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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. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

		ent of the Treasury			curity numbers of		-	_		Ont Or	en to Public Ir	spection
_		Revenue Service	Information about I		r and its separa				/IOIIII99	υρι. Ο	sen to Fublic II	
		lendar year 2015 of foundation	or tax year beginnin	<u> </u>		, 2015	and end		Emplo	ver identifi	ication number	, 20
			DAMENC ECHNDAM:	ON	.				•	3835 5 7		
_	_		RAVENS FOUNDAT:		at address)		Room/suit	2 A			er (see instruction	15)
ľ	W ITTURE	and street (or P O	DOX HUMBER II MIGII IS NOT GEN	ered to stree	aduless)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		СССР	/	\	13)
		100 -/-								,	, –	
_			PAUL B MULHOLLE ce, country, and ZIP or foreign									
•	or or	town, state or province	be, country, and zir or loreign	i postal code	•			c	If exem	ption applica	ation is	
			2211						pending	check here		. ▶□
_		LISLE, KY 40			1			. 4.				. —
G	Che	ck all that apply	Initial return	-	Initial return	•	oublic cha	ם איזי			tions check here.	. ▶□
			Final return	}-	Amended ref						itions meeting the nere and attach	. —
_	<u> </u>		Address chang		Name chang				comp	outation .		. ▶∟_
H	_		zation: X Section 5					E	if privat	te foundation	n status was termina	sted
Ţ			nonexempt charitable trus		Other taxable pr				unders	ection 507(b)(1)(A), check here	. ▶□
ı		market value o		-	method: X C	ashAcc	rual	F			ın a 60-month term	
		of year (from Pa		_	specify)				unders	ection 507(b)(1)(B) check here	. ▶
		<u> </u>			(d) must be on cas	sh basis)				-	1 (4) (5)	
Ŀ	art		venue and Expenses (o columns (b), (c), and (d)	, , , ,	Revenue and	(b) Net inve	estment	(c)	Adjuste	ed net	(d) Disburs for chari	
		may not necessar	rly equal the amounts in	•	expenses per books	incon		(~)	incom		purpos	es
_		column (a) (see ın									(cash basi	s only)
	1		its, etc., received (attach schedule		162,171.						ļ	
	2		e foundation is not required ch Sch B				1 606					
	3	Interest on savings a	ind temporary cash investmen	ts	4,696.		4,696.				ATCH 1	
	4	Dividends and inte	erest from securities	• •	48,987.	4	8,987.				ATCH 2	
	5a	Gross rents		• •								
	b	Net rental income or	(loss)									
e			m sale of assets not on line 1		61,890.							
e	ь	Gross sales price for assets on line 6a	all 652,16	51.								
Revenue	7	Capital gain net in	come (from Part IV, line 2).		€	1,890.					
Œ	8	Net short-term cap	pital gain	• •						-		
	9		ons	• •						HE(CEIVED	!
	1U a	Gross sales less returnand allowances							1_[اريا
	b	Less Cost of goods s	old .						8	MAN	0.0 2040	မြို့
	С		ss) (attach schedule)				7 400			MAY	0 9 2016	2
	11		ach schedule) ATCH. 3		1,486.		1,486.		1 4	V		8
_	12		through 11		279,230.	1 1	7,059.			<u>ogo</u>	EN 1	
υħ	13		icers, directors, trustees, etc	- 1	0.				This was	K. D. GOVE		<u>. </u>
Se	14		alanes and wages									
ē	15	•	nployee benefits									
х	14 15 16 a b c 17 18 19 20 21 22 23 24	- ·	schedule) ATCH 4		48.		2 (00					
e	b		attach schedule)ATCH	1	2,600.		2,600.				-	
.≥	С	Other professiona	l fees (attach schedule) . [هــــا[ه	11,412.		1,412.					
tra	17				707							
nis	18	•	edule) (see instructions)[-	797.		_					
Ē	19	Depreciation (atta	ch schedule) and deplete	n.								
Ad	20											
קַ	21		es, and meetings	1							 	
ē	22	• .	cations	1	240		224					2.5
ng	23		attach schedule) ATCH .8	r	249.		224.					25
äti	24		nd administrative expen	- 1	15 100	.	4 026					^-
96]	Add lines 13 throu	ugh 23	• •	15,106.	1	4,236.				 	25
ō	l .	Contributions, gift	ts, grants paid	• •	367,500.		4 000					67,500
_	26	Total expenses and dis	bursements Add lines 24 and	25	382,606.	ļ	4,236.			0.	- 3	67,525
	27	Subtract line 26 f	rom line 12.									
	a		r expenses and disbursements		-103,376.	<u> </u>	0000				 	
	b		ncome (if negative, enter-	· —		ļ10	2,823.	<u> </u>				
_			ome (if negative, enter -0-								<u> </u>	<u> </u>
\ F	or Pa	perwork Reduction	n Act Notice, see instruc	ions.							Form 990	PF (2015)

JSA For Paperwork Reduction Act Notice, see instructions. $91674J\ 1435\ 4/4/2016\ 8:56$:

5 41	B-1	Attached schedules and amounts in the	Beginning of year	En	d of year
Part I	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing			
2	Savings and temporary	cash investments	563,281.	358,387	7. 358,387
3	Accounts receivable				
	Less allowance for dou	btful accounts ▶			
4	Pledges receivable ▶				
		btful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
ŀ	disqualified persons (at	tach schedule) (see instructions)			
7	Other notes and loans	receivable (attach schedule)			
	Less allowance for dou	btful accounts ▶			
2 a		se			
8 9 0 a		leferred charges			
10a		te government obligations (attach schedule)[9,]	163,488.	88,515	5. 90,549
		stock (attach schedule) ATCH 10	1,216,641.	1,392,898	3. 1,435,718
	-	e bonds (attach schedule)			
11	Investments - land, building and equipment basis	s, >			•
	Less accumulated depreci	ation >			
12	(attach schedule)	loans			
13		ach schedule)			
14	Land, buildings, and equipment basis	>			
	Less accumulated deprecia	ation >			
15	(attach schedule) Other assets (describe	> <u> </u>			
16	,	completed by all filers - see the			
1	·		1,943,410.	1,839,800	1,884,654
17		accrued expenses			
18					
_ I	• •				
20		ors, trustees, and other disqualified persons			
19 20 21 22 22 22 22 22 22 22 22 22 22 22 22		otes payable (attach schedule)			\neg
22		e ▶)		· · · · · · · · · · · · · · · · · · ·	\neg
23	Total liabilities (add line	es 17 through 22)	0.		0.
		llow SFAS 117, check here . ▶		· ·	
န္မ		24 through 26 and lines 30 and 31.			
24	Unrestricted	. <i>.</i> . . <i> </i>			<u> </u>
<u>ख</u> 25					
26					\neg
<u> </u>	-	not follow SFAS 117,			
리		pplete lines 27 through 31.	j		
Assets or Fund B		ncipal, or current funds	1,943,410.	1,839,800	o.
28		or land, bldg , and equipment fund			\neg
S 29		ulated income, endowment, or other funds			\neg
¥ 30		d balances (see instructions)	1,943,410.	1,839,800	ō.
30 31		l net assets/fund balances (see			\neg
_			1,943,410.	1,839,800	o.
Part		inges in Net Assets or Fund Bala			
		balances at beginning of year - Part		nust agree with	
		ed on pnor year's return)			1,943,410
	• •	I, line 27a			
		ided in line 2 (itemize) ► ATCH 11		3	
					1,840,038
		n line 2 (itemize) ► ATCH 12			238
		halances at end of year (line 4 minus	line 5) - Part II, column (b		

Page 3	3
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لنحم	t IV Capital Gains			(b) How	4 1 5 4	
		d describe the kind(s) of property sold	(e g , real estate,	acquired	(c) Date acquired	(d) Date sold
	2-story b	acquired P - Purchase D - Donation	(mo, day, yr)	(mo, day, yr)		
 1a	SEE PART IV SCHE					
b						
С						
d				<u> </u>		
e						
		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ke)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	
_				1		
<u>a</u>						
<u>b</u>			· · · · · · · · · · · · · · · · · · ·			.
<u> </u>	 -	 	·			·
d						
e			11	1		
	Complete only for assets	showing gain in column (h) and owner	7 · · · · · · · · · · · · · · · · · · ·		Gains (Col (h) g	
0	i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (ı)	col	(k), but not less t Losses (from co	
	,	as of 12/31/69	over col. (j), if any	<u> </u>	Lusses (IIOIII Co	u. (11 <i>))</i>
a						
b						
С						
d						
e						
	11.7	()	gain, also enter in Part I, line 7			-
2	Capital gain net income	or (net capital loss)	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		61,890.
2	Nick chart town contains) ain or (loss) as defined in sections				,
-3			(0) a.i.a (0).			
3			structions) If (loss) enter -0 - in 1			
J	If gain, also enter in Pa	art I, line 8, column (c) (see ins	structions) If (loss), enter -0- in			0
Pa	If gain, also enter in Part I, line 8	art I, line 8, column (c) (see ins			me.)	0.
Pa (For	If gain, also enter in Part I, line 8	art I, line 8, column (c) (see ins	educed Tax on Net Investment ne section 4940(a) tax on net invest	tment inco	·	
Par (For If se	If gain, also enter in Part I, line 8	art I, line 8, column (c) (see ins	educed Tax on Net Investment ne section 4940(a) tax on net invest butable amount of any year in the t	tment inco	·	0 . Yes X No
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Pal (For If see Wassif "Y 1 Call 2 3	If gain, also enter in Part I, line 8	under Section 4940(e) for Record private foundations subject to the leave this part blank the section 4942 tax on the distriput qualify under section 4940(e) mount in each column for each year (b) Adjusted qualifying distributions 237,525. 236,207. 363,312. 218,440. 137,613. d) of or the 5-year base period - dividing the distribution has been in existence if less on charitable-use assets for 2015 for the formula of the process of the process of the concharitable-use assets for 2015 for the formula of the process of t	butable amount of any year in the to Do not complete this part ar, see the instructions before making (c) Net value of noncharitable-use assets 1,668,191. 1,517,971. 1,420,719. 1,535,378. 1,440,898. de the total on line 2 by 5, or by the ss than 5 years	pase peno	d? (d) Distribution ra (col (b) divided by	Yes X No (col (c)) 0.142385 0.155607 0.255724 0.142271 0.095505 0.791492 0.158298 860,265. 294,476. 1,028.
Pal (For If see Wassif "Y 1 2 3	If gain, also enter in Part I, line 8	under Section 4940(e) for Record private foundations subject to the leave this part blank the section 4942 tax on the distriput qualify under section 4940(e) mount in each column for each year (b) Adjusted qualifying distributions 237,525. 236,207. 363,312. 218,440. 137,613. d) of or the 5-year base period - dividing the distribution has been in existence if less on charitable-use assets for 2015 for the formula of the process of the process of the concharitable-use assets for 2015 for the formula of the process of t	butable amount of any year in the top to not complete this part ar, see the instructions before making (c) Net value of nonchantable-use assets 1,668,191. 1,517,971. 1,420,719. 1,535,378. 1,440,898. de the total on line 2 by 5, or by the ss than 5 years	pase peno	d? (d) Distribution ra (col (b) divided by	Yes X No Alto (col (c)) 0.142385 0.155607 0.255724 0.142271 0.095505 0.791492 0.158298 860,265.
Pal (For If see Wassif "Y 1 2 3 4 5 6	If gain, also enter in Part I, line 8	under Section 4940(e) for Record private foundations subject to the leave this part blank the section 4942 tax on the distriput qualify under section 4940(e) mount in each column for each year (b) Adjusted qualifying distributions 237,525. 236,207. 363,312. 218,440. 137,613. d) of or the 5-year base period - divining the distribution has been in existence if less on charitable-use assets for 2015 for the first part of Part I, line 27b)	butable amount of any year in the to Do not complete this part ar, see the instructions before making (c) Net value of noncharitable-use assets 1,668,191. 1,517,971. 1,420,719. 1,535,378. 1,440,898. de the total on line 2 by 5, or by the ss than 5 years	pase peno	d? (d) Distribution ra (col (b) divided by	Yes X No (col (c)) 0.142385 0.155607 0.255724 0.142271 0.095505 0.791492 0.158298 860,265. 294,476. 1,028.

Page 4

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstri	iction	<u>s)</u>
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 if necessary - see instructions)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,0	028.
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			200
3	Add lines 1 and 2		Ι,(028.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		3 /	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1,0	028.
6	Credits/Payments 4.62			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 462.			
b	Exempt foreign organizations - tax withheld at source			
С.	Tax paid with application for exemption of time to line (1 dim occo).			
d -	Backup withholding entiredusty withheld			462.
7	Total credits and payments Add lines od unough od 11111111111111111111111111111111111			102.
8	Effect any periods of underpayment of estimated tax offect field.			566.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<u>`</u>	
10 11	Enter the amount of line 10 to be Credited to 2016 estimated tax Refunded 11			
_	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
_	Instructions for the definition)?	1b		Х
	If the enswer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			ŀ
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$(2) On foundation managers ► \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			1
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		-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	١.		١
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		_
_	If "Yes," attach the statement required by General Instruction T			l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that The state legislation that effectively amends the governing instrument so that no mandatory directions that	6	x	
7	conflict with the state law remain in the governing instrument?	7	x	
7	Enter the states to which the foundation reports or with which it is registered (see instructions)	Ė		
oa	TI. KY			
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	х	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			ĺ
•	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
		QC	0-PF	/2015

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of 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? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ PAUL B. MULHOLLEM, JR. Telephone no ▶			
•-	Located at ▶ P.O. BOX 192 CARLISLE, KY ZIP+4 ▶ 40311			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			T
15	and enter the amount of tax-exempt interest received or accrued during the year			
40	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
16		16		Х
	over a bank, securities, or other financial account in a foreign country?	-10		 -
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			įÌ
	the foreign country			1
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			i
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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)?			. 1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			i
	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) Yes X No			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ļ		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		L
	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))			
а	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			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	i		
_	(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		Х
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	•			
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or	İ		
	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	3 h	† <i>-</i>	نا
	foundation had excess business holdings in 2015)	3b	-	Х
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
E	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	75		- x
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		

Form 9	90-PF (2015) THE MULHOLLEM	CRAVENS FOUNI	OATION	20-3	3835578	Page 6
Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		_
5a	During the year did the foundation pay or incur any amo			<u></u>		
	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public ele					
	directly or indirectly, any voter registration drive?			[]	,	
	(3) Provide a grant to an individual for travel, study, or o				,	
	(4) Provide a grant to an organization other than a					
	section 4945(d)(4)(A)? (see instructions)			مرايد ايدايد	,	
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children				, l i	
b	If any answer is "Yes" to 5a(1)-(5), did any of the					ŀ
Ð	Regulations section 53 4945 or in a current notice regar					
	Organizations relying on a current notice regarding disa	-	•			
					'-	1
С	If the answer is "Yes" to question 5a(4), does the		•			İ
	because it maintained expenditure responsibility for the			res No	'	
_	If "Yes," attach the statement required by Regulations se					
6a	Did the foundation, during the year, receive any fur			1 1 1 2 1		
	on a personal benefit contract?			. — —	1 1	
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act /	6b	<u> </u>
	If "Yes" to 6b, file Form 8870					Ì
7a	At any time during the tax year, was the foundation a p					
	If "Yes," did the foundation receive any proceeds or ha					
Pai	and Contractors	rs, Trustees, Fou	mualion managers	s, nigiliy Fald Ellip	noyees,	
1	List all officers, directors, trustees, foundation r					
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense other allo	
		devoted to position	enter -0-)	and deferred compensation	Other unc	
	10		0.	0.		0
ATC	н 13		<u> </u>	0.		<u> </u>
					\ 16	
2	Compensation of five highest-paid employees "NONE."	(other than thos	ie incluaea on lin	e 1 - see instructi	ons). It no	ne, enter
	NONE.	(b) Title, and average		(d) Contributions to		
(a)	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	e account, owances
		devoted to position		compensation		
	NONE	<u></u>				
					- 	
		<u> </u>				
Tota	I number of other employees paid over \$50,000		<u> </u>	<u> ▶</u>		
					Form 990	-PF (2015)

•		20. 20	225570
	THE MULHOLLEM CRAVENS FOUNDATION	20-31	335578
orm 990-PF (2015)			Page 7
	ntion About Officers, Directors, Trustees, Foundation Montractors (continued)	anagers, Highly Paid Employ	/ees,
3 Five highest-pa	id independent contractors for professional services (see in	structions). If none, enter "NONI	E."
(a) N	ame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
··			C
~			
		<u> </u>	
otal number of other	s receiving over \$50,000 for professional services	>	
Part IX-A Summ	nary of Direct Charitable Activities		
	r largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the number of	Expenses
1 N/A		4-14	
			
2			
-			
3			
4			

	hest-paid independent contractors for professional services (see ins (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE			
		ļ ,	
tal number	of others receiving over \$50,000 for professional services	<u></u>	
art IX-A	Summary of Direct Charitable Activities		
	ation's four largest direct charitable activities during the tax year. Include relevant statistical and other beneficianes served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
N/A			
·			
3			
4			
art IX-B	Summary of Program-Related Investments (see instructions)		
Describe the t	wo largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 NONE			
			
2			
	ram-related investments. See instructions		
All other area	THE OF TH		
			i e
All other prog			

Form 990-PF (2015) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 1,677,849. 1b 210,745. 1c c Fair market value of all other assets (see instructions) 1d 1,888,594. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) _______1e 2 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 1,888,594. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 28,329. instructions) 1,860,265. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 93,013. 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) 93,013. 1,028. 2a Tax on investment income for 2015 from Part VI, line 5 2a b Income tax for 2015 (This does not include the tax from Part VI). 2b 1,028. 2c 91,985. 3 3 4 5 91,985. 6 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, 91,985. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 367,525. **b** Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 367,525. 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 income Enter 1% of Part I, line 27b (see instructions) 1,028.

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

Form 990-PF (2015)

366,497.

6

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Part XIII Undistributed Income (see instr	uctions)			Fage 3
1 Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
line 7				91,985.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only				
b Total for prior years 20 13 ,20 12 ,20 11				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014	832,426.			
f Total of lines 3a through e	032,420.		<u>-</u> -	<u> </u>
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 367,525.				
a Applied to 2014, but not more than line 2a				
· · · · · · · · · · · · · · · · · · ·				
b Applied to undistributed income of prior years (Election required - see instructions)				
· · · · · · · · · · · · · · · · · · ·				
c Treated as distributions out of corpus (Election required - see instructions)		i		
d Applied to 2015 distributable amount.				91,985.
e Remaining amount distributed out of corpus	275,540.			
5 Excess distributions carryover applied to 2015.				
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,107,966.			
b Prior years' undistributed income Subtract				
line 4b from line 2b				
income for which a notice of deficiency has				
been issued, or on which the section 4942(a)				
tax has been previously assessed	· · · · · · · · · · · · · · · · · · ·			<u></u> -
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2014 Subtract line				
4a from line 2a Taxable amount - see instructions		:		
f Undistributed income for 2015 Subtract lines				
4d and 5 from line 1. This amount must be		1		
distributed in 2016				
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)		-		-
8 Excess distributions carryover from 2010 not	68,026.			
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	1,039,940.			
10 Analysis of line 9	·			
a Excess from 2011 144,871.				
b Excess from 2012 293, 732.				
c Excess from 2013 167, 944.				
d Excess from 2014 157,853.				
e Excess from 2015 275,540 .				
				Err 990-PF (2015)

Рa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NC.	T APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	it it is a private opera	ating		
	foundation, and the ruling	g is effective for 2015, e	nter the date of the ruling		▶		
b	Check box to indicate v					4942(j)(3) or	4942(j)(5)
2.	Cates the leases of the ed	Tax year		Prior 3 years			
z a	Enter the lesser of the ad- justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 201	2	(e) Total
	for the minimum investment			(4)	1 1		
	return from Part X for each						
_	year listed						
D	85% of line 2a						
С	Qualifying distributions from Pert						
4	XII, line 4 for each year listed . Amounts included in line 2c not						
u	used directly for active conduct						
	of exempt activities						
е	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				ļ		
а	"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 invest-						
	ment return shown in Part X, line 6 for each year listed					i	
С	"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)(w)			ļ	 		
	port from an exempt						
	organization,						
Dэ		ntary Information (Complete this part	only if the founds	tion had \$5	000 05 00	ro in accete of
L		uring the year - see		only if the lounda	tion nau \$5	,000 01 1110	ne ili assets at
1	Information Regardin						
_	List any managers of	•		re than 2% of the tota	al contribution	s received b	v the foundation
	before the close of any						y and roundation
	NONE						
b	List any managers of	the foundation who	own 10% or more o	of the stock of a corn	oration (or a	n equally lar	ne portion of the
_	ownership of a partner					ir equally larg	ge portion of the
	• •	. ,					
	N/A						
2	Information Regardin	a Contribution Grant	Gift Loan Scholars	hin etc Programs:			
-	<u> </u>	•		• • •	A-lili		
	Check here ► X if t unsolicited requests f	ine roungation only for funds if the found	makes contributions	to preselected char	Rable organiz	zations and (does not accept
	other conditions, comp			ants, etc (see mstruc	tions) to man	riduais di diç	janizations under
	The name, address, a	<u> </u>		the nemon to whom on	nlications shou	ıld be eddress	
a	riie name, address, a	ind telephone number	or e-mail address or	the person to whom ap	plications shot	no be address	sea
	The form in which app	dications should be su	hmitted and informati	on and materials they	should include		
IJ	тне топп и миноп арр	moations should be Su	omitted and informati	on and materials mey	SHOULD INCIDE	-	
	Any submission deadl	ines				-	
_	, Jasimoolon dead						
d	Any restrictions or I	imitations on awards	, such as by geog	raphical areas, charita	able fields. k	ınds of instit	tutions, or other
	factors		, , ,	•			,

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relaboriship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Name and address (home or business) Amount Purpose of grant or contribution Amount Recipient Purpose of grant or contribution Purpose of grant								
3 Grants and Contributions Paid Duri	If recipient is an individual	oved for F	·uture Payment					
Name and address (home as husiness)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount				
a Paid during the year	or substantial contributor	recipient						
a raid duffing the year								
ATCH 14								
		•						
Total	 	<u></u>	▶ 3a	367,500.				
b Approved for future payment								
Total								

5E1491 1 000

art XVI-A Analysis of Income-Producter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-			-		(OCC III di dolloris)
b					
с					
d					
e					
f					
g Fees and contracts from government agencies					•
Membership dues and assessments					
Interest on savings and temporary cash investments -			14	4,696.	
Dividends and interest from securities			14	48,987.	
Net rental income or (loss) from real estate	-		~ - 		
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property. $$.	-		18	1 400	-
Other investment income	1		18	1,486. 61,890.	
Gain or (loss) from sales of assets other than inventor	1		10	01,090.	
Net income or (loss) from special events • • •	1				
Gross profit or (loss) from sales of inventory					
Other revenue a			- 		
b					
c			-		
d					
e		<u> </u>		117,059.	
Subtotal Add columns (b), (d), and (e)		·			117 05
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activities	culations.) es to the A	ccomplishment of	Exempt Pur	poses	
ee worksheet in line 13 instructions to verify cal	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
ee worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
re worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activition ine No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
re worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activition ine No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions ne No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
re worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activition ine No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
ee worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitions No. Explain below how each activ	culations.) es to the A ity for whic	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to

Form 990-PF (2015)	THE MULHOLLEM CRAVENS FOUNDATION	20-3835578 Page 13
_	on Regarding Transfers To and Transactions and R Organizations	elationships With Noncharitable

		···										
1 Did the organization directly or indirectly engage in any of the following with any other organization described								Yes	No			
	ın sect	ion 501(c) of th	ne Code (other than	section 501(c)(3) o	organizations)	or in section 5	527, re	lating to	o politica!			
	organiz	zations?										
а	Transfe	ers from the rep	orting foundation t	o a noncharitable ex	empt organiza	ation of						
	(1) Cas	sh	<i></i>							1a(1)		Х
										1a(2)		Х
		ransactions										
	(1) Sal	es of assets to	a noncharitable ex	empt organization						15(1)		Х
				table exempt organiza						1b(2)		Х
				er assets						1b(3)		Х
										1b(4)		Х
										-		Х
				ship or fundraising so								Х
				ists, other assets, or						1c		Х
		_		es," complete the f						the 1	fair m	arket
		-		vices given by the r	-				-			
	value i	n any transacti	on or sharing arrai	ngement, show in c	olumn (d) the	value of the	goods,	other a	issets, or s	ervice	s rec	eived
(a) Li	ne no	(b) Amount involv	ved (c) Name of	f noncharitable exempt org	janization	(d) Description of	of transfer	s, transac	tions, and shai	ng arra	ngeme	nts
		N/A				N/A						
						~						
			1	·								
	1											
									-			

2a			•	affiliated with, or rel			•	-	Г	\neg		л
			, ,	other than section 5	01(c)(3)) or in	section 5277	• • • •	• • • •	l	Ye	es X	·] No
D	it Yes	(a) Name of orga	following schedule		organization		16) Deccrin	tion of relations	hip		
		(a) Name of orga	IIIZAUGI	(b) Type of	organization		ĮC.	Descrip	HOH OF TELACIONS	siip		
												
	• •											
	Unde	r penaltes of perjury,	I seclare that I bave es	mined this return, including	accompanying sche	dules and statement	ts and to	the best	of my knowledg	e and t	elief, it	is true
		ct, and complete dec	raidn of preparer sither tha	n taxpayer) is basett (in all info	mation of which pre		_					
Sigi	ו ו	, 14 (101	16	MEASI	ノんい	1	May the IRS			
Her	e 📶	nature of officer or t	rustee	Date		itle		-`-	(see instruction	eparer s)? X	Yes	below No
										, <u></u>		
	- 	Print/Type prepa	rer's name	Preparer's signatur		Date		Ch	eck if F	PTIN		
Paid	t	BROOKE J N	4ILTZOW	Brooke J. Mi	ltyou	04/0	04/2016	.		P013	8723	37
Pre	parer	Firm's name	▶ PRICEWATERH	OUSECOOPERS LI	.P			Firm's EIN				
Use	Only		▶ ONE NORTH W									
	•		•	L		60606	I,	Phone no	312-29	98-20	000	
		•								_	DE	(2045)

THE MULHOLLEM CRAVENS FOUNDATION 20-3835578
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CA	APITAL GAI	NS AND LO	SSES FOR	R TAX ON	INVEST	M	ENT INCOM	
Kınd of F	Property		Desc	ription		or	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPITA	AL GAIN DIS	TRIBUTIONS			2,739.	
		MERRILL LYNG			ATTACHE	Р	VARIOUS	VARIOUS
156,280.		156,476.					-228.	
		MERRILL LYNG PROPERTY TY			ATTACHE	Р	VARIOUS	VARIOUS
85,847.		74,498.					11,349.	
75,000.	i	MERRILL LYNG PROPERTY TY 75,000.			ATTACHE	P	10/04/2007	06/29/2015
		THE CHEMOUR:				₽	07/08/2015	07/08/2015
8.							8.	
		MERRILL LYNO PROPERTY TY			ATTACHE	P	VARIOUS	VARIOUS
116,500.		121,992.					-5,492.	
		MERRILL LYNO PROPERTY TY			ATTACHE	Ρ	VARIOUS	VARIOUS
183,684.		145,624.					38,060.	
		MERRILL LYN			ATTACHE	Р		VARIOUS
34,843.		19,389.					15,454.	
TOTAL GAIN(L	oss)		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			61,890.	
			•					
								:
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Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

THE MULHOLLEM CRAVENS	FOUNDATION	20-3835578			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion			
	501(c)(3) taxable private foundation				
• •	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See			
General Rule					
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction tributions.				
Special Rules					
regulations under sect 13, 16a, or 16b, and t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 hat received from any one contributor, during the year, total contributions ne amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line s of the greater of (1)			
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re e year, total contributions of more than \$1,000 <i>exclusively</i> for religious, ch I purposes, or for the prevention of cruelty to children or animals. Complet	arıtable, scientific,			
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					
Caution. An organization that is 990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Sanswer "No" on Part IV, line 2, of its Form 990, or check the box on line beertify that it does not meet the filing requirements of Schedule B (Form 99	chedule B (Form 990, H of its Form 990-EZ or on its			

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 THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number 20-3835578

Part	Contributors (see instructions). Use duplicate copies of	oi Part i il additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192	\$ 50,000.	Person X Payroll Noncash
	CARLISLE, KY 40311		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192		Person X Payroll Noncash
	CARLISLE, KY 40311		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$10,031.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$4,858.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$ 5,243.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$11,182.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)

Name of organization THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number 20-3835578

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$9,230.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$10,140.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$16,125.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$14,503.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	PAUL MULHOLLEM, JR. & VALERIE CRAVENS P.O. BOX 192 CARLISLE, KY 40311	\$ 5,859. 	Person X Payroll X 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)

Name of organization THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number 20-3835578

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
3	256 SHS AUTODESK, INC.			
		\$_	16,250.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4	66 SHS BIO-RAD LABORATORIES, INC.			
		\$_	9,016.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
5	178 SHS DARDEN RESTAURANTS, INC.			
		\$_	10,349.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
6	578 SHS DR HORTON INC.			
		\$_	18,658.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
7	238 SHS GLOBAL PAYMENTS INC.			
		\$_	17,128.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
8	139 SHS HUNTINGTON INGALLS INDUSTRIES, INC.			
		\$_	17,887.	12/10/2015

Employer identification number

20-3835578

Part II	Noncash Property (see instructions). Use duplicate copies	or Fart in additional space is free	ueu.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	263 SHS INTUIT INC.		
		\$\$	12/10/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10	185 SHS NIKE, INC.		
		\$\$	12/10/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_11	58 SHS ULTA SALON, COSMETICS & FRAGRANCE, INC.		
		\$10,693.	12/10/2015
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(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

Employer identification number

20-3835578

	(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional additional copies.	ons completing Part e year. (Enter this inf	III, enter the total formation once S	
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
		(e) Transfo	-	
	Transferee's name, address, an	d ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transf nd ZIP + 4	-	nship of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Part I				
	Transferee's name, address, ar	(e) Transf nd ZIP + 4		nship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of grft	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transf	-	enship of transferor to transferee
	rransieree s manie, auuress, di	too date 1 of	realit	none of datasetor to datasetee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

NET INVESTMENT <u>INCOME</u>	2,464. 1,791. 441.	4,696.
REVENUE AND EXPENSES PER BOOKS	2,464. 1,791. 441.	4,696.
		TOTAL
	- U.S. INTEREST - OID	
DESCRIPTION	MERRILL LYNCH MERRILL LYNCH - 1 MERRILL LYNCH - 1	

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NET INVESTMENT INCOME	48,987.	48,987.
REVENUE AND EXPENSES PER BOOKS	48,987.	48,987.
		TOTAL
DESCRIPTION	MERRILL LYNCH	

FORM 990PF, PART I - OTHER INCOME

	NET	INVESTMENT	INCOME	1,486.
REVENUE	AND	EXPENSES	PER BOOKS	1,486.

1,486.

1,486.

TOTALS

DESCRIPTION MERRILL LYNCH

20-3835578

	CHARITABLE <u>PURPOSES</u>		
	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME		
	REVENUE AND EXPENSES PER BOOKS	48.	48.
FORM 990PF, PART I - LEGAL FEES			TOTALS
FORM 990PE, PAR	DESCRIPTION	MEYER CAPEL	

FEES
ACCOUNTING
PART
1 990PF,
FORM

CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,600.	2,600.
REVENUE AND EXPENSES PER BOOKS	2,600.	2,600.
		TOTALS
DESCRIPTION	PWC	

REVENUE AND

EXPENSES PER BOOKS

INVESTMENT NET

11,412.

MERRILL LYNCH FEES

DESCRIPTION

11,412.

TOTALS

11,412.

11,412.

FORM 990PF, PART I - TAXES

REVENUE AND

EXPENSES

<u>DESCRIPTION</u> <u>PER BOOKS</u>

FOREIGN TAXES 797.

NET INVESTMENT INCOME	150.	224.
REVENUE AND EXPENSES PER BOOKS 15.	10. 150. 74.	249.
DESCRIPTION ILLINOIS CHARITY BUREAU FUND	ILLINOIS SECRETARY OF STATE EMA INITIAL ANNUAL FEES ADR FEES	TOTALS

25.

15. 10.

CHARITABLE PURPOSES

1

ENDING BOOK VALUE FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS DESCRIPTION

ENDING ENDING ENDING EMU

20-3835578

88,515.

90,549.

90,549.

88,515.

US OBLIGATIONS TOTAL

MERRILL LYNCH

91674J 1435 4/4/2016 8:56:10 AM V 15-4.2F

DESCRIPTION	
DESCR	

MERRILL LYNCH - MUTUAL FUNDS MERRILL LYNCH - EQUITIES

ENDING BOOK VALUE

ENDING FMV

637,758. 755,140.

635,022. 800,696. 1,435,718.

TOTALS

1,392,898.

ATTACHMENT	11	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

NONDIVIDEND DISTRIBUTIONS 4.

TOTAL 4.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

PREMIUM AMORTIZATION 136. OTHER DECREASES 102.

TOTAL 238.

THE MULHOLLEM CRAVENS FOUNDATION

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

PAUL B. MULHOLLEM, JR.

DIRECTOR

PO BOX 192 C/O PAUL B MULHOLLEM JR. P.O. BOX 192

CARLISLE, KY 40311

VALERIE K. CRAVENS PO BOX 192 C/O PAUL B MULHOLLEM JR. P.O. BOX 192

DIRECTOR

CARLISLE, KY 40311

SYLVIA J. CRAVENS

DIRECTOR

141 KENTUCKY AVE.

LEXINGTON, KY 40502

ATTACHMENT 13

20-3835578

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THE MULHOLLEM CRAVENS FOUNDATION

PORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID D	DURING THE YEAR.		
			ATTACHMENT 14
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	FURPOSE OF GRANT OR CONTRIBUTION	·
COMMONWEALTH FUND FOR KET	NONE PC	TO FURTHER THE MISSION OF THE DONEE	
NATIONAL FFA FOUNDATION	NONE PC	TO FURIHER THE MISSION OF THE DONEE	
NICHOLAS COUNTY HISTORICAL SOCIETY	NONE PC	TO FURTHER THE MISSION OF THE DONEE	
PARIS-BOURBON COUNTY YMCA	NONE PC	TO FURTHER THE MISSION OF THE DONEE	
THE CARNEGIE CENTER	NONE PC	TO FURTHER THE MISSION OF THE DONEE	
CARLE CENTER FOR PHILANTHROPY	NONE PC	TO FURTHER THE MISSION OF THE DONEE	

50,000.

25,000

55,000.

50,000

10,000

10,000.

AMOUNT

20-3835578

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AID DURING
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CONTRIBUTIONS
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ATTACHMENT 14 (CONT'D)

RELATIONSHI RECIPIENT NAME AND ADDRESS KY STATE FFA FOUNDATION NONE HAITI PARTNERS A BETTER COMMUNITY AG FUND WUKY WUKY FC FC FC FC FC FC FC FC FC F	P TO SUBSTANTIAL CONTRIBUTOR AND TON STATUS OF RECIPIENT	TO FURTHER THE MISSION OF THE DONEE TO FURTHER THE MISSION OF THE DONEE TO FURTHER THE MISSION OF THE DONEE TO FURTHER THE MISSION OF THE DONEE TO FURTHER THE MISSION OF THE DONEE TO FURTHER THE MISSION OF THE DONEE	10,000. 10,000 3,000. 5,000
UNIVERSITY OF MINNESOTA NONE PC		TO FURTHER THE MISSION OF THE DONEE	100,000.

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ATTACHMENT 14 (CONT'D)		AMOUNT	2,500.	. 000.	3,000.	4,000.
		PURPOSE OF GRANT OR CONTRIBUTION	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE PC	NONE PC
FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR		RECIPIENT NAME AND ADDRESS.	KENTUCKY DOLL AND TOY MUSEUM	NICHOLAS COUNTY ANIMAL WELFARE SOCIETY	NICHOLAS COUNTY FFA CHAPTER	NICHOLAS COUNTY HIGH SCHOOL

367, 500

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 14

V 15-4.2F

8:56:10 AM

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