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Form **990-PF**

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

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

		of the Treasury renue Service		► Inform	ation abo	out Fori	m 990-Pl	F and its separate	instructions	is at www.irs	gov/form990pf.	Open to Public Inspection
Ford	alen	dar year 2015 d	or tax year	beginnin	ng				, and e	nding		
Nan	ne of	foundation	-	_						_	A Employer identificatio	n number
		HILLIA						I, INC.			20-0511708	3
		nd street (or POb								Room/suite	B Telephone number	
		8-C AUG								<u> </u>	404-745-97	<u>//0</u>
-		own, state or pro ENVILLE		intry, and 296		oreign p 	ostal cod	le			C If exemption application is	pending, check here
GC	heck	all that apply:		Initial ret	turn			Initial return of a	former public	charity	D 1. Foreign organization	is, check here
				Final retu	urn			Amended return				
				Address	change			Name change			Foreign organizations m check here and attach or	eeting the 85% test, computation
H C	_	type of organization 4947(a)(1				_		vate foundation (able private found	lation		E If private foundation sta under section 507(b)(1	
I Ea		rket value of all		•					Acc	rual	1	
		Part II, col. (c),		ond or yea	" " 7	_	her (spe			iuai	F If the foundation is in a under section 507(b)(1	
	\$	art 11, con. (c),	1 376	5 264	L (Part	I. colu	mn (d) n	nust be on cash	basis)		diddi Scotion Sov(b)(I)(D), CHOOK HOLC
	rt I		evenue an	d Expens	es , and (d) m		(a)	Revenue and enses per books	(b) Net II	nvestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes
						-	J	30,471.			N/A	(cash basis only)
		Contributions,	girts, grant If the foundation			Cab D		30,4/1	 		N/A	
	2	Interest on saving	s and tempo		eu lu allacii s	oui b						
	3	cash investments			tion			26,541.	1 2	6,539.	 	STATEMENT 1
	4	Dividends and	mieresi no	mi securi	ues			20,541		0,333.		DIAIDMENT I
		Gross rents	(1)									
	b Net rental income or (loss)					33,011.	-					
e	6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all 426,616.					33,011.						
Revenue	7 Capital gain net income (from Part IV, line 2)					. 3	3,011.					
æ		Net short-term	•		, 2)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	9	Income modific		11.1						-		
	10a	Gross sales less i										
		and allowances Less Cost of goo	do sold									
		Gross profit or		L				•				
	11	Other income	(1000)					168.		168.		STATEMENT 2
·~	12	Total Add line	s 1 throug	ıh 11				90,191.		9,718.		
5	13	Compensation of			tees, etc			0.		0.		0.
~		Other employe	-					<u> </u>				
က	15	Pension plans,	employee	benefits								
ses.		Legal fees								1		
₹		Accounting fee	es	5	TMT	3		1,260.		[6]	CE	1,260.
Operating and Administrative Expenses	C	Other profession	onal fees	5	TMT	4		7,985.	,	/77/985.	FIVED	0.
ıı ş	17	Interest								[3] MA)	17	
trat	18	Taxes			TMT	5		5,484.	1	1 0':	17 2016 18	0.
nis(19	Depreciation a	nd depletio	n						_ O@r	13/	
Ē		Occupancy					<u> </u>				EN TEL	
¥		Travel, confere									731	_
auc		Printing and pi				_						1.00
<u>ing</u>	23	Other expense			TMT	6		128	·	0.		128.
rati	24	Total operatin						44 0==	1			1 222
þe		expenses. Add		_	3			14,857	<u> </u>	7,985.		1,388.
9		Contributions,		-			-	53,000	+			53,000.
	26	Total expense		ursemen	ts.			60 055		U 005		F4 202
		Add lines 24 a					 	67,857	·	7,985.		54,388.
	i	Subtract line 2						22 224				
	ŀ	Excess of revenu	-			nts		22,334	-	31.733.		-
	ı h	Net investmen	it income (if negative	enter -O-1		1		· •) I . / 1 1 .	1	1

LHA For Paperwork Reduction Act Notice, see instructions.

C Adjusted net income (if negative, enter -0-)

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N/A

			DATION, INC.		1311/08 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,268.	7,707.	7,707.
	2	Savings and temporary cash investments	39,011.	121,634.	121,634.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
	`	Less; allowance for doubtful accounts ▶			
	5	Grants receivable	**		
	1				
	٦	Receivables due from officers, directors, trustees, and other			
		disqualified persons .			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 7	1,197,143.	1,097,185.	1,103,352.
	1	Investments - corporate bonds STMT 8	115,199.	148,262.	141,969.
	11	Investments - land, buildings, and equipment basis			
	''				
	۱.,	Less accumulated depreciation			
	1	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ► DIVIDEND RECEIVABLE)	1,434.	1,602.	1,602.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,354,055.	1,376,390.	1,376,264.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
m	19	Deferred revenue			
Liabilities	1				
喜	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	1	Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	24	Unrestricted			
ä	25	Temporarily restricted .			
Bal	26	Permanently restricted			
ā		Foundations that do not follow SFAS 117, check here			
큔		and complete lines 27 through 31.	<u> </u>		
ō	07	-	0.	0.	
şţ	27	Capital stock, trust principal, or current funds	0.	0.	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund		1,376,390.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	1,354,055.	1,3/6,390.	
ž	30	Total net assets or fund balances	1,354,055.	1,376,390.	
_	31	Total liabilities and net assets/fund balances	1,354,055.	1,376,390.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
_				- 	
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	0		4 4-1
		st agree with end-of-year figure reported on prior year's return)	•	. 1	1,354,055. 22,334.
2	Ente	amount from Part I, line 27a		2	22,334.
3	Othe	r increases not included in line 2 (itemize) ROUNDING		3	1.
4	Add	lines 1, 2, and 3		4	1,376,390.
5	Decr	eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	1,376,390.
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	1 990-PF (2015) THE HILLIARD FAMILY FOUNDATION				20-	<u>0511'</u>	<u> 708</u>		Page 4
	art VI Excise Tax Based on Investment Income (Section 494)			1940(e), or 4	948 -	- see ir	stru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and e	nter "N/	'A" on line 1.)					
	Date of ruling or determination letter: (attach copy of letter if nec								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-	and enter 19	6	1			<u>1,0</u>	<u> 35.</u>
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			ol. (b). ノ					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers er	nter -0-)		2				0.
3	Add lines 1 and 2				3	<u> </u>		<u>1,0</u>	35.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	nter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5			1,0	35.
6	Credits/Payments:	1 _	1	0 400					
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	 	2,400.	-				
	Exempt foreign organizations - tax withheld at source	6b	 		-				
	Tax paid with application for extension of time to file (Form 8868)	6c							
	Backup withholding erroneously withheld	6d	1		-			^ 4	
	Total credits and payments. Add lines 6a through 6d				7			<u> </u>	100.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	cnea		_	8				<u>3.</u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9			1 2	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1 262	Refunded >	10			<u>1,3</u>	62.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax art VII-A Statements Regarding Activities		1,304	· Ketunded 🚩	11				0.
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation o	ar did it nartic	inate or intervene	un.			Yes	No
Ia	any political campaign?	nation C	n ulu it partic	ipate of intervene	. 131	<u> </u>	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	92 / 942	e instructions	for the definition	//2	-	1b		X
J	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an					F	-10		
	distributed by the foundation in connection with the activities.	и оор.	00 0. any m	atorialo pobliciri	J . 0,				
c	Did the foundation file Form 1120-POL for this year?						1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear:		-					 -
J	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers			0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendi				-				
	managers. ► \$ 0.								
2	Has the foundation engaged in any activities that have not previously been reported to the If	RS?					2		X
	If "Yes," attach a detailed description of the activities.					Ī			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrum	ent, articles d	of incorporation, o	or	Ì		ı	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es				Ĺ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the yea	ις					4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b		<u> </u>
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.							ı	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther:				-		ı	
	By language in the governing instrument, or					1		ı	
	• By state legislation that effectively amends the governing instrument so that no mandator	y direct	tions that con	flict with the state	e law				
	remain in the governing instrument?					-	6	<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete	Part II, col.	(c), and Part XV	/		7	X	
_								ı	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🟲	·			 †		ı	
_	SC		0	1				ı	
Þ	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	General (or (iesignate)		- 1	.	37	
•	of each state as required by General Instruction G? If "No," attach explanation	otion A	049(3/9) == 4	049/4/E) for oct	ndar	-	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of se			1942(J)(D) for cale	HUAL	İ		ı	v
10	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," or					- -	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ile listing	their names an	d addresses			10 . QQ ()_DF	(2015)

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-	, and the state of	T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		163	140
••	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	· · ·		
12	If "Yes," attach statement (see instructions)	12		x
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
10	Website address ► N/A	[10	21	L
14	The books are in care of ► LISA DELORME Telephone no. ► 404 – 74	15-9	771	
••	Located at ► 1708-C AUGUSTA STREET, BOX 2, GREENVILLE, SC ZIP+4 ►29		, , _	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		_	<u></u>
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	-10		
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2015?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015? Yes X No			
	If "Yes," list the years >			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	_2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			}
	>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			:
	during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		<u> X</u>
	Fo	rm 99 0)-PF	(2015)

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Part VII-B Statements Regarding Activities for Which F		Required (contro	70-02117	08	Page 6
5a During the year did the foundation pay or incur any amount to:	OIIII 4720 May DC I	required (contin	ueu)		-
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e)\2	[V	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	,		.3 (22) 100		
any voter registration drive?	. to burry on, an ootly of man		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., organization					
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No		İ
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		3	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it mainta	ıned	_		
expenditure responsibility for the grant?		[/A □ Y6	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			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	helter transaction?	Y6	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	/		
Paid Employees, and Contractors			•		
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	1 ()	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	xpense int, other
	to position	`enter'-0-)	compensation	allov	wances
AND CONTRACTOR O					_
SEE STATEMENT 9		0.	0.		0.
				-	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	l	<u> </u>	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense int, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accou	ınt, other wances
NONE			Compensacion		
				<u> </u>	
	1	1			
	-			-	
otal number of other employees paid over \$50,000					0
		·	Form	990-P	F (2015)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	_	
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.
	Forr	m 990-PF (2015)

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

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54,388.

3a

3Ь

4

6

3

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions. Subtract line 5 from line 4

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

a Suitability test (prior IRS approval required)

income, Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				70,604.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			52,503.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 54,388.				
a Applied to 2014, but not more than line 2a			52,503.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				1,885.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				68,719.
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 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				
				Form 990-PF (2015)

Part XIV Private Operating Form 990-PF (2015)	LIARD FAMIL			N/A	11708 Page 1
1 a If the foundation has received a ruling or				N/A	
foundation, and the ruling is effective for			′ .		
	•		d un contion	4942(j)(3) or 494	42(j)(5)
b Check box to indicate whether the found		Tournamon described	Prior 3 years	1 4342())(3) (1 1 43-	12())(3)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2013	(8) 2014	(6) 2010	(4) 2012	(0) 10(a)
investment return from Part X for		1			
each year listed _			-	 -	
b 85% of line 2a	<u> </u>		-		
c Qualifying distributions from Part XII,					
line 4 for each year listed		-	<u> </u>		
d Amounts included in line 2c not					
used directly for active conduct of		j			
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 alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(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					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during t				·	
1 Information Regarding Foundatio	n Managers:			- -	
a List any managers of the foundation wh		than 2% of the total co	ntributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed in			·		·
SEE STATEMENT 10					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	n (or an equally large port	ion of the ownership of a pa	rtnership or
other entity) of which the foundation has					·
NONE					
2 Information Regarding Contributi	ion Grant Gift Loan	Scholarship, etc.,	Programs:		
Check here X if the foundation o				not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					
a The hame, address, and telephone ham	ber of a man address of	the person to whom ap			
b The form in which applications should be	ne submitted and informa	tion and materials they	should include.		
the form in which applications should be	to Submitted and into ma	and materials they	onoula molado.		
c Any submission deadlines:					
2y dabinidation doddinida.					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable field	s, kınds of institutions, or	other factors:	
•					

3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SHEVILLE ART MUSEUM SOUTH PACK SQUARE	NONE	PC	GENERAL FUND	
ASHEVILLE, NC 28801				7,500
BRUCE MUSEUM OF ARTS AND SCIENCE 1 MUSEUM DRIVE GREENWICH CT 06830	NONE	PC	GENERAL FUND	5,000
				•
CALVARY HOME FOR CHILDREN	NONE	PC	GENERAL FUND	
110 CALVARY HOME CIRCLE ANDERSON, SC 29261				2,000
S.C. BOTANICAL GARDENS 1931 BROOKGREEN GFARDEN DRIVE MURRELLS INLET, SC 29576	NONE	PC	GENERAL FUND	33,500
THE GREENWICH LAND TRUST 370 ROUND HILL ROAD	NONE	PC	GENERAL FUND	
GREENWICH, CT 06831		<u> </u>		5,000
to a pproved for future payment			▶ 3a	53,000
NONE				
-				
Total		<u></u>	▶_ 3b	orm 990-PF (201

THE HILLIARD FAMILY FOUNDATION, INC.

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	(c) Exclu- sion	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Turiction income
a	_				
b	_				
c	_	<u></u> -			_
d	_				
e	-				
f	-		+ +		
g Fees and contracts from government agencies			+ + -		
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash					
Investments			14	26 541	
4 Dividends and interest from securities			14	26,541.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					···
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	-		1.4	1.00	
7 Other investment income			14	168.	
8 Gain or (loss) from sales of assets other			1.0	22 011	
than inventory			18	33,011.	
9 Net income or (loss) from special events			+ + -		
10 Gross profit or (loss) from sales of inventory			+ + -		
11 Other revenue:					
a					
b	l l				
<u> </u>					
d	-				
e		0		59,720.	
12 Subtotal. Add line 13 columns (b), (d), and (e)	l		•1	-	0. 59,720.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	33,120
····					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	Exempt P	ırposes	
Line No. Explain below how each activity for which in	come is reported in i	column (e) of Part XVI	-A contributed	importantly to the accomi	alishment of
the foundation's exempt purposes (other than			A CONTINUE CO	importantly to the accomp	Alsimiciti of
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				-
				·	
	-				··· . · · · · · · · · · · · · · · · · ·
		 		= :	
		•		***	<u> </u>
				•.	
					
					
			 .		
					
					
					
		• • • • • • • • • • • • • • • • • • • •	-		
					

X Yes Signature of officer or trustee Title Print/Type preparer's name Preparer's signature Date Check self-employed Paid WILLIAM C. LANKFORD P00577880 **Preparer** Firm's EIN > 58-0673524Firm's name ► MOORE STEPHENS TILLE **Use Only** Firm's address ► 780 JOHNSON FERRY RD., ATLANTA, GA 30342 Phone no. 404-256-1606

Form 990-PF (2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of the organization

Employer identification number

	TH	HE HILLIARD FAMILY FOUNDATION, INC.	20-0511708				
Organiza	ation type (check o	ne):					
Filers of: Section:							
Form 990	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 990)-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note. Or	nly a section 501(c)	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	le. See instructions.				
General	Rule						
	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor?	· · · · · · · · · · · · · · · · · · ·				
Special	Rules						
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II.	or 16b, and that received from				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it mu	st answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fort the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

THE HILLIARD FAMILY FOUNDATION, INC.

20-0511708

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT AND HEATHER GLENN 1708-C AUGUSTA STREET, BOX 2 GREENVILLE, SC 29605	\$30,471.	Person X 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 Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (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 Occash Complete Part II for noncash contributions.)

Employer identification number

THE HILLIARD FAMILY FOUNDATION, INC.

20-0511708

Part II	Noncash Property (see instructions) Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
_		\$	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
	5	\$	990, 990-EZ, or 990-PF) (

Employer identification number

	LLIARD FAMILY FOUNDATIO	N, INC.	20-0511708 in section 501(c)(7), (8), or (10) that total more than \$1,000 for					
art III	the year from any one contributor. Complete col	lumns (a) through (e) and the follow	WING line entry. For organizations					
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or space is needed	less for the year (Later this thio once)					
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I	(b) r wposc or gire	(0, 000 0. g	(L) Door, pater or their garden sea					
-								
_ -		- W. W						
_								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
-								
-								
No. om art I	(h) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I	(b) Purpose of gift	(c) Ose of gift	(d) Description of now girt is need					
-								
— I :								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I	(b) i desce of girt	(4, 441 11 311	(
-		(a) Transfer of air						
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I								
		···						
\vdash	(e) Transfer of gift							
	(e) Italiane of girt							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	URITIES S	TATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE			
JP MORGAN	39,223	. 12,68	26,54	26,539.		
TO PART I, LINE 4 =	39,223	12,68	26,54	26,539.		
FORM 990-PF		OTHER I	NCOME	S	TATEMENT 2	
DESCRIPTION			(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
MISC/OTHER			168.	168.		
TOTAL TO FORM 990-PE	, PART I,	LINE 11 =	168.	168.		
FORM 990-PF		ACCOUNTI	NG FEES	S	TATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES		1,260.	0	•	1,260.	
TO FORM 990-PF, PG 1		1,260.	0	•	1,260.	
FORM 990-PF	0'	THER PROFES	SIONAL FEES	S	TATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMEN	T FEES	7,985.	7,985	•	0.	
TO FORM 990-PF, PG	_, LN 16C	7,985.	7,985	•	0.	

FORM 990-PF	TAX	ES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	
EXCISE TAXES	5,484.		0.		0.
TO FORM 990-PF, PG 1, LN 18	5,484.		0.		0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	
ANNUAL REGISTRATION BANK FEES	50. 78.	-	0.		50. 78.
TO FORM 990-PF, PG 1, LN 23	128.		0.		128.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT 7
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE
APPLE INC ARTISAN INTL VALUE FUND CABOT OIL & GAS CORP CINEMARK HOLDINGS INC DB NOTE OF NOTES EAFE BSKT 4 DEUTSCHE X-TRACKERS MSCI EAF ENDO INTERNATIONAL PLC FORD MOTOR CO ISHARES CORE S&P MID-CAP ETF ISHARES MSCI EAFE INDEX FUND JAPANESE :LARGE CAP EQUITY JOHN HANCOCK L/C EQUITY-I JPM GLOBAL RES ENH INDEX FD JPM US LARGE CAP CORE PLUS FI KEYCORP LENNAR CORP MERCK AND CO INC MFS INTERNATIONAL VALUE I MOSAIC CO/THE PARNASSUS EQUITY INCOME FD				19,506. 18,500. 20,044. 20,116. 23,000. 23,611. 19,953. 20,056. 82,339. 121,091. 19,700. 48,996. 100,000. 52,268. 20,153. 20,072. 20,162. 60,000. 19,870. 53,239.	27,262. 23,094. 10,172. 16,381. 20,760. 21,728. 14,999. 17,965. 91,951. 117,675. 19,933. 52,666. 102,034. 49,524. 20,510. 22,743. 17,959. 68,803. 10,760. 49,497.

THE HILLIARD FAMILY FOUNDA	TION, INC.	, ,	20-0511708
SPDR S&P 500 ETF TRUST		202,340.	222,422.
T-MOBILE		20,147.	25,819.
TENTY-FIRST CENTURY FOX		20,095.	16,024.
VANGUARD FTSE EUROPE ETF		11,852.	10,724.
VERIZON COMMUNICATIONS		19,969.	19,875.
VIACOM INC		20,220.	12,348.
YUM BRANDS		19,886.	19,724.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	1,097,185.	1,103,352.
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
FORM 990-PF DESCRIPTION	CORPORATE BONDS	BOOK VALUE	
DESCRIPTION	CORPORATE BONDS		FAIR MARKET VALUE
	CORPORATE BONDS	BOOK VALUE 50,332. 23,343.	FAIR MARKET VALUE
DESCRIPTION DODGE & COX INCOME FUND	CORPORATE BONDS	50,332.	FAIR MARKET VALUE
DESCRIPTION DODGE & COX INCOME FUND JPM STRAT INCOME OPPORT FD	CORPORATE BONDS	50,332. 23,343.	FAIR MARKET VALUE 48,826. 21,754.

FORM 990-PF		VIII - LIST OF OFFICERS, DIRECTORS USTEES AND FOUNDATION MANAGERS				STATEMENT 9	
NAME AND ADDRESS			TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
HEATHER PREVOST 1708-C AUGUSTA S GREENVILLE, SC 2	TREET, BOX 2	•	PRESIDENT 0.00	0.	0.	0	
R. GLENN HILLIAR 1708-C AUGUSTA S GREENVILLE, SC 2	TREET, BOX 2		VICE PRESIDENT 0.00	0.	0.	0	
KATHRYN STUART 1708-C AUGUSTA S GREENVILLE, SC 2			VICE PRESIDENT 0.00	0.	0.	0	
NANCY JOYCE 1708-C AUGUSTA S GREENVILLE, SC 2			TREASURER 0.00	0.	0.	0	
GLENN SHAW 1708-C AUGUSTA S GREENVILLE, SC 2	-		SECRETARY 0.00	0.	0.	0	
TOTALS INCLUDED	ON 990-PF, PA	GE 6,	PART VIII =	0.	0.	0	
FORM 990-PF			V - LINE 1A		STATI	EMENT 1	

NAME OF MANAGER

HEATHER PREVOST HILLIARD R. GLENN HILLIARD KATHRYN STUART