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Form **990-PF**

Return of Private Foundation

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

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

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Ford	alen	dar year 2015 or tax year beginning MAI	R 1, 2015	, and ending	FEB 28, 2016	
Nar	ne of	foundation			A Employer identification	number
М	ERI	RILL I & GRACE HANKS CE	HARITABLE TR		61-6394207	
		nd street (or P O box number if mail is not delivered to stree		Room/suite	B Telephone number	
R	EG	IONS BANK, TRUSTEE, P.	O. BOX 1628		251-438-80	77
City	or to	own, state or province, country, and ZIP or foreign			C If exemption application is p	
_M	OB:	ILE, AL <u>36633-1628</u>				-
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here $ ightharpoonup$
		Final return	Amended return		2 Foreign organizations me	eting the 85% test
		Address change	Name change	·····	Foreign organizations me check here and attach co	mputation
H C	_	, , <u>, , , , , , , , , , , , , , , , , </u>	exempt private foundation		E If private foundation sta	
			Other taxable private founda		under section 507(b)(1)	(A), check here
		· 1 —	ting method: X Cash	Accrual	F If the foundation is in a	
•		Part II, col. (c), line 16)	Other (specify)		under section 507(b)(1)	(B), check here
_		4,059,634. (Part I, coll	umn (a) must be on cash i	oasis)		
Pa	irt 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))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	18,468.	···	N/A	
	2	Check fithe foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	105,040.	104,192.	1	STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
a)	6a	Net gain or (loss) from sale of assets not on line 10	133,653.		RECE	IVED
Revenue	b	Gross sales price for all assets on line 6a1,915,708.				TQ.
Revenu	7	Capital gain net income (from Part IV, line 2)		133,653.	153 111 1	2016 3
<u>~</u>	8	Net short-term capital gain		_	(0)	[th]
	9	Income modifications			000	
	10a	Gross sales less returns and allowances			LUCLIE	0, 0
	b	Less Cost of goods sold	1			
	C	Gross profit or (loss)				
	11	Other income	055 464	005 045		
	12	Total. Add lines 1 through 11	257,161.	237,845.	-	20 004
	13	Compensation of officers, directors, trustees, etc	39,992.	9,998.		29,994
	14	Other employee salaries and wages			<u></u>	
Ş		Pension plans, employee benefits				
Sus	1	Legal fees Accounting fees STMT 2	3,150.	0.		3,150
xpe	į .	Accounting fees STMT 2 Other professional fees	3,130.			3,130
ē Tī	l	Interest			+	
aţi		Taxes STMT 3	4,047.	1,433.		0 .
istr	1	Depreciation and depletion	2/02/3	2,133		
i.		Occupancy				
Ad	21	Travel, conferences, and meetings				
2		Printing and publications				
ğ	1	Other expenses STMT 4	517.	517.	,	0.
atin	1	Total operating and administrative				
Operating and Administrative Expenses		expenses Add lines 13 through 23	47,706.	_11,948.	,	33,144.
ō	25	Contributions, gifts, grants paid	186,888.			186,888
	1	Total expenses and disbursements.				
	L	Add lines 24 and 25	234,594.	11,948		220,032
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	22,567.			
	b	Net investment income (if negative, enter -0-)		225,897		
	C	Adjusted net income (if negative, enter -0-)			N/A_	

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	09-PF (2015) MERRILL I & GRACE HANKS			<u> 5394207 Page 2</u>
P	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		120,591.		
	1			24,230.	24,230.
	3	Accounts receivable ►			
]	Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
	ŀ	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations STMT 5	468,319.	484,081.	500,870.
	b	Investments - corporate stock STMT 6	2,247,128.	2,241,233.	
	C	Investments - corporate bonds STMT 7	886,245.	993,341.	972,119.
	11	Investments - land, buildings, and equipment basis			
	•	Less accumulated depreciation	151.	151.	<u>151.</u>
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers - see the			***
		instructions. Also, see page 1, item I)	3,722,434.	3,743,036.	4,059,634.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ç	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here		- ::	
		and complete lines 24 through 26 and lines 30 and 31			
Ces	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
Ba	26	Permanently restricted			
'n		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
Ö	27	Capital stock, trust principal, or current funds	3,722,434.	3,722,434.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	20,602.	
Zet	30	Total net assets or fund balances	3,722,434.	3,743,036.	
_					
	31	Total liabilities and net assets/fund balances	3,722,434.	3,743,036.	
	art	III Analysis of Changes in Net Assets or Fund B	alances		
<u> </u>	art	III , analysis of originges in Net Assets of Fulld b			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	3,722,434.
2	Ente	r amount from Part I, line 27a		2	22,567.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	3,745,001.
5	Decr	eases not included in line 2 (itemize) BOOK/TAX TIMIN	G DIFFERENCE	5	1,965.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	3,743,036.
					Form 990-PF (2015)

	RILL I & GRACE			E T	<u>R</u>	6	<u>1-6394</u>	1207	Page 3
	and Losses for Tax or		t income	(b) Ho	ow acquired (n) Date :	acquired	(d) Date	
			. P -	Purchase V Donation	(mo., d	ay, yr.)	(mo., da		
1a PUBLICLY TRADE	D SECURITIES				P _				
b CAPITAL GAINS	DIVIDENDS								
<u> </u>			_						
<u>d</u>									
<u>e</u>									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				aın or (loss) s (f) mınus (g	1)	
a 1,915,250.			1,782,05	5.				133	,195.
b 458.									458.
С									
d									
e									
Complete only for assets showin	g gain in column (h) and owned	by the foundation	on 12/31/69		(1)	Gains (C	ol. (h) gain n	ninus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		col. (k), but r	not less than (from col. (h	-0-) or	
a						_		133	,195.
b			·			•			458.
c				+					
d									
e		**							
			_	$\overline{}$					
2 Capital gain net income or (net ca	If gain, also e	enter in Part I, line	<i>(</i>		2			122	,653.
	•	er -0- ın Part İ, lıne	1	가는					, 033.
3 Net short-term capital gain or (los		5) and (6):		7					
If gain, also enter in Part I, line 8,	column (c).			 			37/3		
Part V Qualification U	nday Castian 4040(a)	tau Daduaad	Tow on Not	<u> </u>	3		N/A		
(For optional use by domestic private	foundations subject to the sect	ion 4940(a) tax on	net investment in	come.)	1				
	•								
lf section 4940(d)(2) applies, leave th	ns part blank.								
Was the foundation liable for the sect	ion 4942 tax on the distributable	e amount of any ve	ear in the base per	od?			ſ	Yes	X No
If "Yes," the foundation does not qual			•				1		140
1 Enter the appropriate amount in a				ntries.					
	Г	THE MICH BUILDING BU	lore making any or			1		(d)	
(a) Base period years	(b) Adjusted qualifying	n distributions	Net value of no	(c) ncharit	able-use assets		Distribi	itión ratio	(0))
Calendar year (or tax year beginning	·9 ···/		1101 14100 01 110			-	(col. (b) divid		
2014		203,132.			459,718.				45548
2013		183,493.			155,084.				$\frac{44161}{46333}$
2012		<u>174,854.</u>			769,472.				<u>46387</u>
2011		175,323.			780,325.				<u>46378</u>
2010		22,273.		3,	<u>302,804.</u>	<u> </u>		.0	<u>06744</u>
2 Total of line 1, column (d)						_2		1	<u>89218</u>
3 Average distribution ratio for the 5	5-year base period - divide the to	otal on line 2 by 5,	or by the number	of year	rs .				
the foundation has been in exister						3	<u> </u>	0	37844
	·								
4 Enter the net value of noncharitab	le-use assets for 2015 from Par	t X. line 5				4	1	1,359	.663.
	450 455015 101 25 15 11 0111 1 41	17, 1110 0						.,	,
5 Multiply line 4 by line 3						5		164	,987.
5 Maniply line 4 by line 5						-		101	<u>, , , , , , , , , , , , , , , , , , , </u>
0	(40) (Double line 07h)							2	250
6 Enter 1% of net investment incom	1e (1% of Part I, line 2/b)					6			, 259.
						i _		4.68	0.46
7 Add lines 5 and 6						7	<u> </u>	T 6 /	<u>,246.</u>
8 Enter qualifying distributions from	n Part XII, line 4					8		220	,032.
If line 8 is equal to or greater than	line 7, check the box in Part VI,	, line 1b, and comp	olete that part usin	g a 1%	tax rate.				
See the Part VI instructions.									
523521 11-24-15							Fo	orm 990-	PF (2015

	n 990-PF (2015) MERRILL I & GRACE HANKS CHARITABLE TR 61-639 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	34207 e instru	ction	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		_	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		2,2	<u>59.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
-	Add lines 1 and 2		2,2	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2,2	<u>59.</u>
	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3, 280.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d.		3,2	2 N
	Total disease and payments. The since of an organize	_	<u> </u>	50.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-	1,0	21.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax		<u>+,, </u>	0.
	art VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	10		_X_
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	İ		
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1
	managers. > \$O.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			7.7
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a	<u></u>	X
	4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			
	b If "Yes," has it filed a tax return on Form 990-T for this year?			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X
e	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ĺ
0	By language in the governing instrument, or			ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			ł
	remain in the governing instrument?	6	х	
7	The state of the s	7	Х	
•				
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)	_		
	AL	-		
b	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)	8b	X	1
^	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	00	1	
9	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		x
10	and the state of t	10	†	X
	one and personal popularities demand on a sering the tan Jean II 100, talked a considered rating their parison and desired on	Form 99	0-PF	

orm 990-PF (2015) MERRILL I & GRACE HANKS			<u>61-63942</u>	07 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
` (1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio			İ	1 1
4945(d)(4)(A)? (see instructions)		Y€	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for		
the prevention of cruelty to children or animals?	• • •		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru		J	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		
expenditure responsibility for the grant?		I/A	s No	
If "Yes," attach the statement required by Regulations section 53 494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			ĺ	ĺĺ
a personal benefit contract?	pay promitting on	□ ve	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	۰، بـــا	1	6b X
If "Yes" to 6b, file Form 8870	ci sonai penent contract.		<u> </u>	21
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	□ v _e	es X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attribu		L 16		7b
Part VIII Information About Officers, Directors, Trust		nagere Highly		<u> </u>
Paid Employees, and Contractors	ees, i ouiluation Ma	iiiageis, i ligilii	,	
List all officers, directors, trustees, foundation managers and their	compensation.		-	
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred	account, other allowances
REGIONS BANK	TRUSTEE	enter -0-7	compensation	anowanees
P.O. BOX 1628	IKODIEE			
MOBILE, AL 36633-1628	3.00	39,992.	0.	0.
MODILE, AL 30033-1020		39,992.	- 0.	
		'		
			-	
				
O Companyation of the highest poid and large (athor than the pine	luded on line 4). If none	OPAGE INONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(a) Evnense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
	devoted to position		compensation	allowances
NONE				
		<u> </u>	-	
	1		1	1
		-		
		<u> </u>	<u> </u>	
		ļ	ļ <u> </u>	<u> </u>
	Į			
		<u> L</u>		<u> </u>
Total number of other employees paid over \$50,000				0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	e (c) C	ompensation
NONE		<u>.</u>
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.	Expen	ses
1 <u>N/A</u> .		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	1	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amoı	<u>Int</u>
1 N/A		
2		
All other program-related investments. See instructions. 3		
Total, Add lines 1 through 3		0.
	Form 99 6	D-PF (2015)

For	m 990-PF (2015) MERRILL I & GRACE HANKS CHARITABLE TR	<u> </u>	-639420/ Page 8
<u>P</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	137,553.
b	Average of monthly cash balances	1b	4,288,350.
C	Fair market value of all other assets	1c	151.
d	Total (add lines 1a, b, and c)	1d	4,426,054.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,426,054.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	66,391.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,359,663.
6	Minimum investment return Enter 5% of line 5	6	217,983.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	ıd certaır	1
	foreign organizations check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	217,983
2a	Tax on investment income for 2015 from Part VI, line 5 2a 2,259.		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,259
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	215,724
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	215,724
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	215,724
Р	art XII Qualifying Distributions (see instructions)		
_ 1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	220,032
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:		
	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	220,032
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
•	income. Enter 1% of Part I, line 27b	5	2,259
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	217,773
•	Nets. The executed on long C will be used in Part V column (b) in subanguant years when calculating whether the foundation		

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2015 from Part XI, Inn 7 2015 care and a committed		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2 Unablativate recent array as of the end of 1015 and for prior years: 3 Excess distributions carryover, if any, to 2015; a From 2010 From 2011 From 2011 From 2012 From 2019 F					215 724
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f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015				0.	
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7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015					
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	be distributed in 2016				182,277.
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	7 Amounts treated as distributions out of				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	corpus to satisfy requirements imposed by				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015					
not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	may be required - see instructions)	0.			<u></u>
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	8 Excess distributions carryover from 2010				
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	not applied on line 5 or line 7	0.			
10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015					
a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	Subtract lines 7 and 8 from line 6a	0.			
b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	10 Analysis of line 9:				
c Excess from 2013 d Excess from 2014 e Excess from 2015	a Excess from 2011				
d Excess from 2014 e Excess from 2015	b Excess from 2012				
e Excess from 2015					
e Excess from 2015					
	e Excess from 2015	<u> </u>	<u> </u>	<u> </u>	Form 990-PF (2015)

523581 11-24-15

Form 990-PF (2015) MERRILL Part XIV Private Operating Form	I & GRACE			61-63	94207 Page 10
			-A, question 9)	N/A	
1'a If the foundation has received a ruling or					
foundation, and the ruling is effective for			un anatuan	4042(1)(2) or 40	(42(s)(E)
b Check box to indicate whether the found		ig toundation described i	Prior 3 years	4942(J)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2013	(0) 2014	(6) 2010	(4) 2012	(0) 10101
investment return from Part X for					
each year listed			 -		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			-	-	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly				-	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets	i				
` '			-		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	.			 	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)				 	
(3) Largest amount of support from					
an exempt organization		 		-	
(4) Gross investment income	motion (Comple	to this part only	if the foundation	had \$5 000 or m	ore in accete
Part XV Supplementary Info at any time during t	rmation (Comple he vear-see insti	ructions)	ii the loundation	i ilau \$5,000 or ili	ore ili assets
 Information Regarding Foundation List any managers of the foundation wh 		than 2% of the total con-	tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n			mbanons received by the	, loundation before the cio	oc or any tax
NONE	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has			- - ·		
NONE					
2 Information Regarding Contributi					
Check here ▶ ☐ If the foundation o	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.					<u> </u>
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addre	essed:	
SEE STATEMENT 8					
b The form in which applications should b	e submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors:	

523601 11-24-15

11-24-15

	<u>Unrelated b</u>	usiness income		y section 512, 513, or 514	(e)
nter gross amounts unless otherwise indicated. Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	t I				
С	1 1				
d					
е	l i				· · · · · · · · · · · · · · · · · · ·
f					,—
g Fees and contracts from government agencies					
Membership dues and assessments				-	
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	105,040.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		-			
Net rental income or (loss) from personal					
property					
Other investment income	7				***
Gain or (loss) from sales of assets other		· 			
than inventory			18	133,653.	
Net income or (loss) from special events				2007.000	
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C	1 1				
d					
e				238,693.	
е		0.		230,7033	
e Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	13	238,69
е	ns.)	0.			238,69
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities	ies to the Accon	plishment of E	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculational Relationship of Activities	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Exermine Worksheet in line 13 instructions to verify calculations. The No. Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Exermine Worksheet in line 13 instructions to verify calculations. The No. Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Exermine Worksheet in line 13 instructions to verify calculations. The No. Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Exermine Worksheet in line 13 instructions to verify calculations. The No. Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Exermine Worksheet in line 13 instructions to verify calculations. The No. Explain below how each activity for which	ies to the Accor	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accorr	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculation Tart XVI-B Relationship of Activition Explain below how each activity for which	ies to the Accorr	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions ine No. Explain below how each activity for which	ies to the Accorr	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions ine No. Explain below how each activity for which	ies to the Accorr	aplishment of Exolumn (e) of Part XVI-	xempt P	13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions ine No. Explain below how each activity for which	ies to the Accorr	aplishment of Exolumn (e) of Part XVI-	xempt P	13	

P00275848

PTIN

Firm's EIN \triangleright 63-0191630

Phone no. (251)343-1200

Check self- employed

Paid

Preparer

Use Only

reparer's signature

Signature of officer or trustee

Print/Type preparer's name

J WILBERT JORDAN,

Firm's name ► SMITH DUKES

Firm's address ► 3800 AIRPORT BLVD

MOBILE, AL 36608-1667

Title

06/30/16

Date

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

	MERRILL I & GRACE HANKS CHARITABLE TR	61-6394207						
Organization type (chec	ck one)							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
General Rule X For an organiza	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to	staling \$5,000 or more (in money or						
	any one contributor Complete Parts I and II See instructions for determining a contrib	outor's total contributions						
Special Rules								
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supplied in section 501(c)(3) filing Form 990 or 990-EZ, Part II, line 13, putor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the at EZ, line 1 Complete Parts I and II.	, 16a, or 16b, and that received from						
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.								
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not file Sche on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

MERRILL I & GRACE HANKS CHARITABLE TR

61-6394207

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	ESTATE OF MERRILL I HANKS, REGIONS BANK EXECUTOR	Total contributions	Person X
	PO BOX 1628	\$ 18,468.	Payroll Noncash (Complete Part II for
	MOBILE, AL 36633	_	noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

MERRILL I & GRACE HANKS CHARITABLE TR

61-6394207

art II Non	cash Property (see instructions). Use duplicate copies of Pa	art ii ii additional space is needed	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			

me of organ	nization			Employer identification number		
ERRILI art III	L I & GRACE HANKS CHARIT Exclusively religious, charitable, etc., contributing the year from any one contributor. Complete colu	tions to organizations described	WIND line entry. For organization	ine		
	completing Part III, enter the total of exclusively religious, ch Use duplicate copies of Part III if additional s	naritable, etc., contributions of \$1,000 or	less for the year (Enterthis info one	ce) 🏲 🌣		
) No.	(b) Purpose of gift	(c) Use of gift	(d) Des	Description of how gift is held		
art I						
-						
		(e) Transfer of gif	t			
-	Transferee's name, address, and a	ZIP + 4	Relationship of tra	ansferor to transferee		
) No.						
orn art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
——						
		(e) Transfer of gif	t			
-	Transferee's name, address, and a	ZIP + 4	Relationship of tra	ansferor to transferee		
_						
) No. rom art i	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
		(e) Transfer of gif	<u> </u>			
-	Transferee's name, address, and ZIP + 4		Relationship of tra	ansferor to transferee		
) No						
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
	(e) Transfer of gift					
-	Transferee's name, address, and	<u> </u>	Helationship of tra	ansferor to transferee		
-						

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECU	RITIES ST	PATEMENT 1	
SOURCE	GROSS CE AMOUNT		(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
CORP. INTEREST DIVIDENDS US INTEREST	24,347. 76,782. 4,369.	45	0. 24,347 8. 76,324 0. 4,369	24,347. 75,476. 4,369.		
TO PART I, LINE 4	105,498.	458. 105,040		. 104,192.		
FORM 990-PF		ACCOUNTI	NG FEES	S	PATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	-	3,150.	0.		3,150.	
TO FORM 990-PF, PG 1	, LN 16B	3,150.	0.		3,150.	
FORM 990-PF		TAX	ES	S	ratement 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX W/H 1,433. 2015 FEDERAL EXCISE TAX ESTIMATE 2,614.		1,433.	1,433.	·	0.	
		0.		0.		
TO FORM 990-PF, PG 1	, LN 18	4,047.	1,433.		0.	

FORM 990-PF	OTI	HER E	XPENSES			STATEMENT	<u>4</u>
DESCRIPTION	(A) (B) EXPENSES NET INVE PER BOOKS MENT INC						
ADR INVESTMENT FEES		517.	517.				0.
TO FORM 990-PF, PG 1, LN 23		517.		517.			0.
FORM 990-PF U.S. AND S	STATE/C	ITY G	OVERNMENT	OBLIG	ATIONS	STATEMENT	5
DESCRIPTION		U.S GOV'		воок	VALUE	FAIR MARKE	т
GOVERNMENT OBLIGATIONS - SCHI ATTACHED	EDULE	Х			484,081.	500,8	70.
TOTAL U.S. GOVERNMENT OBLIGATIONS					484,081.	500,870.	
TOTAL STATE AND MUNICIPAL GOV	VERNMEN'	T OBL	IGATIONS		,,, <u>,</u>		
TOTAL TO FORM 990-PF, PART I	I, LINE	10A	:		484,081.	500,8	70.
FORM 990-PF	COR	PORAT	E STOCK			STATEMENT	6
DESCRIPTION				воог	VALUE	FAIR MARKE VALUE	т
CORPORATE STOCK - SCHEDULE A	TTACHED		•	2,	241,233.	2,562,2	64.
TOTAL TO FORM 990-PF, PART I	I, LINE	10B	;	2,	241,233.	2,562,2	64.
FORM 990-PF	COR	PORAT	E BONDS			STATEMENT	7
				воон	VALUE	FAIR MARKE VALUE	т
DESCRIPTION							
CORPORATE BONDS - SCHEDULE A	TTACHED		,		993,341.	972,1	19.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

OFFICE OF FINANCIAL AID, UNIVERSITY OF MOBILE 5735 COLLEGE PKWY MOBILE, AL 36613

TELEPHONE NUMBER NAME OF GRANT PROGRAM

251-442-2222 PASTORAL MINISTRY SCHOLARSHIPS

FORM AND CONTENT OF APPLICATIONS

APPLICATION AVAILABLE FROM UNIVERSITY FINANCIAL AID OFFICES ABOVE

ANY SUBMISSION DEADLINES

DECEMBER 15 PRIOR TO START OF ACADEMIC YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

RESTRICTED TO ENTERING FULL-TIME FRESHMEN, SOPHOMORES, JUNIORS OR SENIORS WITH RELIGION MAJOR OR MINOR INTENDING TO ENTER A CAREER AS A PASTOR; PRIORITY GIVEN TO STUDENTS FROM ESCAMBIA AND MONROE COUNTIES IN ALABAMA

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

OFFICE OF FINANCIAL AID, SAMFORD UNIVERSITY 800 LAKESHORE DRIVE BIRMINGHAM, AL 35229

TELEPHONE NUMBER NAME OF GRANT PROGRAM

205-726-2905

PASTORAL MINISTRY SCHOLARSHIPS

FORM AND CONTENT OF APPLICATIONS

APPLICATION AVAILABLE FROM UNIVERSITY FINANCIAL AID OFFICES ABOVE

ANY SUBMISSION DEADLINES

DECEMBER 15 PRIOR TO START OF ACADEMIC YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

RESTRICTED TO ENTERING FULL-TIME FRESHMEN, SOPHOMORES, JUNIORS OR SENIORS WITH RELIGION MAJOR OR MINOR INTENDING TO ENTER A CAREER AS A PASTOR; PRIORITY GIVEN TO STUDENTS FROM ESCAMBIA AND MONROE COUNTIES IN ALABAMA