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Form 990-PF

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

2015

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection 2015, and ending For calendar year 2015 or tax year beginning 20 A Employer identification number Name of foundation ELLA RAE RUPP PARKS MEMORIAL FUND 62-1638744 B Telephone number (see instructions) Room/suite Number and street (or P.O. box number if mail is not delivered to street address) (615)297-9049 PO BOX 150502 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, NASHVILLE TN 37215 check here G Check all that apply. Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% Address change Name change test, check here and attach computation 🕨 If private foundation status was X Section 501(c)(3) exempt private foundation H Check type of organization: terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of J Accounting method X Cash Accrual If the foundation is in a 60-month year (from Part II, col. (c), line 16) Other (specify) termination under section 153,867 (Part I, column (d) must be on cash basis.) **▶** \$ 507(b)(1)(B), check here · · Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (b) Net investment (c) Adjusted net for chantable expenses per (c), and (d) may not necessarily equal the purposes income income books (cash basis only) amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule).

Check Lift the foundation is not required to attach Sch. B 2 3 interest on savings and temp, cash investments $6,\overline{105}$ 6,105 4 Dividends and interest from securities 5a Gross rents...... b Net rental income or (loss) Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for Capital gain net income (from Part IV, line 2) . . Net short-term capital gain Income modifications . . 10a Gross sales less 100 returns, & allowances
b Less Cost of
goods sold c Gross profit or (loss) (attach schedule) Other income (attach schedule) 6,105 6,105 Total. Add lines 1 through 11..... 12 Compensation of officers, directors, trustees, etc.... 1,375 687 14 Other employee salaries and wages · · · Pension plans, employee benefits ... 15 16a Legal fees (attach schedule)..... 700 700 **b** Accounting fees (attach schedule) #1. 950 c Other professional fees (attach sche € 2) Operating and Administrative Interest 20 20 Taxes (attach schedule) (see instructions 3 Depreciation (attach sch.) and depletion 20 Occupancy..... 21 Travel, conferences, and meetings.... 22 Printing and publications 6. <u>65</u> 23 Other expenses (attach schedule) #4. Total operating and administrative 1,637 3,110 1,473 expenses. Add lines 13 through 23 Contributions, gifts, grants paid . Total exp. & disbursements. 3,1101,637 1,473Add lines 24 and 25 1180 Subtract line 26 from line 12. 27 2**,**995 Excess of revenue over expenses and disbursements b Net investment income (if neg, enter ~0-) 4,468 c Adjusted net income (if neg., enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

Б.	-a- 11	Delenes Chaste description solumn should be for	Degining of year	End	ı yeai		
ع ۱۲	irt II	Balance Sheets description column should be for end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash non-interest-bearing		6,782	6,782		
	2	Savings and temporary cash investments	21,735	17,948	17,948		
	3	Accounts receivable ▶			naka kalendara dan ka		
		Less. allowance for doubtful accts. ▶					
	4	Pledges receivable ▶					
		Less ⁻ allowance for doubtful accts.		a a subsequent property and a service of the servic	- contract on the second secon		
	5	Grants receivable			·		
	6	Receivables due from officers, directors, trustees, and other			- ·-		
	7	disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts		7.74			
S	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments U.S. and state govt. obligations (attach schedule)					
	ь	Investments corporate stock (attach schedule)#5.	82,396	82,396	129,13		
	1	Investments corporate bonds (attach schedule)	·				
	11	Investments — land, buildings, and equipment basis					
	12	Investments mortgage loans					
	13	Investments other (attach schedule)					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation	~ ************************************		1 The said of the state of the said of the		
	15	(attach schedule) · · · · · · · · · · · · · · · · · · ·					
	16	Total assets (to be completed by all filers see the					
		Instructions. Also, see page 1, item i)	104,131	107,126	153,867		
	17	Accounts payable and accrued expenses		2017220	100,00		
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ap	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe					
	I			-			
	23	Total liabilities (add lines 17 through 22)	0	U			
		Foundations that follow SFAS 117, check here					
Š		and complete lines 24 through 26 and lines 30 and 31.					
alances	24	Unrestricted	ļ				
Ba	25	Temporarily restricted					
Net Assets or Fund B	26	Permanently restricted		··-			
교		Foundations that do not follow SFAS 117, check here ▶⊠					
ō		and complete lines 27 through 31.					
ets	27	Capital stock, trust principal, or current funds					
Ass	28	Paid-in or capital surplus, or land, bldg, and equipment fund	104,131	107,126			
ë	29	Retained earnings, accumulated income, endowment, or other funds					
Z	30	Total net assets or fund balances (see instructions)	104,131	107,126			
	31	Total liabilities and net assets/fund balances (see instructions)	104,131	107,126			
Pa	art III	Analysis of Changes in Net Assets or Fund Ba	lances				
1	Tota	net assets or fund balances at beginning of year Part II, colum	nn (a), line 30 (must agree	with			
	end-	-of-year figure reported on pnor year's return)			104,131		
2	Ente	r amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·		2	2,995		
3	Othe	er increases not included in line 2 (itemize)		3			
4	Add	lines 1, 2, and 3		4	107,126		
5	Decr	reases not included in line 2 (itemize)		5			
6		net assets or fund balances at end of year (line 4 minus line 5)	Part II column (h) line		107.126		

	and Losses for Tax on Inv			(-) D-:	(4) 5 : 11
· •	the kınd(s) of property sold (e.g., rea ouse; or common stock, 200 shs. M		(b) How acquired P Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
2-Story brick wareri	ouse, or common stock, 200 shs. W	LC Co.)	D Donation	(110., day, yr.)	(110., day, yr.)
b					
C		 			
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper			n or (loss) f) minus (g)
а					
b					
C			·		
<u>d</u>					
<u>e</u>	<u> </u>				
Complete only for assets sho	owing gain in column (h) and owned				. (h) gain minus
(i) F.M.V. as of 12/31/69	M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any		1	less than -0-) or rom col. (h))	
a					
b					
<u>c</u>					
<u>d</u>		 			·····
e	F:				
2 Capital gain net income or (r		also enter ın Part I, I , enter -0- ın Part I,		2	
Not short-term capital gain c	or (loss) as defined in sections 1222(me /		
· -	ne 8, column (c) (see instructions). If		7		
		(1055),	•	1 1	
			ſ	2	
art V Qualification or optional use by domestic pr	Under Section 4940(e) for tivate foundations subject to the sective this part blank.				
Part V Qualification for optional use by domestic presection 4940(d)(2) applies, lead as the foundation liable for the	Under Section 4940(e) for ivate foundations subject to the section 4942 tax on the distributable	tion 4940(a) tax on r e amount of any yea	net investment inco ar in the base perio	ment Income	∑ Yes □
Part V Qualification for optional use by domestic presection 4940(d)(2) applies, lead as the foundation liable for the "Yes," the foundation does not	Under Section 4940(e) for example to the section we this part blank.	tion 4940(a) tax on r e amount of any yea ot complete this par	net investment inco ar in the base perio t.	ment Income me.)	X Yes
Part V Qualification for optional use by domestic prosection 4940(d)(2) applies, lead as the foundation liable for the "Yes," the foundation does not	Under Section 4940(e) for avate foundations subject to the section 4942 tax on the distributable equalify under section 4940(e). Do n	tion 4940(a) tax on r e amount of any yea ot complete this par	net investment inco ar in the base perio t.	ment Income me.)	(d)
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1 (4)	Excise 18x based on investment income (section 4340(a),	<u>, 4340(D), 43</u>	140(e), 01 4340		3CC III	3ti uc	ions		
`1a	Exempt operating foundations described in section 4940(d)(2), check here								
	Date of ruling or determination letter: (attach copy of letter		ry see inst.	.)[. Buck	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				1	. (w.i.)683	.\w.&.	Mark and and	85
	here and enter 1% of Part I, line 27b			1		1.0			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	enter 4%	-	┙╽	April 100 April				MOLTIL.
_	of Part I, line 12, col. (b).				_				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	-	*		2				
3	Add lines 1 and 2				3	ļ			89
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	-	•		4				89
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter the state of	er -u	• • • • • • • • • • • • • • • • • • • •	• •	5	. ¥	r as S	خدر ا	03
6	Credits/Payments	6-							
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a			1		W.		(4) ¹³
b	Exempt foreign organizations — tax withheld at source	6b		60		14.5			
C	Tax paid with application for extension of time to file (Form 8868)			-00			4.7		
d -	Backup withholding erroneously withheld				357% (C	and M			آذ للأسد 60
7	Total credits and payments. Add lines 6a through 6d			• •	7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2:				8	L			29
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount of line 10 to be. Credited to 2016 estimated tax	overpaid	Refunded	.	10	 			
11 Par	t VII-A Statements Regarding Activities	· · · · · · · · · · · · · · · · · · ·	neranaea	_	- ' '	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or I	local logislati	on or did it par	ticin	ate or		1128	Yes	No
10	Intervene in any political campaign?						18	163	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political					• • • •	ıa_		
U	definition)?		-		1 1116		1b .		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and				hed		\$ \Q - \A	3000 Z	Ski Zpř
	or distributed by the foundation in connection with the activities.	a 00p.00 0. 0	ary materials pr						
c	Did the foundation file Form 1120-POL for this year?	. 					1c	کم ڈنگ	X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed d						20.00	80.46	% .∵4
_	(1) On the foundation. > \$ 0 (2) On foundation manage	• •			0				7 (3)
е	Enter the reimbursement (if any) paid by the foundation during the year for political		e tax imposed		<u> </u>				7 %
•	on foundation managers. ▶ \$	a orportation							
2	Has the foundation engaged in any activities that have not previously been reporte	ed to the IRS	·?				2	Amerc.	X
_	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 gr	overnina ins	trument. article:	s of			Α.:		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed	•					3	eduta.	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more durin		-				4a		х
b	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 t						5	-	X
	If "Yes," attach the statement required by General Instruction T.	•					5.,300	1.5 %2	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat	tisfied either:							
	By language in the governing instrument, or								Dó.
	By state legislation that effectively amends the governing instrument so that no	mandatory of	directions that						
	conflict with the state law remain in the governing instrument?	•					6	Χ	**************************************
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes				art XV	,	7	X	\vdash
8a	Enter the states to which the foundation reports or with which it is registered (see i							11	1280
-	TN	,						2.	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-	PF to the Att	orney General	(or			P.	1888. Fr. 11. E	
-	designate) of each state as required by General Instruction G? If "No," attach expla		•	•		N/A	8b	الألاد منكا	*
9	Is the foundation claiming status as a private operating foundation within the mear					/ 43	W/86-46		400
-	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instruc	_			mplete	e	in the second		1
	Part XIV		•		-		9		
10	Did any persons become substantial contributors during the tax year? If "Yes," atta					*1/12	Ť	-	 -
• •	and addresses		_			A\N	10		

Form	990-PF (2015)		Pa	ge 5
Par	t VII-A Statements Regarding Activities (continued)			
1 i	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		<u>X</u>
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	Х	<u>L</u>
	Website address ► N/A			
14	The books are in care of ► SEE ATTACHMENT #6 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	• • • • •	• • • • •	▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year		Г	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "yes," enter the name of			
	the foreign country >	NOV.	ter.	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 7775	·	r
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	95. VA.	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?	NE a S	1.01%	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1200	899693 445	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	28.4	40.0	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	3		
	(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)?	14	3.0	
	(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.)	2,44.84		
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	a con sac.		
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	3500	-
_	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	201400	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	325	10.250	
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
a	and 6e, Part XIII) for tax year(s) beginning before 2015?	100 de	Speed 1	
	If "Yes," list the years ▶ 20 1 4 , 20 , 20 , 20		1.5.	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		Marie Co	
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	SUBA S		
	to all years listed, answer "No" and attach statement see instructions.)	2b	x	Server of the
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	5 -22 - 74 		3800
Ĭ	► 20 , 20 , 20 , 20			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		دُي. إ	
	at any time during the year?			
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)		<i>A</i> .	
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4720, to determine	384	1 .	

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?

4a

4b

Par	t VI	B Statements Regarding Act	ivities for Which	Form 4720 May B	e Required (c	ontinued)			<u> </u>
- 5a	Dur	ing the year did the foundation pay or incur					¥44	t .	4
	(1)	Carry on propaganda, or otherwise attemp	t to influence legislation	on (section 4945(e))?	Yes	⊠ No		1	
	(2)	Influence the outcome of any specific publ							
	• •	on, directly or indirectly, any voter registrat			Yes	⊠ No			19. se
	(3)	Provide a grant to an individual for travel,	study, or other similar i	purposes?	Tyes	⊠ No			
	(4)	Provide a grant to an organization other th			_	_			
	• •	in section 4945(d)(4)(A)? (see instructions)			Tyes	⊠ No		13. 10.	r. Thom
	(5)				-	_			
	• •	educational purposes, or for the prevention			Yes	No.		100	a. ≁âssic
b	If a	ny answer is "Yes" to 5a(1)-(5), did any of t						Propagation	maray Ali editra
		julations section 53.4945 or in a current notice				N/A.	. 5b		***************************************
		anizations relying on a current notice regard					1,747 Perch 1940	830.00	wa C
С		e answer is "Yes" to question 5a(4), does th							
		ause it maintained expenditure responsibility			N./A.	∏ No			
		es," attach the statement required by Regul			نیدا	_	il in the second		
6a	Dıd	the foundation, during the year, receive any	funds, directly or indi	rectly, to pay premiums			0.7%		
	on	a personal benefit contract?			Yes	⊠ No	1		
b	Dıd	the foundation, during the year, pay premiu	ms, directly or indirect	ly, on a personal benefit	contract?		. 6b		Χ
	lf "Y	'es" to 6b, file Form 8870.			_		7.5		* · · · · · · · · · · · · · · · · · · ·
7a	At a	ny time during the tax year, was the founda	tion a party to a prohit	oited tax shelter transaction	on? Yes	⊠ No			<u> </u>
b	lf "	es," did the foundation receive any proceed	ls or have any net inco	ome attributable to the tra	insaction?	\overline{N}/A	. 7b		
Pai	t V	Information About Officers,	Directors, Trust	ees, Foundation M	anagers, High	nly Paic	i Emple	oyees	,
		and Contractors				····			
_1	Lis	all officers, directors, trustees, foundation		ir compensation (see in					
		(a) Name and address	(b) Title, and avg. hours per week	(c) Compensation	(d) Contributions employee benefit) Expens		
			devoted to position	(if not paid, enter -0-)	and deferred co	mp.	other all	owance	es
SEI	i P	TTACHMENT #7							
		-							
	<u></u>	npensation of five highest-paid employe	as (ather than these	included on line 1	oo instructions)				
2		one, enter "NONE."	es (outer than those	included of fine 1 s	ee mstructions).				
		one, enter worke.	(h) Title and sug	<u> </u>	(d) Contribution	s to			-
(a	a) Na	me and address of each employee paid	(b) Title, and avg. hours per week	(c) Compensation	employee ben	efit (e) Expens	e accou	ınt,
		more than \$50,000	devoted to position	(5) 5511,5511544511	plans and defe		other all	owance	es
SEI	-: <i>Z</i>	TTACHMENT #8	·····	· · · · · · · · · · · · · · · · · · ·	compensatio	<u>'' </u>			
.									
				1					
					ļ				
Tota	nur	nber of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·				▶	Τ –	0
						_	200	<u> </u>	

Form 990-PF (2015) ELLA RAE RUPP PARKS MEMORI	62-1638744	Page
Part VIII Information About Officers, Directors, Trustees,		hly Paid Employees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see	e instructions). If none, enter "NO	ONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE ATTACHMENT #9		······································
•		
T-1-1		
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 st of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1		
2		
		
3		
4		
Part IX-B Summary of Program-Related Investments (see instr	uctions)	·
Describe the two largest program-related investments made by the foundation during		Amount
1		
2		
All other program-related investments. See instructions.		
- 1 - Common contraction - and then adverted		

3

Form 990-PF (2015)

_ _P a	Minimum Investment Return (All domestic foundations must complete this part. Foreign four see instructions.)	ndations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1.05 E	
	purposes:		
а	Average monthly fair market value of securities	1a	151,942
b	Average of monthly cash balances	1b	3,332
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	155,274
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	3.5	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	155,274
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	2,329
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	152,945
6	Minimum investment return. Enter 5% of line 5	6	7,647
Pa	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	.l. <u></u>	
	foundations and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	7,647
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	State of the state	
c	Add lines 2a and 2b	2c	89
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,558
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	7,558
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	7,558
	A VIII	<u> </u>	
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	37.00	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,473
þ	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	* 170	
а	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	1,473
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	1,473
	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.		
	AF COOPED THE COOPED TO SEE TH		. 000 DE (00.15)

Par	Undistributed income (see	e instructions)			
-		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				7,558
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			6,989	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015.				
а	From 2010				
h	From 2011				
	From 2012				
ب س	From 2013				
- u					
e	From 2014	ر المراجعة المراجعة المراجعة المراجعة ال			
T	Total of lines 3a through e	7	######################################		
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$1, 473			1 473	
а	Applied to 2014, but not more than line 2a			1,473	
þ	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				
е	Remaining amount distributed out of corpus				A STATE OF THE STA
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same		NAME OF THE PERSON OF THE PERS		
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b			等的 1. 数数数 1. 数数	4. 第二次 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been		3		
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount see instructions				
е	Undistributed income for 2014. Subtract		A STATE OF THE STA		
	line 4a from line 2a. Taxable amount				
	see instructions			5,516	
f	Undistributed income for 2015. Subtract				? ,
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2016				7,558
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-				
	tion 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		1.7.1.4	Addition of the second	
10	Analysis of line 9 ⁻		WY CHANGE TO		
а					
b	Excess from 2012				
С	Excess from 2013				
d	Excess from 2014			1000 000 000 000 000 000 000 000 000 00	
e	Excess from 2015				

Par	t XIV Private Operating For	undations (see in	structions and Part V	/II-A, question 9)		
1a`	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo	r 2015, enter the da	ate of the ruling	▶		
b	Check box to indicate whether the foun	dation is a private o	perating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a	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					0
b	85% of line 2a		 			0
С	Qualifying distributions from Part XII,				 	
_	line 4 for each year listed					0
А	Amounts included in line 2c not used		· · · · · · · · · · · · · · · · · · ·		*	
_	directly for active conduct exempt act.					1 0
_	Qualifying distributions made directly					
Ŭ	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:					1
	"Assets" alternative test enter					
-	(1) Value of all assets					0
	(2) Value of assets qualifying under		 	 		
	section 4942(j)(3)(B)(i)					1 0
b	"Endowment" alternative test enter		 	 		
	2/3 of min. investment return shown in					
_	Part X, line 6 for each year listed · · ·					
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)	<u> </u>	 	 		
	5 or more exempt organizations					
	as provided in section 4942(j)(3)					1 0
	(B)(iii) · · · · · · · · · · · · · · · · · ·	<u> </u>	 	 		
	an exempt organization					0
	(4) Gross investment income		 			- 0
Da		nation (Comple	to this part onl	y if the foundati	on had \$5 000	·
۲al	t XV Supplementary Inform at any time during the			y ii ule louildau	OII IIAU \$5,000	or more in assets
1	Information Regarding Foundation M	_4	manacuona.)			
	List any managers of the foundation wh	-	more than 2% of the	total contributions re	ceived by the found	ation hefore the
a	close of any tax year (but only if they ha				ceived by the lound	audit belote tile
101	, , , ,	ave continuited inor	е пап фэ,000). (Осс	3000011 307 (d)(2).)		
	List any managers of the foundation wh	o own 10% or more	e of the stock of a co	rnoration (or an equal	lly large portion of th	ne ownership
D	of a partnership or other entity) of which				ily large portion or th	ie Ownership
ЮИ		ii the louridation ha	s a 10/6 of greater in	iterest.		
2	Information Regarding Contribution,	Grant Gift Loan	Scholarship etc. P	Programe:		
_	Check here if the foundation on				and does not acce	nt uncolicited
	requests for funds. If the foundation ma					
	complete items 2a, b, c, and d.	anco giilo, gi aiilo, ci	o. (See misudellens) t	o marriadas or organ	izations under other	conditions,
а	The name, address, and telephone nur	mber or e-mail of th	e nerson to whom a	nnlications should be	addressed:	···········
	E ATTACHMENT # 10	inder or e-man or th	c person to whom u	ppiloadorio oriodio oc	addressed.	
اندن	S ATTACHMENT # 10					
b	The form in which applications should	be submitted and in	formation and mater	rals they should includ		
~	The same of the sa	and the second s	mrrae rendeur	and another mode		
С	Any submission deadlines					
						
ď	Any restrictions or limitations on awards	s, such as by geogr	aphical areas, charita	able fields, kinds of ins	stitutions, or other fa	ctors:

FDA

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Recipient show any relationship to status of **Amount** contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year Approved for future payment

Page 12

Part AVI	Analysis of income-Pro	aucing Acu	ivities					
Enter gross a	amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514			
	_	(a)	(b)	(c)	(d)	Related or exempt function income		
		Business	Amount	Excl.	Amount	(See instructions.)		
1 Program	service revenue:	code		code				
8								
b								
_								
е								
f								
9 Fees &	contracts from government agencies							
2 Members	ship dues and assessments							
3 Interest on	savings and temporary cash investments							
4 Dividend	s and interest from securities			14	6,105			
5 Net renta	al income or (loss) from real estate:							
a Debt-	financed property							
b Not do	ebt-financed property							
6 Net rental	income or (loss) from personal property							
7 Other inv	vestment income							
8 Gain or (los	ss) from sales of assets other than inventory			l				
9 Net incor	me or (loss) from special events							
10 Gross pr	ofit or (loss) from sales of inventory							
11 Other rev	venue. a							
_								
d				L				
e								
12 Subtotal.	. Add columns (b), (d), and (e)	\$ A 3	C		6,105	1		
13 Total. Ad	dd line 12, columns (b), (d), and (e)				13	6,105		
(See worksh	eet in line 13 instructions to verify calcula	ations.)						
Part XVI-	B Relationship of Activitie	s to the Ac	complishment of	Exemp	t Purposes			
Line No. ▼	Explain below how each activity for vaccomplishment of the foundation's	which income is	s reported in column (e)	of Part X	VI-A contributed importa			
								

Form **990-PF** (2015)

FDA

orm	99Q-	PF (2015) ELLA	RAE RUP	P PARKS	MEMORI_	62-16	38744			Pag	ge 1 :
Par	t X\	/II Information Exempt Organization	Regarding To	ransfers To	and Transac	ctions a	nd Relations	hips With No	nchari	table	
1	Did t	the organization directly		ge in any of the	following with ar	ny other or	rganization descri	bed in section	77	Yes	No
	501(c) of the Code (other tha	an section 501(c)(3) organizations) or in section 52	7, relating	to political organ	ızatıons?			1. 18. 1. 29.
a		sfers from the reporting									
		Cash·····							1a(1)		X
	(2)	Other assets · · · · · · ·		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •		1a(2)	390863	Х
b		er transactions.									
	(1)	Sales of assets to a nor							1b(1)	L	X
	(2)	Purchases of assets from							1b(2)		X
	(3)	Rental of facilities, equip							1b(3)		X
	(4)	Loans or loan guarantee							1b(4) 1b(5)		X
	(5) (6)	Performance of services							1b(5)		X
_	٠,	ring of facilities, equipme							10		X
ď		e answer to any of the at							<u> </u>	of the	
a) Lir	e no.	(b) Amount involved	(c) Name of nor	ncharitable exem	pt organization	(d) Descri	ription of transfers, t	ransactions, and sha	ring arrang	ements	
	sect	e foundation directly or i	other than section	-	·	tax-exem	pt organizations o	lescribed in	. Ye	s 🛚	No.
b	If "Y	'es," complete the follows		/L\ T			163	Doggiotes of!			
		(a) Name of organizat	101)	(D) 1y	oe of organizatio	<u> </u>	(c)	Description of rela	uonsnip		

Sign		der penalties of perjury, I declare that I have ex af, it is true, correct, and complete. Declaration								_
Here	Signature of officer or trustee		Date PRESIDENT Title				May the IRS discuss this return with the preparer shown below (see instructions)?			
 Paid	•	Print/Type preparer's name	Preparer's signature JOYCE HARPER		Date 10-27-1		Check		PTIN P00013611	2
Prepare Use On		Firm's name ► HRB TAX GRO			10-21-1				71840	_
use on	Firm's address ▶ 9175 CAROTHERS PKWY Ph			Phon	e no. 6	L577	19521			
DA 15	99	90PF13 BWF 990 Form Software	Copyright 1996 ~ 2016 HRB Tax Grou	ıp, Inc.				For	rm 990–PF (2015)

2015 FORM 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B OPEN TO PUBLIC INSPECTION , and ending For calendar year 2015, or tax period beginning Name of Organization **Employer Identification Number** ELLA RAE RUPP PARKS MEMORIAL FUND 62-1638744 Disbursements for Net Investment Adjusted **Accounting Category Amount** Net Income Income Charity 700 700 TAX PREPARATION 700 700

J1023M

2015 FORM 990 SCHEDULE OF OTHER PROFESSIONAL FEES

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

Name of Organization

INSPECTION For calendar year 2015, or tax period beginning , and ending Employer Identification Number

LLA	RAE	RUPP	PARKS	MEMORIAL	FUND	62-1638744	

	ORIAL FUND	Net Investment	62-16381 Adjusted	Disbursements fo
Category	Amount	Income	Net Income	Charity
DVISORY FEES	950			
JVISORI ILLE				
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	,			
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	<u> </u>			
			•	
	tal: 950	950		

2015 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT 3: PAGE 1 - 990- OPEN TO PUBLIC		PART I, LINE		
INSPECTION For calendar year 2015, or tax per Name of Organization	od beginning	, and	ending Employer Ident	ification Number
ELLA RAE RUPP PARKS MEMORIA	L FUND		62-1638744	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Chanty
ANNUAL REPORT	20			20
:				
:				
,				
				1
			_	
				ļ
			1	
				ļ
	}			
				}
				}
Total:	20			20

J1023M

2015 FORM 990 OTHER EXPENSES SCHEDULE

ATTACHMENT 4: PAGE 1 990-PF OPEN TO PUBLIC					
INSPECTION For calendar year 2015, or tax per Name of Organization	iod beginning	, and	ending Employer idei	ntification Number	
ELLA RAE RUPP PARKS MEMORIA	L FUND		62-1638744		
Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity	
BANK FEES	65			65	
•			I		
	,		<u> </u> }		
	,				
		j			
			}		
Total	65		 	6.5	

2015 FORM 990 SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

ATTACHMENT 5: 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 Employer Identification Number ELLA RAE RUPP PARKS MEMORIAL FUND 62-1638744

LLA RAE RUPP PARKS MEMORIAL FUND		62-1638744				
Description of Property	Cost	FMV at Year End	Book Value	Fair Market Value		
86 AT & T	Х		11,526	20,164		
0 CARE CAPITAL	X		582	1,529		
2 COMCAST	X		1,858	4,063		
5 FRONTIER COMMUNICATIONS	X		633	397		
KINDRED HEALTHCARE	X		51	24		
10 MILLER INDUSTRIES 6 MONSANTO CO	X		10,488	4,57		
0 PFIZER INC	X	}	123 1,915	99 2 , 260		
58 VERIZON	X		10,804	16,54		
08 ISHARES US PRE	X		19,940	19,73		
00 NATIONAL HEALTH INVESTORS	X		14,177	30,43		
50 NATL RETAIL PPTY	X		6,390	18,023		
00 VENTAS INC	X		3,909	11,286		
FAIRPOINT COMMUN	X					
]				
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2015 FORM 990 BOOKS ARE IN CARE OF

ATTACHMENT 6 - 990-PF PAGE 5, PART VII-A, I	LINE 14
OPEN TO PUBLIC	
INSPECTION For calendar year 2014, or tax period beginning	
Name of Organization	Employer Identification Number
ELLA RAE RUPP PARKS MEMORIAL FUND	62-1638744
Part VII-A - Line 14	
Individual Name	RMAN RANDOLPH PARKS
Street Address	06 18TH AVE S APT 20
U.S. Address	
Zip code 37215 City NASHVILLE	State <u>TN</u>
Foreign Address	
City	
Province or State	
Country	······ <u> </u>
Postal code	
Phone Number	(615) 297-9049
Fax Number	

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

ATTACHMENT 7: PAGE 1 - 990-PF PAGE 6, PART VIII OPENTO PUBLIC INSPECTION For calendar year 2015, or tax period beginning , and ending

Name of Organization	•		1	ification Number
ELLA RAE RUPP PARKS MEMOI (A) Name and Address	(B) Title and Average	(C) Compensation (If	62-16387 (D) Cont. to Employee	(E) Expense Account
(A) Name and Address	Hrs. per Week	not paid, enter 0)	Ben. Plans & Def. Comp.	& Other Allowances
NORMAN RANDOLPH PARKS 1606 18 TH AVE S APT 20 NASHVILLE, TN 37212	PRESIDENT 1.50	1,375		
JUDITH ELAINE PARKS 1109 GRAYBAR LANE NASHVILLE, TN 37204	SECRETARY TREASURER			

FDA

2015 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

ATTACHMENT 8: PAGE 1 990-PF OPEN TO PUBLIC	PAGE 6, PART VI	II, LINE 1		
INSPECTION For calendar year 2015, or tax period	od beginning	, and end		
Name of Organization			Employer Identifica	tion Number
ELLA RAE RUPP PARKS MEMORIAI	FUND		62-1638744	
Part VIII Compensation of the Five Highest Paid	Employees Other Than Office	ers, Directors, and 1	rustees	
(a) Name and Address of Each Employee Paid More Than \$50,000	(b) Title and Average Hours Per Week Devoted to Position	(c) Compensation	(d) Contributions to Empl. Benefit Plans & Deferred Compensation	(e) Expense Account and Other Allowances
NONE	Per Week Devoted to Position	(c) Compensation	Deferred Compensation	Other Allowances

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

ATTACHMENT 9: PAGE 1 990-PF PAGE 6, PART VI OPEN TO PUBLIC	II, LINE 2			
INSPECTION For calendar year 2015, or tax period beginning	, and ending			
Name of Organization	Employer Identification Number			
ELLA RAE RUPP PARKS MEMORIAL FUND	62-1638	7 4 4		
Part VIII Compensation of the Five Highest Paid Independent Contractors for				
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation		
NONE				
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2015 FORM 990 APPLICATION SUBMISSION INFORMATION