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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation DEBARDELEBEN FOUNDATION INC		A Employer identification number 63-1239131	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 11008		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code BIRMINGHAM, AL 35202		B Telephone number (see instructions) (205) 841-6461	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> 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) \$ 2,254,544		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))	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	999,026			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	17,926	17,926		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	494,283			
	b Gross sales price for all assets on line 6a 1,140,693				
	7 Capital gain net income (from Part IV, line 2) . . .		494,283		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	1,511,235	512,209		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)	2,765	2,765		0
	17 Interest	18	18		0
	18 Taxes (attach schedule) (see instructions)	6,231	8		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	27	27		0
	24 Total operating and administrative expenses. Add lines 13 through 23	9,041	2,818		0
	25 Contributions, gifts, grants paid	110,393			110,393
	26 Total expenses and disbursements. Add lines 24 and 25	119,434	2,818		110,393
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,391,801			
	b Net investment income (if negative, enter -0-)		509,391		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	13,674	19,257	19,257
	2	Savings and temporary cash investments	204,232	409,502	409,502
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	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 government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	907,700	2,088,648	1,825,785
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	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)	1,125,606	2,517,407	2,254,544
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	0	0	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,125,606	2,517,407	
	30	Total net assets or fund balances (see instructions)	1,125,606	2,517,407	
	31	Total liabilities and net assets/fund balances (see instructions)	1,125,606	2,517,407	

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 1,125,606
2	Enter amount from Part I, line 27a	2 1,391,801
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 2,517,407
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6 2,517,407

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase D—Donation (b)	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	FIDELITY #621	P		2015-12-31
b	FIDELITY #621	P		2015-12-31
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 164,913		170,384	-5,471
b 975,780		476,026	499,754
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
a			-5,471
b			499,754
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	494,283
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 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	74,245	1,437,852	0 051636
2013	55,298	1,179,078	0 046899
2012	60,850	959,251	0 063435
2011	68,603	969,774	0 070741
2010	48,663	885,367	0 054964

2 Total of line 1, column (d).	2	0 287675
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	0 057535
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,793,431
5 Multiply line 4 by line 3.	5	103,185
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	5,094
7 Add lines 5 and 6.	7	108,279
8 Enter qualifying distributions from Part XII, line 4.	8	110,393

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 VII

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	5,094
c 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	5,094
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	5,094
6 Credits/Payments			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 4,150		
b Exempt foreign organizations—tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868).	6c 1,000		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d.		7	5,150
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶		10	56
11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 56 Refunded ▶		11	0

Part 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 in any political campaign?	1a	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b		No
c Did the foundation file Form 1120-POL for this year?	1c		No
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			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

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		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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>MICHAEL B HAWKINS CPAABV</u> Telephone no ► <u>(205) 323-5440</u> Located at ► <u>110 OFFICE PARK DRIVE SUITE 100 BIRMINGHAM AL</u> ZIP+4 ► <u>35223</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ► 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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 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. ► <input type="checkbox"/>		
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		No
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 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). 2b		
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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>). 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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?	4b	No

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))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? 5b Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>			
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? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b <i>If "Yes" to 6b, file Form 8870</i>			No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b			

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHARLES W DEBARDELEBEN 4222 OLD LEEDS ROAD BIRMINGHAM, AL 35213	PRESIDENT & SECRETARY 0 00	0	0	0
WHITNEY DEBARDELEBEN ONE NORMAN DRIVE MOUNTAIN BROOK, AL 35213	VICE PRESIDENT & TREASURER 0 00	0	0	0
PRINCE DEBARDELEBEN III 4560 DOLLY RIDGE ROAD BIRMINGHAM, AL 35243	EXECUTIVE VICE PRESIDENT 0 00	0	0	0
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	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) 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
NONE		

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

0

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 N/A	0
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 N/A	0
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶

0

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	1,568,992
b	Average of monthly cash balances.	1b	251,750
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,820,742
e	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	1,820,742
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	27,311
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,793,431
6	Minimum investment return. Enter 5% of line 5.	6	89,672

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	89,672
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	5,094
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	5,094
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	84,578
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	84,578
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	84,578

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	110,393
b	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		
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	110,393
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	5,094
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	105,299

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				84,578
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.	5,464			
b From 2011.	21,428			
c From 2012.	15,032			
d From 2013.				
e From 2014.	6,323			
f Total of lines 3a through e.	48,247			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 110,393				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				84,578
e Remaining amount distributed out of corpus	25,815			
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	74,062			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
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			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	5,464			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	68,598			
10 Analysis of line 9				
a Excess from 2011.	21,428			
b Excess from 2012.	15,032			
c Excess from 2013.				
d Excess from 2014.	6,323			
e Excess from 2015.	25,815			

Part XIV

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b Check box to indicate whether the organization is a:

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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Part XV

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))

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

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 email address of the person to whom applications should be addressed

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)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total</div>			<div>3a</div>	110,393
<div>b Approved for future payment</div>				
<div>Total</div>			<div>3b</div>	0

Enter gross amounts unless otherwise indicated

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

[illegible]

Part XVII

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

b Other transactions

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
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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?

b If "Yes," complete the following schedule

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.
--

Paid Preparer Use Only	Print/Type preparer's name MICHAEL B HAWKINS	Preparer's Signature	Date 2016-11-05	Check if self-employed <input type="checkbox"/>	PTIN P00032727
	Firm's name <input type="checkbox"/> PEARCE BEVILL LEESBURG MOORE PC			Firm's EIN <input type="checkbox"/> 63-0813240	
	Firm's address <input type="checkbox"/> 110 OFFICE PARK DR BIRMINGHAM, AL 35223			Phone no. (205) 323-5440	

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ALABAMA BALLET 2726 1ST AVENUE SOUTH BIRMINGHAM,AL 35233	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,000
ALABAMA SYMPHONY ORCHESTRA 1200 10TH AVENUE SOUTH BIRMINGHAM,AL 35294	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,000
AMERICAN BASEBALL FOUNDATION 2660 10TH AVENUE S 620 BIRMINGHAM,AL 35205	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,500
AMERICAN HEART ASSOCIATION 1449 MEDICAL PARK DR BIRMINGHAM,AL 35213	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
CATHEDRAL CHURCH OF THE ADVENT 2017 6TH AVENUE NORTH BIRMINGHAM,AL 35203	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	200
CENTER FOR EXECUTIVE LEADERSHIP VARIOUS BIRMINGHAM,AL 35202	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,268
CHILDREN'S HARBOR 1600 6TH AVE S BIRMINGHAM,AL 35233	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,450
CHILDREN'S HOME SOCIETY 1605 EUSTIS STREET ST PAUL,MN 55108	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	3,125
COASTAL CONSERVATION ASSOCIATION 6919 PORTWEST SUITE 100 HOUSTON,TX 77024	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	450
CRIPPLED CHILDREN'S FOUNDATION 2019 4TH AVENUE NORTH BIRMINGHAM,AL 35203	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
FCA NORTH CENTRAL ALABAMA PO BOX 59267 BIRMINGHAM,AL 35259	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
FLY RIGHT INC PO BOX 1023 MERIDIAN,MS 39302	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	3,400
FRIENDS OF BIRMINGHAM BOTANICAL GARDENS 2612 LANE PARK ROAD BIRMINGHAM,AL 35223	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
GLENWOOD INC 150 GLENWOOD LANE BIRMINGHAM,AL 35242	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,200
HORIZONS SCHOOL 2018 15TH AVE S BIRMINGHAM,AL 35205	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	250
Total ► 3a				110,393

Form 990PF Part XV Line 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				
JUVENILE DIABETES RESEARCH FOUNDATION 600 BEACON PARKWAY WEST BIRMINGHAM,AL 35209	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,500
KINGS HOME 221 KINGS HOME DR CHELSEA,AL 35043	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
LAKESHORE FOUNDATION 4000 RIDGEWAY DRIVE HOMEWOOD,AL 35209	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
LORD WEDGEWOOD CHARITY 1572 MONTGOMERY HWY STE 202 BIRMINGHAM,AL 35216	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,800
OPPORTUNITIES INC 714 COUNTRY CLUB ROAD LIVINGSTON,AL 35470	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
RED MOUNTAIN GARDEN CLUB 3240 STERLING ROAD BIRMINGHAM,AL 35223	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	250
RED MOUNTAIN PARK 2011 FRANKFURT DR BIRMINGHAM,AL 35211	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,500
ROTARY CLUB OF BIRMINGHAM 2019 4TH AVENUE NORTH BIRMINGHAM,AL 35203	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
THE FOUNDRY PO BOX 824 BESSEMER,AL 35021	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	7,000
UNITED WAY 3600 8TH AVENUE SOUTH BIRMINGHAM,AL 35222	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	17,500
UNTIL THEY KNOW MINISTRY 300 VESTAVIA PARKWAY STE 2300 VESTAVIA HILLS,AL 35216	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
YMCA OF BIRMINGHAM 2101 4TH AVENUE NORTH BIRMINGHAM,AL 35203	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,000
AERIE AFRICA CHRISTIAN MINISTRY 1249 HAZELWOOD DRIVE FORT WASHINGTON,PA 19034	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	500
AIDS ALABAMA PO BOX 55703 BIRMINGHAM,AL 35255	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
BILLY GRAHAM EVANGELISTIC ASSOC 1 BILLY GRAHAM PARKWAY CHARLOTTE,NC 28201	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
Total ▶ 3a				110,393

Form 990PF Part XV Line 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				
BOYS AND GIRLS CLUB'S OF ALABAMA 3821 JOHN WILLILAMSON DR HUEYTOWN,AL 35023	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
CHANGED LIVES CHRISTIAN CENTER 1308 26TH AVE N BIRMINGHAM,AL 35204	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
CHRISTUS ST MICHAEL FOUNDATION 2600 ST MICHAEL DR TEXARKANA,TX 75503	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,500
FRIENDS OF THE ENVIRONMENT PO BOX AB 20755 MARSH HARBOUR,ABACO BF	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	4,000
INDEPENDENT PRESBYTERIAN CHURCH 3100 HIGHLAND AVE S BIRMINGHAM,AL 35205	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	100
JH RANCH 402 OFFICE PARK DR BIRMINGHAM,AL 35223	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	3,000
MITCHELL'S PLACEKELTICITY 4778 OVERTON RD BIRMINGHAM,AL 35210	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,800
MOBILE CARNIVAL ASSOCIATION 108 S CLAIBORNE ST MOBILE,AL 36602	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	500
NEW WATER MINISTRIES 460 CIVITAN ROAD DADEVILLE,AL 36853	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,000
PARKINSON ASSOCIATION OF CENTRAL ALABAMA PO BOX 243004 MONTGOMERY,AL 36124	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	250
RAILROAD PARK FOUNDATION 1600 1ST AVENUE BIRMINGHAM,AL 35233	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,500
RONALD MCDONALD HOUSE 1700 4TH AVE S BIRMINGHAM,AL 35233	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	100
SPIRITUAL LIFE MINISTRY FOUNDATION PO BOX 530308 BIRMINGHAM,AL 35253	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	5,000
SUSAN G KOMEN NORTH CENTRAL ALABAMA 1909 27TH AVENUE S HOMEWOOD,AL 35209	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	250
UAB 1720 2ND AVENUE S BIRMINGHAM,AL 35233	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	2,500
Total ▶ 3a				110,393

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
UAB - SCHOOL OF NURSING 1720 2ND AVENUE S BIRMINGHAM, AL 352941210	NONE	PUBLIC CHARITY	TO ASSIST AGENCY IN CARRYING OUT CHARITABLE PURPOSE	1,000
Total ▶ 3a				110,393

TY 2015 Investments Corporate Stock Schedule**Name:** DEBARDELEBEN FOUNDATION INC**EIN:** 63-1239131

Name of Stock	End of Year Book Value	End of Year Fair Market Value
FIDELITY - MARKETABLE SECURITIES	2,088,648	1,825,785

TY 2015 Other Expenses Schedule**Name:** DEBARDELEBEN FOUNDATION INC**EIN:** 63-1239131

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	27	27		0

TY 2015 Other Professional Fees Schedule**Name:** DEBARDELEBEN FOUNDATION INC**EIN:** 63-1239131

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	2,765	2,765		0

TY 2015 Taxes Schedule**Name:** DEBARDELEBEN FOUNDATION INC**EIN:** 63-1239131

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	6,223	0		0
OTHER TAXES	8	8		0

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Name of the organization	Employer identification number
DEBARDELEBEN FOUNDATION INC	63-1239131

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization DEBARDELEBEN FOUNDATION INC	Employer identification number 63-1239131
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 999,026	Person <input type="checkbox"/>
	ANNE W DEBARDELEBEN		Payroll <input type="checkbox"/>
	3316 DELL ROAD		Noncash <input checked="" type="checkbox"/>
	BIRMINGHAM, AL 35223		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Name of organization DEBARDELEBEN FOUNDATION INC	Employer identification number 63-1239131
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ACADIA PHARMACEUTICALS INC SECURITIES (2,000 SHARES)	\$ 78,620	2015-08-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	APPLE INC SECURITIES (3,500 SHARES)	\$ 403,340	2015-08-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	CELGENE CORP SECURITIES (1,500 SHARES)	\$ 196,545	2015-08-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	GOOGLE INC CL A SECURITIES (300 SHARES)	\$ 207,441	2015-08-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	NOVAVAX INC SECURITIES (5,000 SHARES)	\$ 68,250	2015-08-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	TETRAPHASE PHARMACEUTICALS INC COM SECURITIES (1,000 SHARES)	\$ 44,830	2015-08-12

Name of organization DEBARDELEBEN FOUNDATION INC	Employer identification number 63-1239131
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
	(e) Transfer of gift			
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
	<div></div> <div></div> <div>--</div>	<div></div> <div></div> <div></div>		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
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(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
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(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
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