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# Form **990-PF**

### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

	Ford	alen	dar year 2014 or tax year beginnin	<u> </u>		, and ending		
	Nan	ne of	foundation				A Employer identification	number
	т	HE	JOSEPH H. & REV	63-0989498				
			nd street (or P O box number if mail is not	B Telephone number				
			D. BOX 3128				(205)221-4	000
		-	own, state or province, country, and	7IP or foreign p	ostal code	<u> </u>	C If exemption application is p	
	•		PER, AL 35502-3		55(5) 5555		in exemption application is p	ending, creek nee
			all that apply Initial retu		Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
	•		Final retu		Amended return	and public charty	- Tri Grough Grydinganon	,, on ook note
			Address		Name change		Foreign organizations me check here and attach co	eeting the 85% test,
2015	H C	heck			empt private foundation		1	
20		_	ction 4947(a)(1) nonexempt charitat	. ~	Other taxable private founda	ition	E If private foundation sta under section 507(b)(1)	_ [ ]
æ	1 Fa		rket value of all assets at end of year			Accrual	F If the foundation is in a	•
7≕7			Part II, col (c), line 16)	, , , , , , , , , , , , , , , , , , ,	her (specify)		under section 507(b)(1)	
NO!	,				mn (d) must be on cash t	pasis)		Λ-,,
=	Pa	rt l	Analysis of Revenue and Expense	es .	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
Ć.,			(The total of amounts in columns (b), (c), necessarily equal the amounts in column	and (d) may not ı(a))	expenses per books	income	income	for chantable purposes (cash basis only)
CERTA		1	Contributions, gifts, grants, etc., rec	eived	287,500.		N/A	
67	<u>9</u>	2	Check I if the foundation is not require	d to attach Sch B				
1	200	3	Interest on savings and temporary cash investments		133.	133.	,	STATEMENT 1
	Ø	4	Dividends and interest from securiti	es	579.	579.	,	STATEMENT 2
· ,	$\bowtie$		Gross rents					
	>	b	Net rental income or (loss)					
	M	6a	Net gain or (loss) from sale of assets not o		-2,820.			
	MINISTERNATION NAY	b	Gross sales price for all assets on line 6a	3,384.			R	ECEIVED
ķ		7	Capital gain net income (from Part IV, line	2)		0.		
9		8	Net short-term capital gain					NV & 1 2045 101
NSI/L		9	Income modifications Gross sales less returns				22	WI S I SOID O
8		10a	and allowances			· <del></del>		Section 16 to 1 4 miles
	E.	ט	Less Cost of goods sold				<u> </u>	GUEN, UL
			Gross profit or (loss)		_			
			Other income		285,392.	712.	<u> </u>	
		_	Total Add lines 1 through 11		205,392.	712.		0.
		13 14	Compensation of officers, directors, trusto				' <u> </u>	<u> </u>
			Other employee salaries and wages Pension plans, employee benefits				<del></del>	
	es	1	Legal fees					
	sue			TMT 3	4,183.	3,137.		1,046.
	ă			TMT 4	37.	37.		0.
	ve E	17	Interest			· · · · · · · · · · · · · · · · · · ·		
	Operating and Administrative Expenses			TMT 5	10.	10.		0.
	ııstı	19	Depreciation and depletion					
	Ξ	20	Оссиралсу					
	Ad	21	Travel, conferences, and meetings					
	pue	22	Printing and publications			——————————————————————————————————————		
	g.	23	Other expenses S	TMT 6	214.	97.		117.
	atir	24	Total operating and administrative	<b>!</b>				
	bei		expenses. Add lines 13 through 23		4,444.	3,281.		1,163. 90,644.
	0	25	Contributions, gifts, grants paid		90,644.			90,644.
		26	Total expenses and disbursements	<b>S</b> .				
			Add lines 24 and 25		95,088.	3,281.		91,807.
	į	27	Subtract line 26 from line 12					
			Excess of revenue over expenses and disl		190,304.			
			Net investment income (if negative, e			0.		
		C	Adjusted net income (if negative, enter	er -0-)			N/A	<u> </u>

LHA For Paperwork Reduction Act Notice, see instructions.

Part IV Capital Gains a	nd Losses for Tax on Ir	vestment	Income				00 000	, Lg00	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			`P	How acquired - Purchase - Donation		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )		
1a SEE STATEMENT D		<u>_</u>		-	P	VA	RIOUS	12/31/14	
b WASHED SALES -		)-1			P	VA	RIOUS	12/31/14	
C									
_d									
<u>e</u>	·- <u>-</u> .			Ĺ.,				J	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	st or other basis expense of sale				(h) Gain or (loss ) plus (f) minus		
a 62,096.	<u> </u>	ļ <u>.</u>	66,20	4.				-4,108.	
b 1,288.								1,288.	
<u>c</u>									
d									
Complete anhi for secrete chausen	gare in column (h) and award by	the foundation	00 10/21/60			w.o.	(0-1-(1-)		
Complete only for assets snowing	gain in column (h) and owned by	T		$\dashv$			ns (Col. (h) gain but not less tha		
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				sses (from col		
a							<del></del>	-4,108.	
b	<u> </u>						-	1,288.	
C									
d						-			
е									
2 Capital gain net income or (net cap	If gain, also enter			}	2			-2,820.	
3 Net short-term capital gain or (loss									
If gain, also enter in Part I, line 8, c		10 (0)		]	:				
If (loss), enter -0- in Part I, line 8	<del></del>		· <del></del>	للِ	3		N/A	<u> </u>	
Part V Qualification Ur						ncon	<u>ne</u>		
(For optional use by domestic private t	foundations subject to the section (	4940(а) tах оп	net investment in	come	e)				
If section 4940(d)(2) applies, leave thi	s part blank								
								Yes X No	
Was the foundation liable for the section			•	1007				☐ Yes ⚠ No	
If "Yes," the foundation does not qualif  1 Enter the appropriate amount in ea				ntries	<del></del> -				
(a)	(b)			(c)				(d)	
Base period years Calendar year (or tax year beginning	مرام مرابع المرام ا	stributions	Net value of no			ets	Distri (col (b) dr	bution ratio vided by col. (c))	
2013		5,107.			107,13	37.			
2012	13	5,776.			46,2			2.937921	
2011		9,834.			214,2			1.119480	
2010		4,125.	,		172,2			.778574	
2009	24	0,504.			295,4	47.		.814034	
								C 251246	
2 Total of line 1, column (d)				_		<u> </u>	2	6.351046	
3 Average distribution ratio for the 5-	•	on line 2 by 5,	or by the number	of ye	ars			1 270200	
the foundation has been in existent	ce if less than 5 years					-	3	1.270209	
4 February and colors of according to be		haa F						280,263.	
4 Enter the net value of noncharitable	e-use assets for 2014 from Part X,	line 5				-	4	200,203.	
5 Multiply line 4 by line 3							5	355,993.	
o worthly mic a ny mic 3									
6 Enter 1% of net investment income	e (1% of Part I. line 27h)					ĺ	6	0.	
1 to 41 not madeling income									
7 Add lines 5 and 6							7	355,993.	
8 Enter qualifying distributions from	Part XII, line 4				••		8	91 <u>,</u> 807.	
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1'	% tax rate				

	330 11 (2014)		9894			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	948 - 9	see in	stru	ctior	15)
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					^ `
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1%	1	<del></del>			0.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					0
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		——		0.
_	Add lines 1 and 2	3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	<del> </del>			<u> </u>
	Credits/Payments					
	2014 estimated tax payments and 2013 overpayment credited to 2014					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld . 6d					Λ
	Total credits and payments Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u> </u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2015 estimated tax ► Refunded ►	11				
	rt VII-A Statements Regarding Activities				Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	111	-		163	X
	any political campaign?		-	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		F	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	a or	İ			
	distributed by the foundation in connection with the activities.		1			Х
	Did the foundation file Form 1120-POL for this year?		- 1	1c		
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\infty\$ \$\\$ 0 \cdot (2) On foundation managers \$\infty\$ \$\\$ 0 \cdot \text{(2)} \text{(3)} \$\text{(4)} \$\text{(5)} \$\text{(6)} \$(			Į.		
	(1) On the foundation > V		ł			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			ļ		
_	managers ▶\$ 0.			2	:	х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		}			
_	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	'	ŀ	3	:	Х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		ŀ	4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/	'a	4b		
	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation termination dissolution or substantial contraction during the year?  STMT 10		}	5	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? STMT 10  If "Yes," attach the statement required by General Instruction T.					
_	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
D						
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law				
	, , , ,	1011		6	X	
,	remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	,	ŀ	7	X	
′	bid the foundation have at least \$5,000 in assets at any time during the year. If Tes, complete Fat II, cor (c), and fat NV		ŀ	··· ' ····		
0-	Enter the states to which the foundation reports or with which it is registered (see instructions)					
oa	AL					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
Ø	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
0	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	•	~ <del>"</del>		
9	vear 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		ŀ	9		Х
10		TMT	11	10	Х	
10	Did any persons become substantial contributors during the text year. If they, attach a sciedule listing their names and addresses		<del>-:</del>			

nrm	990-PF (2014) THE JOSEPH H. & REVA ENGEL FOUNDATION 63-0989	498		Page 5
	ert VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	if "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	_X_	
	Website address ► N/A			
14	The books are in care of ► MARK PFLAUM, CPA  Telephone no ► 205-22	$\frac{21-4}{1}$	000	
	Located at ► 17 EAST 18TH STREET, P.O. BOX 3128, JASPER, AL ZIP+4 ►35	502	<u>-31</u>	28
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>,</b> ▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	No
	securities, or other financial account in a foreign country?	16_		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	T	<b>\</b>	A1 -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(1) Engago in the core of exercises as property with a set			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
	a dioqualinos portosis			
	(a) raman gassa (a) manifest (a			
	(4) Tay componed to the compon			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	To the behalf of the Control of the			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"  If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
,	a If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
1	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here			
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2014?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
-	defined in section 4942(j)(3) or 4942(j)(5))			
á	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
-	before 2014? Yes X No	1		
	If "Yes," list the years			
į	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b	ļ	<u></u>
(	f the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>&gt;</b>	1		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
1	b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014)  N/A	3b	-	-
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del> </del>	X
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	Х
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4 <u>b</u>	<u> </u>	

orm 990-PF (2014) THE JOSEPH H. & REVA ENG			63-09894	98	. Page <b>6</b> 1
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	<del></del>	<del></del>
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		•	s X No		
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire		- F		
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	in Regulations	/-		
section 53 4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check l					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to					
expenditure responsibility for the grant?	N	I/A 🔲 Ye	es 📖 No 📗		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?	-	Yı	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		-	6b	X
If "Yes" to 6b, file Form 8870.		L1			
7a At any time during the tax year, was the foundation a party to a prohibited tax		Yo	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		inagers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
/ Allows and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans		Expense unt, other
(a) Name and address	to position	enter -0-)	and deterred compensation		owances
LISA R. ENGEL	PRESIDENT/DIF	ÆCTOR	,		
3547 KINGSHILL RD					_
BIRMINGHAM, AL 35223	7.50	0.	0.		0.
ALAN Z. ENGEL	VICE PRES/SEC	RETARY/DI	RECT		
3547 KINGSHILL RD					•
BIRMINGHAM, AL 35223	1.00	0.	0.	ļ	<u> </u>
ANDREA 🔈 ENGEL Haines	TREASURER/DIF	ECTOR		1	
3547 KINGSHILL RD					•
BIRMINGHAM, AL 35223	0.25	0.	0.	<u> </u>	0.
	_				
2 Compensation of five highest-paid employees (other than those in	oluded on line 1). If none	enter "NONE "	<u> </u>	<u> </u>	
2 Compensation of five nighest-paid employees totaler than those in	(b) Title, and average	enter NONE.	(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	acco	unt, other
77	devoted to position		compensation	and	owances
N/A	0.00	0.	0.		0.
	0.00	· ·		<del> </del>	
	-				
	<del> </del>				
	-				
		<del> </del>			
	1				
	1				
Total number of other employees paid over \$50,000			<b>•</b>	•	0
The state of the s				200	25 (22)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	e /	(c) Compensation
N/A		
		0.
		<del></del>
Total number of others receiving over \$50,000 for professional services	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	E	xpenses
1 N/A	<del></del>	
		0.
2		
3		
	_	
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	F	Amount
1 N/A		
		0.
2		
All other program-related investments. See instructions		·
3		
<u> </u>	$\neg$	
Total. Add lines 1 through 3		0.
	Form	<b>990-PF</b> (2014)

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	52,662.
b	Average of monthly cash balances	1b	231,869.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	284,531.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	284,531.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,268.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	280,263.
6	Minimum investment return. Enter 5% of line 5	6	14,013.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part )	d certain	
1	Minimum investment return from Part X, line 6	1	14,013.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI )  2b		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,013.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,013.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,013.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	91,807.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	91,807.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income Enter 1% of Part I, line 27b	5	0.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2014)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Page 9

Part XIII Undistributed Income (see instructions) (d) (b) (c) (a) 2013 2014 Corpus Years prior to 2013 1 Distributable amount for 2014 from Part XI, 14,013. line 7 2 Undistributed income, if any, as of the end of 2014 0 a Enter amount for 2013 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2014 225,978. a From 2009 126,029. **b** From 2010 229,410. c From 2011 133,509. d From 2012 69,750. e From 2013 784,676. f Total of lines 3a through e 4 Qualifying distributions for 2014 from 91,807. Part XII, line 4 > \$ 0 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 14,013. d Applied to 2014 distributable amount 77,794 e Remaining amount distributed out of corpus 0. 0. Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below: 862,470. 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b Taxable 0. amount - see instructions e Undistributed income for 2013 Subtract line 0 4a from line 2a Taxable amount - see instr f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) 8 Excess distributions carryover from 2009 225,978 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. 636,492 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 126,029 a Excess from 2010 229,410 b Excess from 2011 133,509 c Excess from 2012 69,750 d Excess from 2013

Form **990-PF** (2014)

e Excess from 2014

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77,794

		VA ENGEL FO			989498 Page 10
Part XIV   Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶		
<b>b</b> Check box to indicate whether the found	lation is a private operatir	ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for		1		1	1
each year listed .					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	ĺ	(		1	1
d Amounts included in line 2c not					
used directly for active conduct of			}		
exempt activities			j		
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					<del>  -</del>
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets		1			
, ,	ļ			<del></del>	<del></del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					İ
b "Endowment" alternative test - enter					<del> </del>
2/3 of minimum investment return					
shown in Part X, line 6 for each year	}	ļ			
listed	L		<del></del>		<del></del>
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on			}		
securities loans (section		•			
512(a)(5)), or royalties)					
(2) Support from general public			İ		
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					<del> </del>
(3) Largest amount of support from					
an exempt organization			<u></u>		
(4) Gross investment income		<u> </u>	<u> </u>		
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000) (See s	section 507(a)(2) )			
ALAN Z. ENGEL	<del> </del>				
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large port	ion of the ownership of a	partnership or
NONE					
2 Information Regarding Contribut					
Check here 🕨 🗓 if the foundation of					
the foundation makes gifts, grants, etc	(see instructions) to indiv	viduals or organizations u	nder other conditions, o	complete items 2a, b, c, ar	ıd d
a The name, address, and telephone num	ber or e-mail address of t	the person to whom appli	cations should be addre	essed	
N/A					
$\boldsymbol{b}$ The form in which applications should t $N/A$	e submitted and informa	tion and materials they st	rould include		
c Any submission deadlines				<del></del>	
N/A				<del></del>	·
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors	
N/A					
				<del>_</del> .	- 000 55 :::
A22601 11-2A-1A					Form <b>QQD_DF</b> (2014)

Total

art XVI-A Analysis of Income-Produ	ucing Activitie	9 <b>S</b>			
er gross amounts unless otherwise indicated	Unrelated t	ousiness income		section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
Program service revenue	code	Amount	code	Amount	function income
a					
b	_				
C	_				
d	_				
e	_	···			
·	_		_		
g Fees and contracts from government agencies		<del></del>			
Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·			
Interest on savings and temporary cash			1 7 4	122	
nvestments			14	133. 579.	
Dividends and interest from securities			14	5/9.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property	ļ				<u> </u>
Net rental income or (loss) from personal					
property					
Other investment income					<del></del> -
Gain or (loss) from sales of assets other			1.0	2 020	
than inventory	<u> </u>		18	-2,820.	
Net income or (loss) from special events			<del></del>		
Gross profit or (loss) from sales of inventory					
Other revenue					
a	_				
b	-				
c			1 1		
d	-		<del>-   -   -  </del>		
e			0.	-2,108.	·
Subtotal Add columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·	0 •		-2,1
Total. Add line 12, columns (b), (d), and (e)				13	-2,1
e worksheet in line 13 instructions to verify calculations			Francis A Di		-
art XVI-B Relationship of Activities	s to the Accon	npiisnment of	Exempt Pt	ırposes 	
ne No. Explain below how each activity for which in	come is reported in	column (e) of Part X\	/I-A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other th	an by providing fund	s for such purposes)	<u>-</u>	<del></del>	
N/A	<del></del>				
	- 4				
	<del></del>	<del></del>			
				<del></del>	
					···
			····		

423621 11-24-14

	······			FNGET LO				989498		ge 13
Part X	VII Information Re Exempt Organ		nsfers To a	and Transactio	ns an	d Relations	hips With Non ————	charitable	9	
1 Did t	he organization directly or indi	rectly engage in any	y of the followin	g with any other orga	ınizatıon	described in sect	ion 501(c) of		Yes	No
the C	Code (other than section 501(c	)(3) organizations)	or in section 52	7, relating to political	organiza	ations?				
a Tran	sfers from the reporting found	ation to a noncharit	able exempt orç	ganization of						
(1)	Cash .			•				1a(1)		X
(2)	Other assets	•						1a(2)		X
b Othe	r transactions									
(1)	Sales of assets to a nonchanta	ble exempt organiza	ation					1b(1)		X
(2)	Purchases of assets from a no	nchantable exempt	organization					1b(2)		X
(3)	Rental of facilities, equipment,	or other assets			•			1b(3)	Li	Х
(4)	Reimbursement arrangements							1b(4)		Х
(5)	Loans or loan guarantees	_					•	1b(5)		X
(6)	Performance of services or me	embership or fundra	aising solicitatio	ns				1b(6)		X
c Shar	ing of facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees				10		X
d If the	answer to any of the above is	"Yes," complete the	following sche	dule Column (b) sho	uld alwa	iys show the fair i	narket value of the go	ods, other ass	sets,	
or se	rvices given by the reporting f	oundation. If the foi	undation receive	ed less than fair mark	et value	ın any transactıoı	n or sharing arrangen	nent, show in		
colui	mn (d) the value of the goods,	other assets, or ser	vices received							
(a) Line no	(b) Amount involved	(c) Name (	of noncharitable	exempt organization		(d) Description	of transfers, transaction	s, and shanng a	rangeme	nts
		N/A				1				
			<u> </u>							
							********			
								1		
							·			
	<del></del>								*****	
	<del>                                     </del>	<del></del>								
						<del> </del>				
						<del> </del>				
						<del> </del>		<del></del>		
ın se	e foundation directly or indirection 501(c) of the Code (othe	r than section 501(			organiza	tions described		Yes	X	] No
<u> </u>	es," complete the following sch (a) Name of org			(b) Type of organiz	ation	<del></del> -	(c) Description of rel	ationship		
	N/A	<u> </u>		(b) Type or organiza	-		(e) Boodington or to			
					-					
	Under penalties of penjury, I declare and belief, visitive, correct, and cor	mplete Declaration of p			II informat	tion of which prepare		May the IRS return with the shown below	e prepar	er
	Signature of officer or trustee	<u> </u>		Date		Title				
	Print/Type preparer's na	ame	Preparer's si	gnature	10	Date	<u> </u>	PTIN		
			1/	1	ایم	11	self- employed	_		
Paid	STEPHEN M.		Kegher m.	Beneral, C.	14 5	5/12/15		P00031		
Prepar Use O	111111 3 1141110 7	PHEN M.	BERMAN	& ASSOC.,	L.L	.C.	Firm's EIN ► 58	-15401	39	
_	Firm's address ► 34	75 LENOX LANTA 30		N.E., SUI	TE 9	50	404	262.2	101	
	1 AT	TIMINIH 20.	JZ 0				Phone no 4 0 4	-262-2	TOT	

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Internal Revenue Service

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/torm990

OMB No 1545-0047

2014

Name of the organization

**Employer identification number** 

TH	HE JOSEPH H. & REVA ENGEL FOUNDATION	63-0989498						
Organization type (check of	one):							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.						
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor'							
Special Rules								
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from						
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
year, contribution is checked, enter purpose. Do not c	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fort the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number

## THE JOSEPH H. & REVA ENGEL FOUNDATION

63-0989498

(b) Name, address, and ZIP + 4  ALAN Z • ENGEL	(c) Total contributions	(d) Type of contribution
ATAN 7 FNCFI		<del> </del>
3547 KINGSHILL RD. BIRMINGHAM, AL 35223	\$\$	Person X Payroll
(b)	(c)	(d) Type of contribution
JOSEPH ENGEL REVOCABLE TRUST DTD 6/30/99  505 20TH STREET NORTH, STE. 1150  BIRMINGHAM, AL 35203	\$ 175,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c)	(d) Type of contribution
	<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	<b>\$</b>	Person Payroli Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	<b>s</b>	Person Payroll Oncash Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	<b>s</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
	(b) Name, address, and ZIP+4  JOSEPH ENGEL REVOCABLE TRUST DTD 6/30/99  505 20TH STREET NORTH, STE. 1150  BIRMINGHAM, AL 35203  (b) Name, address, and ZIP+4  (b) Name, address, and ZIP+4	Name, address, and ZIP + 4   Total contributions

Name of organization

Employer identification number

## THE JOSEPH H. & REVA ENGEL FOUNDATION

63-0989498

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		s	

Employer identification number

THE JO	SEPH H. & REVA ENGEL F	OUNDATION		63-0989498
Part III (	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of	columns (a) through (e) and the follo	wing line entry For orga	anizations _
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, chantable, etc., contributions of \$1,000 of all space is needed.	r less for the year (Enter this	into once.) 5
(a) No.				Description of how sift is held
from Part I	(b) Purpose of gift	(c) Use of gift	(a)	Description of how gift is held
				<del></del>
-		(e) Transfer of gi	<u>                                 </u>	
-	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
1				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d	) Description of how gift is held
Part I	(b) Fulpose of gift	(0) 030 01 girt	,,,,	, 2000ption of note give to note
<del></del>				
			<del></del>	
		(e) Transfer of gi	ft	
-	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
			-	
(a) No. from	(b) Purpose of gift	(c) Use of gift	ld	) Description of how gift is held
Part I	——————————————————————————————————————	(0) 032 01 gm		
<del></del>				
		(e) Transfer of gi	ft	
-	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
			·	
			· - · · · · · · · · · · · · · · · · · ·	
(a) No. from	(h) D	(c) Use of gift		) Description of how gift is held
Part I	(b) Purpose of gift	(c) Use of gift	(a	Description of now girt is need
<u> </u>		(e) Transfer of gi	ft	<u></u>
		.,		
Ļ	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
1				

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# PORTFOLIO APPRAISAL Joseph H. and Reva Engel Foundation (Alan Engel),

Lisa R. Engel, Alan Z. Engel and Andrea J. Engel, Directors (HS8621)

December 31, 2014

Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Yield
COMMON STO	ОСК						
CONSUMER	DISCRETIONARY						
10	Amazon.com Inc	332.52	3,325	310.35	3,104	1.7	0.0
200	Ford Motor Company	16.60	3,320	15.50	3,100	1.7	3.2
50	Goodyear Tire & Rubber	25.39	1,269	28.57	1,429	0.8	0.8
15	GoPro Inc Cl A	43.36	650	63.22	948	0.5	0.0
35	Home Depot Inc	90.59	3,171	104.97	3,674	2.0	1.8
37	Jarden Corp	38.97	1,442	47.88	1,772	1.0	0.0
50	Under Armour Inc Cl A	67.54	3,377	67.90	3,395	1.9	0.0
35	Walt Disney Co	90.23	3,158	94.19	3,297	1.8	1.2
			19,712		20,717	11.4	1.1
CONSUMER	STAPLES						
25	Anheuser-Busch InBev ADR	111.12	2,778	112.32	2,808	1.5	2.4
50	Church & Dwight Co	69.77	3,488	78.81	3,941	2.2	1.6
25	Costco Wholesale Corp	121.89	3,047	141.75	3,544	2.0	1.0
100	WhiteWave Foods Cl A	35.80 _	3,580	34.99	3,499	1.9	0.0
			12,894		13,791	7.6	1.2
ENERGY							
35	Exxon Mobil Corp	99.59	3,486	92.45	3,236	1.8	3.0
150	GasLog Ltd	20.64	3,096	20.35	3,053	1.7	2.8
50	Occidental Petroleum	90.63	4,531	80.61	4,031	2.2	3.6
35	Schlumberger Ltd	105.12	3,679	85.41	2,989	1.6	1.9
			14,792		13,308	7.3	2.9
FINANCIALS							
35	Prudential Financial Inc	90.04	3,151	90.46	3,166	1.7	2.6
25	Wells Fargo & Co	51.42	1,286	54.82	1,371	0.8	2.6
		_	4,437	_	4,537	2.5	2.6
HEALTHCAR	E						
15	Actavis PLC	229.23	3,439	257.41	3,861	2.1	0.0
50	Bristol-Myers Squibb	53.86	2,693	59.03	2,952	1.6	2.5
25	Gilead Sciences Inc	104.35	2,609	94.26	2,357	1.3	0.0
25	Johnson & Johnson	108.38	2,710	104.57	2,614	1.4	2.7
50	Medtronic Inc	65.39	3,269	72.20	3,610	2.0	1.7
25	Thermo Fisher Scientific	121.95	3,049	125.29	3,132	1.7	0.5
			17,768		18,526	10.2	1.2
INDUSTRIALS	5						
	Boeing Co	127.86	1,918	129.98	1,950	1.1	2.8
35	Caterpillar Inc	105.54	3,694	91.53	3,204	1.8	3.1
75	Delta Air Lines Inc	41.46	3,109	49.19	3,689	2.0	0.7
15	Lockheed Martin Corp	175.15	2,627	192.57	2,889	1.6	3.1
50	Nielsen Hldgs NV	41.93	2,096	44.73	2,237	1.2	2.2
15	Union Pacific Corp	105.94	1,589	119.13	1,787	1.0	- 1.7

# R. H. BLUESTEIN & COMPANY

# PORTFOLIO APPRAISAL Joseph H. and Reva Engel Foundation (Alan Engel), Lisa R. Engel, Alan Z. Engel and Andrea J. Engel, Directors (HS8621) December 31, 2014

Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Yield
15	United Parcel Service Cl B	98.58	1,479	111.17	1,668	0.9	2.4
50	Xylem Inc	37.70	1,885	38.07	1,904	1.1	1.3
			18,397		19,326	10.7	2.1
TECHNOLOG	GY						
25	Apple Inc	100.86	2,522	110.38	2,760	1.5	1.7
25	ARM Hldgs PLC ADR	46.68	1,167	46.30	1,158	0.6	0.6
25	Facebook Inc Cl A	75.92	1,898	78.02	1,951	1.1	0.0
5	Google Inc Cl C	582.45	2,912	526.40	2,632	1.5	0.0
15	IBM Corp	191.75	2,876	160 44	2,407	1.3	2.7
35	Palo Alto Networks Inc	98.64	3,452	122.57	4,290	2.4	0.0
15	Visa Inc Cl A	225.15	3,377	262.20	3,933	2.2	0.7
			18,205		19,129	10.6	0.8
MATERIALS							
25	Ecolab Inc	113.91	2,848	104.52	2,613	1.4	1.3
25	Monsanto Co	117.84	2,946	119.47	2,987	1.6	1.6
15	Sherwin Williams Co	217.59	3,264	263.04	3,946	2.2	0.8
			9,058	-	9,545	5.3	1.2
UTILITIES							
50	American Water Works	49.38	2,469	53.30	2,665	1.5	2.3
25	NextEra Energy Inc	101.73	2,543	106.29	2,657	1.5	2.7
_			5,012	_	5,322	2.9	2.5
SPECIAL SITU	IA TIONIC						
SPECIAL SIT	AMERCO	290.85	2,909	284.26	2,843	1.6	0.0
50	Taser Intl Inc	290.83	1,160	26.48	1,324	0.7	0.0
50	rasar inir me	23.19		20.46			
			4,068	-	4,167	2.3	0.0
			124,343		128,368	70.9	1.5
CORPORATE B							
25,000	PEPSICO INC (Callable 0.750% Due 03-05-15	100.19	25,048	100.05	25,013	13.8	0.3
	Accrued Interest			_	60	0.0	
			25,048		25,073	13.8	0.3
CASH/MONEY	MKT						
	Federated Govt Obligations Fund		27,739		27,739	15.3	0.0
TOTAL PORTFO	OLIO		177,131		181,181	100.0	1.1

# THE JOSEPH H. AND REVA ENGEL FOUNDATION FORM 990 - PF 12/31/2014

RECIPIENT	PURPOSE	AMOUNT
Ahavath Achim Synagogue	Religious	18.00
Alabama Ballet	Civic	50.00
Alabama Possible	Cıvic	50.00
Alabama State Trooper Association	Civic	25.00
Alabama Symphony Orchestra	Civic	750.00
Alpha Epailon Phi	Educational	100.00
Alzheimers Of Central Alabama	Medical	25.00
Alzheimers Association, St Louis Chapter	Medical	50.00
Balkan Sunflowers USA	Civic	250.00
Birmingham First Seventh Day Aventist	Religious	250.00
Birmingham Holocaust Educational Committee	Educational	554.00
Birmingham Jewish Federation	Civic	5,018.00
Birmingham Jewish Foundation	Religious	288.00
Bloom Hillel	Educational	100.00
Chabad Of Alabama	Religious	360.00
Chabad at Washington U in St Louis	Educational	360.00
Children's Miracle Network Hospital	Medical	100.00
Collat Jewish Family Serv.	Religious	2,108.00
Collat School of Business	Civic	250.00
Community Furniture Bank	Civic	50.00
Congregation Beth-El	Religious	18.00
Crippled Children's Foundation	Medical	100.00
Crisis Center	Medical	75.00
Delta Gamma	Civic	25.00
Dixie Golf Foundation	Civic	150.00
Emmet O'Neal Library	Educational	50.00
Friends of Yemin Orde	Civic	2,500.00
Gateway	Civic	100.00
Girl Scouts of North Central Alabama	Civic	50.00
Girls Inc.	Civic	500.00
Hadassah	Religious	220.00
Heart Gallery Alabama	Medical	100.00
Hispanic Interest Coalition	Civic	150.00
Horizons School	Educational	2,500.00
Institute Of Southern Jewish Life	Civic	500.00
Jewish Federation Of Central AL	Civic	500.00
Knesseh Israel	Religious	518.00
Louisiana Walks For PAN	Medical	100.00
Magic Moments	Civic	50.00
March of Dimes	Medical	50.00
McWane Center	Civic	85.00
Md Anderson Cancer Center	Medical	25.00
Mitchell's Place	Civic	50.00
Mountain Brook Firefighters Local	Civic	25.00
N E Miles Jewish Day School	Educational	2,554.00
National Fire Safety Council Inc.	Civic	52.00
Northwestern University	Educational	6,000.00
Oasis	Civic	750.00
Planned Parenthood Of AL	Educational	500.00
Railroad Park Foundation	Civic	104.00 1,000.00
Ramah Darom	Religious	•
Ransom Everglades School	Educational	50.00

# THE JOSEPH H. AND REVA ENGEL FOUNDATION FORM 990 - PF 12/31/2014

RECIPIENT	PURPOSE	AMOUNT
Robert E Reed Gastrointestinal Oncology Fund	Medical	100.00
RUFF Animal Rescue	Civic	25.00
Sisterhood Of Temple Beth-El	Religious	262.00
Sixth Avenue Baptist Church	Religious	100.00
Teach for America	Educational	5,000.00
Temple Beth El	Religious	1,168.00
Temple Emanu-El	Religious	504.00
Temple Israel	Religious	18.00
The Exceptional Foundation	Educational	100.00
The Seven Project Association	Civic	250.00
The Women's Fund	Civic	100.00
Torah Fund	Civic	180.00
UAB	Medical	100.00
UAB Dept. Of Psychiatry	Medical	50,000.00
UAB National Alumni Society	Civic	100.00
United Negro College Fund	Educational	100.00
United States Holocaust Museum	Civic	280.00
University of Colorado Foundation	Civic	250.00
WBHM Public Radio	Civic	150.00
Women's Jewish Learning Center	Educational	500.00
Woodlawn Foundation	Civic	1,000.00
YWCA	Civic	150.00
		90,644.00

# 2014 Tax Information Statement

Page 4 of 16 **CROWNE PARTNERS, ATTN: ALAN ENGEL** JOSEPH H. & REVA ENGEL FOUNDATION 505 NORTH 20TH STREET, SUITE 1150 Recipient's Name and Address: BIRMINGHAM, AL 35203 AL (844)221-1939 XX-XXX9498 20-8007203 EJ8621 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: **Questions?** State: STATE STREET BANK & TRUST COMPANY BOSTON, MA 02206-5300 Payer's Name and Address: WMS TAX DEPARTMENT PO BOX 5300

# 2nd TIN notice Corrected

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premlums.

Covered (Box 5 is not checked)

**************************************	00.0	0.00	00.00	0.00	0.00	0.00	0.00	0.00
Federal Mark Withheld	00'0	0.00	00.0	00.0	00.0	00.0	0.00	0.00
Net Gein or Loss	00.0	-73 22	00.0	-66.33	-23.41	-292.48	51.7-	00.0
Adjustmente (Box 19)	187.63	00.0	88.60	00'0	00.0	00.0	00.00	230.90
FEBORETTI	8		>					*
Copie of Cop	1,180.50	1,239.38	1,281.20	1,347.30	163.89	3,020.50	3,193.70	1,004.25
(Box 1d)	992.87	1,166.16	1,192.60	:	:	2,728.02	3,186.55	773.36
FINE CONTRACTOR	⋖	<b>4</b>	⋖	⋖	⋖	⋖	∢	⋖
E CONTROLLE DE LA CONTROLLE DE	Short Term Sales Reported on 1099-B 25.0 ARM HLDGS PLC SPONSORED ADR 042068106 10/15/2014 08/21/2014 A	ARM HLDGS PLC SPONSORED ADR 12/22/2014 09/10/2014	BOEING CO COM 10/15/2014 09/10/2014 A	BOEING CO COM 12/22/2014 09/30/2014 A	CALIFORNIA RESOURCES COR-W/I	CBS CORP-B 09/22/2014 08/21/2014 A	CHUBB CORP COM 09/29/2014 Various	25.0 DELTA AIR LINES INC 247361702 10/15/2014 08/21/2014 A
Control of the Contro	ss Reported on 10: ARM HLDGS PLC 10/15/2014	ARM HLDGS PLC 12/22/2014	BOEING CO COM 10/15/2014	BOEING CO COM 12/22/2014	CALIFORNIA RESOURCES CO	CBS CORP-B 09/22/2014	CHUBB CORP COM 09/29/2014	DELTA AIR LINES INC 10/15/201408
Population of the control of the con	<b>Short Term Sale</b> 25.0 042068106	25.0 042068106	10.0 097023105	10.0 097023105	20.0 13057Q107	50.0 124857202	35.0 171232101	25.0 247361702



This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayor is ultimately responsible for the accuracy of their own tax return.

Page 5 of 16

Reciplent's Name and Address:

# 2014 Tax Information Statement

Payer's Name and Address:
STATE STREET BANK & TRUST COMPANY
WMS TAX DEPARTMENT
PO BOX 5300
BOSTON, MA 02206-5300

Account Number: EJ8621
Recipient's Tax ID Number: XX-XXX9498
Payer's State ID Number: 20-8007203
Payer's State ID Number: AL
State: AL
Questions? (844)221-1939

JOSEPH H. & REVA ENGEL FOUNDATION CROWNE PARTNERS, ATTN: ALAN ENGEL 505 NORTH 20TH STREET, SUITE 1150

BIRMINGHAM, AL 35203

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

はいい いっこうかい かっこう										
Obscription of the control of the co	Cusip=::		A CAMPAGO		00103 00103 10103	Endla	dustments.	Net Cen	Federal Miles	Sarre
25.0	(Box 1c) (Bo DELTA AIR LINES INC	(Box 1b) NC		(Box 1d)	(Box 18)	(Box 1f)	(Box 1g)	v Teller grander og virker	(Box 4)	(Box 16)
247361702	12/22/2014 09/10/2014 A	1/10/2014	<b>V</b>	1,188.47	1,289.15		0.00	-102.68	0.00	0.00
10.0	DIAGEO PLC SPONSORED ADR NEW	ORED ADR NE	M:							:
252430205	09/10/2014 08/21/2014 A	3/21/2014	⋖	1,202.67	1,193.70		0.00	8.97	0.00	0.00
35.0	FREEPORT-MCMORAN COPPER & GOLD INC CL B	N COPPER &	GOLD INC CL B							: : :
35671D857	09/09/2014 08/21/2014 A	3/21/2014	∢	1,199,21	1,285.20		0.00	-85.99	0.00	0.00
50.0	GENERAL ELECTRIC CO COM	CO COM								
369604103	10/15/2014 08/21/2014 A	3/21/2014	4	1,194.95	1,324.75		0.00	-129.80	0.00	0.00
50.0	GENERAL ELECTRIC CO COM	CO COM								
369604103	1103 12/17/2014 08/21/2014 A	3/21/2014	∢	1,217.08	1,324.75		0.00	-107.67	00.0	0.00
60.0	GOODYEAR TIRE & RUBBER CO COM	NBBER CO C	WO.							
382550101	10/15/2014 08/21/2014 A	3/21/2014	A	971.72	1,269.25		0.00	-297.63	00.0	0.00
10.0	GOPRO INC-CLASS A	_								
38268T103	10/15/2014 08/21/2014		¥	695.20	433.60		0.00	261.60	0.00	0.00
25.0	HESS CORP									
42809H107	42809H107 09/22/2014 08/21/2014 A	3/21/2014	⋖	2,406.48	2,508.00		00.00	-101,54	00.0	0.00

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# 2014 Tax Information Statement

STATE STREET BANK & TRUST COMPANY PO BOX 5300 BOSTON, MA 02206-5300 Payer's Name and Address: WMS TAX DEPARTMENT

(844)221-1939 XX-XXX9498 20-8007203 EJ8621 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number:

Page 6 of 16 CROWNE PARTNERS, ATTN: ALAN ENGEL JOSEPH H. & REVA ENGEL FOUNDATION **605 NORTH 20TH STREET, SUITE 1150** Recipient's Name and Address: BIRMINGHAM, AL 35203

2nd TIN notice Corrected **Questions?** State:

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

Blow Blow	Company of the control of the contro	Form 8924	Proceeds	Cost or Cost o	Code if any	Adjustments	Net Gain or Loss	Federal Income Tex Withheld	State Tax
25000.0	1c) (Box 1b) IP 0.875% 10/31/14		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)	•	(Box 4)	(Box 16)
459200GZ8	10/31/2014 09/11/2014 A	∢	25,000.00	25,021.00		0.00	-21.00	00.0	0.00
25.0	JARDEN CORP								
471109108	10/15/2014 08/21/2014 A	⋖	1,367.84	1,481.25	≯	93.41	00.00	00.0	00.00
38.0	JARDEN CORP								
471109108	12/22/2014 Various A	⋖	1,780.95	1,735,39		00.0	45.56	00.0	0.00
15.0	PERRIGO CO PLC COMMON STOCK NPV	NPV							
G97822103	11/17/2014 08/21/2014 A	⋖	2,300.28	2,222.85		0.00	77.43	00.00	0.00
15.0	STARWOOD HOTELS & RESORTS								
85590A401	09/10/2014 08/21/2014 A	<b>4</b>	1,258.75	1,266.60		0.00	-9.85	0.00	00.0
10.0	UNION PACIFIC CORP COM								
907818108	10/15/2014 08/21/2014	4	985.67	1,059,40		00.0	-73.73	0.00	0.00
10.0	UNITED PARCEL SERVICE - CL B								
11312106	911312106 10/15/2014 08/21/2014 A	∢	947.12	985.80	>	38.68	00.0	0.00	0.00
10.0	UNITED PARCEL SERVICE - CL B								
911312106	12/22/2014 09/10/2014	4	1117.53	1 109 98		00.00	7.55	00.0	0.00



# 2014 Tax Information Statement

STATE STREET BANK & TRUST COMPANY PO BOX 5300 BOSTON, MA 02206-5300 Payer's Name and Address: WMS TAX DEPARTMENT

AL (844)221-1939 XX-XXX9498 20-8007203 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected Questions? State:

Page 7 of 16 CROWNE PARTNERS, ATTN: ALAN ENGEL JOSEPH H. & REVA ENGEL FOUNDATION 505 NORTH 20TH STREET, SUITE 1150 Recipient's Name and Address:

BIRMINGHAM, AL 35203

2nd TIN notice

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Custo Custo Number	(Box 1c) (Box 1b)	Architecture (Box 1b)	The control of the co	Piecedan (Box 1d)	Other Besis	Foode Fany (Box 11)	dlustments (Box 1g)	Ner Gain	Tex Withheld	Wittmeld (Box 16)
949746101	:	08/21/2014	⋖	1,278.34	1,285,50	≯	7.18	0.00	00.0	0.0
25.0	WELLS FARGO & COMPANY	OMPANY								
949746101	101 10/15/2014 08/21/2014 A	08/21/2014	∢	1,171.99	1,285.50		0.00	-113.51	0.00	0.00
25.0	WELLS FARGO & COMPANY	COMPANY								
949746101	12/22/2014 09/16/2014 A	09/16/2014	∢	1,369.97	1,336.79	•	00.0	33.18	0.00	00'0
10.0	WHITING PETROLEUM CORP	UM CORP								
966387102	12/01/2014 09/10/2014	:	4	400.58	822.40		0.00	-421.84	00.0	0.00
15.0	WHITING PETROLEUM CORP	EUM CORP								
966387102	966387102 12/01/2014 Various	Various	∢	600.84	1,242.10	3	641.26	00.0	0.00	0.00
25.0	WHITING PETROLEUM CORP	EUM CORP								
966387102	12/04/2014 Various		∢.	983.40	2,311.01		00'0	-1,327.61	0.00	0.00
otal Short Te	Total Short Tarm Saiss Benorted on 1099-B			00 100 00	88 204 49		1 287 RA	A0 1 CB C.		

Report on Form 8949, Part I, with Box A checked

This is important tax information and is being furnished to the internal Revenue Service (except as Indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

FORM 990-PF INTERE	ST ON SAVIN	NGS AND TEM	PORARY	CASH IN	IVESTMENTS	STATEMENT	1
SOURCE FIRST NATIONAL BANK OF JASPER TOTAL TO PART I, LINE 3		REVE	(A) REVENUE PER BOOKS		(B) IVESTMENT ICOME	(C) F ADJUSTED NET INCOME	
		133.			133.		
			133.		133.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FR	OM SECUR	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCC		
STATE STREET BANK AND TRUST CO, NOMINEE STATE STREET BANK	29	•	0.	29.	. 2	29.	
AND TRUST CO, NOMINEE	550	•	0.	550.	. 55	50.	
TO PART I, LINE 4	579	•	0.	579.	57	79.	
FORM 990-PF		ACCOUNTI	NG FEE	S		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
ACCOUNTING FEES	_	4,183.		3,137.		1,0	046.
TO FORM 990-PF, PG	1, LN 16B	4,183.		3,137.		1,0	046.

FORM 990-PF (	OTHER PROFES	SIONAL FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES	
INVESTMENT ADVISORY FEE - RHB	37.	37.		0.	
TO FORM 990-PF, PG 1, LN 16C	37.	37.		0.	
FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
FOREIGN TAX PAID	10.	10.		0.	
TO FORM 990-PF, PG 1, LN 18	10.	10.		0.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME		
BANK CHARGES ANNUAL REG. POSTAGE ADR FEES	96. 85. 31. 2.	72. 0. 23. 2.		24. 85. 8. 0.	
TO FORM 990-PF, PG 1, LN 23	214.	97.		117.	

FORM 990-PF CO	ORPORATE STOCK		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE  128,368.  128,368.		
BLUESTEIN & COMPANY - NOMINEE - STA-1	124,343.			
TOTAL TO FORM 990-PF, PART II, LI	124,343.			
FORM 990-PF CO	ORPORATE BONDS		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	т
BLUESTEIN & COMPANY - NOMINEE - StA-1	25,048.	25,073.		
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	25,048.	25,0	73.
FORM 990-PF	OTHER ASSETS		STATEMENT	9
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE VALUE	Т
PURCHASED INTEREST PAID	0.	3.		3.
TO FORM 990-PF, PART II, LINE 15	0.	3.		3.
FORM 990-PF STATEMENT CON TERMINATION, ETC	CERNING LIQUIDAT		STATEMENT	10

### **EXPLANATION**

THE FOUNDATION IS THE BENEFICIARY OF THE ESTATE OF JOSEPH H. ENGEL. IT IS EXPECTED THAT A TOTAL OF \$1.5 MILLION WILL BE RECEIVED FROM THE ESTATE UPON ITS TERMINATION. AS OF DECEMBER 31, 2014, A PARTIAL DISTRIBUTION WAS RECEIVED FROM THE ESTATE. ALONG WITH ASSETS ON HAND, THE FOUNDATION USED THE ESTATE BEQUEST TO SATIFY CERTAIN CHARITABLE DONATIONS. NO TECHNICAL TERMINATION OF THE FOUNDATION HAS OCCURRED NOR IS ONE EXPECTED IN THE NEAR FUTURE.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 11

NAME OF CONTRIBUTOR

**ADDRESS** 

JOSEPH H. ENGEL REV. TRUST DTD 6/30/99

505 20TH STREET NORTH, STE.1150

BIRMINGHAM, AL 35203