

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.

Open to Public Inspection

Dec	artme			social security numbers or				2013
inte	mal R	evenue Service Informa		rm 990-PF and its separate	<del></del>		s.gov/form990pf.	Open to Public Inspection
		ndar year 2015 or tax year beginning	<u></u>		, and endin	g		
Na	ame c	of foundation					A Employer identification	number
							F. C.	
_		E F HAYES TRUST  and street (or P O box number if mail is not or	delivered to etree	t addraga)	l Poor	om/suite	57-6084896	<del></del>
		•		t address)	Hoc	mvsuite	B Telephone number	<b>C</b> 2
		SALLY GILREATH I					864-895-47	
		town, state or province, country, and $ar{z}$	112 or toreign ( 29690	DOSTAI CODE			C If exemption application is p	ending, check here
				Initial return of a f	armar aublia abasi	<u> </u>	D 4 Farana anananahara	
G	CHec	k all that apply: Initial retu			ormer public chari	ıy	D 1. Foreign organizations	s, check here
		Address c		Amended return Name change			Foreign organizations me check here and attach co	eting the 85% test,
<u></u>	Chac			xempt private foundation			1	
<u>"</u> _	_	ection 4947(a)(1) nonexempt charitab		Other taxable private found	ation		E If private foundation sta under section 507(b)(1)	
LE		arket value of all assets at end of year		ing method: X Cash	Accrual			
		Part II, col. (c), line 16)		ther (specify)	7.007001		F If the foundation is in a under section 507(b)(1)	
	<b>-\$</b>			ımn (d) must be on cash	basis.)			(D), CHECK HEIE
_	art	Analysis of Revenue and Expense:	S	(a) Revenue and	(b) Net investi	ment	(c) Adjusted net	(d) Disbursements
ست		(The total of amounts in columns (b), (c), a necessarily equal the amounts in column	nd (d) may not (a) )	expenses per books	income	mont	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., rece					N/A	
	2	Check X If the foundation is not required						
	3	Interest on savings and temporary cash investments		4.		4.		STATEMENT 1
	4	Dividends and interest from securitie	s	6,199.	6,	199.		STATEMENT 2
	5a	Gross rents			-			
!	b	Net rental income or (loss)		-				
	6a	Net gain or (loss) from sale of assets not on	line 10	1,635.				
Ž	b	Gross sales price for all assets on line 8a 22	<u>2,309.</u>		•			
Revenue	7	Capital gain net income (from Part IV, line 2)	)		1,	635.		
<u>,</u> "	8	Net short-term capital gain			-			
	9	Income modifications Gross sales less returns				<u>.</u>		,
7	10a	and allowances				1	<u> </u>	
9	ľ	Less Cost of goods sold			<u>, i                                    </u>		<u> </u>	<del>- , , ,</del>
73		Gross profit or (loss)			-	-	-	
	11	Other income		7 000	-	000		
	12	Total. Add lines 1 through 11		7,838.	7,	838.		
	13	Compensation of officers, directors, trustee	s, etc	0.		0.		0.
	14	Other employee salaries and wages						
S	15	Pension plans, employee benefits Legal fees						
ns(	102		'МТ 3	2,350.	1	175.		1,175.
ğ	,	Other professional fees	MI J	2,330.	<u>+ /</u> _	1/5.	<del>-</del>	1,1/5.
and Administrative Expenses	17	Interest						
aŧj	18		мт 4	4,248.		0.	-	0.
istr	19	Depreciation and depletion		2,2200				
Ë	20	Occupancy						<del></del>
Ad	21	Travel, conferences, and meetings						
P	22	Printing and publications						
g	23		MT 5	3,658.	•	0.	-	0.
Operating	24	Total operating and administrative						
per		expenses. Add lines 13 through 23	<u> </u>	10,256.	1,	175.		1,175.
0	25	Contributions, gifts, grants paid	•_= = <sub>=</sub> - <sub>1</sub>    ]	17,500.				17,500.
	26	Total expenses and disbursements.	18 (7)					<u> </u>
		Add lines 24 and 25	) %:	27,756.	1,:	175.		18,675.
	27	Subtract line 26 from line 12:	4 (					
	a	Excess of revenue over expenses and disbu	rsements	<19,918.				
	b	Net investment income (if negative, ent	er -0-)		6,0	663.		<u> </u>
	C	Adjusted net income (if negative, enter-	o-ı l				N/A	

Part II Balance	Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	ear
	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-intere	st-bearing	537,305.	884.	884.
2 Savings and temp	orary cash investments			
3 Accounts receiva	ole 🟲			
	or doubtful accounts	]		
4 Pledges receivable				
1	or doubtful accounts		li li	
5 Grants receivable				
	om officers, directors, trustees, and other			
disqualified perso				
	. Γ			<del></del>
7 Other notes and loans rec		•		
	r doubtful accounts >			
9 Prepaid expenses				
9 Prepaid expenses	and deferred charges			
Toa mvestments o.c	. and state government obligations			
<b>b</b> Investments - cor				<del> </del>
c Investments - cor	porate bonds			
11 Investments - land, buildin	gs, and equipment: basis			
Less accumulated deprec	abon			
12 Investments - mo	tgage loans			
13 Investments - oth	er STMT 6	44.	516,547.	581,370.
14 Land, buildings, a	nd equipment: basis ►			
Less accumulated deprec	ation >			
15 Other assets (des	ribe <b>&gt;</b> )			
16 Total assets (to b	e completed by all filers - see the			
instructions. Also,	see page 1, item I)	537,349.	517,431.	582,254.
17 Accounts payable	*			
18 Grants payable	· · · · · · · · · · · · · · · · · · ·			
40 0.44	Ţ	*		
<u> </u>	rectors, trustees, and other disqualified persons	·		•
21 Mortgages and ot				
21 Mortgages and of	scribe >)			
22 Other habilities (ut		·		•
22 Tetal liabilities /2	dd lines 17 through 22)	0.		-
1	ollow SFAS 117, check here			
ו מ	s 24 through 26 and lines 30 and 31.			
24 Unrestricted				
25 Temporarily restri	<del></del>			
26 Permanently restri				
Foundations that	lo not follow SFAS 117, check here			
and complete line	·			
27 Capital stock, trus	principal, or current funds	0.	0.	
28 Paid-in or capital s	urplus, or land, bldg., and equipment fund	0.	0.	
25 Temporarily restricts 26 Permanently restricts 26 Permanently restricts 27 Foundations that and complete line 27 Capital stock, trus 28 Paid-in or capital stock 29 Retained earnings 30 Total net assets of	accumulated income, endowment, or other funds	537,349.	517,431.	
30 Total net assets o	fund balances	537,349.	517,431.	
31 Total liabilities ar	d net assets/fund balances	537,349.	517,431.	
Part III Analysis	of Changes in Net Assets or Fund Ba	lances		
rait III )a.yo.o				
Total net assets or fund	palances at beginning of year - Part II, column (a), line 3	0		
(must agree with end-of	year figure reported on prior year's return)		1	537,349.
Enter amount from Part			2	<19,918.
Other increases not incli			3	0.
Add lines 1, 2, and 3		· · · · · · · · · · · · · · · · · · ·	4	517,431.
Decreases not included	n line 2 (itemize)		5	0.
	palances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	517,431.
				Form <b>990-PF</b> (2015)

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7

8

24,929.

18,675.

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523521 11-24-15

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	art VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		500			Page 4
_		940	- see	ınsırı	uctio	nsj
18	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)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%					1	.33.
	of Part I, line 27b					
(	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of 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				0.
3	Add lines 1 and 2	3			1	<u>.33.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1	33.
6	Credits/Payments:					
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a					
t	Exempt foreign organizations - tax withheld at source 6b					
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	7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1	33.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
_11_	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or				
	distributed by the foundation in connection with the activities.					
С	c Did the foundation file Form 1120-POL for this year?			1c		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			-		
	managers. ▶ \$ Q .					
2	2 Has the foundation engaged in any activities that have not previously been reported to the IRS?					Х
	If "Yes," attach a detailed description of the activities.			,		
3	3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				'	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5		Х
	If "Yes," attach the statement required by General Instruction T.			<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				ļ	
	By language in the governing instrument, or			1		,
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		1		
	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	X	
•	the tree teams and a tree to the team of the team of the feet of the team of t			<b>_</b>		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	SC					
h	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)					
U				v		
9	of each state as required by General Instruction G? If "No," attach explanation  SEE STATEMENT 7  8b X					
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	uai		_		v
10				9		X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	L	

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

Part VII-B Statements Regarding Activities for Which	Form 4700 May Pa	Poguirod (	57-60841	396	Page 6
	Form 4/20 May Be	nequirea (contin	ued)	<del></del>	
5a During the year did the foundation pay or incur any amount to:	4045(-)\0	<b></b>	es X No		ĺ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es LaLINO	- {	İ
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi		es X No	1	İ
any voter registration drive?	-0		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose:		11	ן מאובבו פּּ		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		es X No		
4945(d)(4)(A)? (see instructions)	or advectional aurages or		ן מא באבו פּבּ	1	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		es X No	j	ł
the prevention of cruelty to children or animals?	dar the eventions described		ן מאובבו אי	ŀ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instr		in negulations	N/A	5b	ŀ
Organizations relying on a current notice regarding disaster assistance (see misi-	•			30	-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ained		1	l
expenditure responsibility for the grant?		N/A 🗀 Ye	es No		
If "Yes," attach the statement required by Regulations section 53.494		N/A	.5 140		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promiumo on		es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal henefit contract?	10	ا ۱۹۵ لخکا ۵۰	6ь	x
If "Yes" to 6b, file Form 8870.	personal benefit contract?		F		- A
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	□ v₄	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust		anagers. Highly		, · · ·	
Paid Employees, and Contractors	,		•		
1 List all officers, directors, trustees, foundation managers and their	compensation.	· · · · · · · · · · · · · · · · · · ·			
t-1 Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e)	Expense unt, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allo	wances
	1				
	]				_
SEE STATEMENT 8		0.	0.		0.
	4				
	4				
	-	-	<u> </u>		
	1	]			
	4				
				<u> </u>	
	4				
	-				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1\ If need	enter "NONE "		<u>i</u>	
2 Compensation of five nignest-paid employees (other than those inc	(b) Title, and average	, enter "NONE."	(d) Contributions to	(a)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	accou	unt, other
NONE	devoted to position		compensation	allo	wances
NONE	-				
	· · · · · · · · ·	<del>                                  </del>		-	
	-				
	· <del>-</del> · · · · · · · · · · · · · · · · · · ·	<del> </del> -			
	1				
		-		-	
	-				
			<del></del>	<del> </del>	
	1				
Total number of other ampleyees paid over \$50,000	<u> </u>	<u>ı</u>			0
Total number of other employees paid over \$50,000					

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>	_	
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 statis	stical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pro  N/A	duced, etc.	Lapenses
24/22		
2		
3		<del></del>
4		
Don't IV D. O		
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.	Amount
1 <u>N/A</u>		
		<del>_</del>
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		Λ

_	m 990-PF (2015) DOE F HALES TRUST	5/-	-6084896 Page 6
<u>F</u>	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	534,916.
b	Average of monthly cash balances	1b	23,658.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	558,574.
е	Reduction claimed for blockage or other factors reported on lines 1a and		· -
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	558,574.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,379.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	550,195.
6	Minimum investment return. Enter 5% of line 5	6	27,510.
P	<b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	27,510.
2a			2,75101
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	133.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	27,377.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	27,377.
6	Deduction from distributable amount (see instructions)		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	27,377.
<u>-</u>	art XII Qualifying Distributions (see instructions)	· ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	18,675.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	18,675.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
-	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,675.

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

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4940(e) reduction of tax in those years.

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
1 Distributable amount for 2015 from Part XI, line 7				27,377.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			17,509.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:		<b>U•</b>		
<b>a</b> From 2010				
<b>b</b> From 2011				
c From 2012			İ	
d From 2013				
e From 2014				
f Total of lines 3a through e	0.	,		<del></del>
4 Qualifying distributions for 2015 from			]	
Part XII, line 4: ►\$ 18,675.				
a Applied to 2014, but not more than line 2a			17,509.	<del></del>
<b>b</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	-	<u> </u>		1,166.
e Remaining amount distributed out of corpus	0.		·	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:	-			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				,
line 4b from line 2b		0.		•
c Enter the amount of prior years'				<u> </u>
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.	` <u>.</u>	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				26,211.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
B Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016				
Subtract lines 7 and 8 from line 6a	0.			
Analysis of line 9:				
a Excess from 2011				
<b>b</b> Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				
				Farm 000-DE (2015)

	HAYES TRUST			57-60	84896 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of		. , .			
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	<b>▶</b> L		
<b>b</b> Check box to indicate whether the found	dation is a private operati	ng foundation described	in section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a		<u> </u>	<u> </u>		
c Qualifying distributions from Part XII,				<del>                                     </del>	
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				· · · · · · · · · · · · · · · · · · ·	
, ,					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					<del></del>
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	•				
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt				1	
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	-				
an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:		<del> </del>		
a List any managers of the foundation who	•	than 2% of the total cont	ributions received by the	foundation before the closi	a of any tay
year (but only if they have contributed m			noutions received by the		, or uny tax
NONE					
b List any managers of the foundation who	n own 10% or more of the	e stock of a cornoration (	or an equally large portion	n of the ownership of a par	rtnerchin or
other entity) of which the foundation has			or an equally large portion	in of the ownership of a pai	thership of
NONE	•				
2 Information Regarding Contribution	on Grant Gift Loan	Sabalarahin ata Dr			
Check here ► X if the foundation of				at account upoplicated requi	ata far funda If
the foundation makes gifts, grants, etc. (					
<del></del>	-				<u>.                                    </u>
a The name, address, and telephone numb	JEI OI E-IIIAII AUGIESS OI II	ie person to whom appir	cations should be addres	seu.	
b The form in which applications should be	e submitted and informat	ion and materials they sh	ould include.		
applications should be					
c Any submission deadlines:					
A A		la-sas about 11 C 11	l		
d Any restrictions or limitations on awards	, such as by geographica	i areas, charitable fields,	kinas of institutions, or o	iner factors:	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment 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 a Paid during the year N/A PUBLIC CHARITY BUILDING FUND LOCUST HILL BAPTIST CHURCH PO BOX 759 7,500. TRAVELERS REST. SC 29690 NORTH GREENVILLE UNIVERSITY-JOYFUL N/A PUBLIC CHARITY THE MINISTRY OF JOYFUL SOUND SOUND PO BOX 1892 TIGERVILLE, SC 29688 10,000, Total **▶** 3a 17,500. **b** Approved for future payment NONE Total

## Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		Excluded by 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		Code				
a					<del></del>		
b	1 1		+				
C					<del></del>		
d	-						
e	_	<del></del>					
f	_		$\perp \perp$				
g Fees and contracts from government agencies	\		$\rightarrow$				
2 Membership dues and assessments		<del></del>					
3 Interest on savings and temporary cash	- 1 i			_			
investments		<del></del>	14	4.	·		
4 Dividends and interest from securities	<u> </u>	<del></del>	14	6,199.			
5 Net rental income or (loss) from real estate:	<u> </u>						
a Debt-financed property		<del> </del>	1				
b Not debt-financed property			_				
6 Net rental income or (loss) from personal	- }		} {				
property							
7 Other investment income		··					
8 Gain or (loss) from sales of assets other			1 1				
than inventory		<del></del>	18	1,635.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a	_						
b			ļl				
C	_				···		
d			<u> </u>				
e	_						
2 Subtotal. Add columns (b), (d), and (e)	- :	0	<u>.                                      </u>	7,838.	0.		
3 Total. Add line 12, columns (b), (d), and (e)				13	7,838.		
See worksheet in line 13 instructions to verify calculations.				<del>-</del>			
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt	Purposes			
Line No. Explain below how each activity for which in the foundation's exempt purposes (other than			A contribu	ted importantly to the accomp	olishment of		
the foundation's exempt purposes (other that	an by proviolity ful	us for such purposes).		<del></del>	<del></del>		
				<del></del>	<del></del>		
		<u> </u>					
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	<del></del>						
	<del></del>	<del></del>					
	<del></del>	<del></del>		<del></del>			
	_ <del>_</del> .			<del></del>			
1							

	(a) Name of organization	(b) Type of organization		(c) Description of re	elationship
	N/A				
		<del> </del>			
Sign Here	r penalties of perjury, I declare that have examined this return, include neiter, his true, correct, and complete Declaration of preparer (other the neiter). The true of officer or trustee			has any knowledge	May the IRS discuss this return with the preparer shown below (see instr.)?  X Yes N
Paid Preparer Use Only	Print/Nype preparer's name	4 D(0000ar)	Date 5/3/16 LC	Check if self- employed Firm's EIN ▶ 5	PTIN P00066636 7-0381582
	Firm's address ► PO BOX 6286  GREENVILLE, SC 29	9606-6286		Phone no. 86	4-242-3370

**JOE F. HAYES TRUST** 

TIN: 57-6084896

**TAX YEAR ENDING: DECEMBER 31, 2015** 

# EXHIBIT I - ATTACHMENT TO FORM 990-PF, PART XII, LINE 3b

THE FOLLOWING IS A LIST OF THE DISTRIBUTABLE AMOUNTS DETERMINED UNDER IRC SEC. 4942(d) FOR ALL PAST TAX YEARS IN THE TAXPAYER'S START UP PERIOD (FULL PAYMENT PERIOD IS NOT APPLICABLE).

DISTRIBUTABLE AMOUNT
21,463
16,728
14,563
15,751
15,552
17,227
18,639
18,226

# **JOE F. HAYES TRUST**

TIN: 57-6084896

**TAX YEAR ENDING: DECEMBER 31, 2015** 

# EXHIBIT II - ATTACHMENT TO FORM 990-PF, PART XII, LINE 3b

THE FOLLOWING IS A LIST OF THE ACTUAL PAYMENTS IN CASH OR ITS EQUIVALENT FOR EXEMPT PURPOSES DURING EACH TAX YEAR IN THE TAXPAYER'S START UP PERIOD (FULL PAYMENT PERIOD IS NOT APPLICABLE).

TAX YEAR	CASH PAYMENTS
2007	-0-
2008	250 (Plus \$25,000 set aside to be distributed within 5 years)
2008 SET ASIDE PAID IN 2009	10,000
2008 SET ASIDE PAID IN 2010	5,000
2008 SET ASIDE PAID IN 2011	5,000
2008 SET ASIDE PAID IN 2012	5,000
2009	14,041
2010	15,075
2011	15,264
2012	14,927
2013	16,770
2014	18,175
2015	18,675

FORM 990-PF INTERES	ET ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1		
SOURCE	REVE	(A) REVENUE NET II PER BOOKS II		(C) ADJUSTED NET INCOME			
WELLS FARGO ADVISORS		4.	4.				
TOTAL TO PART I, LINE 3			4.	4.			
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SE	CURITIES	STATEMENT 2		
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENU				
WELLS FARGO ADVISORS	6,199	•	0. 6,1	99. 6,19	99.		
ro part i, line 4 =	6,199	•	0. 6,1	99. 6,19	99.		
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
ACCOUNTING FEES		2,350.	1,17	5.	1,175.		
O FORM 990-PF, PG 1	., LN 16B	2,350.	1,17	5.	1,175.		
ORM 990-PF		TAX	ES		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM	(C) - ADJUSTED E NET INCOM			
EXCISE TAX BASED ON INVESTMENT INCOME	_	4,248.	(	· · · · · · · · · · · · · · · · · · ·	0.		
O FORM 990-PF, PG 1		4,248.	(	).	0.		

OTHER EXPENSES				STATEMENT 5		
	NET IN	EST-	(C) ADJUSTED NET INCOM	<del></del>		
3,65	58.	0.		0.		
3,65	8.	0.		0.		
	VALUATION					
	METHOD	BOO	OK VALUE	FAIR MARKET VALUE		
IARKET	COST COST	BO0	0K VALUE 44. 516,503.			
	(A) EXPENSES PER BOOK 3,65 3,65	(A) (B) EXPENSES NET INV PER BOOKS MENT IN  3,658.	(A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  3,658. 0.  OTHER INVESTMENTS	(A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME NET INCOM  3,658. 0.  OTHER INVESTMENTS		

# **EXPLANATION**

10 LONGER REQUIRED IN SC

FORM 990-PF	PART VIII - TRUSTEES	STATEMENT 8			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOE F. HAYES FRAVELERS REST, SC		TRUSTEE/CHAIRI	PERSON 0.	0.	0.
ELEANOR S. HAYES FRAVELERS REST, SC		TRUSTEE 0.00	0.	0.	0.
JOE F. HAYES, JR FIGERVILLE, SC		TRUSTEE 0.00	0.	0.	0.
THOMAS R. HAYES TRAVELERS REST, SC		TRUSTEE 0.00	0.	0.	0.
OAVID C. HAYES  MONROE, NC		TRUSTEE 0.00	0.	0.	0.
TOTALS INCLUDED ON	990-PF, PAG	GE 6, PART VIII	0.	0.	0.