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Form **990-PF**

EXTENDED TO AUGUST 17, 2015 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
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Dep	artmen	t of the TCASure			social security numbers on m 990-PF and its separate				Open to Public Inspection
		ndar year 2014 or tax			ooo ii aha dagarata	, and e		ngoviiooopi.	Open to Public Inspection
_		f foundation	, , , , , , , , , , , , , , , , , , ,			,		A Employer identification	number
		EC/STYSLIN						72-1372302	
		and street (or P O box num			•		Room/suite	B Telephone number	
_2	210	INVERNESS	CENTER	DRIVE	<u> </u>			(205)991-7	733
	-	own, state or province MINGHAM , A			ostal code			C If exemption application is p	ending, check here
_		all that apply:	Initial retur		Initial return of a fo	ormer nublic o	:harity	D 1. Foreign organizations	s check here
•	011001	[Final return		Amended return	onner paone t	,,,u,,,	i i i orongir organizacioni	,, 0.110011 11010
		Ī	Address ch		Name change			2 Foreign organizations me check here and attach co	eeting the 85% test,
н	Check	type of organization:			kempt private foundation				
<u>"</u>	_	ction 4947(a)(1) none			Other taxable private found	ation		E If private foundation sta under section 507(b)(1)	
I F		arket value of all assets		J Accounti		Accr	ual -	1	
		Part II, col (c), line 1	=		ther (specify)		uu.	F If the foundation is in a under section 507(b)(1)	
-	►\$	44.1	Ĩ7.677.	(Part I, colu	ımn (d) must be on cash	basis.)		dilaci 300tion 307(b)(1)	(b), cricck fiere
	art I		e and Expenses	· · · · · · · · · · · · · · · · · · ·	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
ــــــــــــــــــــــــــــــــــــــ		(The total of amounts in necessarily equal the ar	columns (b), (c), ar nounts in column (a	nd (d) may not a))	expenses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, g			0.	-		N/A	(020) 0000 0000
	2	Check X If the four							
	3	Interest on savings and t cash investments						<u> </u>	
	4	Dividends and interes		s	555,707.	55	5,707.		STATEMENT 1
	•	Gross rents		_	<u> </u>		<u>, , </u>		
		Net rental income or (loss	s)						
	62	Net gain or (loss) from sa		547,879.			1		
a P	Ь	Gross sales price for all assets on line 6a		,656.			_		
SS Revenue	7	Capital gain net income (54	7,879.		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	8	Net short-term capita					<u> </u>		
	9	Income modifications	•						
复	10a	Gross sales less returns and allowances	ŀ				-		
ຼ	1 .	Less Cost of goods sold							
	1	Gross profit or (loss)							
AUG	11	Other income			<52,572.	>	0.		STATEMENT 2
	12	Total Add lines 1 thr	ough 11		1,051,014.	1,10	3,586.		
8	13	Compensation of officers	, directors, trustee	s, etc	0.		0.		0.
er.	14	Other employee salar	ies and wages				-		
2015	15	Pension plans, emplo	yee benefits						
Se se	16a	Legal fees							
ු Expenses	Ь	Accounting fees	SI	'MT' 3	3,625.		906	RECEIVED	906.
Ä	[ c	Other professional fe	es						
		Interest					700		<b>გ</b> ∥
and Administrative	18	Taxes	SI	MT 4	8,556.		8,556,	AUG 2 0 2015 🏴	0.
nist Tist	19	Depreciation and dep	letion				30	2 0 2010	
Ē	20	Occupancy							
¥	21	Travel, conferences,	and meetings					GDEN UT	
and	22	Printing and publicati	ons					·	
		Other expenses	SI	'MT 5	98,158.	9	8,088.		70.
rati	24	Total operating and	admınistrative						
Operating		expenses. Add lines	13 through 23		<u>110,339.</u>	10	<u>7,550.</u>		976.
0	25	Contributions, gifts, q			1,629,845.			<u> </u>	1,629,845.
	26	Total expenses and	disbursements				_		
	1	Add lines 24 and 25			1,740,184.	10	<u>7,550.</u>		1,630,821.
	27	Subtract line 26 from	line 12:						
		Excess of revenue over e			<689,170.			<u> </u>	
		Net investment inco				99	6,036.		
	c	Adjusted net income	(if negative, enter	-0-)				N/A	

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Ĺ	Beginning of year	Eı	nd of year
Column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing		112,635.	47,29	5. 47,295.
2 Savings and temporary cash investments		15,630,583.	4,069,38	
3 Accounts receivable ►				
Less: allowance for doubtful accounts				
4 Pledges receivable ►				
Less: allowance for doubtful accounts ▶				
5 Grants receivable				
6 Receivables due from officers, directors, trustees, and other				
disqualified persons				
7 Other notes and loans receivable			*	
Less: allowance for doubtful accounts ▶				
8 Inventories for sale or use				
9 Prepaid expenses and deferred charges				
10a Investments - U.S. and state government obligations				
b Investments - corporate stock STMT	8	22,441,443.	32,952,80	1. 37,339,289.
c Investments - corporate bonds				
11 Investments - land, buildings, and equipment basis			, <u>.</u>	
Less accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other STMT	9	1,773,787.	2,244,50	1. 2,661,704.
14 Land, buildings, and equipment: basis ▶				
Less accumulated depreciation				
15 Other assets (describe ► STATEMENT	10)	1,594.		0. 0.
16 Total assets (to be completed by all filers - see the				
instructions. Also, see page 1, item I)		39,960,042.	39,313,98	6. 44,117,677.
17 Accounts payable and accrued expenses				
18 Grants payable				
19 Deferred revenue				
19 Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable				
21 Mortgages and other notes payable				
22 Other liabilities (describe >	)			
23 Total liabilities (add lines 17 through 22)		0.		0.
Foundations that follow SFAS 117, check here				
and complete lines 24 through 26 and lines 30 and 31				
0 194 Uprostruted				
25 Temporarily restricted	L			
26 Permanently restricted				
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31		į		
and complete lines 27 through 31				
	_	0.		0.
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other fund	<u> </u>	0.		0.
29 Retained earnings, accumulated income, endowment, or other ful	nds _	39,960,042.	39,313,98	
30 Total net assets or fund balances	<u> </u>	39,960,042.	39,313,98	<u>6.</u>
31 Total liabilities and net assets/fund balances		39,960,042.	39,313,98	6.
Part III Analysis of Changes in Net Assets or Fu	und Ba	lances		
Total not constone fund halogons at hospital and the second of the secon	(a) ! 0		i	<del> </del>
Total net assets or fund balances at beginning of year - Part II, column	(a), line 30	U		1 30 060 040
(must agree with end-of-year figure reported on prior year's return)				1 39,960,042.
Enter amount from Deat Line 07s			ſ	
2 Enter amount from Part I, line 27a		ann an	A MENACONEM C	2 <689,170.
Other increases not included in line 2 (itemize)		SEE STA	ATEMENT 6	3 113,279.
Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3				3 113,279. 4 39,384,151.
Other increases not included in line 2 (itemize)	Dort II	SEE STA	ATEMENT 6	3 113,279.

423511 11-24-14

(a) List and descr	the kind(s) of property sold (e grehouse; or common stock, 200 sha	, real estate,	t income	( <b>b</b> ) F	low acquired Purchase	(c) Dat	e acquired day, yr.)	(d) Date sold (mo., day, yr.)
<del></del>		3. WILO 00.)		U	- Donation			<u> </u>
b RAYMOND JAMES	E CAPITAL I LP			<u> </u>	<u>P</u> 		IOUS	12/31/14
c CAPITAL GAINS I	TUTDENDS	<del></del>			Р	VAR	IOUS	12/31/14
d d	DIVIDENDS		<del></del>		_	+	<del></del> -	<u> </u>
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss us (f) minus	
a	<u> </u>		25,54	7		, ,,		<25,547.
b 26,888.			8,23					18,658.
c 554,768.			0,25	•	<del></del>			554,768.
d	·							334,700.
e								
	g gain in column (h) and owned by	the foundation	n on 12/31/69			(I) Gains	(Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any		ı	col (k), bu	t not less that s (from col.	n -0-) or
a								<25,547.
b					·			18,658.
C								554,768.
d	***************************************							
e								-
2 Capital gain net income or (net cap	ortal loss) { If gain, also enter If (loss), enter -0	r in Part I, line - in Part I, line	7 7	}	2			547,879.
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5) an	ıd (6):						
If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8	column (c)			<u>}</u>	3		N/A	<u> </u>
	nder Section 4940(e) for					ncome		
(For optional use by domestic private If section 4940(d)(2) applies, leave the		1540(a) lax on	net investment in	GOIIIE.	·)			
Was the foundation liable for the section of the se		mplete this pa	rt .					Yes X No
	· · · · · · · · · · · · · · · · · · ·	IST GOTIONS DO	iore making any cr	-	<del></del>			(d)
(a) Base period years Calendar year (or tax year beginnin	<del></del>	tributions	Net value of nor				Distrit (col. (b) div	oution ratio vided by col. (c))
2013					760,43			.060191
2012 2011		4,392. 8,675.			106,65			.040530
2010		6,910.		14,	290,52 217,52	2		.074747
2009	9/	$\frac{0,910}{2,527}$ .			562,47		-	.084286
2009		<u> </u>			302,47	7.		•143024
2 Total of line 1, column (d)						2		.403378
3 Average distribution ratio for the 5 the foundation has been in existen		on line 2 by 5,	or by the number	of yea	rs	3		.080676
4 Enter the net value of noncharitable	•	line 5				4	4	3,493,265.
5 Multiply line 4 by line 3						5		3,508,863.
6 Enter 1% of net investment income	o /19/, of Dort I. line 27h\							
	5 (1/0 VIFAILI, IIII8 Z/D)					6		9,960.
7 Add lines 5 and 6						7		3,518,823.
8 Enter qualifying distributions from	·					8		1,630,821.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.			,
423521 11-24-14							j	orm <b>990-PF</b> (2014)

18 Everpt operating foundations described in section 4940(x)2, thick here ▶		1990-PF	(2014) ALTEC/STYSLINGER FOUNDATION Excise Tax Based on Investment Income (Section 4940)	D(a),	49	940(1	b), 4	940(e)	, or 4	<u>72-</u> 948	1372 - <b>see</b> i	302 nstru	ıctio	Page 4
b Domestic foundations that meet the section 4940(c) requirements in Part V, check here	1a	Exempt						```						
of Part I, line 27 b  All other domains to fundations entire 2% of line 27b. Exempt foreign organizations entire 4% of Part I, line 12, cot. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and trazeble foundations only. Others enter-0-0)  3 Add fines 1 and 2  Subtitle 4 (income) lax (domestic section 4947(a)(1) trusts and trazeble foundations only. Others enter-0-0)  5 Author 14 (income) lax (domestic section 4947(a)(1) trusts and trazeble foundations only. Others enter-0-0)  5 Tax based on investment income Subtract line 4 from line 3. It zero or less, enter-0-  5 Tax based on investment income Subtract line 4 from line 3. It zero or less, enter-0-  5 Tax based on investment income Subtract line 4 from line 3. It zero or less, enter-0-  6 B  6 B  6 B  7 Tax destine 4 from 2 from 2 from 2 from 3 fr		Date of	ruling or determination letter: (attach copy of letter if nec	essary	y-s	ee ins	tructi	ons)						
a All chief domestic foundations enter 2% of the 27h. Exempt toregip organizations enter 4% of Part I, line 12, cot. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and laxable foundations only. Others enter -0-)  3 19,921.  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and traxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or tess, enter -0-  5 Credistr7ayments  2 2014 estimated tax payments and 2013 overpayment credited to 2014  Exempt foreign organizations - tax withhelid at source  6 Tax paid with application for extension of time to file (Form 8868)  Extensity presents, Add lines 5 afterough 6d  Extensity presents, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Extensity presents for organizations of time to file (Form 8868)  Tax based on the Form 5 and 5 is more than line 7, enter amount owed  Tax pad with application for extension of stimated tax. Check here in 16 Form 2220 is attached  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add lines 5 afterough 6d  Total credits and payments, Add l	b	Domest	tic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	•	] a	nd ent	ter 1%	·	}	1		1	9,9	<u> 21.</u>
2		of Part I	I, line 27b											
3 19,921.  Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter 0-)  5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter 0-  6 Credis/Reyments  2014 setting data payments and 2013 overpayment credited to 2014  6 Exempt foreign organizations - tax withheld at source  6 Tax pake with application for extension of time to file (form 8668)  6 Exempt foreign organizations - tax withheld at source  7 Tax face if the 18 payments. Add lines 6a through 66  8 Exiter any penalty for underpayment of stimated tax. Check here □ if Form 2220 is altached  8 Tax face if the total of lines 5 and 3 is more than line 7, enter amount oved  9 Tax face if the total of lines 5 and 3 is more than line 7, enter amount oved  10 Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 5,892. Refunded ▶ 10 5,892.  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical campaign?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical campaign?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical campaign?  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical expenditure tax in foundation or the definition?  15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical expenditure tax i	C	All othe	r domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pa	rt I	l, line 1	12, col	. (b). 🔍						
4 Subtitle A (income) bit (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 19,921.  5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-  6 Credits/Payments a 2014 estimated tax payments and 2013 overpayment credited to 2014 6 13,360.  6 Exempt foreign organizations: -tax withheld at source 6 6	2	Tax und	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers e	ente	er -0-)				2				<u>0.</u>
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments 3 2014 estimated fax payments and 2013 overpayment credited to 2014 5 Exempt foreign organizations - tax withheld all source 6 Tax pad with application for extension of time to this (Form 8868) 6 E 12,500. 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here in if Form 2220 is attached 8 E 47. 9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Total credits and payments. Add lines 6 and 8 is more than line 7, enter amount owed 9 Total credits and payments. Add lines 6 and 8 is more than line 7, enter amount owed 9 Total credits and payments. Add lines 6 and 8 is more than line 7, enter amount owed 9 Total credits and payments. Add lines 6 and 8 is more than line 7, enter amount owed 9 Total credits and 1 line 7 is more than 1 line 10 in the Credited to 2015 estimated tax. Potal tax in the 10	3	Add line	es 1 and 2							3		1	<u>9,9</u>	<u>921.</u>
6 Credits/Payments 2014 estimated tax payments and 2013 overpayment credited to 2014 5 Exempt foreign organizations - tax withheld at source 6 Tax pad with application for extension of time to tile (Form 8868) 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 6 12,500. 7 25,860. 7 25,860. 7 25,860. 7 25,860. 7 25,860. 7 25,860. 7 25,860. 8 47. 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment if little 7 is more than the total of lines 5 and 8, enter in the parameter of the semination of line 10 to the Credited to 2015 estimated tax P 5,892. Refunded P 11 0. 7 Part VIII-A Statements Regarding Activities 1 During the tax year, add the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 During the tax year, add the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 3 to 40 any political campaign? 1 The answers "S'es" to tar or to, attach a detailed description of the activities of the activities of the definition of the foundation in Erom 112-PDO. for this year? 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. S 0. 2 Enter the rembursament (if any) paid by the foundation during the year? 3 Has the foundation angaged in any activities that have not previously been reported to the IRS? 3 Has the foundation made any changes, not previously reported to the IRS? 4 But the foundation have unrelated business gross income of \$1,000 or more during the year? 4 But the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction of the changes 5 Was level a liquidation, termination, dissolution, or substantial contra	4			thers e	ente	er -0-)	)			4	<u> </u>		_	
a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Total credits and payments. Add times 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Total credits and payments. Add times 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Total credits if the 7s is more than the total of lines 5 and 8, enter the amount ower Total credits if the 7s is more than the total of lines 5 and 8, enter the amount overpaid Total credits if the 7s is more than 1 time 7, enter amount ower Total credits if the 7s is more than 5 time 5 and 8, enter the amount overpaid Total credits if the 7s is more than 5 time 5 and 8, enter the amount overpaid Total credits if the 7s is more than 5 time 5 and 8, enter the amount overpaid Total credits if the 7s is more than 5 time 5 and 8, enter the amount overpaid Total credits if the 7s is more than 5 time 10 to be. Credited to 2015 estimated tax ▶ 5, 892. Refunded ▶ 10 5, 892.  The TrivII-A Statements Regarding Activities  To During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign?  If the answer is "Yes" to 1a or 1b, attach a detailed descention of the activities of the 4 time	5		·							5		1	<u>9, 9</u>	<u>921.</u>
Exempt foreign organizations - lax withheld at source  © Tax paid with application for extension of time to file (Form 8868)  © Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  7 Total credits and payments. Add lines 6a through 6d  8 47.  9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  9 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 0 Tax VIII-A Statements Regarding Activities  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Did is spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  1b A Use of the foundation in the form \$120 Pol. for this year?  1c Enter the reimburssement (if any) to ad by the foundation during the year or political expenditure tax imposed on foundation managers. S 0. (2) On foundation managers. S 0.  2 Has the foundation have form the foundation during the year for the activities  1 Has the foundation have directed business gross on come of \$1,000 or more during the year?  1 "Yes," attach the statement required by General Instruction T.  A retire requirements of section \$90-T for this year?  1 "Yes," attach the statement required by General Instruction T.  A retire requirements of section \$90-T for this year?  1 "Yes," attach the statement required by General Instruction T.  A retire requirements of Section \$90-T for this year?  1 "Yes," attach the statement required by General Instruction T.  A retire requirements of Section \$90-T for this year?  1 "Yes," attach the statement required by General Instructio	-			1	i									
E Tax paid with application for extension of time to file (Form 8686) d Backup withholding errorecosty withheld d Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Chock here					+			13,5	60.					
d Backup withholding erroneously withhold  7 Total credits and payments. Add thes 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here					+			40 5						
7   25,860. 8 Enter any penalty for other parment of estimated tax. Check here ☐ if Form 2220 is attached 8   47. 9   Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 9   10   Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpad 10   Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpad 11   Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 5,892. Refunded ▶ 11   0.  Part VII-A   Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political paramager. 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation on connection with the activities are contactly the foundation on connection with the activities are contactly to the foundation on the contactly of the foundation on any political expenditures tax imposed during the year: 1c			• • • • • • • • • • • • • • • • • • • •		+			12,5	00.					
8 Enter any penalty for underpayment of estimated tax. Check here				<u>6d</u>	Ц.					_		_		
9 Tax due If the total of lines 5 and 8 is more than the total of tines 5 and 8, enter the amount overpand 10 Overpayment If line 7 is more than the total of tines 5 and 8, enter the amount overpand 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 5 , 8 9 2 . Refunded ▶ 11 10 . Span 11										-			5,6	47
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpand  11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ► 5 , 892 . Refunded ► 11 0.  Part VII.—8  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)?  1b Lis X  1f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  1c Did the foundation his Form 1120-POL for this year?  1c Extended the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0.  2 Has the foundation have most paged in any activities that have not previously been reported to the IRS?  1f "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, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  3 A X  4 Did the foundation have materiated business gross income of \$1,000 or more during the year?  4 A X  5 If "Yes," thas it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  7 Did the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  8 by language in the governing instrument, or  9 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				cnea										4/.
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any political campaign?  b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) plat by the political expenditures (section 4955) imposed during the year:  (1) On the foundation. \( \mathbb{\text{S}} \) \( \mathbb{\text{O}} \) \( \mathbb{\text{C}} \) \( \text{C		_	——————————————————————————————————————	ation o	or (	did it n	artici	ata or in	tanyana	ın	<del></del>		Yes	No
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<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 law remain in the governing instrument?</li> <li>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</li> <li>8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►</li> <li>AL</li> <li>b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation</li> <li>9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV</li> <li>9 X</li> <li>10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses</li> <li>10 X</li> </ul>			· · · ·											
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remain in the governing instrument?  7 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  7 X  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  AL  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)  of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses  10 X														
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8a Enter the states to which the foundation reports or with which it is registered (see instructions)  AL  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses  10 X	_		· · · ·		_									<del></del>
AL b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	7	Did the	foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	plete	Pa	art II,	col. (d	;), and F	Part XV			7	X	<del> </del>
AL b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	0 -	Enter #	o ctaton to which the foundation recents as with which it is not a district.											1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  9	ďa		re states to which the fourtdation reports or with which it is registered (see instruction	is) 🟲	_						<del></del>			
of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	h		newer is "Ves" to line 7, has the foundation furnished a serve of Form 000 DE to the At-	toras		000-01	/or #	0.00=451						
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	ע		• •	torney	y Gi	eneral	(or de	signate)				0.	_v	
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	a		· · · · · · · · · · · · · · · · · · ·	tion A	04	2/1//2/	\ or 40	40(NE)	for colo	ndar		8D	<del>  ^</del>	<del>  -</del>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	J							42())(3)	ioi calei	iual		0		v
	10		· · · · · · · · · · · · · · · · · · ·					a al al	_					Y Y
	<u> </u>		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	o naung	y (I)	içii (IAITI	ाटक द् <u>षा</u>	adui esse:	·		Forr		-PF	

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Form 990-PF (2014)

Form 990-PF'(2014) ALTEC/STYSLINGER FOUNDAT			72-13723	02 Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		· · ·		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
4945(d)(4)(A)? (see instructions)		Y6	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t			1 1
the prevention of cruelty to children or animals?	o, vadamana, parpooto, ar i		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described i			
section 53 4945 or in a current notice regarding disaster assistance (see instru		iii ricgalations	N/A	5ь
Organizations relying on a current notice regarding disaster assistance check h	·			<del>"                                     </del>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ınad		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494		/A	S L NO	
, , ,	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No	
a personal benefit contract?		Y6		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y€	es X No	
b If Yes, did the foundation receive any proceeds or have any net income attribu			/	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	<b>y</b>	
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
· · · · · · · · · · · · · · · · · · ·	to position	`enter'-0-)	compensation	allowances
LEE J. STYSLINGER, JR.	CHAIRMAN			
210 INVERNESS CENTER DRIVE			_	_
BIRMINGHAM, AL 35242	0.00	0.	0.	0.
	PRESIDENT & C	ΈO		
210 INVERNESS CENTER DRIVE				
BIRMINGHAM, AL 35242	0.00	0.	0.	<u> </u>
	SECRETARY			
210 INVERNESS CENTER DRIVE				
BIRMINGHAM, AL 35242	0.00	0.	0.	0.
	•			
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	F 7 18 2	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each onlyloyde paid more than \$50,000	devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				
Total number of other employees paid over \$50,000		1		0
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Total. Add lines 1 through 3

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	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndatior	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	36,397,680.
b	Average of monthly cash balances	1b	5,451,948.
C	Fair market value of all other assets	1c	2,305,971.
d	Total (add lines 1a, b, and c)	1d	44,155,599.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	] 2	0.
3	Subtract line 2 from line 1d	3	44,155,599.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	662,334.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	43,493,265.
6	Minimum investment return Enter 5% of line 5	6	2,174,663.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certa	
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	2,174,663.
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.)	]	
C	Add lines 2a and 2b	2c	19,921.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,154,742.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,154,742.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,154,742.
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	1,630,821.
b	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:		
а	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	1,630,821.
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.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,630,821.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	ee instructions)			
,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7				2,154,742
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 616, 155.				
b From 2010 329,862. c From 2011 339,933.				
d From 2012				
e From 2013 348,616.				
f Total of lines 3a through e	1,634,566.			
4 Qualifying distributions for 2014 from	2703173001			
Part XII, line 4: ►\$ 1,630,821.				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				<u> </u>
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				1,630,821.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	523,921.			523,921.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,110,645.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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				
assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2013. Subtract line	<u> </u>			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014 Subtract				<del>.</del>
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	92,234.	-		
9 Excess distributions carryover to 2015.	1 010 411			
Subtract lines 7 and 8 from line 6a	1,018,411.			
10 Analysis of line 9:				
a Excess from 2010 b Excess from 2011 329,862.				
c Excess from 2012				
d Excess from 2013 348,616.				
5 (	1	1		

	<u>TYSLINGER F</u>				372302 Page 10
Part XIV   Private Operating F		<del></del>	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	2014, enter the date of	the ruling	<b>▶</b>		
b Check box to indicate whether the found	ation is a private operati	ng foundation described	ın section	4942(j)(3) or 4	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					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,				- <del> </del>	<del> </del>
line 4 for each year listed					
d Amounts included in line 2c not				- <del>                                    </del>	
used directly for active conduct of					
exempt activities					
·					
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	·				ļ
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
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					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	- <del></del>	=.		_	<del>                                     </del>
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5 000 or m	ore in assets
at any time during t			ii tiio rouridatio		ore in assets
1 Information Regarding Foundatio					<del>_</del>
a List any managers of the foundation who	_	than 20/ of the total con	tributions received by th	a foundation hafara the als	on of any tay
year (but only if they have contributed m	ore than \$5,000), (See s	section 507(d)(2).)	minumons received by m	e foundation before the cit	ise of any tax
LEE J. STYSLINGER, J.		(-/(-/-/			
b List any managers of the foundation who		ne stock of a corporation	/or an equally large port	uon of the ownership of a r	artnership or
other entity) of which the foundation has			(or all equally large port	non of the ownership of a p	Dai tilei Silip Ul
NONE	Ü				
	C C:4	Cahalanahin ata D			
2 Information Regarding Contribute Check here ► X if the foundation of					wasta fan frankrijk
the foundation makes gifts, grants, etc. (	ny makes contributions	io preselecteo charitable aduals or organizations i	organizations and does	not accept unsolicited req	uests for lungs. If
_ ·	<del></del>		-		<del></del>
a The name, address, and telephone numb	per or e-mail address of	ine person to wnom app	lications should be addre	esseo:	
b. The farm on which and believe a bould be				· · · · · · · · · · · · · · · · · · ·	<del></del>
b The form in which applications should be	e submitted and informa	tion and materials they s	noula include;		
c Any submission deadlines:					
d Any restrictions or limitations on sweeds	cuch as by assessed	al aroan, abasitable fields	lands of institutions	ather feeters:	<del></del>
d Any restrictions or limitations on awards	, such as by geographic	ai areas, charitable fields	, kinus of institutions, of	omer factors;	

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year A+ EDUCATION FOUNDATION NONE PUBLIC CHARITY GENERAL OPERATING PO BOX 4433 BUDGET MONTGOMERY, AL 36103 5,000. A.G. GASTON BOYS AND GIRLS CLUB NONE PUBLIC CHARITY GENERAL OPERATING 2900 SOUTH PARK DRIVE SW BUDGET BIRMINGHAM AL 35211 100,000. ACADEMY TENNIS CORP NONE PUBLIC CHARITY GENERAL OPERATING 3629 CHARLESTON LANE BUDGET BIRMINGHAM AL 35216 2,500. ALABAMA BALLET NONE PUBLIC CHARITY GENERAL OPERATING 2726 1ST AVENUE SOUTH BUDGET BIRMINGHAM, AL 35233 3,000. ALABAMA SCHOOL OF FINE ARTS NONE PUBLIC CHARITY GENERAL OPERATING 1800 REVEREND ABRAHAM WOODS, JR. BLVD BUDGET BIRMINGHAM AL 35203 21,400. SEE CONTINUATION SHEET(S) Total ➤ 3a 1 629 845 b Approved for future payment NONE Total **▶** 3b

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
g g	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a		<u> </u>				
b						
C			11			
d			1	-	•	
			<del>  </del>	·		
e			┤──┤			
g Fees and contracts from government agencies			<del>  </del>		<del></del>	
2 Membership dues and assessments						
3 Interest on savings and temporary cash	<del></del>		<del>                                     </del>			
investments			1 1		<del></del>	
4 Dividends and interest from securities	ļi	<del>.</del>	14	555,707.		
5 Net rental income or (loss) from real estate:	<del>  </del>		<del></del>			
a Debt-financed property		·· <u>-</u> ·	1			
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income	531390	<52,572.	<u> </u>			
8 Gain or (loss) from sales of assets other				,		
than inventory			18	547,879.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:				·		
			1 1			
			++			
e 12 Subtotal. Add columns (b), (d), and (e)		<52,572.		1,103,586.		
13 Total Add line 12, columns (b), (d), and (e)	<u> </u>	<36,314.	<u> </u>		0. 1,051,014.	
(See worksheet in line 13 instructions to verify calculations.)				13	1,031,014.	
		<del></del>			<del> </del>	
Part XVI-B Relationship of Activities t	to the Acco	emplishment of Ex	cempt	Purposes		
Line No. Explain below how each activity for which inco	me is reported ii	 n column (e) of Part XVI-A	contrib	uted importantly to the accom	inlishment of	
the foundation's exempt purposes (other than					<b>,</b>	
		. *				
			_	<del>-</del>		
					-	
			-		<u> </u>	
			_	<u></u>		
				<u> </u>		
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423621 11-24-14					Form <b>990-PF</b> (2014)	

Form 99		014) <b>ALTEC</b>	:/STYSLING	GER FO	UNDATION			72-	1372302	Pa	ige 13
Part	XVII			nsfers To	and Transactions	and Rela	tions	hips With No	ncharitable	<b>e</b>	
		Exempt Organ				<del></del>					
					ring with any other organiza		ın sect	ion 501(c) of		Yes	No
					527, relating to political org	anizations?					
		from the reporting found	ation to a nonchariti	able exempt o	organization of:						
	Cash								1a(1)		X
	Other								1a(2)		Х
		sactions:	hl	-4							17
		of assets to a noncharita							1b(1)		<u>X</u>
` '		ases of assets from a no	•	organization					1b(2)		X
٠,		I of facilities, equipment,							1b(3)		X
		oursement arrangements s or loan guarantees							1b(4)		X
		rmance of services or me	amharchin ar fundra	ueina enlicitat	tione				1b(5)		X
		facilities, equipment, ma							1b(6) 1c		X
	_		-		hedule. Column (b) should	always show th	he fair n	narket value of the c		e ate	Λ
					ived less than fair market vi					, ,	
		) the value of the goods,						· c· c··a····g arrange			
(a) Line r	10	(b) Amount involved	(c) Name o	of noncharitat	ole exempt organization	(d) De	scription	of transfers, transaction	ons, and sharing ar	rangeme	nts
				N/A				_			
								•			
										********	
								·			
	_										
	_										
			-	<del></del>							
	+										
	-							<del> </del>	<del></del>		
•							<del></del>				
		•	•	-	ne or more tax-exempt orga	inizations desc	ribed			37	٦.,
		501(c) of the Code (othe mplete the following sch	<u>=</u>	c)(3)) or in se	CHON 5277				Yes	LA	No
יי ע	165, 66	(a) Name of ord			(b) Type of organization	1		(c) Description of re	elationship		
		N/A			(b) Type of organization	<u>'</u>		( <b>0</b> ) 000011piion 0110	лацопоттр		
					<del>-</del>						
					<del></del>						
-							•				
					ding accompanying schedules a				May the IRS	tecues t	bic
Sign	and be	lief, it is true correct, and cor	nplete Declaration of p	reparer (other th	nan taxpayer) is based on all info	ormation of which	preparer	has any knowledge	return with the	e prepare	er e
Here		KIII			8/6/13	SEC	CRET	TARY	X Yes	_	] No
	Sign	ature of officer or trustee	!		Date	Title					
		Print/Type preparer's na	ame	Preparer's	signature	Date			PTIN		
				0.	71			self- employed			
Paid		JAMES L. R	ICHARDSON	4 X -	~. rikd	07/16/	/15		P00020		
Prep:	arer	Firm's name ► MCG	LADREY LI	LF()				Firm's EIN ► 4	2-07143	25	

Form **990-PF** (2014)

Phone no 205-278-0001

Firm's address ▶ 216 SUMMIT BOULEVARD, STE 300 BIRMINGHAM, AL 35243

### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No 1545-1709

•						
• If you ar	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			► X
- ii you ar	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)		
Do not coi	mplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868	
Electronic	filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for a o	corporation
required to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	368 to request a	an extension
of time to	file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for	Transfers ,	Associated With	n Certain
Personal E	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	tronic filing of t	this form,
visit www	irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	Only s	submit original (no copies ne	eded).		
A corporat	tion required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		
Part I only	•					
All other co	orporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
to file inco	me tax returns			Enter file	er's identifying	number
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identification r	number (EIN) or
print	,			, ,		` ,
	ALTEC/STYSLINGER FOUNDATION	1			72-1372	2302
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (	SSN)
filing your	210 INVERNESS CENTER DRIVE				,	,
return See Instructions	City, town or post office, state, and ZIP code. For a fo	reign add	lress, see instructions			
	BIRMINGHAM, AL 35242					
Enter the I	Return code for the return that this application is for (file	a senara	te application for each return)			0 4
Litter title i	neturn code for the return that this application is for the	a separa	te application for each return)			<u> </u>
Application	an .	Return	Application			Return
	יונ	ł				Code
Is For	ov Form 000 F7	Code	Is For		<del> </del>	07
·	or Form 990-EZ	01	Form 990-T (corporation)			08
Form 990-I		02	Form 1041-A			
	O (individual)	03	Form 4720 (other than individual)			09
Form 990-I	•	04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	T (trust other than above)  ALLEN W. RITCH	06	Form 8870			12
			D DE DEDUTIONA	7 T	25242	
	oks are in the care of $\triangleright$ 210 INVERNESS (	- FIA.I.FI		, Аь	35242	
Telenha	one No ▶ 205-991-7733		Fax No 🕨			
· ·						. $\square$
<ul><li>If the or</li></ul>	rganization does not have an office or place of busines			· · · · · ·		<b></b>
<ul><li>If the or</li></ul>	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)			
If the or   If this is box ▶	s for a Group Return, enter the organization's four digit  If it is for part of the group, check this box	Group Exe	emption Number (GEN)ich a list with the names and EINs o	all memb		
If the or     If this is     box ▶	s for a Group Return, enter the organization's four digit  If it is for part of the group, check this box   quest an automatic 3-month (6 months for a corporation	Group Exe and atta required	emption Number (GEN)  ich a list with the names and EINs of the Form 990-T) extension of time.	f all memb until	ers the extension	
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• If the or • If this is box ▶ □ 1 I req is for	s for a Group Return, enter the organization's four digit If it is for part of the group, check this box liquest an automatic 3-month (6 months for a corporation AUGUST 15, 2015 and the exempor the organization's return for:	Group Exe and atta required to torganiza	emption Number (GEN)  ich a list with the names and EINs of the Form 990-T) extension of time.	f all memb until	ers the extension	
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● If the or ● If this is box ▶ □  1 I req is for ■ □  2 If the	If it is for part of the group, check this box light is for part of the group, check this box light is for part of the group, check this box light is for part of the group, check this box light is for a corporation automatic 3-month (6 months for a corporation automatic 3-month (6 months for a corporation automatic 3-months for a corporation automatic 3-month (6 months for a corporation automatic 3-months for a corporation au	Group Exe and atta required t organiza , an heck reas	emption Number (GEN)  ich a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named and ending  Initial return	f all memb until ed above.	ers the extension The extension —	on is for
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● If the or  ■ If this is box ▶ □  1	If it is for part of the group, check this box light is for part of the group, check this box light is for part of the group, check this box light is for part of the group, check this box light is for part of the group, check this box light is for a corporation and the automatic 3-month (6 months for a corporation in the automatic 3-months for a corporation in the organization's return for:    X	and atta required t organiza , an heck reas or 6069, , enter any	emption Number (GEN)  Inch a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending  Initial return  Initial return  The refundable credits and lilowed as a credit	f all memb until ed above. Final retur	ers the extension The extension	
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#### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ⋅

OMB No 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			
<ul><li>If you a</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)		
Do not co	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868	
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tin	ne to file (i	6 months for a	corporation
required t	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ıle Form 8	868 to request	an extension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers .	Associated With	ı Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details	on the elec	ctronic filing of t	his form,
visit www	urs.gov/efile and click on e-file for Charities & Nonprofits	i				
Partil	Automatic 3-Month Extension of Time	Only s	submit original (no copies nee	eded).		
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete		
Part I only	y					ightharpoons
	corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	it an exter	sion of time	
to file inc	ome tax returns.			Enter file	r's identifying	number
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	ıdentification r	number (EIN) or
print						
Eda bodha	ALTEC/STYSLINGER FOUNDATION	Ŋ			72-1372	302
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (	SSN)
filing your return See	210 INVERNESS CENTER DRIVE					
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions			
	BIRMINGHAM, AL 35242					
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 7
Applicati	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	-BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	-PF	04	Form 5227			10
Form 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870		<u> </u>	12
	ALLEN W. RITCH	ΪE				
• The bo	poks are in the care of $\blacktriangleright$ 210 INVERNESS (	CENTER	R DR BIRMINGHAM	, AL	35242	
Teleph	none No ▶ 205-991 <del>-7733</del>		Fax No. ▶	-		
<ul><li>If the c</li></ul>	organization does not have an office or place of business	s in the Un	nited States, check this box			<b></b>
	is for a Group Return, enter the organization's four digit			f this is fo	r the whole grou	up, check this
box ▶ [	. If it is for part of the group, check this box	1	ch a list with the names and EINs of	f all memb	ers the extensi	on is for.
1 Ire	quest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	untıl		
	NOVEMBER 15, 2015 , to file the exemp				The extension	
ıs fo	or the organization's return for:	•	-			
▶[	X calendar year 2014 or					
▶[	tax year beginning	. an	d ending			
	, <u> </u>		<u> </u>		_	
2 If th	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on. Initial return	Final retur	n	
	Change in accounting period					
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069.	enter the tentative tax, less any		·	
	nrefundable credits. See instructions			3a	\$	0.
	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	v refundable credits and	<del>-  </del> -	-	
	mated tax payments made. Include any prior year overp			3b	\$	5,960.
	ance due. Subtract line 3b from line 3a Include your pa			55	7	
	using EFTPS (Electronic Federal Tax Payment System)	-		3с	\$	0.
	If you are going to make an electronic funds withdrawal					
instructio		(2.1001.00				

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 1-2014)

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the			·	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
ALABAMA SHAKESPEARE FOUNDATION 1 FESTIVAL DRIVE MONTGOMERY, AL 36117	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	5,000.
ALS ASSOCIATION 3313 MEMORIAL PARKWAY SW, SUITE 100 HUNTSVILLE, AL 35801	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	2,500.
ALTAMONT SCHOOL 4801 ALTAMONT ROAD SOUTH BIRMINGHAM, AL 35222	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	55,000.
AMERICAN CANCER SOCIETY 1100 IRELAND WAY STE 201 BIRMINGHAM, AL 35205-7014	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000.
AMERICAN HEART ASSOCIATION 1449 MEDICAL PARK DRIVE BIRMINGHAM, AL 35213	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	16,000.
ARTS FUND 210 INVERNESS CENTER DRIVE MONTGOMERY, AL 35242	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	1,500.
BETHEL BAPTIST CHURCH 3200 28TH AVENUE NORTH BIRMINGHAM, AL 35207	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	15,000.
BIRMINGHAM ZOO 2630 CAHABA ROAD BIRMINGHAM, AL 35223	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000.
BOY SCOUTS OF AMERICA 516 LIBERTY PARKWAY VESTAVIA HILLS, AL 35242	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	22,500.
BREAKTHROUGH COLLABORATIVE 505 43RD STREET N BIRMINGHAM AL 35222	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	1,500.
Total from continuation sheets			<del>                               </del>	1,497,945.

3 Grants and Contributions Paid During the Y	<del></del>			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
BRIARWOOD CHRISTIAN SCHOOL	NONE	PUBLIC CHARITY	GENERAL OPERATING	
2204 BRIARWOOD WAY BIRMINGHAM, AL 35243			BUDGET	4 50
BIRMINGRAM, AL 33243				4,50
BROWN UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
BROWN UNIVERSITY			BUDGET	
PROVIDENCE, RI 02912				10,00
DIVING GUID GODEDALY				ı
BULLDOG CLUB - SOFTBALL 300 LAKESHORE DRIVE	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35229				25,00
CAMPUS CRUSADE FOR CHRIST	NONE	PUBLIC CHARITY	GENERAL OPERATING	
303 WISTERIA PLACE HOOVE AL 35216			BUDGET	7,00
100VE, RD 33210		<del>                                     </del>		7,00
CANTERBURY UNITED METHODIST CHURCH	NONE	PUBLIC CHARITY	GENERAL OPERATING	
350 OVERBROOK DRIVE			BUDGET	
BIRMINGHAM, AL 35213				2,500
CHILDREN'S FIRST ALLIANCE OF ALABAMA	NONE	PUBLIC CHARITY	GENERAL OPERATING	
1425 I-85 PARKWAY, SUITE C			BUDGET	
MONTGOMERY, AL 36106				5,00
CHILDREN'S HARBOR	NONE	PUBLIC CHARTTY	GENERAL OPERATING	
L600 6TH AVE S			BUDGET	
BIRMINGHAM, AL 35233				10,00
CONSERVATION THROUGH ART	NONE	DUDITO CUADIMY	GENERAL OPERATING	
575 SOUTH MENDENHALL		TODDIC CIMATII	BUDGET	
MEMPHIS, TN 38117	-			2,50
CORNER GROVER GOVERN				
CORNERSTONE SCHOOLS 118 55TH STREET N	NONE	FURLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35212				25,00
EWI SCHOLARSHIP PROGRAM	NONE	PUBLIC CHARITY	GENERAL OPERATING	
2860 SOUTH 2300 EAST, STE 211 SALT LAKE CITY, UT 84109			BUDGET	1,00
Total from continuation sheets	-J		<u> </u>	1,000

3 Grants and Contributions Paid During the			<u> </u>	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	_
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
FCA AUBURN UNIVERSITY CENTER PO BOX 68 AUBURN, AL 36831-0068	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	1,000
FORWARD ATLANTA 855 BORTHBROOK PARKWAY SUWANEE, GA 30024	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000
FRESH WATER LAND TRUST 2308 FIRST AVENUE NORTH BIRMINGHAM, AL 35203	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	15,000
GEORGIA HISTORICAL SOCIETY 501 WHITAKER STREET SAVANNAH , GA 31401	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000
GRACE HOUSE 4911 FARRELL AVENUE FAIRFIELD, AL 35064	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	16,000
GREATER BIRMINGHAM JUNIOR GOLF ORGANIZATION 3300 HIGHLAND AVENUE SOUTH BIRMINGHAM, AL 35205	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	4,000
HARVARD BUSINESS SCHOOL HARVARD BUSINESS SCHOOL BOSTON, MA 02163	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	200,000
HICA 210 INVERNESS CENTER DRIVE BIRMINGHAM, AL 35242	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	1,000
HOLY FAMILY CRISTO REY 2001 19TH STREET ENSLEY BIRMINGHAM, AL 35218-2097	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000
HORIZONS SCHOOL 2018 15TH AVENUE SOUTH BIRMINGHAM, AL 35242	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,000

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3 Grants and Contributions Paid During the	<del></del>		T	
Recipient	If recipient is an individual, show any relationship to	show any relationship to Foundation		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
INDEPENDENT PRESBYTERIAN CHURCH	NONE	PUBLIC CHARITY	GENERAL OPERATING	
3100 HIGHLAND AVENUE			BUDGET	
BIRMINGHAM, AL 35205				1,00
JH RANCH	NONE	PUBLIC CHARITY	GENERAL OPERATING	
402 OFFICE PARK DRIVE, SUITE 320			BUDGET	
BIRMINGHAM, AL 35223				7,00
JUNIOR ACHEIVEMENT OF GREATER BIRMINGHAM	NONE	PUBLIC CHARITY	GENERAL OPERATING	
BIRMINGHAM 216 AQUARIUS DRIVE, SUITE 315			BUDGET	
BIRMINGHAM, AL 35209				5,000
LIFE TURNS 210 INVERNESS CENTER DRIVE	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35242			BODGET	10.00
M-POWER MINISTRIES	NONE	PUBLIC CHARITY	GENERAL OPERATING	
4022 4TH AVENUE SOUTH			BUDGET	
BIRMINGHAM, AL 35222				2,500
MAYLAND COMMUNITY COLLEGE FOUNDATION	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PO BOX 547			BUDGET	
SPRUCE PINE, NC 28777				30,000
MCWANE CENTER	NONE	PUBLIC CHARITY	GENERAL OPERATING	
200 19TH STREET N			BUDGET	
BIRMINGHAM, AL 35203				5,000
MOUNTAIN BROOK CITY SCHOOLS	NONE	PUBLIC CHARITY	GENERAL OPERATING	
FOUNDATION 32 VINE STREET			BUDGET	
MOUNTAIN BROOK, AL 35213				15,000
MUSEUM OF ALABAMA	NONE	PUBLIC CHARITY	GENERAL OPERATING	
624 WASHINGTON AVENUE MONTGOMERY AL 36130			BUDGET	20,000
NATIONAL ALLIANCE FOR PUBLIC CHARTER	NONE	PUBLIC CHARITY	GENERAL OPERATING	
SCHOOLS 1101 15TH STREET NW, #1010			BUDGET	
WASHINGTON DC 20005				10,000
Total from continuation sheets		<del></del>	<u>.</u>	

Part XV Supplementary Information	I I SDINGER FOUND	3211 1014		572302
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	, , , , ,
NATIONAL CENTER FOR FAMILY	NONE	DIIBLIC CHARITY	GENERAL OPERATING	
PHILANTHROPY	NONE	POBLIC CHARITI	BUDGET	
1101 CONNECTICUT AVENUE NW, SUITE 220				
WASHINGTON, DC 20036				10,445
NATIONAL CENTER FOR SPORTS SAFETY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
2316 FIRST AVENUE SOUTH			BUDGET	
BIRMINGHAM, AL 35233				2,500.
NATIONAL MULTIPLE SCLEROSIS SOCIETY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
813 SHADES CREEK PARKWAY, SUITE 100B			BUDGET	
BIRMINGHAM, AL 35209				10,000.
NORTHWESTERN UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
633 CLARK STREET EVANSTON, IL 60208			BUDGET	5,000.
511115251, 12 00200				3,000.
DEMPROVE VIII GOUGO	TOWN			
PEMBROKE HILL SCHOOL 400 W. 52ST STREET	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
KANSAS CITY, MO 64112				50,000.
PRE-SCHOOL PARTNERS	NONE	PUBLIC CHARITY	GENERAL OPERATING	
3736 MONTROSE ROAD			BUDGET	
BIRMINGHAM, AL 35213				5,000.
QUEST	NONE	PUBLIC CHARITY	GENERAL OPERATING	
210 INVERNESS CENTER DRIVE			BUDGET	
BIRMINGHAM, AL 35242	_			2,500.
RAILROAD RESERVATION PARK 1600 1ST AVENUE SOUTH	NONE	PUBLIC CHARITY	GENERAL OPERATING	
BIRMINGHAM AL 35233			BUDGET	20,000.
				20,000.
RED MOUNTAIN PARK	NONE	DIIDI IC CUADIMY	CEMERAL OPERATIO	
281 LYON LANE	NONE	FUBLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35211				20,000.
RESTORATION ACADEMY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PO BOX 30			BUDGET	
FAIRFIELD, AL 35064  Total from continuation sheets	<u> </u>	<u> L </u>	<u> </u>	50,000.
Total from Continuation Sheets			· · · · · · · · · · · · · · · · · · ·	<u> </u>

3 Grants and Contributions Paid During the	(ear (Continuation)	•		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	711100111
REV	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PO BOX 320637 BIRMINGHAM AL 35232-0637			BUDGET	5,0
ROANOKE VALLEY ECONOMIC DEVELOPMENT	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
111 FRANKLIN PLAZA, SUITE 333 ROANOKE, VA 24011				3,0
ROTARY CLUB OF BIRMINGHAM CENTENNIAL	NONE	PUBLIC CHARITY	GENERAL OPERATING	
FUND			BUDGET	
2019 4TH AVENUE N. #200 BIRMINGHAM, AL 35203				20,0
SALVATION ARMY 2100 11TH AVENUE NORTH	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35234			BUDGET	1,00
SAMFORD LEGACY LEAGUE 800 LAKESHORE DRIVE, SAMFORD HALL,	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
ROOM 308 BIRMINGHAM, AL 35229			202011	<1,00
SHELBY COUNTY ARTS COUNCIL 104 MILDRED STREET	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
COLUMBIANA, AL 35051				5,00
SOUTHERN METHODIST UNIVERSITY	L.O.V.P.			
PO BOX 750100	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
DALLAS, TX 75275-0100				100,00
ST. BERNARD ABBEY AND PREP SCHOOL	NONE	PUBLIC CHARITY	GENERAL OPERATING	
1600 ST. BERNARD DRIVE SE			BUDGET	
CULLMAN AL 35055		<u> </u>		10,00
ST. VINCENT'S FOUNDATION	NONE	PUBLIC CHARITY	GENERAL OPERATING	
ONE MEDICAL PARK EAST DRIVE BIRMINGHAM, AL 35235			BUDGET	10.04
				10,00
CCIAF	NONE	PUBLIC CHARITY	GENERAL OPERATING	
.36 HARVEY ROAD, SUITE 101 .ONDONBERRY, NH 03053			BUDGET	20.00
Total from continuation sheets		1.	J	20,00

3 Grants and Contributions Paid During the				
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
THE CENTRAL BAPTIST CHURCH 1225 E LAKE BLVD BIRMINGHAM, AL 35217	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	1,00
THE COMMUNITY FOUNDATION OF WESTERN NORTH CAROLINA 4 VANDERBILT PARK DRIVE ASHEVILLE, NC 28803	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,00
THE EXCEPTIONAL FOUNDATION 1616 OXMOOR ROAD BIRMINGHAM, AL 35209	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,00
THE LEARNING TREE 101 S. DUBOIS STREET TALLASSEE, AL 36078	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	2,50
THE PAPAL FOUNDATION 150 MONUMENT ROAD, SUITE 609 BALA CYNWYD, PA 19004	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	100,00
THE TREE FUND 552 S. WASHINGTON ST, SUITE 109 NAPERVILLE , IL 60540	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	10,00
UAB CENTER FOR PALLIATIVE CARE 1713 6TH AVENUE SOUTH BIRMINGHAM, AL 35233	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	2,50
UAB SCHOOL OF MEDICINE 1720 2ND AVE. S. FOT 1203 BIRMINGHAM, AL 35294-3412	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	2,00
UAB SCHOOL OF NURSING 1720 2ND AVE. S. BIRMINGHAM, AL 35294-1210	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	5 , 00
UNITED WAY MID-WEST 910 NORTH 11 STREET ST. LOUIS MO 63101	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	25,00

3 Grants and Contributions Paid During the	Year (Continuation)			
. Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
DATED WAY OF COMMINA ANADAMA	1000			
JNITED WAY OF CENTRAL ALABAMA 3600 8TH AVENUE SOUTH	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
BIRMINGHAM, AL 35232			BODGET	50,50
JNITED WAY OF E-TOWN	NONE	PUBLIC CHARITY	GENERAL OPERATING	
540 NORTH MAIN STREET			BUDGET	
ELIZABETHTOWN , KY 42701				13,00
DITTED WAY OF GRANGES IN COLDYDY				
JNITED WAY OF GRANVILLE COUNTY 129 COLLEGE STREET	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
DXFORD, NC 27565			BUDGET	4,00
UNITED WAY OF ROANOKE	NONE	PUBLIC CHARITY	GENERAL OPERATING	
325 CAMPBELL AVENUE SW			BUDGET	
ROANOKE, VA 24016				4,00
INIVERSITY OF RICHMOND	NONE	PUBLIC CHARITY	GENERAL OPERATING	
28 WESTHAMPTON WAY			BUDGET	
RICHMOND, VA 23173				25,00
/ANDERBILT UNIVERSITY 2301 VANDERBILT PLACE	NONE	PUBLIC CHARITY	GENERAL OPERATING BUDGET	
VASHVILLE TN 37235			BODGET	2,50
IRGINIA ATHLETIC FOUNDATION	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PO BOX 400833			BUDGET	
CHARLOTTESVILLE, VA 22903				200,00
OUNDED WARRIOR PROJECT	NONE	PUBLIC CHARITY	GENERAL OPERATING	
1899 BELFORT ROAD, SUITE 300			BUDGET	
JACKSONVILLE, FL 32256	_			50,00
VALE UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
VALE UNIVERSITY NEW HAVEN, CT 06520			BUDGET	2,50
			,	
YOUNG LIFE MISSOURI	NONE	PUBLIC CHARITY	GENERAL OPERATING	
2329 S 22ND STREET #102			BUDGET	
ST. JOSEPH, MO 64503  Total from continuation sheets	_ !	<u> </u>	<u></u>	11,00

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
YOUNG LIFE SHELBY COUNTY	NONE	PUBLIC CHARITY	GENERAL OPERATING	
3000 EAGLE POINT CORP DR, STE 5			BUDGET	
BIRMINGHAM, AL 35242		ļ		5,000.
-				
				<del> </del>
Total from continuation sheets				1

FORM 990-PF	DIVIDENDS	AND INTE	EREST	FROM SEC	URI	TIES	STATEME	NT ——	1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A) REVENUE PER BOOK		(B) NET INVEST MENT INCOM	- ADJI		
CENTENNIAL REAL ESTATE FUND III GP, LLC CENTENNIAL REAL	21.		0.	2	1.	21	•	_	
ESTATE FUND IV, LP	4.		0.		4.	4	•		
CENTENNIAL REAL ESTATE FUND, LP	11.		0.	1	1.	11	•		
COSTANOA VENTURE CAPITAL I, LP	333.		0.	33	3.	333	•		
EAGLE CLASS JPM US GOV'T MM FD	559.		0.	55	9.	559	•		
RAYMOND JAMES - DIVIDENDS	1,109,547.	554,7	768.	554,77	9.	554,779	•		
TO PART I, LINE 4	1,110,475.	554,7	768.	555,70	7.	555,707	•		
FORM 990-PF		OTHER	INCO	ME			STATEMEN		
			<del></del>						
DESCRIPTION				(A) VENUE BOOKS		(B) ET INVEST- ENT INCOME	(C) ADJUS NET I	STEI	
CENTENNIAL REAL EST			_	<17,124.	>	0.			
CENTENNIAL REAL EST	ATE FUND II.	I GP,		<37,707.	>	0.			

0.

0.

0.

COSTANOA VENTURE CAPITAL I, LP

CENTENNIAL REAL ESTATE FUND IV, LP

TOTAL TO FORM 990-PF, PART I, LINE 11

6,857.

<4,598.>

<52,572.>

FORM 990-PF '	ACCOUNTI	NG FEES	STATEMENT 3		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	3,625.	906.		906.	
TO FORM 990-PF, PG 1, LN 16B	3,625.	906.		906.	
FORM 990-PF	TAX	ES	S	FATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FOREIGN GEORGIA INCOME TAX REFUND CALIFORNIA INCOME TAX	11,202. <2,711. 65.	> <2,711.>	•	0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18 =	8,556.	8,556.		0.	
FORM 990-PF	OTHER E	XPENSES	S'	ratement 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADVISORY FEES BANK SERVICE FEE	78,222. 364.	78,222. 364.		0.	
INVESTMENT FEES - FROM PASSTHROUGH COMMUNICATION FROM	19,502.	19,502.		0.	
CONTRIBUTIONS - FROM PASSTHROUGH	70.	0.		70.	
TO FORM 990-PF, PG 1, LN 23	98,158.	98,088.		70.	

FORM 990-PF OTHER INCREASES IN NE	T ASSETS OR FU	ND BALANCES	STATEMENT	6
DESCRIPTION			AMOUNT	
BOOK/TAX DIFFERENCE - CENTENNIAL REA BOOK/TAX DIFFERENCE - CENTENNIAL REA BOOK/TAX DIFFERENCE - COSTANOA VENTO FEDERAL INCOME TAX BOOK/TAX DIFFERENCE - CENTENNIAL REA	III, LP LP	30,79 37,69 37,99 2,20 4,59	36. 29. 73.	
TOTAL TO FORM 990-PF, PART III, LIN	Е 3		113,2	79.
FORM 990-PF OTHER DECREASES IN N	ET ASSETS OR F	UND BALANCES	STATEMENT	7
DESCRIPTION			AMOUNT	
ADJUST FOR ACCRUED RAYMOND JAMES INC	COME		70,10	55.
TOTAL TO FORM 990-PF, PART III, LIN	E 5		70,10	55.
FORM 990-PF COR	PORATE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKE	r
RAYMOND JAMES - HEDGE FUNDS RAYMOND JAMES - STOCKS RAYMOND JAMES - MUTUAL FUNDS		7,177,080. 0. 25,775,721.	8,374,08 28,965,20	0.
TOTAL TO FORM 990-PF, PART II, LINE	10B	32,952,801.	37,339,28	
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	r
CLOUGH OFFSHORE FUND CENTENNIAL REAL ESTATE FUND III COSTANOA VENTURE FUND CENTENNIAL REAL ESTATE FUND IV CENTENNIAL REAL ESTATE FUND I	COST COST COST COST COST	500,000. 893,082. 693,088. 158,331.	567,23 893,08 1,043,09 158,33	32. 53.
TOTAL TO FORM 990-PF, PART II, LINE	13	2,244,501.	2,661,70	)4.
	:			

FORM 990-PF '	OTHER ASSETS		STATEMENT	10	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	- · · · · · · · · · · · · · · · · · · ·		FAIR MARKET VALUE	
DIVIDENDS RECEIVABLE	1,594.	0.		0.	
TO FORM 990-PF, PART II, LINE 15	1,594.	0.		0.	