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

2015

Department of the Treasury
Internal Revenue Service

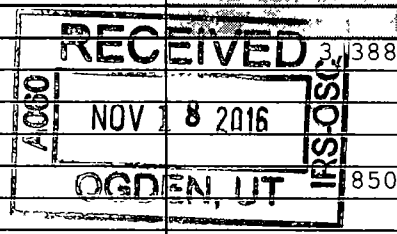
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Open to Public Inspection

For calendar year 2015 or tax year beginning _____, **2015, and ending** _____, **20**

Name of foundation CARRIE WILSON TRUST		A Employer identification number 59-6219246
Number and street (or P.O. box number if mail is not delivered to street address) P O BOX 150502	Room/suite	B Telephone number (see instructions) (615) 297-9049
City or town, state or province, country, and ZIP or foreign postal code NASHVILLE TN 37215		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply:		D 1. Foreign organizations, check here <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 705,238	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	
		(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temp. cash investments				
	4 Dividends and interest from securities	19,975	19,975		
	5a Gross rents	18,000	18,000		
	b Net rental income or (loss) 18,000				
	6a Net gain/(loss) from sale of assets not on line 10	484			
	b Gross sales price for all assets on line 6a 484				
	7 Capital gain net income (from Part IV, line 2)		484		
	8 Net short-term capital gain			0	
	9 Income modifications			0	
	10a Gross sales less returns, & allowances 0				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)			0		
12 Total. Add lines 1 through 11	38,459	38,459			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	6,775	3,387		3,388
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) # 1 850	850			
	c Other professional fees (attach schedule) # 2 3,193	3,193	3,193		850
	17 Interest				
	18 Taxes (attach schedule) (see instructions) # 3 1,058	1,058			645
	19 Depreciation (attach sch.) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) # 4 284	284	284		
	24 Total operating and administrative expenses. Add lines 13 through 23	12,160	6,864	0	4,883
	25 Contributions, gifts, grants paid	17,900			17,900
26 Total exp. & disbursements. Add lines 24 and 25	30,060	6,864	0	22,783	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	8,399				
b Net investment income (if neg., enter -0-)		31,595			
c Adjusted net income (if neg., enter -0-)					



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See inst.)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash -- non-interest-bearing			
	2	Savings and temporary cash investments	73,886	84,323	84,323
	3	Accounts receivable			
		Less: allowance for doubtful accts.			
	4	Pledges receivable			
		Less: allowance for doubtful accts.			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments -- U.S. and state gov. obligations (attach schedule)	2,375	1,869	2,101
	b	Investments -- corporate stock (attach schedule)	157,384	157,084	424,698
	c	Investments -- corporate bonds (attach schedule)			
	11	Investments -- land, buildings, and equipment basis	140,706		
	Less accumulated depreciation (attach schedule)	140,706	140,706	194,116	
12	Investments -- mortgage loans				
13	Investments -- other (attach schedule)				
14	Land, buildings, and equipment basis				
	Less accumulated depreciation (attach schedule)				
15	Other assets (describe)				
16	Total assets (to be completed by all filers -- see the instructions. Also, see page 1, item I)	374,351	383,982	705,238	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	233,645	243,276	
28	Paid-in or capital surplus, or land, bldg., and equipment fund	140,706	140,706		
29	Retained earnings, accumulated income, endowment, or other funds				
30	Total net assets or fund balances (see instructions)	374,351	383,982		
31	Total liabilities and net assets/fund balances (see instructions)	374,351	383,982		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year -- Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	374,351
2	Enter amount from Part I, line 27a	2	8,399
3	Other increases not included in line 2 (itemize) SEE ATTACHMENT #8	3	1,232
4	Add lines 1, 2, and 3	4	383,982
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) -- Part II, column (b), line 30	6	383,982

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P -- Purchase D -- Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	SEE ATTACHMENT #9			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	[If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	484
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014			
2013			
2012			
2011			
2010			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period -- divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -- see instructions)

Table with 11 rows for excise tax calculations. Includes sub-sections 1a through 11. Values include 632, 0, 425, and 207.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes sub-sections 1a through 10. Includes 'Yes' and 'No' columns. Values include N/A, 0, and X.

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Yes	No
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ▶ N/A				
14	The books are in care of ▶ SEE ATTACHMENT #10	Telephone no. ▶		
Located at ▶		ZIP+4 ▶		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -- Check here	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "yes," enter the name of the foreign country ▶				

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		
1b	Organizations relying on a current notice regarding disaster assistance check here		X
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?		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes," list the years ▶ 20 <u>14</u> , 20 __, 20 __, 20 __			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement -- see instructions.)		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 __, 20 __, 20 __, 20 __		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes No
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 pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and avg. hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred comp.	(e) Expense account, other allowances
SEE ATTACHMENT #11				

2 Compensation of five highest-paid employees (other than those included on line 1 -- see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE ATTACHMENT #12		

Total number of others receiving over \$50,000 for professional services ▶

Part IX-A Summary of Direct Charitable Activities

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	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. 3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	537,759
b	Average of monthly cash balances	1b	12,880
c	Fair market value of all other assets (see instructions)	1c	194,116
d	Total (add lines 1a, b, and c)	1d	744,755
e	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	
3	Subtract line 2 from line 1d	3	744,755
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) #13	4	14,895
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	729,860
6	Minimum investment return. Enter 5% of line 5	6	36,493

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.)

1	Minimum investment return from Part X, line 6	1	36,493
2a	Tax on investment income for 2015 from Part VI, line 5 632	2a	632
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	632
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35,861
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	35,861
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	35,861

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. -- total from Part I, column (d), line 26	1a	22,783
b	Program-related investments -- total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	22,783
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	22,783

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				35,861
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			29,633	
b Total for prior years 20__ , 20__ , 20__				
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <u>22,783</u>				
a Applied to 2014, but not more than line 2a			22,783	
b Applied to undistributed income of prior years (Election required -- see instructions)				
c Treated as distributions out of corpus (Election required -- see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus				
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				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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				
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			6,850	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				35,861
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 applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9.				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling ▶					
b Check box to indicate whether the foundation is a private operating foundation described in section			<input type="checkbox"/> 4942(j)(3) or	<input type="checkbox"/> 4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a					0
c Qualifying distributions from Part XII, line 4 for each year listed					0
d Amounts included in line 2c not used directly for active conduct exempt act.					0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					0
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test -- enter:					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test -- enter 2/3 of min. investment return shown in Part X, line 6 for each year listed					0
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)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)

- 1 Information Regarding Foundation Managers:**
- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
- NONE
- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
- NONE
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
- Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
- a** The name, address, and telephone number or e-mail of the person to whom applications should be addressed:
- SEE ATTACHMENT # 14
- b** The form in which applications should be submitted and information and materials they should include.
- c** Any submission deadlines:
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE ATTACHMENT #15				
Total				17,900
b Approved for future payment				
Total				▶ 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Excl. code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments . .					
4 Dividends and interest from securities			14	19,975	
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property			16	18,000	
6 Net rental income or (loss) from personal property. . . .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	484	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)			0	38,459	0
13 Total. Add line 12, columns (b), (d), and (e)					13 38,459

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash		X
	(2) Other assets		X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here *Norman Randolph Parry* 10-28-2016
 Signature of officer or trustee Date
 Title: PRESIDENT

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶ HRB TAX GROUP INC	JOYCE HARPER	10-27-16		P00013611
Firm's address ▶ 9175 CAROTHERS PKWY	Firm's EIN ▶ 431871840		Phone no. 6157719521	

2015 DETAIL STATEMENTS

CARRIE WILSON TRUST
59-6219246

PAGE 1

STATEMENT #1 - DIVIDENDS (990-PF PG 1 LINE 4(B))

SCHWAB DIVIDENDS
MERRILL LYNCH OID INTEREST

TOTAL CARRIED TO 990-PF PG 1 LINE 4(B)

2015 FORM 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning , and ending

Name of Organization

Employer Identification Number

CARRIE WILSON TRUST

59-6219246

Accounting Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
TAX PREPARATION	850			850
Total:	850			850

2015 FORM 990 SCHEDULE OF OTHER PROFESSIONAL FEES

ATTACHMENT 2: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16C

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

CARRIE WILSON TRUST

59-6219246

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
ADVISORY FEES	3,193	3,193		
Total:	3,193	3,193		

2015 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT 3: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
REAL ESTATE	625			625
ANNUAL REPORT	20			20
EXCISE	413			
Total:	1,058			645

2015 FORM 990 OTHER EXPENSES SCHEDULE

ATTACHMENT 4: PAGE 1 990-PF PAGE 1, PART I, LINE 23

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity
BANK FEES	284	284		
Total:	284	284		

2015 FORM 990 SCHEDULE OF INVESTMENTS - GOVERNMENT OBLIGATIONS

ATTACHMENT 5: PAGE 1 - 990-PF PAGE 2, PART II, LINE 10A

OPEN TO PUBLIC INSPECTION For calendar year 2015, or tax period beginning , and ending

Name of Organization: CARRIE WILSON TRUST
 Employer Identification Number: 59-6219246

Description	Cost	FMV at End of Year	Book Value	Fair Market Value
U.S. Government Obligations			1,869	2,101
State and Municipal Government Obligations				
Total U.S. and State Government Obligations			1,869	2,101

2015 FORM 990 SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

ATTACHMENT 6: PAGE 1 - 990-PF PAGE 2, PART II, LINE 10B

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Description of Property	Cost	FMV at Year End	Book Value	Fair Market Value
4443 AT&T	X		48,084	152,884
11 ALCATEL LUCENT	X		713	42
3660 CSX	X		2,054	94,977
20 FAIRPOINT	X		/	
261 FRONTIER	X		793	1,219
635 ISHARES US PRD	X		24,959	24,670
400 MERRILL LYNCH	X		10,004	10,048
700 NHI	X		18,422	42,609
1037 POWERSHS EXCH	X		15,004	15,503
1238 VERIZON	X		21,217	57,220
312 VODAFONE	X		825	10,065
346 WELLS FARGO	X		15,009	15,461
Total:			157,084	424,698

Total:

157,084

424,698

2015 FORM 990 SCHEDULE OF INVESTMENT LAND, BUILDINGS & EQUIPMENT

ATTACHMENT 7: PAGE 1 - 990-PF PAGE 2, PART II, LINE 11

OPEN TO PUBLIC
INSPECTION

For Calendar year 2015, or tax year period beginning

and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Category or Description of Property	Cost or Other Basis	Accumulated Depreciation	End of Year Book Value	Ending FML (990-PF Only)
LAND	140,706		140,706	194,116
Total:	140,706		140,706	194,116

2015 FORM 990 SCHEDULE OF OTHER INCREASES

ATTACHMENT 8: PAGE 1 - 990- PF PAGE 2, PART III, LINE 3

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Description of Increase	Total Amount
ACCOUNTING ASSET ADJUSTMENT	1,232
Total:	1,232

2015 FORM 990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ATTACHMENT 9: PAGE 1 - 990-PF PAGE 3, PART IV, LINE 1

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

	(a) List and Describe the Kind(s) of Property Sold (e.g., Real Estate, 2-story Brick Warehouse; or Common Stock, 200 shs. MLC Co.)	(b) How Acquired P -- Purchase D -- Donation	(c) Date Acquired (mo., day, yr.)	(d) Date Sold (mo., day, yr.)
1 2	FANNIE MAE RETURN OF CAPITAL CAPITAL GAIN DISTRIBUTION	P		
	(e) Gross Sales Price	(f) Depreciation Allowed (or allowable)	(g) Cost or Other Basis Plus Expense of Sale	(h) Gain or (loss) (e) Plus (f) Minus (g)
1 2	484			484
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(l) Gains (Col. (h) Gain Minus Col. (k), But Not Less Than -0-) or Losses (from col. (h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted Basis as of 12/31/69	(k) Excess if Col. (i) Over Col. (j), if Any	
1 2				484

2015 FORM 990 BOOKS ARE IN CARE OF

ATTACHMENT 10 - 990-PF PAGE 5, PART VII-A, LINE 14

OPEN TO PUBLIC INSPECTION For calendar year 2014, or tax period beginning , and ending

Name of Organization CARRIE WILSON TRUST Employer Identification Number 59-6219246

Part VII-A - Line 14

Individual Name NORMAN RANDOLPH PARKS

or Business Name

Street Address ... 1606 18TH AVE S APT 20

U.S. Address

Zip code 37212 City NASHVILLE State TN

Foreign Address

City

Province or State

Country ...

Postal code

Phone Number (615) 297-9049

Fax Number

2015 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 11: PAGE 1 - 990-PF PAGE 6, PART VIII

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

(A) Name and Address	(B) Title and Average Hrs. per Week	(C) Compensation (If not paid, enter 0)	(D) Cont. to Employee Ben. Plans & Def. Comp.	(E) Expense Account & Other Allowances
NORMAN RANDOLPH PARKS 1606 18TH AVE S APT 20 NASHVILLE, TN 37215	PRESIDENT			
JUDITH ELAINE PARKS 1109 GRAYBAR LANE NASHVILLE, TN 37204	SECRETARY/TRE			

**2015 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID
INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES**

ATTACHMENT 12: PAGE 1 990-PF PAGE 6, PART VIII, LINE 2

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

CARRIE WILSON TRUST

59-6219246

Part VIII Compensation of the Five Highest Paid Independent Contractors for Professional Services

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

2015 FORM 990 CASH DEEMED CHARITABLE EXPLANATION

ATTACHMENT 13: PAGE 1 - 990-PF PAGE 8, PART X, LINE 4

OPEN TO PUBLIC INSPECTION For calendar year 2015, or tax period beginning , and ending

Name of Organization CARRIE WILSON TRUST Employer Identification Number 59-6219246

Explanation
DUE TO CURCUMSTANCES A LARGER AMOUNT IS NEEDED TO MAKE THE NECESSARY DISTRIBUTIONS

2015 FORM 990 APPLICATION SUBMISSION INFORMATION

ATTACHMENT 14: PAGE 1 990-PF PAGE 10, PART XV, LINE 2
 OPEN TO PUBLIC

For Calendar year 2015, or tax year period beginning

and ending

Name of Organization		Employer Identification Number		
CARRIE WILSON TRUST		59-6219246		
Name	Phone Number or E-mail	Info and Materials Included	Submission Deadlines	Restrictions on Awards
NORMAN RANDOLPH PARK PO BOX 150502 NASHVILLE TN 37215	615-297-9049	NO SPECIFICATIONS	NO DEADLINES	CHARITABLE AND RELIGIOUS ACTIVITIES OF CHURCHES OF CHRIST

2015 FORM 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 15: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PUBLIC
INSPECTION

For calendar year 2015, or tax period beginning

, and ending

Name of Organization

CARRIE WILSON TRUST

Employer Identification Number

59-6219246

Recipient Name and Address (home or business)	If Recipient is an Individual, Show any Relationship to Any Foundation Manager or Substantial Contributor	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
ACKLEN AVE CHURCH OF CHRIST 900 ACKLEN AVE CHURCH OF CHRIST NASHVILLE TN 37203	NONE	5 - PC	ASSISTANCE FOR THOSE IN NEED	12,900
HEALTHY FAMILIES 900 ACKLEN AVE NASHVILLE TN 37203	NONE	5 - PC	HELP FOR FAMILIES IN NEED	5,000
Total:				17,900