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Form 990-PF
Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

2015
Open to Public Inspection

| Forc | alen | dar year 2015 or tax year beginning | | , and e | nding | | |
|------------------|------------|---|------------------------------|----------------|---------------|---|--|
| Nan | ne of | foundation | | | | A Employer identification | number |
| C | рмс | MUNITY HEALTH SYSTEMS FO | OUNDATION | | | 20-3323391 | |
| Num | ber ar | nd street (or P O box number if mail is not delivered to street a | ddress) | | Room/suite | B Telephone number | |
| 4 | 000 | MERIDIAN BOULEVARD | | | | 615-465-70 | 00 |
| Çıty | or to | own, state or province, country, and ZIP or foreign p | ostal code | | | C If exemption application is pe | ending, check here |
| F | RAI | NKLIN, TN 37067 | | | | | |
| G C | heck | all that apply: Initial return | Initial return of a fo | ormer public o | charity | D 1. Foreign organizations | , check here |
| | | Final return | Amended return | | | | |
| | | Address change | Name change | | | Foreign organizations me check here and attach cor | eting the 85% test, mputation |
| H C | heck | type of organization: X Section 501(c)(3) ex | empt private foundation | | | E If private foundation state | tus was terminated |
| |] Se | ction 4947(a)(1) nonexempt charitable trust | Other taxable private founda | ation | | under section 507(b)(1) | |
| I Fa | ır ma | rket value of all assets at end of year J Accounti | ng method: Cash | X Accr | ual | F If the foundation is in a | 60-month termination |
| (fre | om F | | ther (specify) | | | under section 507(b)(1) | (B), check here |
| _ | | 5,929,009 (Part I, colu | mn (d) must be on cash b | oasis) | | | |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and | | vestment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | | necessarily equal the amounts in column (a)) | expenses per books | inco | ome | income | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | | | | N/A | |
| | 2 | Check X If the foundation is not required to attach Sch B | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| 1 | 4 | Dividends and interest from securities | | | | | |
| | 5a | Gross rents | <u></u> | | | | |
| | b | Net rental income or (loss) | | | | | |
| a) | 6a | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | | | |
| Revenue | b | assets on line 6a | | | | | |
| ě | 7 | Capital gain net income (from Part IV, line 2) | | | 0. | | · · · · · · · · · · · · · · · · · · · |
| ٦ | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications Gross sales less returns | | | | | |
| | ١. | and allowances | | | | | |
| | | Less Cost of goods sold | | - | | | |
| | | Gross profit or (loss) | | | | | |
| | 11 | Other income | 0. | | 0. | | |
| | 12 | Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc | 0. | | 0. | | 0. |
| | 13 14 | Other employee salaries and wages | | | | | <u> </u> |
| | 15 | Pension plans, employee benefits | | | | | |
| Ş | | Legal fees | | | | | |
| nse | | Accounting fees | | | $\overline{}$ | | |
| xpenses | _ | Other professional fees | | | | | |
| | 17 | Interest | | /. | V 16 | CEN | |
| ativ | 18 | Taxes | | /2 | ÿ/ <u> </u> | - VEN | |
| Administrative E | 19 | Depreciation and depletion | | /ণ্ড | 1 MAN | | |
| nini | 20 | Occupancy | | / / | | 11 20 701 | |
| Adr | 21 | Travel, conferences, and meetings | | 1 | 00 | 2016 701 | |
| nd , | 22 | Printing and publications | | | (1) (C) | 100 | |
| g a | 23 | Other expenses | | | | 2. (17 05) | |
| Operating and | 24 | Total operating and administrative | | | | / | |
|)er | | expenses. Add lines 13 through 23 | 0. | | 0. | 7 | 756,655. |
| Ō | 25 | Contributions, gifts, grants paid | 756,655. | | | | 756,655. |
| | 26 | Total expenses and disbursements. | | | | | |
| | | Add lines 24 and 25 | 756,655. | | 0. | | 756,655. |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | a | Excess of revenue over expenses and disbursements | <756,655.> | | | | |
| | | Net investment income (if negative, enter -0-) | | | 0. | | |
| F000 | _ c | Adjusted net income (if negative, enter -0-) | | <u> </u> | | N/A | |
| 52350 11-24 | ון - 15 | LHA For Paperwork Reduction Act Notice, see | instructions. | | | | Form 990-PF (2015) |

6-03

15

| For | m 99 | 0-PF (2015) COMMUNITY HEALTH SYSTEMS | FOUNDATION | 20-3 | 3323391 Page 2 |
|----------------------|------|--|--------------------|---------------------------------------|-----------------------|
| ᆷ | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | |
| <u> </u> | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 6,685,664. | 5,929,009. | 5,929,009. |
| | 2 | Savings and temporary cash investments | | | |
| | | Accounts receivable | | | |
| | | Less allowance for doubtful accounts | Ĭ | | |
| | 4 | Pledges receivable | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | _ | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| S | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| As | | Investments - U.S. and state government obligations | | | |
| | | Investments - corporate stock | | | |
| | _ | Investments - corporate bonds | | | |
| | | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | ١.٠ | Land, buildings, and equipment; basis | | · · · · · · · · · · · · · · · · · · · | |
| | ' | Less accumulated depreciation | • | - | |
| | 15 | Other assets (describe | | | |
| | ľ | Total assets (to be completed by all filers - see the | | | |
| | ١.٠ | instructions. Also, see page 1, item I) | 6,685,664. | 5,929,009. | 5,929,009. |
| | 17 | | 2,300. | 2,300. | 0,525,005. |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| ties | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Liabilities | 21 | Mortgages and other notes payable | | | |
| <u>.</u> | 22 | Other liabilities (describe) | | | |
| | | Cutof Habilities (absorber > | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 2,300. | 2,300. | |
| | - | Foundations that follow SFAS 117, check here | | , | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ces | 24 | Unrestricted | 6,683,364. | 5,926,709. | |
| | 25 | Temporarily restricted | - , , | | |
| Sala | 26 | Permanently restricted | | | |
| <u> </u> | - " | Foundations that do not follow SFAS 117, check here | | | |
| 풀 | | and complete lines 27 through 31. | | | |
| Assets or Fund Balar | 27 | Capital stock, trust principal, or current funds | | | |
| ets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| ISS | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Net / | 30 | Total net assets or fund balances | 6,683,364. | 5,926,709. | |
| Z | " | 10141 1101 200010 07 14112 201311000 | | | |
| | 31 | Total liabilities and net assets/fund balances | 6,685,664. | 5,929,009. | |
| | | | | · · | |
| <u>P</u> | art | Analysis of Changes in Net Assets of Fund Ba | liarices | | |
| 1 | Tota | I net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 | 6,683,364. |
| | • | r amount from Part I, line 27a | | 2 | <756,655.> |
| | | r increases not included in line 2 (itemize) | | 3 | 0. |
| | | lines 1, 2, and 3 | | 4 | 5,926,709. |
| | | reases not included in line 2 (itemize) | | 5 | 0. |
| | | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 5,926,709. |
| | | | | | Form 990-PF (2015) |

COMMUNITY HEALTH SYSTEMS FOUNDATION

Form 990-PF (2015)

523521 11-24-15

20-3323391

Form 990-PF (2015)

| Form 990-PF (2015) COMMUNITY HEALTH SYSTEMS FOR | JNDATION | <u> 20-332</u> | | tion | Page 4 |
|---|--|------------------|-----------------|------|-----------------|
| Part VI Excise Tax Based on Investment Income (Section | | 4946 - See | nstruc | tion | S) |
| 1a Exempt operating foundations described in section 4940(d)(2), check here | and enter "N/A" on line 1. | | | | |
| Date of ruling or determination letter: (attach copy of letter | | _ | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check her | e 🕨 🗶 and enter 1% | 1 | | | 0. |
| of Part I, line 27b | | | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations ent | er 4% of Part I, line 12, col. (b). リ | | _ | | _ |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations or | ıly. Others enter -0-) | 2 | - | | 0. |
| 3 Add lines 1 and 2 | | 3 | | | 0. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of | nly. Others enter -0-) | 4 | | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | 5 | | | 0. |
| 6 Credits/Payments | | | | | |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | | | |
| b Exempt foreign organizations - tax withheld at source | 6b | 7 | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | _ | | | , |
| d Backup withholding erroneously withheld | 6d | - | | | |
| 7 Total credits and payments. Add lines 6a through 6d | | - , | | | 0. |
| | is attached | 8 | | | |
| | is attached | 9 9 | | | 0. |
| | -: | 10 | | | <u> </u> |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp | | | | | |
| Part VII-A Statements Regarding Activities | Refunded | <u> 11 </u> | | | |
| | | | | Yes | No |
| 1a During the tax year, did the foundation attempt to influence any national, state, or loca | i legislation of did it participate of interve | ene in | 1 | 103 | X |
| any political campaign? | | | 1a | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political | | | 1b | | |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activiti | es and copies of any materials publis | hed or | | | |
| distributed by the foundation in connection with the activities | | | | | - ₁₂ |
| c Did the foundation file Form 1120-POL for this year? | | | 1c | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed duri | ng the year: | | | | |
| (1) On the foundation. > \$ 0 . (2) On foundation main | nagers. > \$ | <u>•</u> | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political ex | penditure tax imposed on foundation | | | | |
| managers. ▶ \$ 0 . | | | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to | the IRS? | | 2 | | X |
| If "Yes," attach a detailed description of the activities | | | 1 | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its government | | , or | - | | |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c | hanges | | 3 | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the | ne year? | | 4a | | X |
| 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 | | | | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis | fied either. | | | | |
| By language in the governing instrument, or | | | | | |
| By state legislation that effectively amends the governing instrument so that no main | idatory directions that conflict with the st | ate law | | | |
| remain in the governing instrument? | | | 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 Part | xv | 7 | Х | |
| | | | | | |
| 8a Enter the states to which the foundation reports or with which it is registered (see ins | tructions) 🕨 | | . | | |
| TN | | | . | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to | the Attorney General (or designate) | | | | |
| of each state as required by General Instruction G? If "No," attach explanation | | | 8b | Х | <u> </u> |
| 9 Is the foundation claiming status as a private operating foundation within the meaning | g of section 4942(j)(3) or 4942(j)(5) for c | alendar | _] | | |
| year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Y | | | 9 | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a | | | 10 | | Х |
| | | F | orm 99 0 |)-PF | (2015) |

| | 990-PF (20 | (5) COMMUNITY HEALTH SYSTEMS FOUNDATION | 20-332 | <u>3391</u> | | Page 5 |
|-----|----------------|--|--------------------------|-------------|--|----------------|
| Pa | rt VII-A | Statements Regarding Activities (continued) | | | | |
| | | | | | Yes | No |
| 11 | At any time | during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | | |
| | section 512 | (b)(13)? If "Yes," attach schedule (see instructions) | | 11 | | X |
| 12 | Did the four | ndation make a distribution to a donor advised fund over which the foundation or a disqualified person ha | d advisory privileges? | | | |
| | If "Yes," atta | ach statement (see instructions) | | 12 | | X |
| 13 | Did the four | ndation comply with the public inspection requirements for its annual returns and exemption application? | | 13 | X | |
| | Website ad | dress > N/A | | | | |
| 14 | The books | are in care of COMMUNITY HEALTH SYSTEMS Tel | ephone no.▶ <u>615–4</u> | 65-7 | 000 | |
| | Located at | ▶4000 MERIDIAN BOULEVARD, FRANKLIN, TN | ZIP+4 ▶ 3 | 7067 | | |
| 15 | Section 494 | 17(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | | \cdot |
| | and enter th | ne amount of tax-exempt interest received or accrued during the year | ▶ 15 | 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, o | or other financial account in a foreign country? | | 16 | | X |
| | See the inst | tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | | |
| | foreign cou | ntry 🕨 | | | | |
| Pa | art VII-B | Statements Regarding Activities for Which Form 4720 May Be Require | ed | | | |
| | File Form | 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 1 a | During the | year did the foundation (either directly or indirectly): | | | | |
| | (1) Engage | e in the sale or exchange, or leasing of property with a disqualified person? | Yes X No | | | |
| | (2) Borrov | v money from, lend money to, or otherwise extend credit to (or accept it from) | | | | |
| | a disqu | valified person? | Yes X No | | | |
| | (3) Furnisi | n goods, services, or facilities to (or accept them from) a disqualified person? | Yes X No | | | |
| | (4) Pay co | mpensation to, or pay or reimburse the expenses of, a disqualified person? | Yes X No | | | |
| | (5) Transf | er any income or assets to a disqualified person (or make any of either available | | | | |
| | for the | benefit or use of a disqualified person)? | Yes X No | | | |
| | (6) Agree | to pay money or property to a government official? (Exception. Check "No" | | | | |
| | if the f | oundation agreed to make a grant to or to employ the official for a period after | | | | l , |
| | termin | ation of government service, if terminating within 90 days.) | Yes X No | | | ' |
| t | o If any answ | er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | | |
| | | 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | N/A | 1b | | |
| | Organizatio | ns relying on a current notice regarding disaster assistance check here | ▶∟ | | | |
| (| Did the fou | ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not co | orrected | | | |
| | | first day of the tax year beginning in 2015? | | 1c | _ | Х |
| 2 | Taxes on fa | ıllure to distribute income (section 4942) (does not apply for years the foundation was a private operating | foundation | | | |
| | | section 4942(j)(3) or 4942(j)(5)): | | | | |
| í | At the end | of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year | | | | |
| | before 201 | | Yes X No | | | |
| | | the years \blacktriangleright | | | | |
| ı | | ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating | | | | |
| | | f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "N | | | | |
| | | see instructions.) | N/A | <u>2b</u> | | |
| (| If the provi | sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | | |
| | <u> </u> | | _ | | | |
| 38 | | ndation hold more than a 2% direct or indirect interest in any business enterprise at any time | Yes X No | | | |
| | during the | | | | | |
| ı | | I it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualifier | | İ | | |
| | | 169; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 494; | | | | |
| | | acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use | Schedule C, N/A | 9. | | |
| | | 0, to determine if the foundation had excess business holdings in 2015) | N/A | 3b | $\vdash \vdash$ | X |
| | | ndation invest during the year any amount in a manner that would jeopardize its charitable purposes? ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charit | rahla nurnoca that | 4a | $\vdash \vdash$ | - - |
| ١ | | noation make any investment in a prior year (but after December 31, 1909) that could jeopardize its charit en removed from jeopardy before the first day of the tax year beginning in 2015? | ane harhose mar | 4b | | x |
| | חמט ווטנ טפו | on removed from Joupardy before the mot day of the tax year beginning in 2010. | 1 | orm 99 |)-PF | |
| | | | ' | 5. III - D | | (2010) |

| orm 990-PF (2015) COMMUNITY HEALTH SYSTEMS | FOUNDATION | | 20-33233 |) J T | Page 6 |
|---|---|-----------------------------|--|---------------|---------------------|
| Part VII-B Statements Regarding Activities for Which Fo | orm 4720 May Be Re | equirea _{(contini} | ued) | | , |
| 5a During the year did the foundation pay or incur any amount to. | | | | | ŀ |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 4945(e))? | Ye | s X No | ļ | |
| (2) Influence the outcome of any specific public election (see section 4955); or | to carry on, directly or indire | ctly, | | İ | |
| any voter registration drive? | | Ye | s X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | • | Ye | s X No | ı | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | described in section | | İ | | |
| 4945(d)(4)(A)? (see instructions) | | Ye | s X No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or fo | or | İ | ļ | |
| the prevention of cruelty to children or animals? | | Ye | s X No | l | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | er the exceptions described in | n Regulations | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instruc | | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check he | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from | | ned | 1 | i | |
| expenditure responsibility for the grant? | | /A 🔲 Ye | s 🔲 No | ł | |
| If "Yes," attach the statement required by Regulations section 53 4945- | 5(d) | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | | | | | |
| a personal benefit contract? | | Ye | s X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe | ersonal benefit contract? | | | 6b | Х |
| If "Yes" to 6b, file Form 8870 | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax st | nelter transaction? | | s X No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribut | | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Truste | es, Foundation Mar | agers, Highly | | | |
| Paid Employees, and Contractors | | | | | |
| List all officers, directors, trustees, foundation managers and their c | | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans | (e) | Expense punt, other |
| (a) Name and address | to position | (If not paid, enter -0-) | and deferred compensation | 4000 | owances |
| | | | | | |
| | | | | | |
| SEE STATEMENT 1 | | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| | - | | | | |
| | | 1 | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | ļ | | | |
| | | | l | | |
| 2 Compensation of five highest-paid employees (other than those incl | | enter "NONE." | I (a) a | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) | Expense punt, other |
| (a) Name and address of each employee para more than \$60,000 | devoted to position | (c) compensation | compensation | al | lowances |
| NONE | | | | | |
| | | | | ļ | |
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| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | <u> </u> | | |
| Total number of other employees paid over \$50,000 | <u> </u> | | > | | 0 |
| <u> </u> | | | Forn | n 990- | PF (2015) |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | 0-3323 | 391 Page 7 |
|--|-----------|-------------------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." | | <u> </u> |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | е | (c) Compensation |
| NONE | | |
| | | |
| | • | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | • | 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 | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A | | Amount |
| | | |
| 2 | \exists | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| Total. Add lines 1 through 3 | ▶ | 0. rm 990-PF (2015) |

COMMUNITY HEALTH SYSTEMS FOUNDATION 20-3323391 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 0. a Average monthly fair market value of securities 6,220,324. Average of monthly cash balances 1b c Fair market value of all other assets 6,220,324. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 6,220 3 Subtract line 2 from line 1d. 4 93,305. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 6,127,019. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 306,351 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) 306,351. Minimum investment return from Part X, line 6 Tax on investment income for 2015 from Part VI, line 5 2h Income tax for 2015. (This does not include the tax from Part VI.) 2c Add lines 2a and 2b 306.351 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 306,351 Add lines 3 and 4 Deduction from distributable amount (see instructions) 306,351. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 756,655. 1a a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 756,655. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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

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 4940(e) reduction of tax in those years.

Form 990-PF (2015)

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, | Corpus | rears prior to 2014 | 2014 | 2013 |
| line 7 | | | | 306,351. |
| 2 Undistributed income, if any, as of the end of 2015 | | | | 000,001. |
| a Enter amount for 2014 only | i | | 0. | |
| b Total for prior years: | | | | |
| g rotarior prior yours. | | 0. | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | · · · · · · · · · · · · · · · · · · · |
| a From 2010 | | | | |
| b From 2011 | | | | |
| c From 2012 | | | | |
| d From 2013 | | | | |
| e From 2014 125, 952. | | | | |
| f Total of lines 3a through e | 125,952. | | | |
| 4 Qualifying distributions for 2015 from | | | | |
| Part XII, line 4 ► \$ 756,655. | | | | |
| a Applied to 2014, but not more than line 2a | | | 0. | |
| 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 | - | | | 306,351. |
| e Remaining amount distributed out of corpus | 450,304. | | | |
| 5 Excess distributions carryover applied to 2015 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c and 4e Subtract line 5 | 576,256. | | | |
| 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 | | | | 0 |
| be distributed in 2016 | <u> </u> | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | 0. | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2010 | 0. | | | |
| not applied on line 5 or line 7 | | | | |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a | 576,256. | | | |
| 10 Analysis of line 9: | 3,0,230. | | | |
| a Excess from 2011 | | | | |
| b Excess from 2012 | | | | |
| c Excess from 2013 | | | | |
| d Excess from 2014 125, 952. | | | | |
| e Excess from 2015 450, 304. | | | | |
| 523581 11-24-15 | | | | Form 990-PF (2015) |

| | TY HEALTH S | | | | 323391 Page 1 |
|--|----------------------------|-------------------------------|-------------------------------|----------------------------|--------------------------|
| Part XIV Private Operating F | | | I-A, question 9) | N/A | |
| | | | | | |
| | • | = | ▶ ∟ | <u> </u> | |
| b Check box to indicate whether the foun | | ng foundation described | | 4942(j)(3) or4 | 1942(j)(5) |
| 2 a Enter the lesser of the adjusted net | | 4110044 | | 1 (4) 0040 | (0) 704-1 |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (C) 2013 | (a) 2012 | (e) rotai |
| investment return from Part X for | | | | | |
| each year listed | | | <u> </u> | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | İ | | | |
| · | | | | | |
| | | | + | | |
| | | | | | |
| a "Assets" alternative test - enter | | 1 | | | |
| (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, | | | | | |
| | | | | | |
| | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt | | | | ŀ | |
| section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | J |
| (4) Gross investment income | | <u> </u> | <u></u> | | 1 |
| | | | if the foundation | had \$5,000 or mo | ore in assets |
| at any time during | the year-see insti | ructions.) | · | | |
| | | | | | |
| | | | tributions received by the | foundation before the clo | se of any tax |
| year (but only if they have contributed | more than \$5,000). (See | section 507(d)(2).) | | | |
| NONE | | | <u> </u> | | |
| | | | (or an equally large porti | on of the ownership of a p | partnership or |
| • • | as a 10% or greater intere | SL | | | |
| | | | | | |
| | | | | | |
| Check here X if the foundation | only makes contributions | to preselected charitable | organizations and does | not accept unsolicited req | uests for funds. If |
| b Check box to indicate whether the foundation is a private operating foundation described in section 4942(i)(3) or 4942(i)(3) or 4942(i)(3) or 1942 a Enter the lesser of the adjusted net income from Part I or the imminimum investment return from Part X for each year listed b 85% of line 2a c Qualfying distributions from Part X for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities or Qualfying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or 6 or the alternative test refield upon: 2 Complete 3a, b, or 6 or the alternative test refield upon: 3 Complete 3a, b, or 6 or the alternative test refield upon: 3 Complete 3a, b, or 6 or the alternative test refield upon: 4 Complete 1a com | | | | | |
| 1 at 1fm Foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is grifted to for 2015, enter the date of the fulling foundation, and the ruling is grifted to for 2015, enter the date of the fulling foundation, and the ruling is grifted to 2015, enter the date of the fulling foundation, and the ruling is grifted to 2015, enter the date of the fulling foundation discontinuous provide operating foundation described in section. 2 a first the lesses of the adjusted ret income from Part X for each year listed 3 expect and provided in the foundation of the full income from Part X for each year listed 5 85% of line 2 a 4 callying distributions from Part XII, line 4 for each year listed 4 Armounts rectuded in line 2 conduct of exempt activities • Dustifying distributions made directly for active conduct of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 bibract line 28 from line 2 conducts of exempt activities. 5 complete 38, to c for the alternative line 2 conducts of exempt activities. 6 complete 38, to c for the alternative line 2 conducts of exempt activities. 7 bibract line 28 from line 2 conducts of exempt activities. 7 conducts a line 2 conducts of exempt activities. 8 conducts of line 2 conducts of exempt activities. 9 conducts of line 2 conducts of exempt activities. 1 conducts of line 2 conducts of exempt activities. 1 conducts of line 2 conducts of exempt activities. 1 conducts of line 2 conducts of exempt activities. 2 conducts of line 2 conducts of exempt activities. 1 conducts of line 2 conducts of exempt activities. 2 conducts of line 2 conducts of exempt activities. 2 conducts of line 2 conducts of exempt activities. 2 conducts of line 2 conducts | | | | | |
| The form of the first of the fi | ha authoritad as 1 - 4- | ation and materials the ever | should include: | | |
| | De submitted and inform | ation and materials they | snoula include | | |
| | | | | | |
| | | | | | |
| | | ool aroon, obsertable feel de | Lundo of inchitritions of | other factors: | |
| · · · · · · · · · · · · · · · · · · · | us, such as by geographi | cai areas, charitable field: | s, killus of illsutuuolis, or | outer tactors. | |
| N/A | | | | | |
| 523601 11-24-15 | | | | | Form 990-PF (2015 |

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 360 BOOSTER CLUB, INC PUBLIC MATCHING GRANT OR GIFT 11401 PLANTSIDE DRIVE 1,000. LOUISVILLE, KY 40299 MATCHING GRANT OR GIFT ALS ASSOCIATION TENNESSEE CHAPTER PUBLIC 4825 TROUSDALE DRIVE SUITE 107 250. NASHVILLE, TN 37204 PUBLIC MATCHING GRANT OR GIFT ALZHEIMER'S ASSOCIATION - MID SOUTH CHAPTER 4825 TROUSDALE DRIVE SUITE 220 NASHVILLE, TN 37220 650. AMERICAN CANCER SOCIETY PUBLIC MATCHING GRANT OR GIFT 2000 CHARLOTTE AVE NASHVILLE, TN 37203 5,000. MATCHING GRANT OR GIFT AMERICAN DIABETES ASSOCIATION PUBLIC ATTN: TOUR DE CURE, 220 GREAT CIRCLE ROAD, STE 134 NASHVILLE, TN 37228 500. SEE CONTINUATION SHEET(S) **▶** 3a 756,655. Total **b** Approved for future payment PUBLIC MATCHING GRANT OR GIFT BRENTWOOD MIDDLE SCHOOL PARENTS CLUB 5324 MURRAY LANE 100. BRENTWOOD, TN 37027 PUBLIC MATCHING GRANT OR GIFT KATHY S. HARKEY BREAST CANCER FOUNDATION 25403 I-45 N SUITE D 500. THE WOODLANDS, TX 77380 PUBLIC MATCHING GRANT OR GIFT KENROSE ELEMENTARY SCHOOL 1702 RAINTREE PARKWAY 250. BRENTWOOD, TN 37027 **▶** 3b 850. Total

| Enter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | y section 512, 513, or 514 | (e) |
|---|-----------------------|-----------------------|---|-----------------------------|-----------------------------------|
| · | (a) Business | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | - | | | |
| a N/A | | | | | |
| b | - | | + + | | <u> </u> |
| c | - | | | | |
| d | 1 | | + | | |
| e | | | ++- | | |
| f | - | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | <u> </u> | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| | | | 1 1 | | |
| 4 Dividends and interest from securities 5. Not costal income or (loca) from real costate: | | | + | | |
| 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 | | | 1 1 | | |
| property | | | | | |
| 7 Other investment income | - | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | +-+- | | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | - | | | | |
| 11 Other revenue: | | | | | |
| a | - | | | | |
| b | 1 1 | | | | |
| C | - | | - - - | | |
| d | - | | - - | | |
| e | _ | | . | 0 | . 0 |
| 12 Subtotal. Add columns (b), (d), and (e) | | <u></u> |). | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 0 |
| (See worksheet in line 13 instructions to verify calculations.) | · | · | | ··· | <u>.</u> |
| Part XVI-B Relationship of Activities | to the Accom | plishment of E | xempt Pu | rposes | |
| | | (a) a4 Da-+ VO | 1 A a a a deside side s | d a -ta -th - ta -th - a -a | ampliahment of |
| Line No. Explain below how each activity for which inc | | | 1-A contribute | importantly to the acc | omprishment of |
| nthe foundation's exempt purposes (other that | it by providing funds | s for such purposcs). | | | |
| N/A | | - | | | |
| | | | - | | · |
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| Form 990-F | | | YSTEMS FOUNDATIO | | 20-3323391 | _ Pa | age 13 |
|-----------------|----------------------------------|---------------------------------------|--|--|----------------------------|--|----------|
| Part X | | | To and Transactions and | d Relationships With | Noncharitable | | |
| | Exempt Organ | | | | | 15.5 | |
| | | | llowing with any other organization | | } | Yes | No |
| | | | on 527, relating to political organiza | ations? | | 1 | |
| | fers from the reporting found | ation to a noncharitable exem | pt organization of: | | | l | |
| (1) (| | | | | 1a(1) | | X |
| | Other assets | | | | 1a(2) | | X |
| | transactions; | | | | | | |
| | Sales of assets to a noncharita | · - | | | 1b(1) | | X |
| | Purchases of assets from a no | · - | on | | 1b(2) | <u> </u> | X |
| (3) F | Rental of facilities, equipment, | or other assets | | | 1b(3) | <u> </u> | X |
| | Reimbursement arrangements | | | | 1b(4) | | X |
| | oans or loan guarantees | | | | 1b(5) | | X |
| ٠, | Performance of services or me | | | | 1b(6) | _ | X |
| | ng of facilities, equipment, ma | = | | | <u>1c</u> | <u> </u> | <u> </u> |
| - | • | | schedule. Column (b) should alwa | = | - | sets, | |
| | | | eceived less than fair market value | in any transaction or sharing arr | angement, show in | | |
| | nn (d) the value of the goods, | | · · · · · · · · · · · · · · · · · · | 1 | | | |
| (a) Line no | (b) Amount involved | · · · · · · · · · · · · · · · · · · · | ritable exempt organization | (d) Description of transfers, transfers | isactions, and sharing arr | angemer | nts |
| | | N, | ' A | | | | |
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| | | | | <u> </u> | | | |
| 2a Is the | e foundation directly or indirec | tly affiliated with, or related to | o, one or more tax-exempt organiza | itions described | | r==== | _ |
| ın se | ction 501(c) of the Code (othe | r than section 501(c)(3)) or i | n section 527? | | Yes | <u> X</u> | No |
| b If "Ye | s," complete the following sch | | | | | | |
| | (a) Name of or | ganization | (b) Type of organization | (c) Description | n of relationship | | |
| - | N/A | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | . A | | | |
| | | | cluding accompanying schedules and state er than taxpayer) is based on all informatio | | May the IHS | | |
| Sign | 121. | 1. | 1 11/1.1. | | shown below | (see inst | |
| Here | Vr. Um, E. | <u>المال</u> | 1,1,011,0 | <u></u> | X Yes | • | No |
| | Signature of officer or tructer | a . | Date | Title | | | |

Preparer's signature

Firm's address ► 1033 DEMONBREUN STREET, SUITE 400

NASHVILLE, TN 37203

Check

self- employed

Date

11/8/2016

if PTIN

P00752421 Firm's EIN ► 86-1065772

Paid

Preparer

Use Only

Print/Type preparer's name

FRANCIS J. BEDARD

Firm's name ► DELOITTE TAX LLP

| Part XV Supplementary Information | | | · · · · · · · · · · · · · · · · · · · | |
|--|---|----------------------|---------------------------------------|----------|
| 3 Grants and Contributions Paid During the Ye | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| NEDECK WILLIAM AND A AGREEMENT OF | | | ATTOUTING COLUMN OF CITE | |
| AMERICAN HEALTH LAWYERS ASSOCIATION - PUBLIC INTEREST MISSION | | PUBLIC | MATCHING GRANT OR GIFT | |
| 1620 EYE STREET, NW, 6TH FLOOR | | | | |
| WASHINGTON, DC 20006 | | | | 250. |
| | | | | |
| NAMED TO AN ARROW ARROW ARROW | | DUDI TO | MATCHING GRANT OR GIFT | |
| AMERICAN HEART ASSOCIATION 1818 PATTERSON STREET | | PUBLIC | MATCHING GRANT OR GIFT | |
| NASHVILLE, TN 37203 | | | | 5,000. |
| MASHVIIIIE, IN 37203 | | | | 3,000. |
| | | | | |
| AMERICAN LUNG ASSOCIATION | | PUBLIC | MATCHING GRANT OR GIFT | |
| 5900 WILCOX PLACE | | | | 250 |
| DUBLIN, OH 43016 | | | | 250. |
| AMERICAN RED CROSS, WHERE IT'S NEEDED | | PUBLIC | MATCHING GRANT OR GIFT | |
| MOST | | | | |
| 2025 E STREET NW | | | | |
| WASHINGTON, DC 20006 | | | | 500. |
| | | | | |
| AMERICAN SADDLEBRED MUSEUM | | PUBLIC | MATCHING GRANT OR GIFT | |
| 4083 IRON WORKS PARKWAY | | | | |
| LEXINGTON, KY 40511 | | | | 500. |
| | | | | |
| ASPCA | | PUBLIC | MATCHING GRANT OR GIFT | |
| 424 EAST 92ND STREET | | 100010 | | |
| NEW YORK, NY 10128 | | | | 7,000. |
| | | | | |
| BEST BUDDIES TENNESSEE | | PUBLIC | MATCHING GRANT OR GIFT | |
| 116 WILSON PIKE CIRCLE SUITE 201 | | FOBLIC | MAICHING GRANT OR GIFT | |
| BRENTWOOD, TN 37027 | | | | 1,527. |
| | | | | |
| BOY SCOUTS OF AMERICA - MIDDLE | | PUBLIC | MATCHING GRANT OR GIFT | |
| TENNESSEE COUNCIL | | | | |
| P.O. BOX 150409, 3414 HILLSBORO PIKE | | | | 1 000 |
| NASHVILLE, TN 37215 | | | | 1,000. |
| | | | | |
| BOYS HOME OF VIRGINIA | | PUBLIC | MATCHING GRANT OR GIFT | |
| 414 BOYS HOME ROAD | | | | 05 005 |
| COVINGTON, VA 24426 | | + | | 25,000. |
| | | | | |
| BRENTWOOD ACADEMY | | PUBLIC | MATCHING GRANT OR GIFT | |
| 219 GRANNY WHITE PIKE | | | | |
| BRENTWOOD, TN 37027 | | 1 | 1 | 25,500. |
| Total from continuation sheets | | | | 749,255. |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager Amount status of contribution Name and address (home or business) recipient or substantial contributor BRIGHTSTONE, INC. PUBLIC MATCHING GRANT OR GIFT P.O. BOX 682966 FRANKLIN, TN 37068-2966 500. PUBLIC MATCHING GRANT OR GIFT CAMP MARYMOUNT - MOSS 1318 FAIRVIEW BLVD FAIRVIEW TN 37062 400. CENTRAL METHODIST UNIVERSITY -PUBLIC MATCHING GRANT OR GIFT ENGLISH SCHOLARSHIP ADVANCEMENT & ALUMNI RELATIONS, 411 CENTRAL METHODIST SQUARE FAYETTE, MO 65248 300. COLUMBIA STATE COMMUNITY COLLEGE PUBLIC MATCHING GRANT OR GIFT FOUNDATION PO BOX 680102 FRANKLIN, TN 37068-0102 200,000. PUBLIC MATCHING GRANT OR GIFT COMMUNITY FOUNDATION - JOSEPH & GAIL SEAY FAMILY FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 25,000. COMMUNITY FOUNDATION - KEVIN & DARLA PUBLIC MATCHING GRANT OR GIFT HAMMONS CHARITABLE FOUNDATION 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 25,000. COMMUNITY FOUNDATION - LARRY M. & PUBLIC MATCHING GRANT OR GIFT WENDY M. CARLTON CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 31,900. COMMUNITY FOUNDATION - MARILYN & JIM PUBLIC MATCHING GRANT OR GIFT DOUCETTE CHARITABLE FOUNDATION 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 25,000. COMMUNITY FOUNDATION - MARLETTE PUBLIC MATCHING GRANT OR GIFT FAMILY ADVISED FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 30,000. COMMUNITY FOUNDATION - MICHAEL & PUBLIC MATCHING GRANT OR GIFT KELLY LYND FAMILY FUND 3833 CLEGHORN AVENUE 10,000. NASHVILLE, TN 37215 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager or substantial contributor Name and address (home or business) recipient COMMUNITY FOUNDATION - ROB & MEGAN PUBLIC MATCHING GRANT OR GIFT HORRAR ADVISED FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 20,126. PUBLIC COMMUNITY FOUNDATION - RON & DIANE MATCHING GRANT OR GIFT SHAFER CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 25,000. COMMUNITY FOUNDATION - T. MARK & DENA PUBLIC MATCHING GRANT OR GIFT COBB BUFORD FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 27,500. COMMUNITY FOUNDATION - TOM & MARY PUBLIC MATCHING GRANT OR GIFT MILLER FAMILY ADVISED FUND 3833 CLEGHORN AVENUE #400 NASHVILLE, TN 37215 20,000. COMMUNITY FOUNDATION OF MIDDLE TN PUBLIC MATCHING GRANT OR GIFT 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 15,000. PUBLIC MATCHING GRANT OR GIFT FIDELITY CHARITABLE - KEN & LADONNA KING FUND P.O. BOX 770001 CINCINNATI, OH 45277 2,000. FIDELITY CHARITABLE PUBLIC MATCHING GRANT OR GIFT P.O. BOX 770001 25,000. CINCINNATI, OH 45277 FIDELITY CHARITABLE, PHYYLIS A. AND PUBLIC MATCHING GRANT OR GIFT HARVEY KLEIN FUND P.O. BOX 770001 CINCINNATI, OH 45277-0053 25,000. PUBLIC MATCHING GRANT OR GIFT FRANKLIN AND MARSHALL COLLEGE C/O COLLEGE ADVANCEMENT, P.O. BOX 3003 25,000. LANCASTER, PA 17604-3003 PUBLIC MATCHING GRANT OR GIFT FRIENDS IN GENERAL C/O NASHVILLE GENERAL HOSPITAL MEHARRY 1818 ALBION STREET 2,000. NASHVILLE, TN 37208-2918 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient MATCHING GRANT OR GIFT PUBLIC GATTON COLLEGE OF BUSINESS & **ECONOMICS** UNIVERSITY OF KY, 255 GATTON COLLEGE OF BUSINESS & ECONOMICS BUILDING LEXINGTON, KY 40506-0034 300. GILDA'S CLUB NASHVILLE PUBLIC MATCHING GRANT OR GIFT 1707 DIVISION STREET 400. NASHVILLE, TN 37203 MATCHING GRANT OR GIFT PUBLIC GLADNEY CENTER FOR ADOPTION 6300 JOHN RYAN DRIVE 1,000. FT. WORTH, TX 76132 GRACE COVENANT PRESBYTERIAN CHURCH PUBLIC MATCHING GRANT OR GIFT FOR ASHEVILLE POVERTY INITIATIVE 789 MERRIMON AVENUE 10,000. ASHEVILLE, NC 28804 PUBLIC MATCHING GRANT OR GIFT GRACEWORKS MINISTRIES 104 SOUTHEAST PARKWAY STE, 100 250. FRANKLIN, TN 37204 PUBLIC MATCHING GRANT OR GIFT HARDING ACADEMY 170 WINDSOR DRIVE 1,500. NASHVILLE, TN 37205 PUBLIC MATCHING GRANT OR GIFT HIGH HOPES INC. 301 HIGH HOPES CT 500. FRANKLIN, TN 37064 PUBLIC MATCHING GRANT OR GIFT HOPE INTERNATIONAL 227 GRANITE RUN DRIVE 810. LANCASTER, PA 17601 MATCHING GRANT OR GIFT PUBLIC INTERFAITH DENTAL CLINIC 1721 PATTERSON STREET 1,000. NASHVILLE, TN 37203 JEWISH COMMUNITY OF LOUISVILLE, INC. PUBLIC MATCHING GRANT OR GIFT 3600 DUTCHMANS LANE 6,000. LOUISVILLE, KY 40205 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor JOE C. DAVIS YMCA OUTDOOR CENTER PUBLIC MATCHING GRANT OR GIFT 3088 SMITH SPRINGS RD ANTIOCH, TN 37013 300. JUNIOR ACHIEVEMENT OF MIDDLE PUBLIC MATCHING GRANT OR GIFT TENNESSEE 120 POWELL PLACE 500. NASHVILLE, TN 37204 PUBLIC MATCHING GRANT OR GIFT JUVENILE DIABETES RESEARCH FOUNDATION - MIDDLE TENNESSEE CHAPTER 105 WESTPARK DRIVE, STE. 415 BRENTWOOD, TN 37207 2,150. PUBLIC MATCHING GRANT OR GIFT KATHY S. HARKEY BREAST CANCER FOUNDATION 25403 I-45 N SUITE D 6,000. THE WOODLANDS, TX 77380 PUBLIC MATCHING GRANT OR GIFT LAFAYETTE COLLEGE 730 HIGH STREET 1,000. EASTON, PA 18042 PUBLIC MATCHING GRANT OR GIFT LEARNING MATTERS, INC. P.O. BOX 150175 500. NASHVILLE, TN 37215 PUBLIC MATCHING GRANT OR GIFT LEGAL AID SOCIETY OF MIDDLE TENNESSEE 300 DEADERICK STREET 4,925. NASHVILLE, TN 37201 MATCHING GRANT OR GIFT PUBLIC LEUKEMIA & LYMPHOMA SOCIETY 3601 EISENHOWER AVENUE STE. 450 250. ALEXANDRIA, VA 22304 MATCHING GRANT OR GIFT MODEST NEEDS FOUNDATION PUBLIC 115 E. 30TH STREET, 1ST FLOOR 650. NEW YORK, NY 10016 PUBLIC MATCHING GRANT OR GIFT NASHVILLE OPERA 3622 REDMONT ST 5,500. NASHVILLE, TN 37209 Total from continuation sheets

| 3 Grants and Contributions Paid During the Ye | | т- | | |
|--|--|----------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | 33/11/33/13/1 | |
| | | | | |
| NASHVILLE RESCUE MISSION | | PUBLIC | MATCHING GRANT OR GIFT | |
| РО ВОХ 333229 | | | | |
| NASHVILLE, TN 37203 | | | | 20 |
| | | | | |
| NASHVILLE SYMPHONY | | PUBLIC | MATCHING GRANT OR GIFT | |
| ONE SYMPHONY PLACE NASHVILLE, TN 37201-2031 | | | | 25 |
| VIDEOUS NO GOODEN VID GOVERN | | DUD! TO | AND CONTROL OF CASE | |
| NATIONAL MS SOCIETY - MID-SOUTH CHAPTER | | PUBLIC | MATCHING GRANT OR GIFT | |
| 214 OVERLOOK CIRCLE | | | 1 | |
| BRENTWOOD, TN 37027 | | | | 2,31 |
| | | | | |
| OPEN TABLE OF NASHVILLE, INC. | | PUBLIC | MATCHING GRANT OR GIFT | |
| 210 MORTON AVENUE | | | | |
| NASHVILLE, TN 37211 | | | | 75 |
| | | | | |
| RAVENWOOD HIGH SCHOOL | | PUBLIC | MATCHING GRANT OR GIFT | |
| 1724 WILSON PIKE | | | | |
| BRENTWOOD, TN 37027 | | <u> </u> | | 60 |
| RONALD MCDONALD HOUSE CHARITIES OF | | PUBLIC | MATCHING GRANT OR GIFT | |
| NASHVILLE, TN INC | | 1 | | |
| 2144 FAIRFAX AVENUE | | | | |
| NASHVILLE, TN 37212 | | | | 2,00 |
| | | | | |
| ROYAL POINCIANA CHAPEL | | PUBLIC | MATCHING GRANT OR GIFT | |
| 60 COCOANUT ROW PALM BEACH , FL 33480 | | | | 6,50 |
| | | | | |
| SAFE HAVEN FAMILY SHELTER | | PUBLIC | MATCHING GRANT OR GIFT | |
| 1234 THIRD AVENUE SOUTH | | | | |
| NASHVILLE, TN 37210 | | | | 7,70 |
| | | | | |
| SALVATION ARMY KENTUCKY & TENNESSEE | | PUBLIC | MATCHING GRANT OR GIFT | |
| 214-216 W. CHESTNUT STREET | | 1 | | _ |
| LOUISVILLE, KY 40202 | | | | 5,00 |
| SAMFORD UNIVERSITY - JOURNALISM | | PUBLIC | MATCHING GRANT OR GIFT | |
| SCHOLARSHIP | | | | |
| OFFICE OF ADVANCEMENT, 800 LAKESHORE | | | | |
| DRIVE BIRMINGHAM, AL 35229 Total from continuation sheets | <u> </u> | 1 | 1 | 30 |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager status of contribution Amount Name and address (home or business) or substantial contributor recipient MATCHING GRANT OR GIFT SCALES ELEMENTARY PARENT TEACHER PUBLIC ORGANIZATION 6430 MURRAY LANE BRENTWOOD, TN 37027 300. PUBLIC MATCHING GRANT OR GIFT SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD 7,000. NASHVILLE, TN 37228 PUBLIC MATCHING GRANT OR GIFT ST. LOUIS ZOO ONE GOVERNMENT DRIVE ST. LOUIS, MO 63110 11,000. MATCHING GRANT OR GIFT STUDIO TENN THEATRE COMPANY PUBLIC 230 FRANKLIN ROAD FRANKLIN, TN 37064 500. TENNESSEE PERFORMING ARTS CENTER PUBLIC MATCHING GRANT OR GIFT P.O. BOX 190660, 211 SEVENTH AVE. NORTH, STE. LL-10 NASHVILLE, TN 6,450. 37219 PUBLIC MATCHING GRANT OR GIFT TIMOTHY'S GIFT PO BOX 111642 NASHVILLE, TN 37222 1,000. TRANSYLVANIA UNIVERSITY PUBLIC MATCHING GRANT OR GIFT 300 NORTH BROADWAY 1,000. LEXINGTON, KY 40508 UC SAN DIEGO FOUNDATION - ALZHEIMERS PUBLIC MATCHING GRANT OR GIFT RESEARCH 9500 GILMAN DRIVE (MC: 0940) 250. LA JOLLA, CA 92093 PUBLIC MATCHING GRANT OR GIFT UNITED WAY 209 GOTHIC CT. #107 FRANKLIN, TN 37064 250. PUBLIC MATCHING GRANT OR GIFT UNITED WAY - METROPOLITAN NASHVILLE RE: TOCQUEVILLE SOCIETY, 250 VENTURE 10,000. CIRCLE NASHVILLE, TN 37228 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor MATCHING GRANT OR GIFT PUBLIC UNIVERSITY OF KENTUCKY 125 STURGILL DEVELOPMENT BUILDING LEXINGTON, KY 40506-0015 300. URBAN YOUTH IMPACT PUBLIC MATCHING GRANT OR GIFT 2823 NO. AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407 8,500. VANGUARD CHARITABLE ENDOWMENT PUBLIC MATCHING GRANT OR GIFT (A0833802) P.O. BOX 55766 15,000. BOSTON, MA 02205 VANGUARD CHARITABLE ENDOWMENT PUBLIC MATCHING GRANT OR GIFT (A1045956) P.O. BOX 55766 10,000. BOSTON, MA 02205 WASHINGTON UNIVERSITY IN ST. LOUIS -PUBLIC MATCHING GRANT OR GIFT PROGRAM IN PHYSICAL THERAPY CAMPUS BOX 8502, 4444 FOREST PARK BLVD ST. LOUIS, MO 63108 300. PUBLIC MATCHING GRANT OR GIFT WAVES INC - BROOKWOOD CENTER 145 SE PARKWAY, STE 100 FRANKLIN, TN 37064 1,000. PUBLIC MATCHING GRANT OR GIFT WOMEN ROCK FOR CHARITY 900A EAST CHURCH STREET BRENTWOOD, TN 37027 1,000. PUBLIC MATCHING GRANT OR GIFT WOUNDED WARRIOR PROJECT ATTN: DONOR SERVICES, 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256 5,000. Total from continuation sheets

| FORM 990-PF PART VIII - LIST TRUSTEES AND | LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS | | STATEMENT 1 | |
|--|--|-------------------|---------------------------------|----|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | |
| WAYNE T. SMITH | CHAIRMAN OF THE | BOARD/CEO 0. | | 0. |
| W.LARRY CASH | PRESIDENT 1.00 | 0. | 0. | 0. |
| RACHEL A. SEIFERT | EXECUTIVE VICE | PRESIDENT 8 | | 0. |
| MARTIN G. SCHWEINHART | EXECUTIVE VICE | PRESIDENT 0. | 0. | 0. |
| EDWARD W. LOMICKA | VICE PRESIDENT 1.00 | & TREASURES | | 0. |
| KEVIN J. HAMMONS | SENIOR VICE PRE | ESIDENT 0. | 0. | 0. |
| CHRISTOPHER G. COBB | ASSISTANT SECRE | CTARY 0. | 0. | 0. |
| • | _ | | | |
| TOTALS INCLUDED ON 990-PF, PAGE 6 | PART VIII | 0. | <u> </u> | 0. |