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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ 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.

For calendar year 2014 or tax year beginning 12/01/14, and ending 11/30/15

A Employer Identification number Name of foundation 64-6027443 ROBERT M. HEARIN FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite 601-555-5555 P. O. BOX 16505 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here 39236-6505 **JACKSON** MS Initial return of a former public charity G Check all that apply Initial return 1 Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminated under section 507(b)(1)(A), check here Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at J Accounting method Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col (c), 43,491,262 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (b) Net investment (c) Adjusted net for chantable xpenses per books amounts in columns (b), (c), and (d) may not necessarily equal income purposes income the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check ▶ X if the foundation is **not** required to attach Sch B 2 Interest on savings and temporary cash investments 3 361,161 361,161 902,144 902,144 Dividends and interest from securities 4 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a 13,610,457 Gross sales price for all assets on line 6a 897,174 Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain Income modifications 9 10a Gross sales less returns and allowances AUG 15 b Less Cost of goods sold Gross profit or (loss) (attach schedule) С - 4 0 STMT 1 12,090 12,090 11 Other income (attach schedule) 2,172,569 2,172,569 12 Total. Add lines 1 through 11 75,000 13 Compensation of officers, directors, trustees, etc. And Administrative Expenses 5,921 592 5.,329 Other employee salaries and wages 14 _Pension-plans, employee benefits 15_ 389 STMT 2 432 43 Legal fees (attach schedule) STMT 3 46,055 23.027 23,027 Accounting fees (attach schedule) 132,703 196,833 64,130 Other professional fees (attach schedule) STMT 4 C 17 Interest STMT 5 -4,183-4,183 18 Taxes (attach schedule) (see instructions) STMT 6 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 7 31,987 18,274 13,713 23 Other expenses (att sch) Total operating and administrative expenses. 352,140 170,456 106,588 Add lines 13 through 23 2,115,473 2,598,627 25 Contributions, gifts, grants paid 170,456 2,950,767 2,222,061 Total expenses and disbursements. Add lines 24 and 25 26 Subtract line 26 from line 12 27 -778,198 Excess of revenue over expenses and disbursements 2,002,113 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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Page 2 Balance Sheets Attached schedules and amounts in the description column Beginning of year End of year Part II should be for end-of-year amounts only (See instructions) (b) Book Value (a) Book Value (c) Fair Market Value Cash - non-interest-bearing 48,263 144,110 144,110 2 351,750 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable ▶ Less allowance for doubtful accounts 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see Other notes and loans receivable (att. schedule) 0 Less allowance for doubtful accounts ▶ Inventories for sale or use 23,000 23,000 Prepaid expenses and deferred charges 1,735,370 2,857,911 STMT 8 1,729,451 10a Investments – U S and state government obligations (attach schedule) SEE STMT 9 Investments - corporate stock (attach schedule) 502,936 502,936 9,694,182 b 6,028,917 SEE STMT 10 5,484,833 Investments - corporate bonds (attach schedule) 5,558,547 C 11 Investments - land, buildings, and equipment basis STMT 11 95 Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans SEE STATEMENT 12 23,440,098 25,069,763 26,415,686 13 Investments - other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach sch.) SEE STATEMENT 13 98,800 15 Other assets (describe > Total assets (to be completed by all filers - see the 16 33,328,770 33,033,726 43,491,262 instructions Also, see page 1, item I) 12,500 17 Accounts payable and accrued expenses 12,500 2,866,042 3,349,196 18 Grants payable Liabilities 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) SEE STATEMENT 14 223,434 223,434 22 Other liabilities (describe ▶ Total liabilities (add lines 17 through 22) 3,101,976 3,585,130 ► X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 30,226,794 29,448,596 24 Unrestricted 25 Temporarily restricted Permanently restricted Fund Eoundations that do not follow SFAS-117, check here and complete lines 27 through 31. 5 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds Net. 30,226,794 29,448,596 30 Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see 33,328,770 33,033,726 instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 30,226,794 end-of-year figure reported on prior year's return) 1 2 Enter amount from Part I, line 27a 2 -778,198 3 Other increases not included in line 2 (itemize) ▶ 3 29,448,596 4 4 Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) 29,448,596 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date a		
1a SEE WORKSHEET						
b						
c						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	t or other basis xpense of sale		(h) Gain or (loss) (e) plus (f) minus (g)	
а	44.					
b					1	
С						
d						
_e						
Complete only for assets showing	gain in column (h) and owned by the four	idation on 12/31/6	9) Gains (Col. (h) gain minus	
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any	col	(k), but not less than -0-) or Losses (from col. (h))	
_a						
<u>b</u>						
С						
d						
<u>e</u>						
2 Capital gain net income or (net ca	2	897,174				
3 Net short-term capital gain or (los						
If gain, also enter in Part I, line 8,						
Part I, line 8	3	12,91				
Part V Qualification Ur	nder Section 4940(e) for Reduc	ed Tax on Ne	t Investment Inco	me		
(For optional use by domestic private	foundations subject to the section 4940(a)	tax on net investi	ment income)			
If section 4940(d)(2) applies, leave this	s part blank					
Was the foundation liable for the secti	on 4942 tax on the distributable amount o	any year in the h	asa nariad?		Yes X No	
	fy under section 4940(e) Do not complete		ase period.		163 46	
	ach column for each year, see the instruc		ng any entries			
(a)		lons before makir		· · · ·	(d)	
Base penod years	(b) Adjusted qualifying distributions	Net v	(c) alue of nonchantable-use asset	s	Distribution ratio	
Calendar year (or tax year beginning in) 2013	2,129	364	44,260,	635	(col (b) divided by col (c)) 0.04811(
2012	2,072		43,485,		0.04766	
2012	1,911		41,043,		0.046563	
		208	40,929,		0.048503	
2009	1,934		40,400,		0.047874	
		<u>, </u>			T	
2 Total of line 1, column (d)				2	0.238715	
	year base period – divide the total on line	2 by 5, or by the				
_	as been in existence if less than 5 years	, .,,		3	0.047743	
•	·					
4 Enter the net value of nonchantab	le-use assets for 2014 from Part X, line 5			4	42,715,469	
E. Madhinhalian Albarian O				-	2,039,365	
5 Multiply line 4 by line 3				5	2,039,30.	
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			_ 6_	20,021	
7 Add lines 5 and 6				7	2,059,386	
8 Enter qualifying distributions from	Part XII, line 4			8	2,222,061	
	line 7, check the box in Part VI, line 1b, a	nd complete that r	part using a 1% tax rate			
Part VI instructions			<u> </u>			

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	art VII-B Statements Regarding Activities for Which Form 4	r ∠∪ May Be R	equirea (conti	nuea)	1	<u>-</u>
5a	During the year did the foundation pay or incur any amount to	· · · · · · · · · · · · · · · · · · ·	П,	, v		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 494			Yes X No		
	(2) Influence the outcome of any specific public election (see section 4955), or to discontinuous transfer and transfer an	carry on,	П,	Yes X No		1
	directly or indirectly, any voter registration drive?			===		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization de	scribea in	П,	v 👽 N		
	section 4945(d)(4)(A)? (see instructions)	d aat.aaal		Yes X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or ed	ducational	П,	Yes X No		
_	purposes, or for the prevention of cruelty to children or animals?	the eventuese deed		Yes X No		
þ	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the provider of the second		inbea in	N/A		1
	Regulations section 53 4945 or in a current notice regarding disaster assistance (s	•		N/A	5b	_
_	Organizations relying on a current notice regarding disaster assistance check here					
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	me tax	n/a 🗌 🔻	vas 🗀 Na		
	because it maintained expenditure responsibility for the grant?		N/A	Yes No		
٠-	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					1
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay p	premiums	П,	Yes X No		
_	on a personal benefit contract?	nal hanafit aantraat		Yes X No	6.	x
þ	Did the foundation, during the year, pay premiums, directly or indirectly, on a perso If "Yes" to 6b, file Form 8870	mai beneni comi aci	•		6b	
70	At any time during the tax year, was the foundation a party to a prohibited tax shelte	or transaction?	\Box	Yes X No		1
	If "Yes," did the foundation receive any proceeds or have any net income attributab			N/A	7b	1
	Information About Officers, Directors, Trustees, Fou					1
1 4	and Contractors		goro,g, .	ala Employo	,,	
1 1	ist all officers, directors, trustees, foundation managers and their compensa-	tion (see instructi	ons).			-
				(d) Contributions to		_
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense account,
	• •	devoted to position	enter -0-)	plans and deferred compensation	other	allowances
SE	E STATEMENT 15					
•						
2	Compensation of five highest-paid employees (other than those included on	line 1 – see instr	uctions). If none,	enter		
	"NONE."					
		(b) Title, and average		(d) Contributions to employee benefit	(a) Evne	nca account
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	plans and deferred		ense account, allowances
_		- devoted to position		compensation		
NC	NE CONTRACTOR CONTRACT					
		-	<u> </u>	ļ		
		1				
		-				
		-				
F	Laurahar of other ampleuses and arranges 200	<u>L</u>	<u> </u>			
ota	I number of other employees paid over \$50,000				004	0
				F	om サゴし)-PF (2014)

	ROBERT M. HEARIN FOUNDATION	64-6027443	
	nformation About Officers, Directors, Trustees, Foundati		
а	and Contractors (continued)		
3 Five highest-	paid independent contractors for professional services (see instruction	ns). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of oth	ers receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	r largest direct chantable activities during the tax year. Include relevant statistical information such as the beneficianes served, conferences convened, research papers produced, etc.	the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instruction	ons)	
	t program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			

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•

2

All other program-related investments. See instructions

Total. Add lines 1 through 3

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

FOIII	990-PF (2014) ROBERT M. HEARTN FOUNDATION 04-002/445		Page o
Pŧ	irt X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes		
а	Average monthly fair market value of securities	1a	43,095,672
b	Average of monthly cash balances	1b	267,454
c	Fair market value of all other assets (see instructions)	1c	2,832
d	Total (add lines 1a, b, and c)	1d	43,365,958
	Reduction claimed for blockage or other factors reported on lines 1a and	-10	43,303,330
е	1c (attach detailed explanation) SEE STATEMENT 16 1e 1,095,654		
2	· · · · · · · · · · · · · · · · · · ·	2	0
3	Acquisition indebtedness applicable to line 1 assets	3	43,365,958
4	Subtract line 2 from line 1d	3	43,303,938
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		650 490
_	Instructions)	4	650,489 42,715,469
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	
6	Minimum investment return. Enter 5% of line 5	6	2,135,773
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ouna	ations
	and certain foreign organizations check here ▶ and do not complete this part)		2 125 772
1	Minimum investment return from Part X, line 6	1	2,135,773
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)	-	00 001
С	Add lines 2a and 2b	2c	20,021
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,115,752
4	Recoveries of amounts treated as qualifying distributions	4	0 115 550
5	Add lines 3 and 4	5	2,115,752
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	2,115,752
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes	ì	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,222,061
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 (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	2,222,061
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 (see-instructions)	-5	20,021
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,202,040
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		

P	art XIII ` Undistributed Income	(see instructions)			- <u> </u>	
			(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part X	l,	Corpus	Years pnor to 2013	2013	2014
	line 7					2,115,752
2	Undistributed income, if any, as of the end	i of 2014			-	
а	Enter amount for 2013 only				2,032,076	
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to 2	014			1	
а	From 2009					
b	From 2010				1	
C	From 2011					
d	From 2012					
е	From 2013				1	
f	Total of lines 3a through e					
4	Qualifying distributions for 2014 from Part	XII,			1	
	line 4 ▶ \$ 2,222,061				1	
а	Applied to 2013, but not more than line 2a	ı			2,032,076	
b	Applied to undistributed income of prior ye	ears				
	(Election required – see instructions)					
С	Treated as distributions out of corpus (Ele	ection				
	required – see instructions)		!			
d	Applied to 2014 distributable amount					189,985
е	Remaining amount distributed out of corpo	us				
5	Excess distributions carryover applied to 2	2014				
	(If an amount appears in column (d), the s	same				
	amount must be shown in column (a))					
6	Enter the net total of each column as				1	
	indicated below:				1	
а	Corpus Add lines 3f, 4c, and 4e Subtract	line 5				
b	Prior years' undistributed income Subtract	st .				
	line 4b from line 2b					······
С	Enter the amount of prior years' undistribu	ited			1	
	income for which a notice of deficiency ha	S				
	been issued, or on which the section 4942	2(a)			1	
	tax has been previously assessed					·····
d	Subtract line 6c from line 6b Taxable				1	
	amount – see instructions					
е	Undistributed income for 2013 Subtract li	ne				
	4a from line 2a Taxable amount - see					
	instructions		F 1.60 F			
f	Undistributed income for 2014 Subtract II	nes				
	4d and 5 from line 1. This amount must be	e				
	distributed in 2015					1,925,767
7	Amounts treated as distributions out of co	·				
	to satisfy requirements imposed by section				1	
	170(b)(1)(F) or 4942(g)(3) (Election may t	oe e	,		1	
	required—see instructions)					······································
8	Excess distributions carryover from 2009	not				
	applied on line 5 or line 7 (see instructions	·				·
9	Excess distributions carryover to 2015	5.				
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9	ı			1	
a	Excess from 2010					
b	Excess from 2011				1	
C	Excess from 2012				1	
d	Excess from 2013				1	
е	Excess from 2014					

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1,738,574

Total

	Part XVI-A	Analysis of Income-Producing Activ	vities				
En	iter gross amo	unts unless otherwise indicated	1	ed business income	Excluded	by section 512, 513, or 514	(-)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue					(See instructions)
				-			
							
	c				 	-	
			-	l			
	e f	· · · · · · · · · · · · · · · · · · ·	 	<u> </u>	 		
		d contracts from government agencies					
2	_	dues and assessments	-				
	•	avings and temporary cash investments			14	361,161	
4		nd interest from securities			14	902,144	
		come or (loss) from real estate					
		anced property					
		-financed property					
6	Net rental inc	come or (loss) from personal property					
7	Other investr	ment income			15	12,090	
8	Gain or (loss) from sales of assets other than inventory			14	389,417	507,757
9	Net income of	or (loss) from special events					
		or (loss) from sales of inventory					
11		ue a					
					 		
		·					
42	e	d columns (b), (d), and (e)		0	 	1,664,812	507,757
		ne 12, columns (b), (d), and (e)	<u> </u>	<u> </u>	<u> </u>	13	2,172,569
		n line 13 instructions to verify calculations)					2,172,505
	Part XVI-B	Relationship of Activities to the Acc	complishme	ent of Exempt Pu	rposes		
	Line No.	Explain below how each activity for which income is					
	▼	accomplishment of the foundation's exempt purpose					
	N/A						
_							
		<u>,</u>					
							
							
							
					·····	-	
		······································					<u> </u>
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						_	

OIII		4) ROBERT M.				04 002/44	<u> </u>		ige 13
Pa		_	_	ansfers To and	d Transaction	ns and Relationships V	Vith Noncharitable		
		Exempt Organiza						1,4	- A1-
1	•	•		•	•	er organization described		Yes	No
			r than section	n 501(c)(3) organiz	ations) or in secti	on 527, relating to political	•		1
	organization								1
а	Transfers fro	om the reporting founda	ation to a nor	ncharitable exempt	organization of				ŧ
	(1) Cash						<u>1a</u>	(1)	X
	(2) Other as	ssets					<u>1a</u>	(2)	X
b	Other transa	actions							1
	(1) Sales of	f assets to a noncharita	ble exempt o	organization			11	(1)	X
	(2) Purchas	ses of assets from a no	ncharitable e	exempt organization	1		11	(2)	Х
		of facilities, equipment,						(3)	X
	• •	rsement arrangements						(4)	X
		r loan guarantees						(5)	X
		ance of services or me	mharehin or	fundraising solicita	tions		<u></u>	(6)	X
_	• •	acilities, equipment, ma	•	•				c	X
	=		-			(h) should always show the fe	_	<u> </u>	1
a						(b) should always show the fa			
		-	=	-		foundation received less that			
						e goods, other assets, or servi			
	(a) Line no	(b) Amount involved	(c) Nan	ne of nonchantable exemp	pt organization	(d) Description of transfe	rs, transactions, and shanng arrang	ments	
1/2	A								
			ļ						
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			J.,,,,,					_ ·	
2a		ation directly or indirect	•	•		• •		_	=
	described in	section 501(c) of the C	Code (other the	han section 501(c)((3)) or in section 5	527?		Yes 🛮	No
b	If "Yes," con	nplete the following sch	edule						
	(a) Name of organization		(b) Type of c	organization	(c) Do	escription of relationship		
_]	N/A								
	-								
			-						
						ules and statements, and to the best of	f my knowledge and belief, it is true) ,	
	correct, ar	nd complete Declaration of p	reparer (other th	nan taxpayer) is based o	n all information of wh	nich preparer has any knowledge	May the IRS discuss t	nis return	
Sigi	<u>. 1</u>		16			/	with the preparer show		
ler		1100_AF	A 11		V 0		(see instructions)?	X Yes	No No
ıCI '	" 	从版似	Ulbur	TRUNTE	5_ 1 d	//t//6 L mp	USTEE		
	Sign	ature of officer or trustee		1 4000	Date	Title			
	··· · · · · ·				1 2				
	Pnnt/Ty	pe preparer's name			Preparer's signatur	· 1	Date	Check	_
aid						EX WILDEN			nployed
	arer HAL (GREEN			1	- CANCELL	07/18/		
•	Only Firm's n		ERS GRE					3517	
, 3C	~·"7	625 1	TCHT.AN	ID COLONY	DKWY STE	! 104	Eim's EIN ► 64-08	353 <i>46</i>	1

RIDGELAND, MS 39157-8837

Capital Gains and Losses for Tax on Investment Income 990-PF 2014 Form 12/01/14 , and ending 11/30/15 For calendar year 2014, or tax year beginning **Employer Identification Number** Name ROBERT M. HEARIN FOUNDATION 64-6027443 (b) How acquired P-Purchase D-Donation (C) Date acquired (mo , day, yr) (a) List and describe the kind(s) of property sold, e.g., real estate 2-story bnck warehouse, or common stock, 200 shs MLC Co (d) Date sold (mo , day, yr) **PZENA** P **VARIOUS VARIOUS** (1)01/01/14 P **PZENA VARIOUS** (2)**AGINCOURT** P **VARIOUS VARIOUS** (3)AGINCOURT P 01/01/14 **VARIOUS** (4) RICHMOND P **VARIOUS VARIOUS** (5) RICHMOND P 01/01/14 **VARIOUS** (6) GOLDMAN SACHS (7)**ABERDEEN** (8) **NEUBERGER** (9) ACADIAN (10)(11)(12)(13)(14)(15)(f) Depreciation allowed (or allowable) (e) Gross sales price (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) 45,314 39,287 6,027 (1) 2,837,111 2,323,906 513,205 (2) 2,674,198 2,668,129 6,069 (3) 3,013,167 3,038,248 -25,081 (4)788,134 787,315 819 (5)6,718 3,863,116 3,856,398 (6)205,240 205,240 (7)39,629 39,629 (8)142,081 142,081 (9) 2,467 2,467 (10)(11)(12)(13)(14)(15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) Of Losses (from col. (h)) (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any 6,027 (1) 513,205 (2)6,069 (3)-25,081 (4)819 (5) 6,718 (6) (7) 205,240 39,629 (8) 142,081 (9) 2,467 (10)

(11) (12) (13) (14) (15)

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64-6027443	Federal	Federal Statements		
<u>Stater</u>	Statement 1 - Form 990-PF,	- Form 990-PF, Part I, Line 11 - Other Income	<u>Income</u>	,
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
OIL INCOME TOTAL		\$ 12,090 \$ 12,090	\$ 12,090 \$ 12,090	0 8 8
State	Statement 2 - Form 990-PF	- Form 990-PF, Part I, Line 16a - Legal Fees	lal Fees	
Description LEGAL TOTAL	Total \$ 432	Net Investment	Adjusted Net	Charitable Purpose \$ 389
Stateme	Statement 3 - Form 990-PF, P	990-PF, Part I, Line 16b - Accounting Fees	nting Fees	
Description ACCOUNTING TOTAL	Fotal \$ 46,055 \$ 46,055	Net Investment \$ 23,027 \$ 23,027	Adjusted Net	Charitable Purpose \$ 23,027
Statement 4	- Form 990-PF,	Part I, Line 16c - Other Professional Fees	fessional Fees	
Description INVESTMENT MANAGEMENT FEES CONSULTANTS TOTAL	Fotal \$ 194,333 \$ 2,500 \$ 196,833	Net Investment \$ 130,203 \$ 2,500 \$ 132,703	Adjusted Net	Charitable Purpose \$ 64,130
				4

64-6027443		Federal Statements	tatements			
	Statement 5	•	Form 990-PF, Part I, Line 18 - Taxes	8 - Taxes		
Description		Total	Net Investment		Adjusted Net	Charitable Purpose
EXCISE TAX		-4,183	\$ -4,183	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		\$
TOTAL	ω ————————————————————————————————————	-4,183	\$ -4,18	183 \$	0	0 \$
Sta	Statement 6 -	For	m 990-PF, Part I, Line 19 - Depreciation	Depreciation		
Description	_ =					
Date Cost Pric Acquired Basis Depr	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment	ent Adjusted Net Income
OFFICE EQUIPMENT \$	24			6 \$	95 \$	ഗ
0	24					\$ 0
State	Statement 7 - F	- Form 990-PF, Pa	990-PF, Part I, Line 23 - Other Expenses	ther Expense	Ø	
Description		Total	Net Investment		Adjusted Net	Charitable Purpose
	· ω		v	 	ļ	y.
EXFENSES BANK SERVICE CHARGES D & O LIABILITY INSURANCE		492 22,716	11,358	28		492 11,358
INSURANCE - OIMER OIL EXPENSE OFFICE SUPPLIES		6,002	6,002)2		
OTHER TELEPHONE POSTAGE		1,564	Ċ	6 0 7 0 1 0		1,564
TOTAL	 -	31,987	\$ 18,27	274 \$	0	\$ 13,713
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64-6027443	Federal Statements	ements		
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Statement 8 - Form 990-PF,		Part II, Line 10a - US and State Government Investments	nent Investment	
U. S. GOVERNMENT OBLIGATIONS U. S. GOVERNMENT AGENCIES TOTAL	Beginning of Year \$ 1,990,198 867,713 \$ 2,857,911	End of Year \$ 1,247,414 487,956 \$ 1,735,370	Basis of Valuation COST COST	Fair Market Value \$ 1,241,390 488,061 \$ 1,729,451
Statement 9 - Form 990-PF,	Form 990-PF, Part II, Line	Part II, Line 10b - Corporate Stock Investments	Investments	
Description TRUSTMARK STOCK TOTAL	Beginning of Year \$ 502,936 \$ \$02,936	End of Year \$ 502,936 \$ 502,936	Basis of Valuation	Fair Market Value \$ 9,694,182
Statement 10 -	Form 990-PF, Part II, Line 10c	10c - Corporate Bond Investments	Investments	
Description CORPORATE OBLIGATIONS FOREIGN BONDS TOTAL	Beginning of Year \$ 5,982,965 45,952 \$ 6,028,917	End of Year \$ 5,529,992 28,555 \$ 5,558,547	Basis of Valuation COST COST	Fair Market Value \$ 5,457,351 27,482 \$ 5,484,833
Statement 11 - Form 990-PF	Part	II, Line 11 - Land, Building, and Equipment Investments	ipment Investme	ents
Description LAND, BUILDINGS, AND EQUIPMENT TOTAL	Beginning Net Book \$ 95	End Cost / Basis	End Accumulated Depreciation	Para Net FMV
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Federal Statements

Statement 13 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	End of Year		Fair Market Value
ACCRUED INTEREST RECEIVABLE PREPAID EXCISE TAXES	\$ 98,800	\$		\$
TOTAL	\$ 98,800	\$	0	\$0

Statement 14 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	 Beginning of Year	 End of Year
PRIOR YEAR BOOK TAX DIFFERENCE	\$ 223,434	\$ 223,434
TOTAL	\$ 223,434	\$ 223,434

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64-6027443	reaera	regeral Statements	, N		
Statement 15 - Form 990-PF		Line 1 - List o	f Officers, Directors	s, Trustees,	
		Etc.	<u>Etc.</u>		
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ROBERT M. HEARIN, JR. P O BOX 16505 JACKSON MS 39236	TRUSTEE	00.0	15,000	0	0
LAURIE H. MCREE P O BOX 16505 JACKSON MS 39236	TRUSTEE	0.00	15,000	0	0
MATTHEW L. HOLLEMAN, III P O BOX 16505 JACKSON MS 39236	TRUSTEE	0.00	15,000	0	0
E. E. LAIRD, JR. P O BOX 16505 JACKSON MS 39236	TRUSTEE	00.0	15,000	0	0
DAISY S. BLACKWELL P O BOX 16505 JACKSON MS 39236	TRUSTEE	00.0	0	0	0
ALAN W. PERRY P O BOX 16505 JACKSON MS 39236	TRUSTEE	00.0	15,000	0	0
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64-6027443

Federal Statements

Statement 16 - Form 990-PF, Part X, Line 1e - Reduction Claimed for Blockage Information

Description

DUE TO THE SIZE OF THE BLOCK OF TRUSTMARK CORPORATION STOCK OWNED IN RELATION TO THE TOTAL SHARES OUTSTANDING, A LIQUIDATION OF SUCH SHARES IN A SHORT PERIOD O FTIME WOULD RESULT IN A PRICE LESS THAN FAIR MARKET VALUE.

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

IN WRITING

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Statement 17 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

4-YEAR COLLEGES AND GRADUATE SCHOOLS LOCATED IN THE STATE OF MISSISSIPPI, AND OTHER CHARITIES.

Name	ו כעקומו סומופוווס	
Name	XV, Line 3a - Grants and Contributions Paid During the Year	
Address Relationship Status		
DEADLY DELIVE STATE UNIVERSITY 1000 ASU DRIVE	us Purpose	Amount
CLILEGEE CLINTON MS 39058 UNIV FOR WOMEN COLUMBUS MS 39701 VALLEY STATE UNIV ITTA BENA MS 38941 ITTA BENA MS 38941 ITTA BENA MS 39174 ITTA BENA MS 39216 IVOE MS MEDICAL CENTER JACKSON MS 39216 SOUTHERN STATION BOX HATTIESBURG MS 39401 IMATTIESBURG MS 39401 IMATTIESBURG MS 39610 IMATTIESBURG MS 38610 IMATTIESBURG MS 38610 IMATTIESBURG MS 38610 IMAIN STREET DSU BOX A-1 CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Euture Future Address Address COLLEGE Relationship Status CLINTON MS 39058 Relationship CLINTON MS 39058	SCHOLARSHIPS	75,000
COLUMBUS MS 3970 VALLEY STATE UNIV VALLEY STATE UNIV ITTA BENA MS 38941 SALOO COLLEGE TOUGALOO MS 3916 TOUGALOO COLLEGE TOUGALOO MS 3916 VOE MS MEDICAL CENTER MS 3940 VOE MS MEDICAL CENTER MS 3940 VOE SOUTHERN MS SALO CAREY UNIVERSITY MS 38610 STATE CAREY UNIVERSITY MS 38610 STATE MOUNTAIN MS 38733 CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEVELAND MS 38733 CLEVELAND MS 38733 TOTAL STATE CLEGE STREET WANTER TOTAL MAIN STREET STREET WANTER TOTAL Future Foundationship Status CLINTON MS 39058 COLLEGE STREET WANTER TOTAL STATUS FO BOX 4001	SCHOLARSHIPS	308,000
TITA BEAM MS 38941	EI WIGOU SCHOLARSHIPS	000'09
TOUGALOO MS 39174 TOUGALOO MS 39174 IV OF MS MEDICAL CENTER JACKSON MS 39216 IV OF SOUTHERN MS 39406 ILIAM CAREY UNIVERSITY HATTIESBURG MS 39401 ELUE MOUNTAIN MS 38610 SKSON STATE UNIVERSITY JACKSON MS 39217 TA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b ELUINTON MS 39058 COLLEGE Address PO BOX 4001 Status COLLEGE Address PO BOX 4001 CLINTON MS 39058		75,000
SOUTHERN STATION BOX HATTIESBURG MS 39406 LILIAM CAREY UNIVERSITY HATTIESBURG MS 39401 LEAN CAREY UNIVERSITY HATTIESBURG MS 39401 LEATTIESBURG MS 39401 LEATTIESBURG MS 39401 LEATTIESBURG MS 38401 LEATTIESBURG MS 39401 LEATTIESBURG MS 39401 LEATTIESBURG MS 38401 LEATTIESBURG MS 38733 LITA STATE CLEVELAND MS 38733 LITA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Euture F Euture F Euture F Euture CLINTON MS 39058 COLLEGE CLINTON MS 39058	SCHOLARSHIPS	75,000
HATTIESBURG MS 39406 HATTIESBURG MS 39406 LIAM CAREY UNIVERSITY HATTIESBURG MS 39401 LATTIESBURG MS 39401 ELIAM CAREY UNIVERSITY BLUE MOUNTAIN COLLEGE BLUE MOUNTAIN MS 38610 ENCOUNTAIN MS 38733 LTA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F CLINTON MS 39058 Relationship Status COLLEGE CLINTON MS 39058		000'009
HATTIESBURG MS 39401 E MOUNTAIN COLLEGE BLUE MOUNTAIN MS 38610 SKSON STATE UNIVERSITY JACKSON MS 39217 TA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Address COLLEGE COLLEGE		100,000
BLUE MOUNTAIN COLLEGE BLUE MOUNTAIN MS 38610 EKSON STATE UNIVERSITY JACKSON MS 39217 TA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Address CLEVELEGE Statement 19 - Form 990-PF, Part XV, Line 3b Future F Relationship Status COLLEGE CLEVELEGE Address Relationship Status COLLEGE PO BOX 4001	1 SCHOLARSHIPS	98,733
STATE UNIVERSITY JACKSON MS 39217 LTA STATE CLEVELAND MS 38733 LTA STATE CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Address COLLEGE Relationship Status COLLEGE ROBOX 4001 STATE DSU BOX A-1 1100 COLLEGE STREET W Address Relationship Status COLLEGE PO BOX 4001	SCHOLARSHIPS	20,000
CLEVELAND MS 38733 CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Address Address COLLEGE Relationship Status CLEVELEGE Relationship Status CLINTON MS 39058	ST. SCHOLARSHIPS	
CLEVELAND MS 38733 UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Address Address COLLEGE Relationship Status CLINTON MS 39058 CLINTON MS 39058		356 320
UNIV FOR WOMEN COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Relationship Status COLLEGE COLLEGE CLINTON MS 39058 STATEMENT 19 - Form 990-PF, Part XV, Line 3b Relationship Status COLLEGE PO BOX 4001		
COLUMBUS MS 39701 TOTAL Statement 19 - Form 990-PF, Part XV, Line 3b Future F Future F Address Address COLLEGE CLINTON MS 39058 COLLEGE PO BOX 4001	ET W1600	197,420
Statement 19 - Form 990-PF, Part XV, Line 3b Future F Future F Euture F Address Address Relationship Status COLLEGE Part XV, Line 3b Future F Euture F Future F		150,000 2,115,473
Name Address Relationship COLLEGE PO BOX 4001 CLINTON MS 39058 CLINTON MS 39058	3b - Grants and Contributions Approved for ire Pmt	ţ
Address Relationship COLLEGE CLINTON MS 39058		
COLLEGE CLINTON MS 39058	us Purpose	Amount
		300,000
		18-19

	4			; }
	•		450,000 824,460 197,467 75,000 -188,652 80,299 1,738,574	19
	Contributions Approved for		Purpose	
Federal Statements	Statement 19 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt (continued)	Address	2500 NORTH STATE STREET DSU BOX A-1 498 TUSCAN AV BOX 1 500 W COUNTY LINE RD	
64-6027443	Statement 19 - Form 9	Name	ENTER 33 SITY 9401 4	