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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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

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

		nue Service Illiothiation about Form 950-FF			at www.	.iis.gov/torriissopi.	epon to t and moposition
_		dar year 2014 or tax year beginnin $07/01/14$,	and ending $06/3$	0/15_	···		
	me of fo		7		A Emple	oyer identification number	•
_		AN & EMMIE BOLDEN CHARITABLE	4		1 4 5	EE0E0/12	
	'RUS'	d street (or P O box number if mail is not delivered to street address)		om/suite		-5585842 hone number (see instruction	ne)
		D. BOX 360028	, Ro	Orrsuite		5-988-8989	15)
		n, state or province, country, and ZIP or foreign postal code			20.	5 500 0505 _	
	-	INGHAM AL 35236-0	028		C If exe	mption application is pending	, check here
_			m of a former public c	hantv	D 1. Fo	oreign organizations, check h	ere •
•		Final return Amended	•		2 Fo	oreign organizations meeting	the .
		Address change Name cha			ŧ	i% test, check here and attac	
_	2hl.		 				
		type of organization X Section 501(c)(3) exempt private the 4047(c)(4) represent shortable to get 1				ate foundation status was ter n 507(b)(1)(A), check here	minated under
		n 4947(a)(1) nonexempt chantable trust Other taxab rket value of all assets at J Accounting method					
			X Cash Acc	uai		foundation is in a 60-month to section 507(b)(1)(B), check	
	•	year (from Part II, col (c), Uther (specify) ▶ \$ 2,348,980 (Part I, column (d) must	. h		ange.	2001011 207 (2)(1)(2); 0.1001.	
_							(d) Disbursements
۲	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions))	books	incor	ne 	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	70,530			,	
	2	Check ▶ ☐ If the foundation is not required to attach Sch B				_	
	3	Interest on savings and temporary cash investments	6		6		
	4	Dividends and interest from securities	6,778		6,778		
	5a	Gross rents					
ď	Ь	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	312,108				
Revenue	b	Gross sales price for all assets on line 6a 1,420,118					
Şe.	7	Capital gain net income (from Part IV, line 2)		3:	12,108		
<u>,</u>	8	Net short-term capital gain				0	
j	9	Income modifications				-	- · · · · · · · · · · · · · · · · · · ·
:	10a	Gross sales less returns and allowances					
-	Ь	Less Cost of goods sold					
<u>-</u>	c	Gross profit or (loss) (attach schedule)				· · · · · · · · · · · · · · · · · · ·	
^ 	11	Other income (attach schedule) STMT 1	-122,044	-12	22,044		
Ν,	12	Total. Add lines 1 through 11	267,378		6,848	0	
S	13	Compensation of officers, directors, trustees, etc.	0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Se	14	Other employee salanes and wages					
penses	15	Pension plans, employee benefits					
έ×	16a	Legal fees (attach schedule)					
Administrative Ex	b	Accounting fees (attach schedule) STMT 2	5,300				
ίĶ	c	Other professional fees (attach schedule)	7.33				
Īa	17	Interest				-	
is	18	Taxes (attach schedule) (see instructions) STMT 3	6,739		7	-	
në.	19	Depreciation (attach schedule) and depletion	7,125				 -
퉏	20-						
⋖	24	Travel, conferences, and meetings					
and	22	Printing and publications					
ש	238	hther Mandas Patt schills				-	
ĭ	24	Total operating and administrative expenses.					
rat			12,039		7	0	0
Operating	25	Add lines 13 through 23 Continuous girls, grants-perd	467,400		-		467,400
0	26	Total expenses and disbursements. Add lines 24 and 25	479,439		7	0	467,400
	27	Subtract line 26 from line 12					<u> </u>
	a	Excess of revenue over expenses and disbursements	-212,061		ļ		
	b	Net investment income (if negative, enter -0-)		10	6,841		
	1	Adjusted net income (if negative, enter -0-)			3,311	0.	
	, ,	najaowa notinoonio (ii negative, enter -o-/	1			•	

Form 990-PF (2014)

5

6

17,785

2,380,685

5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 5

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	nd Losses for Tax on Investr	nent Income				
	nbe the kind(s) of property sold (e.g., real estate, rehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date a (mo, da		(d) Date sold (mo, day, yr)
1a SEE WORKSHEET						
<u>c</u>						
<u>d</u>			 			
	(f) Depreciation allowed	(a) Cost o	r other basis		(h) Gain	or (loss)
(e) Gross sales price	(or allowable)		ense of sale	_	(e) plus (f)	• •
a						
b						
<u>C</u>		<u> </u>				
d e						
	g gain in column (h) and owned by the	foundation on 12/3	1/69	<i>(</i>)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any			ess than -0-) or
a						
b	- <u></u>					
С						
d						
Capital gain net income or (net come)	apital loss) If gain, also enter in If (loss), enter -0- in			2		312,108
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	_	Ì			
If gain, also enter in Part I, line 8	3, column (c) (see instructions) If (loss)	, enter -0- ın		3		134,545
	nder Section 4940(e) for Redu	ced Tax on Ne	et Investment In	come		
If "Yes," the foundation does not qua	tion 4942 tax on the distributable amour	olete this part	<u> </u>			Yes X No
	each column for each year, see the ins	tructions before ma	king any entries			
(a) Base penod years Calendar year (or tax year beginning in)			(c) e of nonchantable-use asset			(d) bution ratio vided by col (c))
2013		774	2,829,1			0.185132
2012	512,	, /50	2,924,9	7/4		0.175301
			_			_
2009						
2 Total of line 1, column (d)				2		0.360433
	5-year base period – divide the total on		ne	Ì		
number of years the foundation h	as been in existence if less than 5 year	3		3	-	0.180217
4 Enter the net value of nonchanta	ble-use assets for 2014 from Part X, lin	e 5		4	ļ	2,603,414
5 Multiply line 4 by line 3				_5_	-	469,179
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			6		1,968
7 Add lines 5 and 6				7		471,147
8 Enter qualifying distributions from If line 8 is equal to or greater that	n Part XII, line 4 n line 7, check the box in Part VI, line 1	b. and complete tha	it part using a 1% tay	rate See t	the	467,400
Part_VI instructions		o, and complete the				

Form	990-PF (2014) HERMAN & EMMIE BOLDEN CHARITABLE 45-5585842			F	'age 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)			
1a	Exempt operating foundations described in section 4940(d)(2), check here land enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	·	<u>3,</u>	<u>937</u>
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	Į.			
	Part I, line 12, col (b)	Ì			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0
3	Add lines 1 and 2	3		<u>3,</u>	937
4	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		<u>3,</u>	937
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 3,330				
b	Exempt foreign organizations – tax withheld at source	Ì			
C	Tax paid with application for extension of time to file (Form 8868) 6c	Ì			
d	Backup withholding erroneously withheld 6d 6d			_	
7	Total credits and payments Add lines 6a through 6d	7		<u>3,</u>	<u>330</u>
8	Enter any penalty for underpayment of estimated tax. Check hereif Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			<u>607</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11		_	
<u>P</u>	rt VII-A Statements Regarding Activities			<u> </u>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		-	Yes	No
	participate or intervene in any political campaign?		1a	├ ──	X
b	Did it spend more than \$100 duning the year (either directly or indirectly) for political purposes (see				l
	Instructions for the definition)?		1b	ļ.—	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		l l	ĺ	
	published or distributed by the foundation in connection with the activities		l l		l
C	·		1c	├ ──	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ	İ	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$			l	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	 	<u> </u>
	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				l
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/·	4a	 	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/I			 _
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	 	X_
	If "Yes," attach the statement required by General Instruction T			l	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or		ł		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		1_		l
_	conflict with the state law remain in the governing instrument?	3/1/	6	X	├──
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 P	art XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ŀ	Ì	
L	AL If the energy is "Vee" to line 7, has the foundation furnished a copy of Form 000 DE to the Attempty Coporal.		-	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		O.L.	x	
0	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	├┷	
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,"		1	1	v
40	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	6.	10		x
_	names and addresses STMT	<u>u</u>	Form 99	10-PE	
			TOTAL DE	, U I	(2014)

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

Form 990-PF (2014)

4b

		EMMIE BOLDEN CHART		5585842	ontinued)		P	age 6
	Dunng the year did the foundation	-	FOITH 4/20 INIAY DE	e Required (C	onunueu)	П		ι
Эa	(1) Carry on propaganda, or other	rwise attempt to influence legislation (s specific public election (see section 495		🗆 י	/es X No			
	directly or indirectly, any voter		,,,,		res X No			İ
	• • •	al for travel, study, or other similar purp	oses?		res X No			
	· ·	tion other than a chantable, etc, organ						
	section 4945(d)(4)(A)? (see in				res X No	}		
		than religious, chantable, scientific, lite	erary, or educational	لحسا				
	• • • •	of cruelty to children or animals?	•		res X No			
b		, did any of the transactions fail to qua	alify under the exceptions	s described in	_			
	-	a current notice regarding disaster ass	-		N/A	5b_		
	Organizations relying on a current	notice regarding disaster assistance c	heck here		▶ 🔲			[
C		5a(4), does the foundation claim exemp	•		_			
	because it maintained expenditure	responsibility for the grant?		N/A 🗌	′es 🗌 No	ĺ		
	If "Yes," attach the statement requ	aired by Regulations section 53 4945-5	5(d)					
6a	Did the foundation, during the year	r, receive any funds, directly or indirect	ly, to pay premiums					
	on a personal benefit contract?			\	′es 🛚 No			
b	Did the foundation, during the year	r, pay premiums, directly or indirectly, o	on a personal benefit co	ntract?	_	6b		X
	If "Yes" to 6b, file Form 8870				_			
7a	At any time during the tax year, wa	as the foundation a party to a prohibited	d tax shelter transaction?	? <u> </u>	′es X No			
		any proceeds or have any net income			N/A	7b		<u> </u>
	and Contractors	ut Officers, Directors, Truste			ly Paid Emp	loyee 	es, 	
<u> 1 L</u>	ist all officers, directors, trustees	s, foundation managers and their co	ompensation (see inst	rucuons).		т—		
	(a) Name	e and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense a allowa	
EM	MIE C. BOLDEN	BIRMINGHAM	TRUSTEE					
P.	O. BOX 360028	AL 35236	0.00	o	0			_0
HE	RMAN D. BOLDEN	BIRMINGHAM	TRUSTEE					
_P.	O. BOX 360028	AL 35236	0.00	0	0	<u> </u>		0
			İ					
2	Compensation of five highest-pa	id employees (other than those incl	uded on line 1 - see ii	nstructions). If no	one, enter			
	(a) Name and address of each em	ployee paid more than \$50 000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Exp		
	•		devoted to position	, ,	plans and deferred compensation	omer	allowa	nces
NO	IE .			-				
				-			<u> </u>	
				 		<u> </u>		
								
						<u> </u>	1	
Total	number of other employees paid or	ver \$50,000			Fo	<u>▶</u> m 99	U D-PF	(2014)

Form 990-	PF (2014) HERMAN & EMMIE BOLDEN CHARITABLE 45-5585842		Page 7
Part V	III Information About Officers, Directors, Trustees, Foundation Managers, Highly	Paid En	nployees,
	and Contractors (continued)		
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NONE	."	
	(a) Name and address of each person paid more than \$50,000 (b) Type of sen	исе	(c) Compensation
NONE			
_			
Total num	ber of others receiving over \$50,000 for professional services		
Part IX	A Summany of Direct Charitable Activities		
Part IX	A Summary of Direct Charitable Activities		
List the fou	ndation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of		_
organization	s and other beneficianes served, conferences convened, research papers produced, etc		Expenses
1 TH	E BOLDEN CHARITABLE TRUST DOES NOT DIRECTLY HOLD		
CH	ARITABLE ACTIVITIES. INSTEAD, THE CHARITABLE TRUST		
MA	KES DONATIONS TO NUMEROUS CHARITIES.		_
2			
	•		
3			
	·	Ì	
	·		
4			
	·		
Part IX	-B Summary of Program-Related Investments (see instructions)		
Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/.	A		
	·		
2			
	·	Ì	
• •	·		
All other pr	ogram-related investments. See instructions		
3			
•		l l	

Form 990-PF (2014)

▶

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.		
	purposes		
а	Average monthly fair market value of securities	1a	1,979,947
b	Average of monthly cash balances	1b	663,113
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,643,060
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	i '	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,643,060
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		-
	instructions)	4	39,646
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,603,414
6	Minimum investment return. Enter 5% of line 5	6	130,171
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operat	ing fo	oundations
	and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	130,171
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)		
С	Add lines 2a and 2b	2c	3,937
3	Distributable amount before adjustments Subtract line 2c from line 1	3	126,234
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	126,234
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	<u>126,234</u>
Pá	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	467,400
b	Program-related investments – total from Part IX-B	1b	
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 (pnor 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	467,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	T	-
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	467,400
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foun	dation	

Form 990-PF (2014)

P	art XIII Undistributed Incon	ne (see instruction	<u>is) </u>	,		
			(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Pa	rt XI,	Corpus	Years prior to 2013	2013	2014
	line 7					126,234
2	Undistributed income, if any, as of the	end of 2014				
	Enter amount for 2013 only					
	Total for prior years 20 , 20					
3	Excess distributions carryover, if any, t	o 2014 [.]				
	From 2009		_			
	From 2010					
C	From 2011		_			
d	From 2012	366,501				
е	From 2013	388,967				
f	Total of lines 3a through e		755,468			
4	Qualifying distributions for 2014 from P	art XII,				
	line 4 ▶ \$ 467,400		}			
а	Applied to 2013, but not more than line	2a .				
b	Applied to undistributed income of prior	years				
	(Election required – see instructions)					
C	Treated as distributions out of corpus (Election				
	required - see instructions)					
d	Applied to 2014 distributable amount					126,234
е	Remaining amount distributed out of co	orpus	341,166			
5	Excess distributions carryover applied t	o 2014				
	(If an amount appears in column (d), th	e same				
	amount must be shown in column (a))					
6	Enter the net total of each column as	3				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e. Subtr	act line 5	1,096,634			
b	Prior years' undistributed income Subt	ract				
	line 4b from line 2b					
C	Enter the amount of prior years' undistr	nbuted				
	income for which a notice of deficiency	has				
	been issued, or on which the section 49	942(a)			ĺ	
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
е	Undistributed income for 2013. Subtract	t line				
	4a from line 2a Taxable amount - see					
	instructions			:		
f	Undistributed income for 2014 Subtrac	t 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 sec	tion				
	170(b)(1)(F) or 4942(g)(3) (Election ma	y be				
	required—see instructions)					
8	Excess distributions carryover from 200	9 not				
	applied on line 5 or line 7 (see instruction	ns)				
9	Excess distributions carryover to 20	15.				
	Subtract lines 7 and 8 from line 6a	,	1,096,634			
0	Analysis of line 9					
а	Excess from 2010]			
b	Excess from 2011		1			
С	Excess from 2012	366,501				
d	Excess from 2013	388,967				
е	Excess from 2014	341,166				

SEE STATEMENT 7

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year SEE STATEMENT 8 467,400 467,400 Total ▶ 3a Approved for future payment N/A Total **▶** 3b

Part XVI	-A Analysis of Income-Producing Ac	tivities				
	amounts unless otherwise indicated		d business income	Excluded	by section 512, 513, or 514	
Ū		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program	service revenue			code		(See instructions)
				ļ		
				ļ		
С						
d						_
е				ļ		
f	 			ļ		
_	and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·	 		
	hip dues and assessments	-		7.4		
	n savings and temporary cash investments			14	6,778	
	and interest from securities			14	0,778	
	I income or (loss) from real estate					
	financed property lebt-financed property					
	l income or (loss) from personal property			 	-	
	estment income	-				
	oss) from sales of assets other than inventory			18	312,108	
	ne or (loss) from special events			10	312,100	
	of (loss) from sales of inventory					
11 Other rev	•					
	STATEMENT 9				-122,044	
		-				
	*		-			
a						
a e						
е	Add columns (b), (d), and (e)		0		196,848	
e 12 Subtotal			0		196,848 13	196,848
e	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations)				13	196,848
e 12 Subtotal 13 Total. Ad	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations) B Relationship of Activities to the A		nent of Exempt	Purpo	13 ses	
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rait	VAII	Exempt Organi	_	Talisters 10 a	anu rransaci	ions and Relations	nips vvi	ith Noncharita	able		
1 D	d the org			age in any of the f	following with any	other organization descri	bed			Yes	No
in		501(c) of the Code (ot				section 527, relating to po		1			
	_	rom the reporting foun	dation to a	noncharitable exer	mpt organization	of				l	
) Cash	, 0							1a(1)	Ī	X
(2) Other :	assets							1a(2)		X
b O	ther trans	sactions						1			
(1) Sales o	of assets to a nonchar	table exemp	ot organization					1b(1)		<u> </u>
-		ses of assets from a			ation	•		[2	1b(2)		X
		of facilities, equipmen		ssets				-	1b(3)		<u>X</u>
-	-	ursement arrangemen	ts					, r	1b(4)		<u>X</u>
		or loan guarantees nance of services or r	namhamhin	or fundraiona cal	ostatiana		•	-	1b(5)		$\frac{x}{x}$
		facilities, equipment, r		-				·· -	1b(6) 1c	-+	$\frac{\mathbf{x}}{\mathbf{x}}$
	_		_	' - '		umn (b) should always sh	ow the fai	r market	10		
						If the foundation received					
		-			-	of the goods, other assets					
	ine no	(b) Amount involved		ne of nonchantable exer				actions, and shanng arra	angemen	ts	
N/A											
								······			
	·					<u>.</u>					
		·									
-		<u> </u>									
			-								
			1								
				· · · · · · · · · · · · · · · · · · ·							
		<u> </u>									
						x-exempt organizations		_	7		
		n section 501(c) of the	-	er than section 50°	1(c)(3)) or in sect	ion 527?		L	_ Yes	X	No
b If		mplete the following s	chedule	T		<u> </u>					
N/.		a) Name of organization		(b) Type of	organization	(c)	Description	of relationship			
14/.	Δ					<u>-</u>					—
											—
					·			-			—
		· <u> </u>	- · ·					-			—
	Under pe	naities of perjury, I declare	that I have exa	mined this return, inclu	iding accompanying s	chedules and statements, and to of which preparer has any know	o the best of	my knowledge and be	elief, it is	true,	
l	concer, a	ina complete Deciaration of	proparer (oute	That taxpayer, is bas	ed on all illionnation	or which prepares that any know	vicuge	May the IRS discuss			
ign								with the preparer sh (see instructions)?	nown belo		No
lere		740.1			١					<u>" </u>	
	= =	Frema Wirlden					RUSTE	E			
	F Sign	ature of officer of trustee	· · · · · · · · · · · · · · · · · · ·		Date	Title					
	Print/Ty	pe preparer's name			Preparer's signatur			Date	1 -	heck [ıf
aid	BONINI	EE B. BAILEY,	CPA		BULLI	B. Bailey, (PA	11-6-	15 56	elf-emplo	yed
repare	r	name ► ALDRI		BORDEN &	COMPANY,	PC	PT			20	—
se Onl	y	· · · · · · · · · · · · · · · · · · ·	DMMERCI					m's EIN ► 63 - 0			
			OMERY,		04			one no 334 -	_		
									990		

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

Department of the Treasury Internal Revenue Service

Name of the organization

HERMAN & EMMIE BOLDEN CHARITABLE

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule of Contributors

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

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

2014

TRUST		45-5585842				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	on				
	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					
	n is covered by the General Rule or a Special Rule . I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See				
General Rule						
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions by or property) from any one contributor. Complete Parts I and II See instructions is	-				
Special Rules						
regulations under 13, 16a, or 16b,	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % some sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 9 and that received from any one contributor, during the year, total contributions of the of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Comp	990-EZ), Part II, line ne greater of (1)				
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiving the year, total contributions of more than \$1,000 exclusively for religious, charitational purposes, or for the prevention of cruelty to children or animals. Complete Pa	able, scientific,				
contributor, during contributions total during the year fo General Rule ap	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the year, contributions exclusively for religious, charitable, etc., purposes, but not led more than \$1,000. If this box is checked, enter here the total contributions that or an exclusively religious, charitable, etc., purpose. Do not complete any of the papplies to this organization because it received nonexclusively religious, charitable, etc., more during the year.	o such t were received ints unless the				
990-EZ, or 990-PF), but	that is not covered by the General Rule and/or the Special Rules does not file Schit must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H 2, to certify that it does not meet the filing requirements of Schedule B (Form 990	of its Form 990-EZ or on its				

Employer identification number

Marile of Organization								
<u>HERMAN</u>	&	EMMIE	BOLDEN	CHARITABLE				

45-5585842

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HERMAN D. BOLDEN P. O. BOX 360025 BIRMINGHAM AL 35201	\$ 70,530	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
,101	Nume, audreed, and En	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

HERMAN & EMMIE BOLDEN CHARITABLE

Employer identification number 45-5585842

	Noncash Property (see instructions). Use duplica	 <u> </u>	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	80 SHARES EMERGE ENERGY		
	·	\$ 10,982	09/03/14
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	240 SHARES DOW CHEMICAL		
	·	\$ 12,936	09/03/14
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	260 SHARES KEYERA CORPORATION		
	·	\$ 23,789	09/03/14
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	230 SHARES SUSSER PETE PARTNERS		
		\$ 12,873	09/03/14
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	240 SHARES DELEK LOGISTICS		
		\$ 9,950	09/03/14
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	