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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. OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_		of foundation			, 2013,	and ending		Employer identific	, 20		
		COMPASS FUND 4737682					^	A Employer identification number 04-3366745			
_		per and street (or P.O. box number if mail is not delivered	d to stre	et address)		Room/suite	В	Telephone number			
				,					(and mondations)		
I	20 1	BOX 5300		800	0-392-9244						
	City or town, state or province, country, and ZIP or foreign postal code								372 7211		
							С	C If exemption application is pending, check here			
Ι	30S'	TON, MA 02206-5300						pending, check here			
_		ck all that apply. Initial return		Initial return	of a former p	ublic charit	УВ	1 Foreign organization	one check here		
		Final return		Amended re	turn			2 Foreign organization			
		Address change	Γ	Name change				85% test, check he computation			
H	Che	ck type of organization X Section 501	(c <u>)(3)</u> e	exempt private f	oundation			If private foundation s			
\perp	s	ection 4947(a)(1) nonexempt charitable trust		Other taxable pr	ıvate foundat	ion		under section 507(b)(
ı	Fair	market value of all assets at JAcco	unting	method X C	ash Acc	rual	F	If the foundation is in	a 60-month termination		
	end			her (specify)			_	under section 507(b)(1)(B), check here		
	16)	► \$ 2,207,539. (Part i	, colum	n (d) must be o	n cash basis)						
P	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a)	Revenue and	(b) Net inve	stment	(c) 4	Adjusted net	(d) Disbursements for charitable		
		may not necessarily equal the amounts in	e	xpenses per books	incom			income	purposes		
_		column (a) (see instructions))	<u> </u>						(cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule).		623,868.							
	2	Check ► L attach Sch B									
	3	Interest on savings and temporary cash investments		10 045		0 045			Omer		
-	4	Dividends and interest from securities	-	18,045	1	8,045.			STMT		
	5 a				-						
		Net rental income or (loss)		240,615.							
		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 63 659, 858.		240,013				7-			
Venu	_	assets on time oa			24	0,615.					
8	7	Capital gain net income (from Part IV, line 2) .			21	0,013.	·				
	8 9	Net short-term capital gain	<u> </u>						-		
		Gross sales less returns									
-	b	and allowances · · · · · Less Cost of goods sold	1								
		Gross profit or (loss) (attach schedule)									
	11	Other income (attach-schedule)		20,086	-1	2,774.			STMT		
	12	T-4-1 A-10 1 45 1 49		902,614.	24	5,886.					
	13	Compensation of officers, directors, trustees, etc.									
,	14	Other employee salaries and wages									
nse	15	Pension plans: employee benefitst	<u></u>								
읩		Legal fees (attach schedule)									
ũ		Accounting fees (attach schedule) STMT 3.		1,238		1,238.		NONE	NC NC		
Administrative	C	Other professional fees (attach schading . 4 .		13,572	<u> </u>	3,572.					
trat	17	Interest	<u> </u>	7 477		455					
ni:	18	Taxes (attach schedule) (see instructions) STMT. 5	\vdash	1,411		477.					
Ē	19	Depreciation (attach schedule) and depletion.									
	20	Occupancy	-								
ΞI	21	Travel, conferences, and meetings			<u> </u>						
- 1	22	Printing and publications Other expenses (attach schedule) STMT . 6 .	<u> </u>	75	 	-			7		
ij	23 24	Other expenses (attach schedule) ฉะเทน. 0. Total operating and administrative expenses.		/ 5	 						
Operating		Add lines 13 through 23		16,296	1	5,287.		NONE	7		
-	25	Contributions, gifts, grants paid		62,000		2,201.		110111	62,00		
- 1	26 26	Total expenses and disbursements. Add lines 24 and 25		78,296	1	5,287.		NONE	62,07		
\neg	27	Subtract line 26 from line 12	†						02,01		
-		Excess of revenue over expenses and disbursements	1	824,318				į			
		Net investment income (if negative, enter -0-)			23	0,599.			······································		
		Adjusted net income (if negative, enter -0-)			1			+			

JSA For Paperwork Reduction Act Notice, see instructions.

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25 G/6

Da	ırt II	Balance Sheets description column should be for end-of-year	Beginning of year	End of	year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
١	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	9,561.	376,020.	376,020
	3	Accounts receivable		~	
1		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
1		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			
ğ	9	Prepaid expenses and deferred charges			
Assets	-	Investments - U.S. and state government obligations (attach schedule)			
			803,639.	948,340.	1 665 006
		Investments - corporate stock (attach schedule)	003,039.	940,340.	1,665,996
	11 ^C	Investments - corporate bonds (attach schedule)	-		
	12	Investments - mortgage loans			
- 1	13	Investments other (ettech eshadule)	46,526.	73,659.	165,523
	14	l and huldings and			
		Less accumulated depreciation (attach schedule)			
ı	15	Other assets (describe			
- 1	16	Total assets (to be completed by all filers - see the			
1		instructions. Also, see page 1, item I)	859,726.	1,398,019.	2,207,539
7	17	Accounts payable and accrued expenses	0337720.	2/050/025.	2/201/333
	18		· · · · · · · · · · · · · · · · · · ·		
	19	Grants payable			
≌۱		Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
2	21				•
_	22	Other liabilities (describe			
1		7 . 1 . 1		370377	
\dashv	23	Total liabilities (add lines 17 through 22)		NONE	
Ses	24	Foundations that follow SFAS 117, check here . and complete lines 24 through 26 and lines 30 and 31. Unrestricted			
S١					
	25	Temporarily restricted			
힏	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, $\blacktriangleright X$ check here and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	859,726.	1,398,019.	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Asi	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	859,726.	1,398,019.	
2	31	Total liabilities and net assets/fund balances (see			
		instructions)	859,726.	1,398,019.	
P	art II	Analysis of Changes in Net Assets or Fund B			"
_		al net assets or fund balances at beginning of year - Part II		ust agree with	
•		-of-year figure reported on prior year's return).			859,726.
2					824,318.
2	O+b	er amount from Part I, line 27a			U47/J10.
					1,684,044.
F	Do-	I lines 1, 2, and 3	 FMFNT 7		
					286,025.
O	100	al net assets or fund balances at end of year (line 4 minus lir	ie oj - Farcii, column (D)	, iii ie 30 0	1,398,019.

Form 990-PF (2013) Part IV Capital Gains	and Losses for Tax on Inve	etment Income			Page
	d describe the kind(s) of property sold ((b) How acquired	(c) Date	(d) Date sold
2-story bi	rick warehouse, or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	acquired (mo , day, yr)	(mo., day, yr.)
1a PUBLICLY TRADED	SECURITIES		:		
b					
<u>c</u>					
<u>d</u> e					<u> </u>
-	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	nes)
(e) Gross sales price	(or allowable)	plus expense of sale	_	(e) plus (f) mini	us (g)
a 659,858.		419,243.			240,615.
b	· · · · · · · · · · · · · · · · · · ·			·	
<u> </u>				<u>.</u>	
<u>d</u>					
Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69		C-: (C-1 (b)	
(i) F.M.V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) ga (k), but not less t Losses (from co	than -0-) or
	as of 12/31/69	over col. (j), if any	-		240,615.
a b			<u> </u>		
C					
d					
e			ļ,		
Capital gain net income or	(not conital local	gain, also enter in Part I, line 7			240 615
	or (loss) as defined in sections 12.	(loss), enter -0- in Part I, line 7	2		240,615.
	t I, line 8, column (c) (see inst				
_		1	3		
Part V Qualification U	Inder Section 4940(e) for Red	uced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e).	outable amount of any year in the b	ase perio	d?	Yes X No
		see the instructions before making	any entri	es.	
(a) Base period years	(b)	(c)		(d) Distribution ra	etio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	ļ	(col (b) divided by	col (c))
2012	54,317.	1,186,529.	ļ .		0.045778
2011 2010	53,650. 41,075.	1,096,964. 943,888.	-		0.048908 0.043517
2009	3,275.	818,999.			0.003317
2008	70,075.	955,237.			0.073359
Total of line 1, column (d) <i></i>		2		0.215561
	for the 5-year base period - divide				
number of years the found	dation has been in existence if less	than 5 years	3		0.043112
		- Book V I.a. E	4	1	470 000
Enter the net value of nor	charitable-use assets for 2013 fro	m rant X, line 5	-		<u>,472,909.</u>
Multiply line 4 by line 3			5		63,500.
,					
Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		2,306.
Add lines 5 and 6			7		65 Qn <i>c</i>
Add lines 5 and 6			 '-+ -		65,806.
Enter qualifying distribution	ons from Part XII, line 4		8		62,075.
If line 8 is equal to or gr	eater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% tax	
Part VI instructions.					

1a Exempt operating foundations described in section 4940(d)(2), check here		4,6	512. 512. NONE 512.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		4,6 1 4,6	512. NONE 512.
here ▶ and enter 1% of Part I, line 27b. 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 3 Add lines 1 and 2		4,6 1 4,6	512. NONE 512.
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-)		2,6	NONE 512.
Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2,6	NONE 512.
3 Add lines 1 and 2		2,6	NONE 512.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2,6	NONE 512.
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments a 2013 estimated tax payments and 2012 overpayment credited to 2013. b Exempt foreign organizations - tax withheld at source. c Tax paid with application for extension of time to file (Form 8868). d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d. 6d 7 Total credits and payments of estimated tax Check here if Form 2220 is attached. 9 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. 10 Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ NONE Refunded ▶ 11		2,6	512.
6 Credits/Payments a 2013 estimated tax payments and 2012 overpayment credited to 2013		2,6	581.
a 2013 estimated tax payments and 2012 overpayment credited to 2013 6a			
b Exempt foreign organizations - tax withheld at source 6b NONE c Tax paid with application for extension of time to file (Form 8868) 6c 1, 405. d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d			
c Tax paid with application for extension of time to file (Form 8868) 6c 1,405. d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d			
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d			
7 Total credits and payments. Add lines 6a through 6d			
8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		Ι,:	171
11 Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ NONE Refunded ▶ 11			131.
""			
Fait VIPA Statements negarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	П	Yes	No
· · · · · · · · · · · · · · · · · · ·	1a	162	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	1ь		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			
, and the second	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1) On the foundation > \$ (2) On foundation managers > \$			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
foundation managers. > \$	l		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities	İ		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
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?	5		<u> </u>
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	ŀ		
By language in the governing instrument, or	İ		
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	6	Х	
with the state law remain in the governing instrument?	7	X	<u> </u>
			
NH			
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? If "No," attach explanation	8b	X	+
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete			x
Part XIV.	9		\vdash
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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). 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address ▶ N/A 14 The books are in care of ▶ INVESTORS BANK & TRUST Telephone no. ▶ (617) 537-3887 Located at ▶ PO BOX 5300, BOSTON, MA ZIP+4 ▶ 02206-5300 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Form	990-PF (2013) 04-3366/45			Page 5
meaning of section 512bil 13if #1 Yes, "attach schedule (see instructions). 12	Par	VII-A Statements Regarding Activities (continued)			
meaning of section 512bil 13if #1 Yes, "attach schedule (see instructions). 12	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			1
Design Design Preserved Preserved Preserved Design Preserved Design			11	<u> </u>	X
13 Dut the foundation comply with the public inspection requirements for its annual returns and exemption application? . 13 X Website address ▶ N/A 14 The books are in care of ▶ INVESTORS BANK 6 TRUST Totaphone no. ▶ (617) 537-3887 15 Section 4347all1) nonexempt chartrable trusts filing form 990-Filin lieu of form 1041 · Check here and enter the amount of tax-exempt interest received or accrued during the year. 15 A any time during claimed year 2013, did the foundation have an interest in or a signature or other surhority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form 10 F 90-22.1. If "Yes," enter the name of the foreign country ▶ Per VII-3 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. 1a During the year did the foundation feither directly or indirectly) (13 Engage in the sale or exchange, or leasing of property with a disqualified person?	12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
Website address ▶ N/A 1 The books are in case of ▶ INVESTORS BANK 6 TRUST Located at ▶ PO BOX 5300, BOSTON, MA 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-Fi in lieu of Farm 1041 Check here and enter the amount of tax-exempt interest received or accrued during the year. 16 At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securites, or other financial accruit in a foreign country? See the instructions for exceptions and filing requirements for Form 10 F 90:22.1. If "Yes," enter the name of the foreign country ⟩ Fart VII B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any tens is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or lessing of property with a disqualified person?		· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>
14 The books are in care of ▶ INVESTORS EABIK & TRUST	13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u> </u>	<u></u>
14 The books are in care of ▶INVESTORS_BANK & TRUST					
tocated at PPO BOX 5300, BOSTON, MA 15 Section 437(a)(1) nonexempt charable trust filing form 990-PF in lieu of form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year. 16 At any time during calendar year 2013, 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? See the instructions for exceptions and filing requirements for Form TD F 90-2.1. If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-2.1. If "Yes," enter the name of the foreign country. Part VII3 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. 1a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or lessing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to for accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of a disqualified person? (5) Transfer any income or assets to a disqualified person for make any of either available for the benefit or use of a disqualified person? (6) Agree to pay money or property to a government official? (Exception. Check "No." if the foundation spreed to make a great to or to employ the official for a penod after termination of government service, if terminating within 90 days.) b) if any on answer is "Yes" to fail 11-(6), did any of the acts fail to quality under the acceptions described in Regulations section 53 494 (16)3 or in a current notice regarding disaster assistance check here c) Did the foundation defined in section 4942(4)(3) or 4942(4)(3) or 4	14	The books are in care of ► INVESTORS BANK & TRUST Telephone no. ► (617) 537:	-388	7	
and enter the amount of tax-exempt interest received or accrued during the year		Located at ► PO BOX 5300, BOSTON, MA ZIP+4 ► 02206-5	5300		
16 At any time during calendar year 2013, 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? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶ Part VIIBB 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. 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?	15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	$\cdot \sqcup$
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶ Part VILB 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. 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?					
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country P Part VIIB 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. 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?	16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority	ı	Yes	l
Part VILB 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. 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?			16	L	<u> X</u>
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 a 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?					
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 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?					
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?	Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1 a				
disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or remburse the expenses of, a disqualified person? (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)? (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.) 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)? 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 2013? 2 Taxes on failure to distribute income (section 4942(j)(3) or 4		(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?					
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		· · · · · · · · · · · · · · · · · · ·			
(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)? (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.). 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)? Crganizations relying on a current notice regarding disaster assistance check here. c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? 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(i)(3) or 4					
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6e, Part XIII) for tax year(s) beginning before 2013?					
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all years listed, answer "No" and attach statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ——————————————————————————————————	•				
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			26		χ̈́
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		•	- 20	 	
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at any time during the year?	٠,				
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foundation had excess business holdings in 2013)					
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		· · · · · · · · · · · · · · · · · · ·	24		
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 2013? 4b X	A -			 	Y
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? 4b X			44	 	^\-
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	t VII-B Statements Regarding Activities for		20 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any amou					
	(1) Carry on propaganda, or otherwise attempt to influence				D	
	(2) Influence the outcome of any specific public ele	•	•			
	directly or indirectly, any voter registration drive?				•	
	(3) Provide a grant to an individual for travel, study, or oth	ner sımılar purposes?		. Yes X No	•	
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described	ın		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	ee instructions)		. Yes X No	•	
	(5) Provide for any purpose other than religious, ch	arıtable, scientific,	literary, or educationa	al		ĺ
	purposes, or for the prevention of cruelty to children of	or animals ⁷		Yes X No	.	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				n	
	Regulations section 53.4945 or in a current notice regard			•	. 5b	-
	Organizations relying on a current notice regarding disasti					
c	If the answer is "Yes" to question 5a(4), does the				<u> </u>	
•	because it maintained expenditure responsibility for the g		•		.	
	If "Yes," attach the statement required by Regulations section		· · · · · · · · · · · · ·		'	
6.	Did the foundation, during the year, receive any fund			-	i l	
Va		•			_	ļ
	on a personal benefit contract?				1 1	v
D	Did the foundation, during the year, pay premiums, directl	y or indirectly, on a p	ersonal benefit contrac	π ⁷	. 6b	<u> </u>
	If "Yes" to 6b, file Form 8870.					
	At any time during the tax year, was the foundation a part	•	•			·
	If "Yes," did the foundation receive any proceeds or have a				. 7b	
Par	t VIII Information About Officers, Directors and Contractors	, Trustees, roun	dation ivianagers,	Highly Paid Empi	oyees,	
1	List all officers, directors, trustees, foundation ma	nagers and their	compensation (see	instructions).		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens	
		devoted to position	enter -0-)	and deferred compensation	other allo	wances
	RT_L.V_FRENCH	TRUSTEE				
	LOFTSLAND FARM, EARLYSVILLE, VA 22936-9707		-0-	-0-		
	LEY_SFRENCH	VARIOUS				
325	LOFTSLAND FARM, EARLYSVILLE, VA 22936-9707		-0-	-0-		-0-
		- -				
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instruction	ons). If no	ne, enter
	"NONE."	41.7.4		(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expens other allo	e account,
		devoted to position		plans and deferred compensation	other and	wances
NON	NE		NONE	NONE	N	ONE
	·- ·-					
Tota	I number of other employees paid over \$50,000 .	L	_		NT.	ONE
1012	in number of other employees pald over \$30,000 .	· · · · · · · · · · · · · · · · · · ·)-PF (2013)
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All other program-related investments See instructions

Total. Add lines 1 through 3.

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundation	ns,
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	1,452,109.
b	Average of monthly cash balances	1b	43,230.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,495,339.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	İ	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	1,495,339.
4	Subtract line 2 from line 1d		
	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	22,430.
5		5	1,472,909.
6	Minimum investment return. Enter 5% of line 5	6	73,645.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ► and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	73,645.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 4, 612.		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2013. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	4,612.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	69,033.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	69,033.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	69,033.
Part	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	62,075.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	2	NONE
3	purposes Amounts set aside for specific charitable projects that satisfy the	-	NONE
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	62,075.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	·	02,013.
-	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62,075.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years.		

Pa	rt XIII Undistributed Income (see instru	ictions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				69,033.
2	Undistributed income, if any, as of the end of 2013		-=		
	Enter amount for 2012 only			47,863.	
b	Total for prior years 20 <u>11</u> ,20,20		NONE		
3	Excess distributions carryover, if any, to 2013				
	From 2008 NONE				
	From 2009 NONE				
	From 2010				
	From 2011				
	From 2012 NONE	NONE	•		
	Total of lines 3a through e	NONB			·
4	Qualifying distributions for 2013 from Part XII,			1	
	line 4 > \$ 62,075.			47.063	
	Applied to 2012, but not more than line 2a			47,863.	
Ь	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
			NONE		··· · · · · · · · · · · · · · · · · ·
C	Treated as distributions out of corpus (Election required - see instructions)	NONE			
а	Applied to 2013 distributable amount	110111			14,212.
	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2013	NONE			NONE
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a).) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract				-
_	line 4b from line 2b Enter the amount of prior years' undistributed		NONE		
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		NONE		
	tax has been previously assessed		NONE		
đ	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e	Undistributed income for 2012. Subtract line		1101112		
	4a from line 2a Taxable amount - see instructions				
1	Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2014				54,821.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONB			
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2014.	MONTE			
10	Subtract lines 7 and 8 from line 6a	NONB			
	Analysis of line 9 Excess from 2009 NONE				
	Excess from 2009 NONE]	
	Excess from 2011 NONE				
	Excess from 2012 NONE		+		
	Excess from 2013 NONE				
_					

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Par	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questio	on 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling	_			iting -	
ь	Check box to indicate who				4942(j)	(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years	<u> </u>	
2 a	Justed net income from Part t or the minimum investment return from Part X for each year listed	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
b	85% of line 2a					
	Qualifying distributions from Part					
Ī	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the alternative test relied upon					
a	"Assets' alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed "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					ma s
	(j)(3)(B)(iii)					
	(4) Gross investment income				-	
Pai		ntary Information (only if the found	ation had \$5,000	or more in assets
	<u>.</u>	during the year - s	 			
1	Information Regarding					
а	•	tax year (but only if th				ed by the foundation
	ROBERT L.' List any managers of		own 10% or more of	f the stock of a corn	oration for an equally	/ large portion of the
		ship or other entity) of				r large portion of the
	11011111					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	unsolicited requests f	the foundation only or funds. If the found plete items 2a, b, c, an	ation makes gifts, gra	to preselected chari ants, etc. (see instruct	table organizations a tions) to individuals o	and does not accept or organizations under
a	The name, address, an	d telephone number o	r e-mail address of the	person to whom app	lications should be add	dressed:
b	The form in which app	lications should be sul	omitted and information	on and materials they s	should include:	
С	Any submission deadli	ines:				
d	Any restrictions or lifactors.	mitations on awards,	such as by geogra	phical areas, charita	ble fields, kınds of i	nstitutions, or other

Part XV Supplementary Information	(continued)									
3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient frecipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Name and address (home or business) Amount Purpose of grant or contribution Purpos										
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount						
Name and address (home or business)	or substantial contributor	recipient	contribution							
a Paid during the year										
CD2 CD3 D73/73/73 11										
SEE STATEMENT 11				62,000.						
		1								
		ŀ								
				60.000						
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·			62,000.						
a Approved for fature payment										
NONE										
		0								
			,							
			 							
		1								
Total	<u></u>	<u></u>	▶ 3b							
				5 000 DE (

gross amounts unless otherwise indicated	Unrela	ited business income	Excluded by		
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption income (See instructions.
1					1000
					
					-
				-	
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments					
Dividends and interest from securities		·	14	18,045.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
Other investment income					
Sain or (loss) from sales of assets other than inventor			18	240,615.	
Net income or (loss) from special events				,	
Gross profit or (loss) from sales of inventory					
Other revenue a					
SEE STATEMENT 12				20,086.	
			ŀ		
				-	
		{	İ		
Subtotal Add columns (b), (d), and (e)	ulations)				278,7
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No. Explain below how each activities	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No. Explain below how each activities	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activities e No. Explain below how each activities	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No. Explain below how each activities	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities Re No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities Re No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities Re No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities Re No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities Re No. Explain below how each activities	ulations) to the Ac	complishment of Ending in the complishment of Ending in the complishment of Ending in the complex control in the c	xempt Purp	oses of Part XVI-A contribu	uted importantly t

Form 99	0-PF (20						0	<u>4-336674</u>	<u>5</u>			Pa	13 agu
Part 2	ΧVII	Information F Exempt Orga	legarding T nizations	ransfers	To and Tra	ansacti	ons and	Relations	hips Wi	th Non	chari	table	,
1 0	id the	organization direct	ly or indirectly	y engage i	in any of the	following	with any	other organ	ization de	scribed	13.5	Yes	No
		on 501(c) of the Co											
		ations?											
a T	ransfe	rs from the reportin	g foundation to	o a noncha	aritable exemp	ot organi	zation of:						
		h	-			_					18(1)		X
		er assets									1=(2)		X
		ansactions:											
1.	I) Sale	s of assets to a non	charitable exe	mot organ	ization						16(1)	Age Tar	X
(2	2) Purc	hases of assets fro	m e noncharita	ble exemi	ot organization	 1					16(2)		X
		tal of facilities, equi									1b(3)		X
i	l Rein	nbursement arrang	ements								15(4)		X
		ns or loan guarante									1b(5)		X
		ormance of services									1b(8)	-	X
		of facilities, equipm									10		X
		nswer to any of th										hair m	
v	alue o	f the goods, other	assets, or sen	vices give	n by the repo	irting for	indation. I	f the found	ition recei	ved less	than	fair m	arket
V (a) Lina		any transaction of	,		show in colur	·		f the goods		-			
(a) Line	no.	(B) MINORINI INVOIVED	(c) regime of	HORRING HOSD	e axempt organiz	auon	(c) Desci	ipcon or transfe	rs, transacuo	ns, erra erter	ing ana	ngeme	nts
			 										
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	-		 					· — – · — ·					
d	escribe	oundation directly ed in section 501(c) complete the follow (a) Name of organization	of the Code (wing schedule.	other than		c)(3)) or		5277		· · · · · ĺ		es []	No
		/=/ isette oi oiñsiismud	··	 	/at ithe of oids	.,,440,411		·	c) Description	, or consum	actif.		
				 									
				1	·····								
				1	_								
	Under	pensities of perjury, I deci- and complete Decisration of	are that I have some	mined this ret	um, including acco	mpenying so	hodules and	statements, and 1	o the best of	my knowled	pe and I	bellet, it	is true
Sign	abrida.		ווי שניים ו	A	(0)	on of wideli	Mehmet the st	ly scrownoge.					
	7	when d.	4 Thence	R I	10/25/4	OJU	TRUST	'EE		May the ER with the p		shown_	palow
Here	Sign	eture of afficer or trustee		t	Date		Title			see instructio	ns)? X]y==[No
	1								L				<u> </u>
D-:-		Print/Type preparat's na	ime	(Prepe	ırar's signatura	02		Cate	Chec	k if	PTIN		
Paid	- 1	JOSEPH M. ST	ROLLO	/se	ash 111.	SIR	REB	10/10/	014 self-	mployed	P002	409	68
Prepa	ırer	Firm's name ► TI	IOMSON REU	meks (YAX & ACC	OUNTI	VG)		Firm's EIN		1297		
Use (Only		THOMSON		MS 36T3								
	- 1		STON. MA			02	210		Phone no.	617-8	56-1	621	

Form 990-PF (2013)

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

20**13**

Department of the Treasury Internal Revenue Service Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs.gov/form990

Name of the organization Employee

Employer identification number

THE COMPASS FUND	4737682	04-3366745
Organization type (check of	one)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated a	es 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	
Instructions. General Rule)(7), (8), or (10) organization can check boxes for both the Gene	·
	on filing Form 990, 990-EZ, or 990-PF that received, during the my one contributor. Complete Parts I and II.	year, \$5,000 or more (in money or
Special Rules		
under sections 5	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1 09(a)(1) and 170(b)(1)(A)(vi) and received from any one contribu \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line and II.	itor, during the year, a contribution of
during the year, t	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that retotal contributions of more than \$1,000 for use <i>exclusively</i> for reurposes, or the prevention of cruelty to children or animals. Com	ligious, charitable, scientific, literary,
during the year, not total to more year for an <i>exclu</i> applies to this or	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that recontributions for use <i>exclusively</i> for religious, charitable, etc., pur than \$1,000. If this box is checked, enter here the total contribusively religious, charitable, etc., purpose. Do not complete any of ganization because it received <i>nonexclusively</i> religious, charitable, year	poses, but these contributions did utions that were received during the the parts unless the General Rule e, etc., contributions of \$5,000 or
990-EZ, or 990-PF), but it r	nat is not covered by the General Rule and/or the Special Rules on must answer "No" on Part IV, line 2, of its Form 990; or check the to certify that it does not meet the filing requirements of Schedu	e box on line H of its Form 990-EZ or on its

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) (2013)

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Name of organization Employer identification number THE COMPASS FUND 4737682 04-3366745 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. **Total contributions** Name, address, and ZIP + 4 Type of contribution ___1_ ROBERT V. FRENCH, TRUSTEE Person Payroli 325 LOFTLANDS FARM 623,868. Noncash (Complete Part II for EARLYSVILLE, VA 22936-9707 noncash contributions.) (c) (a) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person

(b)

Name, address, and ZIP + 4

		\$	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 Noncash (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 Noncash

(a)

No.

(Complete Part II for noncash contributions)

Payroll Noncash

(c)

Total contributions

(Complete Part II for noncash contributions.)

(d)

Type of contribution

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	1,1 1,1 1,1 1,1 1,1 1,0 1,0 1,0 1,0 1,0	18,045.
REVENUE AND EXPENSES PER BOOKS	1, 1, 2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	18,045.
DESCRIPTION	ALAMOS GOLD INC AMERICAN TOWER CORP APPLE COMPUTER INC COM BLOCK DIAMOND GROUP LTD BOLING CO COM CONSOLIDATED COMMUNICATIONS HOLDINGS CROSSTEX ENERGY INC CRYOLIFE INC DANAHER CORP COM DICKS SPORTING GOODS INC HANNON ARMSTRONG SUSTAINABLE HARSCO CORP KIMBERLY CLARK CORP COM NRG YIELD INC-CLASS A NATL -OILWELL INC COM RATL -OILWELL INC TARGA RESOURCES CORP TWIN BUTTE ENERGY LTD WHITESTONE REIT B WILLIAMS COMPANIES INC COM TEXTAINER GROUP HOLDINGS LTD KNOT OFFSHORE PARTNERS LP SEADRILL PARTNERS LLC	TOTAL

4737682

FORM 990PF, PART I - OTHER INCOME

NET INVESTMENT INCOME	-1,179. -1,179. -1,179. -1,269. -1,031. -1,031. -1,117. -1,117. -1,117. -1,117. -1,117. -1,177. -1,286. -1,933. -1,933. -1,933. -1,933. -1,933. -1,933. -1,933. -1,933.	
REVENUE AND EXPENSES PER BOOKS	1,510. 160. 1,024. 1,917. 1,306. 2,098. 345. 989. 355. 2,370. 1,296. 660. 1,199. 1,337. 20,086.	
DESCRIPTION	ARC LOGISTICS LP ATLAS ENERGY ACCESS MIDSTREAM PARTNERS LP EQT MIDSTREAM LP ENTERPRISE PRODS PARTNERS LP GENESIS ENERGY LP LINN ENERGY LLC MPLX LP MAGELLAN MIDSTREAM PARTNERS LP MARKWEST ENERGY PARTNERS LP ONEOK PARTNERS LP PHILLIPS 66 PARTNERS LP ONEOK PARTNERS LP ONEOK PARTNERS LP SUNCOKE ENERGY PARTNERS LP SUNCOKE ENERGY PARTNERS LP SUNCOKE ENERGY PARTNERS LP SUNCOKE ENERGY PARTNERS LP SUNCOKE ENERGY PARTNERS LP TALLGRASS ENERGY PARTNERS LP TALLGRASS ENERGY PARTNERS LP TALLGRAS ENERGY PARTNERS LP TALLGRAS ENERGY PARTNERS LP TALLGRAS ENERGY PARTNERS LP TALLGRAS ENERGY PARTNERS LP WESTERN GAS EQUITY PARTNERS WESTERN GAS EQUITY PARTNERS WESTERN GAS PARTNERS LP WESTERN GAS PARTNERS LP WESTERN GAS PARTNERS LP WESTERN GAS PARTNERS LP WESTERN GAS EQUITY PARTNERS WESTERN GAS PARTNERS LP WESTERN REFINING LOGISTICS LP WESTERN REFINING LOGISTICS LP WORLD POINT TERMINALS LP CLASS ACTION PROCEEDS GIANT INTERACTIVE	

4737682

0

STATEMENT

CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,238. 1,238. ===========
REVENUE AND EXPENSES PER BOOKS	1,238. 1,238. 1,238.
DESCRIPTION	CUSTODIAN & MANAGEMENT FEES (A TOTALS

4737682

FEES	
PROFESSIONAL	
OTHER	
ı	
PART I	
990PF,	
FORM	

	NET	INVESTMENT	INCOME	1 1 1 1	13,572.		13,572.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13,572.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13,572.	H H H H H H H H H H H H H H H H H H H
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	INVESTMENT MGMT FEES-SUBJECT T		TOTALS	

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TAXES	
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PART	
990PF,	
FORM	11 11 11 11

NET INVESTMENT INCOME	i ! !	477.	477.
REVENUE AND EXPENSES PER BOOKS	 	477.	1,411.
		- PRINCIPAL	TOTALS
DESCRIPTION	1 1 1 1 1	FOREIGN TAXES FEDERAL ESTIMATES -	

- OTHER EXPENSES FORM 990PF, PART I

REVENUE AND EXPENSES PER BOOKS

CHARITABLE PURPOSES

NH ANUAL FILING FEE

DESCRIPTION

75.

75.

TOTALS

26

9

FORM 990PF,	PART III -	OTHER DECREASES	IN NET WORTH C	R FUND BALANCES
=========	==== == ====	=======================================	===========	=========

DESCRIPTION AMOUNT

PARTNERSHIP ADJUSTMENT
ROUNDING ADJUSTMENT
IN-KIND CONTRIBUTION ADJUSTMENT

2. 191,647.

94,376.

TOTAL

286,025.

AMOUNT OF GRANT PAID

NORTH ANDOVER, MA 01845-3381

FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP:

PURPOSE OF GRANT: GENERAL SUPPORT

NA

501C3

1,000.

THE COMPASS FUND 4737682 04-3 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	366745
RECIPIENT NAME: CENTER FOR NON-PROFIT EXCELLENCE	
ADDRESS: 1701-A ALLIED STREET CHARLOTTESVILLE, VA 22903	
RELATIONSHIP:	
PURPOSE OF GRANT: GENERAL SUPPORT	
FOUNDATION STATUS OF RECIPIENT: 501C3 AMOUNT OF GRANT PAID	3,000.
	3,000.
RECIPIENT NAME: SALVATION ARMY	
ADDRESS: 615 SLATERS LANE ALEXANDRIA, VA 22313	
RELATIONSHIP: NA	
PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:	
501C3	
AMOUNT OF GRANT PAID	5,000.
RECIPIENT NAME: ALZHEIMER'S ASSOCIATION	
ADDRESS: 225 N. MICHIGAN AVENUE, FL 17 CHICAGO, IL 60601	
RELATIONSHIP: NA	
PURPOSE OF GRANT: DISEASE RESEARCH	
FOUNDATION STATUS OF RECIPIENT: 501C3	
AMOUNT OF GRANT PAID	5,000.

THE COMPASS FUND 4737682 04-3366745 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HOSPICE OF THE PIEDMONT INC. ADDRESS: 675 PETER JEFFERSON PKWY, #300 CHARLOTTESVILLE, VA 22911 RELATIONSHIP: NA PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 501C3 AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: SOUTHERN ENVIRONMENTAL LAW CENTER ADDRESS: 201 WEST MAIN STREET CHARLOTTESVILLE, VA 22902 **RELATIONSHIP:** NA PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 501C3 AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: CHILDREN YOUTH & FAMILY SERVICES ADDRESS: 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902 **RELATIONSHIP:**

NA

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

501C3

AMOUNT OF GRANT PAID 5,000.

THE COMPASS FUND 4737682 04-3366745 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SPECIAL OLYMPICS VIRGINIA INC ADDRESS: 3212 SKIPWITH ROAD, SUITE 100 RICHMOND, VA 23294 **RELATIONSHIP:** NA PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 501C3 AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: CHARLOTTESVILLE FREE CLINIC ADDRESS: 1138 ROSE HILL DR., #200 CHARLOTTESVILLE, VA 22903-5162 RELATIONSHIP: NA PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 501C3 AMOUNT OF GRANT PAID 1,000. TOTAL GRANTS PAID: 62,000.

12

04-3366745

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

RELATED OR EXEMPT FUNCTION INCOME																						
Ö	1 1 1 1 1	305.	160.	1,510.	1,024.	1,917.	1,306.	733.	2,098.	995.	345.	355.	195.	2,370.	. 686	554.	1,296.	. 099	1,199.	-	503.	235.
		0	0	0	0	0	0	0	0	0	0	0	0	0	0 ,	0	0	0	0	0	0	0
PTIO			ACCESS MIDSTREAM P	ATLAS ENERGY LP	EQT MIDSTREAM PART	ENTERPRISE PRODS P	GENESIS ENERGY LP	MPLX LP	MAGELLAN MIDSTREAM	MARKWEST ENERGY PA	MARLIN MIDSTREAM P	ONEOK PARTNERS LP	QEP MIDSTREAM PART	RENTECH NITROGEN P	SUNCOKE ENERGY PAR	SUNOCO LOGISTICS P	SUSSER PETROLEUM P	TALLGRASS ENERGY P	TARGA RESOURCES PA	WESTERN GAS PARTNE	WESTERN GAS EQUITY	WORLD POINT TERMIN

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Information about Schedule D and its separate instructions is at www.irs.gov/form1041

OMB No 1545-0092

2013

Name of estate or trust Employer identification number THE COMPASS FUND 4737682 04-3366745 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) (h) Gain or (loss) the lines below. Adjustments Subtract column (e) to gain or loss from from column (d) and Proceeds Cost This form may be easier to complete if you round off cents (sales price) Form(s) 8949, Part I, combine the result with (or other basis) line 2, column (a) column (a) to whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 259,201. 224,648. 34,553 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 4 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2012 Capital Loss Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on 34,553 Part | Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (g) Adjustments (h) Gain or (loss) the lines below (d) (e) Subtract column (e) Proceeds Cost to gain or loss from Form(s) 8949, Part II. from column (d) and This form may be easier to complete if you round off cents (sales price) (or other basis) combine the result with line 2, column (g) column (g) to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 400,644. 194,595. 206,049 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts..... 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2012 Capital Loss 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on 206,062

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

Sched	dule D (Form 1041) 2013				Page
Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate	2'9
•	Caution: Read the instructions before completing this pa	art.	(see instr.)	or trust's	s (3) Total
17	Net short-term gain or (loss)	17			34,553
18	Net long-term gain or (loss):				
а	Total for year	18a		<u> </u>	206,062
Ь	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b			6
C	28% rate gain	18c			1,253
	Total net gain or (loss). Combine lines 17 and 18a ▶	19			240,615
gains	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 s, go to Part V, and do not complete Part IV If line 19, column (3), is a n ssary.	or Fo et loss	rm 990-T, Part I, line s, complete Part IV a	4a) If lines 18a nd the Capital L	and 19, column (2), are to Loss Carryover Worksheet,
Par	t IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P				
a	The loss on line 19, column (3) or b \$3,000		1 /ra 22 /ar Farm 0	<u>2</u>	0 (
	Carryover Worksheet in the instructions to figure your capital loss carryover	paye	i, line 22 (di Folili 9	30-1, lille 34), is	s a loss, complete the cap i
Par	t V Tax Computation Using Maximum Capital Gains Rate	s			
Form	1 1041 filers. Complete this part only if both lines 18a and 19 in col	umn (2) are gains, or an	amount is ente	ered in Part I or Part II a
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thar	zero.		
	ion: Skip this part and complete the Schedule D Tax Worksheet in the i	nstruc	tions ıf:		
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.		116		
	n 990-T trusts. Complete this part only if both lines 18a and 19 a orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part				
	her line 18b, col. (2) or line 18c, col. (2) is more than zero. Skip this part	and c	ompiete the Sched	ile D lax wor	ksneet in the instructio
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4)	. 21		
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero				
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T)				
24	Add lines 22 and 23	-	-		•
25	If the estate or trust is filing Form 4952, enter the		<u> </u>		
	amount from line 4g; otherwise, enter -0 ► 25		-		
26 27	Subtract line 25 from line 24. If zero or less, enter -0		·		
27 20	Subtract line 26 from line 21. If zero or less, enter -0-		·		
28	Enter the smaller of the amount on line 21 or \$2,450		·		
29	Enter the smaller of the amount on line 27 or line 28				
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is	taxed	31	▶ 3	
31	Enter the smaller of line 21 or line 26		•		
32 33	Subtract line 30 from line 26				
33 34					
35	Add lines 27 and 30				
36	Enter the smaller of line 32 or line 35		_		
30 37	Multiply line 36 by 15%			▶ 3	7
38	Enter the amount from line 31				<u></u>
39	Add lines 30 and 36				
40	Subtract line 39 from line 38. If zero or less, enter -0-				
41	Multiply line 40 by 20%			▶ 4	1
42	Figure the tax on the amount on line 27. Use the 2013 Tax Rate Schedule for		1 1	· · · · · · · · · · · · · · · · · · ·	
	and Trusts (see the Schedule Ginstructions in the instructions for Form 1041)				
43	Add lines 37, 41, and 42		·		
44	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule for		' 	-	
•	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1 1		
		-			i e

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www.irs gov/form8949.

OMB No 1545-0074

Attachment Sequence No

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

THE COMPASS FUND 4737682

Social security number or taxpayer identification number

04-3366745

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if any, to gain or loss If you enter an amount in column (g) enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo., day, yr)	disposed (Mo , day, yr)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
1100 SUMMIT MIDSTREAM PAR		•						
	VAR	01/08/2013	21,915.00	21,514 00			401 00	
50 TYLER TECHNOLOGIES INC	VAR	01/29/2013	2,677.00	1,935.00	•		742 00	
200. ELEMENT FINANCIAL COR	09/04/2012	01/30/2013	1,585 00	1,171.00			414 00	
92. SYNTA PHARMACEUTICALS	04/25/2012	01/31/2013	1,023 00	413 00			610.00	
186. SYNTA PHARMACEUTICALS	04/25/2012		2,076.00	836 00			1,240.00	
90 EQT MIDSTREAM PARTNERS	06/27/2012		3,594.00	2,035.00			1,559 00	
50 GENESIS ENERGY LP	10/26/2012		2,362.00	1,313.00				
163. FLOTEK INDUSTRIES INC	09/06/2012		•	.,		770-	1,049.00	
183. EPL OIL & GAS INC			2,628 00	1,934.00			694.00	
187. FLOTEK INDUSTRIES INC	VAR	03/27/2013	4,967.00	2,897.00			2,070.00	
67 EPL OIL & GAS INC	09/06/2012 VAR	03/27/2013	2,985 00	2,219 00			766.00	
10. SUSSER PETROLEUM PARTN			1,805 00	1,058 00			747.00	
186. ONEOK PARTNERS LP	09/20/2012 VAR	03/28/2013	325 00	231.00			94.00	
314. ONEOK PARTNERS LP			10,602.00	9,030.00			1,572 00	
2 Totals. Add the amounts in column act negative amounts). Enter early our Schedule D, line 1b (if Box A Box B above is checked), or line 3	th total here and above is checking (if Box C above	d include on ed), line 2 (if e is checked) >	L	15,243.00			2,713.00	

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 3X2615 2 000

(C) Short-term transactions not reported to you on Form 1099-B

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www irs gov/form8949

OMB No 1545-0074

Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return THE COMPASS FUND 4737682 Social security number or taxpaver identification number

Adjustment, if any, to gain or loss

04-3366745

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	enter a cod	amount in column (g), de in column (f) arate instructions	(h) Gain or (loss) Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr.)	disposed (Mo , day, yr.)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
46. SUSSER PETROLEUM PARTN	/ /					-		
26 000000 00000000000000000000000000000	09/20/2012	04/17/2013	1,468 00	1,065 00			403.00	
36 SUSSER PETROLEUM PARTN	09/20/2012	04/18/2013	1,151.00	834 00			317.00	
210. EQT MIDSTREAM PARTNER	06/27/2012		-8,424.00	4,781.00				
55 WESTERN GAS EQUITY PAR				-			3,643.00	
141 MECERDAL CAC POLITER DA	12/07/2012	05/06/2013	2,180.00	1,442 00			738.00	
141. WESTERN GAS EQUITY PA	12/07/2012	05/10/2013	5,575 00	3,697 00			1,878.00	
35 WESTERN GAS EQUITY PAR	12/07/2012	05/13/2013	1,402.00	918 00			484.00	
16 WESTERN GAS EQUITY PAR	12/07/2012		633.00	419.00			214.00	
10. WESTERN GAS EQUITY PAR			033.00	417.00			214.00	
	12/07/2012	05/16/2013	395.00	262.00			133.00	
1. WESTERN GAS EQUITY PART	12/07/2012	05/20/2013	39 00	26.00	:		13 00	
41. WESTERN GAS EQUITY PAR	12/07/2012	05/21/2013	1,600 00	1,075.00			525.00	
1 WESTERN GAS EQUITY PART	12/07/2012	•	39 00	26 00				
94 EQT MIDSTREAM PARTNERS	12/01/2012	<u>V3/22/2013</u>	39 00	26 00			13.00	
	06/27/2012	06/10/2013	4,379.00	2,143.00			2,236.00	
106. EQT MIDSTREAM PARTNER								
33. SUSSER PETROLEUM PARTN	06/27/2012	00/11/2013	4,896.00	2,145.00			2,751.00	
	09/20/2012	06/11/2013	940.00	750 00			190.00	
2 Totals. Add the amounts in coluract negative amounts). Enter ear your Schedule D, line 1b (if Box Box B above is checked), or line	ch total here and A above is checke	d include on ed), line 2 (if						

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 3X2615 2 000

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

THE COMPASS FUND 4737682

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification number

04-3366745

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term Part I transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below, Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	If you enter an a enter a coo	any, to gain or loss mount in column (g), le in column (f). rate instructions	(h) Gain or (loss) Subtract column (e)
(Example 100 sh XYZ Co)	(Mo., day, yr)	disposed (Mo., day, yr)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
375. SUSSER PETROLEUM PART	VAR	06/12/2013	10 617 00	8,432 00			2 105 00
25 AMERICAN TOWER CORP	VAK	06/12/2013	10,617 00	8,432 00	 		2,185.00
23 AMERICAN TONER CORP	02/26/2013	06/27/2013	1,857.00	1,874 00			-17.00
600. ONEOK NEW	05/01/2013		26,201.00	29,242.00			-3,041.00
338. WILLIAMS COMPANIES IN	1 23/ 02/ 2020	V./ ==/ ==0	20,202.00				3,012.00
	VAR	07/24/2013	11,462 00	11,278 00			184 00
65. PHILLIPS 66 PARTNERS L	07/23/2013	07/25/2013	2,000 00	1,495 00			505 00
30. TARGA RESOURCES PARTNE	01/17/2013	07/25/2013	1,503.00	754.00			749.00
64. WILLIAMS COMPANIES INC	05/09/2013		2,144.00	2,328.00			-184.00
198. WILLIAMS COMPANIES IN							
1300 COASTAL CONTACTS INC	12/20/2012	07/26/2013	6,708.00	6,507.00			201.00
1500 CORDIAL CONTACTO INC	VAR	08/26/2013	6,275.00	8,122 00			-1,847.00
300. VITAMIN SHOPPE INC	01/07/2013		12,414 00	16,816.00			-4,402 00
150. CONCUR TECHNOLOGIES I	10/22/2012		16,838 00	9,915 00			6,923 00
1700. CROCS INC	VAR	10/11/2013					
220 WESTERN GAS PARTNERS	VAR	10/11/2013	22,668.00	26,787.00			-4,119.00
	01/17/2013	10/21/2013	13,363.00	8,959.00			4,404.00
30 WESTERN GAS PARTNERS L		10/22/2013	1,829.00	1,222 00			607 00
2 Totals Add the amounts in column act negative amounts). Enter each your Schedule D, line 1b (if Box A Box B above is checked), or line 3	ins (d), (e), (g), a h total here and a above is checke t (if Box C above	nd (h) (subtr- d include on ed), line 2 (if e is checked) >			(a) the basis	as reported to the	

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 3X2615 2 000

Form **8949**

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www irs.gov/form8949.

OMB No 1545-0074

Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment 12A

Name(s) shown on return

THE COMPASS FUND 4737682

Social security number or taxpayer identification number

04-3366745

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check. Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if a lift you enter an a enter a cod See the sepa	(h) Gain or (loss) Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo., day, yr.)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
272. SUNCOKE ENERGY PARTNE	01/18/2013	10/30/2013	7,377 00	5,046 00			2,331 00
78 CRYOLIFE INC	VAR	11/04/2013	743.00	482 00	-	-	261.00
122 CRYOLIFE INC	VAR	11/05/2013	1,147.00	753 00			394.00
15. SUNCOKE ENERGY PARTNER	01/18/2013		408 00	278 00			130 00
28. SUNCOKE ENERGY PARTNER	01/18/2013		762.00	519 00			243 00
34. SUNCOKE ENERGY PARTNER	01/18/2013		922.00	628 00			294 00
51 SUNCOKE ENERGY PARTNER	01/18/2013		1,383.00	946.00			437.00
50. CONSOLIDATED COMMUNICA HOLDINGS	04/17/2013		959.00	853.00			106.00
2 Totals. Add the amounts in colur act negative amounts) Enter ea your Schedule D, line 1b (if Box Box B above is checked), or line	ch total here and A above is checke	d include on ed), line 2 (if	259,201.	224,648.			34,553.

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions. JSA 3X2615 2 000

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side)

Social security number or taxpayer identification number

• THE COMPASS FUND 4737682

04-3366745

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo., day, yr)	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and	If you enter an a enter a coo	any, to gain or loss imount in column (g), de in column (f), trate instructions	(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 Sil X12 CO)	(Wo., day, yr)	(Mo , day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
1200. LINN ENERGY LLC-UNIT	VAR	01/18/2013	44,944.00	20 027 00			15 117 00
447. CYS INVESTMENTS INC	VAR	01/29/2013	5,738 00	29,827.00 4,065.00			15,117.00
197 CYS INVESTMENTS INC	06/12/2009	01/30/2013	2,533.00	1,774 00			759.00
150. GENESIS ENERGY LP	06/06/2011	03/11/2013	7,087 00	3,278.00			3,809.00
600. ALAMOS GOLD INC	VAR	03/14/2013	8,361 00	10,112.00	-		-1,751 00
100 TARGA RESOURCES CORP	08/19/2011	03/26/2013	6,618.00	3,027 00			3,591.00
150 MARKWEST ENERGY PARTN	06/08/2011	04/04/2013	8,691.00	5,193 00			3,498.00
200. SPDR GOLD TRUST	VAR	05/02/2013	28,402.00	27,149.00	С		1,253.00
100. KIMBERLY CLARK CORP C	12/25/1995	05/16/2013	10,396.00	438.00			9,958.00
265. ALAMOS GOLD INC	07/26/2010	06/12/2013	3,720 00	3,903.00			-183 00
25. BOEING CO COM	04/23/2012	06/12/2013	2,540.00	1,813.00			727.00
128. ALAMOS GOLD INC	07/26/2010	06/13/2013	1,771.00	1,885.00			-114.00
325 AMERICAN TOWER CORP	VAR	06/27/2013	24,141.00	12,771.00			11,370.00
24. ALAMOS GOLD INC	07/26/2010	07/18/2013	328 00	353 00			-25.00
2 Totals. Add the amounts in col (subtract negative amounts). Er include on your Schedule D, lin checked), line 9 (if Box E above (if Box F above is checked)) ▶	nter each total e 8b (if Box D	here and above is		-			

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return. (Name and SSN or taxpayer identification no not required if shown on other side)

Social security number or taxpayer identification number

·THE COMPASS FUND 4737682

04-3366745

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Part II

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

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- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- X (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and	If you enter an a enter a coo	any, to gain or loss mount in column (g), de in column (f), rate instructions	(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sh. XYZ Co)	(Mo., day, yr)	(Mo , day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
583. ALAMOS GOLD INC	VAR	07/22/2013	8,164.00	7,604.00			560 00
226. TARGA RESOURCES PARTN	08/18/2010		11,563.00	1,243 00			10,320 00
44 TARGA RESOURCES PARTNE	08/18/2010		2,205 00	-,		-	2,205.00
15. TARGA RESOURCES PARTNE	08/18/2010		754 00	72 00			682.00
140. WILLIAMS COMPANIES IN	06/18/2012		4,743.00	4,167.00			576.00
85 TARGA RESOURCES PARTNE	08/18/2010		4,227 00	406.00			3,821.00
60 WILLIAMS COMPANIES INC	06/18/2012		2,035 00	1,786 00			249 00
95. TARGA RESOURCES PARTNE	08/18/2010		4,703.00	455.00			4,248.00
143. TARGA RESOURCES PARTN	08/18/2010		7,128 00	988 00			6,140.00
12 TARGA RESOURCES PARTNE	08/18/2010	08/01/2013	599 00	254.00			345.00
145. MARKWEST ENERGY PARTN	06/08/2011		10,104 00	4,519.00			5,585.00
111. MARKWEST ENERGY PARTN	06/08/2011		7,472.00	3,463 00			4,009.00
94 MARKWEST ENERGY PARTNE	06/08/2011		6,444.00				3,512 00
400. VIRNETX HOLDING CORP	VAR	10/11/2013					-2,112.00
2 Totals. Add the amounts in co (subtract negative amounts). E include on your Schedule D, li checked), line 9 (if Box E abov (if Box F above is checked) ▶	lumns (d), (e), inter each tota ne 8b (if Box D	(g), and (h) I here and I above is					

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(Example 100 sh XYZ Co)	(Mo., day, yr.)	(Mo , day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
109. WESTERN GAS PARTNERS	06/03/2011	10/22/2013	6,644.00	2,790.00			3,854.00
61 SEADRILL PARTNERS LLC	10/19/2012	10/23/2013	2,011.00	1,416.00			595 00
70 WESTERN GAS PARTNERS L	06/03/2011	•	4,264.00	2,045 00			2,219 00
76. SEADRILL PARTNERS LLC	10/19/2012		2,506.00	1,765 00			741.00
86 WESTERN GAS PARTNERS L	06/03/2011		5,254.00	2,265.00			2,989.00
25 WESTERN GAS PARTNERS L	06/03/2011		1,523.00	745.00			778.00
80 WESTERN GAS PARTNERS L	06/03/2011	•		2,337.00		•	2,389.00
60. WESTERN GAS PARTNERS L	06/03/2011		3,591.00	1,753 00			1,838.00
70. WESTERN GAS PARTNERS L	06/03/2011	10/31/2013	4,196 00	1,792 00		·	2,404 00
131. SEADRILL PARTNERS LLC	10/19/2012	11/06/2013	4,355 00	2,986 00			1,369.00
900. KIMBERLY CLARK CORP C		11/21/2013	97,070 00	3,944.00			93,126.00
73 CONSOLIDATED COMMUNICA HOLDINGS	02/16/2011	11/29/2013	1,406.00	1,270 00			136.00
22 CONSOLIDATED COMMUNICA HOLDINGS	02/16/2011		422 00	383 00			39 00
29 CONSOLIDATED COMMUNICA HOLDINGS		12/05/2013	556.00	504.00			52.00
2 Totals. Add the amounts in c (subtract negative amounts). include on your Schedule D, checked), line 9 (if Box E about (if Box F above is checked))	olumns (d), (e), Enter each tota line 8b (if Box D ove is checked),	(g), and (h) here and above is or line 10	250.00				

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Page 2

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(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr.)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
76. CONSOLIDATED COMMUNICA HOLDINGS	02/16/2011	12/06/2013	1,457.00	1,322.00			135 00
180. CONSOLIDATED COMMUNIC HOLDINGS		12/09/2013	3,451.00	3,131.00			320 00
551. RENTECH NITROGEN PART	02/10/2011		3,431.00	3,131.00			320 00
449. RENTECH NITROGEN PART	VAR	12/17/2013	9,344.00	7,997.00			1,347.00
	11/04/2011	12/18/2013	7,780 00	6,541.00			1,239.00
243. CONSOLIDATED COMMUNIC HOLDINGS	02/16/2011	12/19/2013	4,658 00	4,227 00			431 00
127 CONSOLIDATED COMMUNIC HOLDINGS	02/16/2011	12/20/2013	2,435.00	2,209.00			226.00
-							
					1		
							
2 Totals. Add the amounts in co (subtract negative amounts).							
include on your Schedule D, I checked), line 9 (if Box E abo (if Box F above is checked) ▶	ine 8b (if Box C ve is checked),	above is	400,644.	194,595.			206,049.

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Form **8949** (2013)

BJA356 664U

Form 8	868 (Rev. 1-2014)				Page 2
	ou are filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part I	I and check this box	
	Only complete Part II if you have already been gran				
 If y 	ou are filing for an Automatic 3-Month Extension,	complete c	only Part I (on page 1).		
Part		ctension c	of Time. Only file the ori	ginal (no copies needed).	
			E	nter filer's identifying number, see	
	Name of exempt organization or other filer, see in	structions.		Employer identification number (I	EIN) or
Type	or			1	
print				04-3366745	<u> </u>
File by	Number, street, and room or suite no. If a P.O. bothe	x, see instruc	ctions.	Social security number (SSN)	
due da	te for IPO BOX 5300		. <u>. </u>		
filing ye return		a foreign ad	dress, see instructions.		
instruc	tions <u>BOSTON, MA 02206-5300</u>		· · · · · · · · · · · · · · · · · · ·		
Enter	the Return code for the return that this application	is for (file a		nch return)	
Appl	ication	Return	Application		Return
Is Fo		Code	Is For		Code
Forn	1 990 or Form 990-EZ	01			
	n 990-BL	02	Form 1041-A		08
Forn	1 4720 (individual)	03	Form 4720 (other than in	ndividual)	09
Forn	n 990-PF	04	Form 5227		10
Forn	n 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11_
	n 990-T (trust other than above)	06	Form 8870		12
	! Do not complete Part II if you were not already of			sion on a previously filed Forn	n 8868.
	e books are in the care of ► STATE STREET BA			 ,	
	lephone No. ► <u>(617)537-3887</u>	<u> </u>	Fax No. ►		. \Box
	he organization does not have an office or place of l				
	his is for a Group Return, enter the organization's fo				
	e whole group, check this box ▶I		art of the group, check this	box ▶ and at	tach a
	ith the names and EINs of all members the extension			11 /18 00 14	
4	I request an additional 3-month extension of time u			<u>11/17</u> , 20 <u>14</u> .	20
5	For calendar year 2013 , or other tax year beginn				, 20
6	If the tax year entered in line 5 is for less than 12 m	ionths, che	ck reason: Initial re	eturn Final return	
_	Change in accounting period	TELLOTE	TIME IC NEEDED TO	N DDEDADE AM	
7	State in detail why you need the extension ADD	TITONAL	TIME 15 NEEDED 10	PREPARE AN	· · · · · · · · · · · · · · · · · · ·
	ACCURATE TAX RETURN			· · · · · · · · · · · · · · · · · · ·	
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	If this application is for Forms 990-BL, 990-PF, 9	200 T 472	0 or 6060 optor the tor	stativo tay loce any	
ъa	nonrefundable credits. See instructions.	330-1, 472	o, or occes, enter the ter	8a \$	2,400.
L	If this application is for Forms 990-PF, 990-T	4720 0	vr 6069 enter any refu	The state of the s	2,400.
D	estimated tax payments made. Include any pi			la sali	
	amount paid previously with Form 8868.	noi year .	overpayment anowed as	8b \$	2,400.
^	Balance Due. Subtract line 8b from line 8a. Include	VOUL DAVID	nent with this form, if requi		2,100.
C	(Electronic Federal Tax Payment System). See instru		nent with this form, in requi	8c \$	
	Signature and Verific		st he completed for I		
Unde know	r penalties of perjury, I declare that I have examined ledge and belief, it is true, correct, and complete, and that	this form, in	ncluding accompanying sche	-	e best of my
	<u> </u>		•		
Signs	ture >		Title ▶	Date ► 08/0	7/2014
5.90					8 (Rev 1-2014)