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Form **990-PF**

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

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2013

OMB No 1545-0052

| | | | | ax year beginning | , 2013 | , and ending | | , | |
|---------------|------|----------|---|---|--|--------------------|-----------|--|----------------------------------|
| Name | | | | ATTON C/O EMI | IE W TACOURS | | Α | Employer identification nui | mber |
| Numbe | r an | d stree | et (or P O box number | ATION C/O EMI. If mail is not delivered to stre | et address) | Room/suite | В | Telephone number (see the i | nstructions) |
| | | | POINT ROA | | | j | | (203) 692-248 | • |
| | | | • | and ZIP or foreign postal cod | | 06030 | С | If exemption application is | ponding check here ▶ □ |
| GRE | | | | Instint nation | | 06830 | • | it exemption application is | pending, check here. |
| GC | mei | ck an | that apply: | Initial return Final return | Initial Return of a form | ner public charity | D | 1 Foreign organizations, che | ck here |
| | | | | Address change | Name change | | [| 2 Foreign organizations med | eting the 85% test, check |
| Н | Ch | eck | type of organizati | | i01(c)(3) exempt private for | undation | l | here and altach computati | on |
| | | | | nonexempt charitable | | | E | If private foundation status | |
| 1 | Fai | mar | ket value of all assets | s at end of year J | Accounting method X C | ash Accrual | | under section 507(b)(1)(A) | , check here |
| > | | m Pa | | | Other (specify) t I, column (d) must be on a | ,-, | F | If the foundation is in a 60- | month termination |
| Par | Ψ_ | IA | 2,669, nalysis of Re | | | | <u>_</u> | under section 507(b)(1)(B) | , cneck nere [_] |
| | | | | total of amounts in | (a) Revenue and expenses per books | (b) Net investmen | t | (c) Adjusted net income | (d) Disbursements for charitable |
| | | CO | lumns (b), (c), an | nd (d) may not neces- | CAPCINGES PER BOOKS | l liteoffic | | Income | purposes |
| | | (Si | ee instructions)) | ounts in column (a) | | | | | (cash basis only) |
| | 1 | 1 | Contributions, gifts, g | rants, etc, received (att sch) | | | | | |
| | | 2 | | undn is not req to att Sch B | | ` . | | 4 | · |
| | | 3 | | ngs and temporary | 683. | 68 | 3. | | |
| | | 4 | | est from securities | 60,366. | 60,36 | | | |
| | 1 | _ | Gross rents Net rental income | | | | | | |
| _ | ļ | | or (loss) | 1 | 42 172 | | | | |
| R E | | | Gross sales price for | sale of assets not on line 10 all 193, 762 | | L-6a Stmt | | | * |
| V E | | 7 | assets on line 6a - Capital gain net incor | me (from Part IV, line 2) | | | | | |
| N | | 8 | Net short-term of | capital gain | | | | | |
| U E | | 9 | | ations | • • | | | | |
| _ | ĺ | 10 a | Gross sales less returns and allowances | | , , | | | , , | |
| | - (| b | Less Cost of goods sold | | | | | | |
| | | c | ~ | att sch) | | | | | |
| | | | | ittach schedule) | | | | | |
| | | | | MISC & PTS | | 42 | | | |
| | + | 12 13 | | 1 through 11 | 20/23 | 61,47 | 0. | | |
| | | 14 | • | laries and wages | | | | | |
| | | 15 | Pension plans, e | employee benefits | | | | O (Sin 1) | |
| | A | | - | schedule) | | 7,5 | 6. | RECEIVED | 19 |
| | M | | | tach sch) | | | \ | | , 3/ |
| 0 1 | 2 | | | ach sch) | | 24,92 | <u>Б.</u> | 1115 6 2015 | |
| O P E | 5 | 17 18 | Taxes (attach schedule)/c | | 626. mt 1,666. | 1,66 | 90 | | |
| E R I | R | 19 | Depreciation (at | tach | | 1,00 | 1 | - | * |
| Ţ | r | 20 | | on | | | _) | - Lander | |
| FC.c | V E | 20 21 | | | | | <u>.</u> | | |
| 20 | E | 22 | Printing and pub | olications | | | | | |
| 5,2015 | P | 23 | Other expenses | (attach schedule) | | | | | |
| 2 | N S | 24 | Total operation | MIS and administrative | C 167. | 16 | /. | | |
| JG | E | 24 | | lines 13 through 23 | | 34,94 | 1. | | |
| Æ | | 25 | | grants pald | 112,047. | | | | |
| | | 26 | Total expenses | and disbursements | 146 000 | 24.04 | 1 | | |
| <u> </u> | + | 27 | Subtract line 26 | from line 12: | 146,988. | 34,94 | <u> </u> | | |
| | | а | Excess of reve | nue over expenses | , · | | | | |
| ننطق مناجع | | | and disbursem | and disbursements d 25 from line 12: nue over expenses tents tion (if negative, enter -0-) tion Act Notice, see i | -128,691. | | | <u> </u> | |
| 63 | | , 10 | Net investment inco | me (if negative, enter -0-). | | 26,52 | 9. | <u> </u> | |
| RAA | Fo | r Pa | perwork Reduct | tion Act Notice see i | nstructions. | | TEF | A0301 10/18/13 | Form 990-PF (2013) |
| 2.77 | | 4 | , | | | | | | |

| Dar | 6 11 | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | Fug o | i year |
|--|----------|--|---|---------------------------------------|---|
| Fai | . 11 | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 12,882. | | |
| | 2 | Savings and temporary cash investments | | 79,985. | 79,985. |
| | 3 | Accounts receivable | | | |
| | 1 | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | to a contract . | |
| | ļ | 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 sch) |) - (av | · · · · · · · · · · · · · · · · · · · | |
| A S | } | Less: allowance for doubtful accounts | | | |
| š | 8 | Inventories for sale or use | | | |
| S E T | 9 | Prepaid expenses and deferred charges | | | |
| s | ļ | a Investments — U.S. and state government obligations (attach schedule) | | | |
| | 1 | b Investments — corporate stock (attach schedule) [| 947,426. | 977,058. | 1,418,437. |
| | 0 | c Investments — corporate bonds (attach schedule) | 984,695. | 807,468. | 819,679. |
| | 11 | Investments — land, buildings, and equipment: basis · · · · · · · · · · · · · · · · | | | |
| | | Less. accumulated depreciation (attach schedule) | | | |
| | 12 | Investments – mortgage loans | | | |
| | 13 | Investments — other (attach schedule) L-13 Stmt | 128,997. | 173,226. | 351,840. |
| | 14 | Land, buildings, and equipment: basis | | | , |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 16 | Total assets (to be completed by all filers = | | | |
| | ļ | see the instructions. Also, see page 1, item I). | 2,074,000. | 2,037,737. | 2,669,941. |
| L | 17 | Accounts payable and accrued expenses | , | | |
| À | 18 | Grants payable | | | * ` |
| B | 19 | Deferred revenue | | | |
| L | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | |
| T | 21 | Mortgages and other notes payable (attach schedule) | | | |
| i E | 22 | Other liabilities (describe | | | *************************************** |
| <u> s </u> | 23 | Total liabilities (add lines 17 through 22) | | | , |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | | | |
| NF | 24 | Unrestricted | | <u> </u> | |
| E U T N | 25 | Temporarily restricted | | | |
| , D | 26 | Permanently restricted | | | |
| A B S A E L T A | | Foundations that do not follow SFAS 117, check here X and complete lines 27 through 31. | | i | |
| ΕL | 27 | Capital stock, trust principal, or current funds | | l | |
| SÑ | 28 | Paid-In or capital surplus, or land, building, and equipment fund | | · · · · · · · · · · · · · · · · · · · | • |
| C O E | 29 | Retained earnings, accumulated income, endowment, or other funds | 2,074,000. | 2,037,737. | • |
| RS | 30 | Total net assets or fund balances (see instructions) | 2,074,000. | 2,037,737. | |
| | 31 | Total Ilabilities and net assets/fund balances (see instructions). | 2,074,000. | 2,037,737. | |
| Par | t 111 | Analysis of Changes in Net Assets or Fund Balance | es | | |
| 1 | Total | I net assets or fund balances at beginning of year — Part II, column (a of-year figure reported on prior year's return) | a), line 30 (must agree w | ith | 2,074,000. |
| 2 | | | | | -128,691. |
| 3 | | increases not included in line 2 (Itemize) DUNREALIZED APPI | RECIATION | 3 | 92,428. |
| 4 | | lines 1, 2, and 3 | | 4 | 2,037,737. |
| 5 | D = === | Acciment to a be be a second of the second o | | - | |
| 6 | Total | l net assets or fund balances at end of year (line 4 minus line 5) — Pa | art II, column (b), line 30 | 6 | 2,037,737. |
| | | | | | |

| (a) List and descri | De the kind(s) of property sold (e.g., real use; or common stock, 200 shares MLC | estate, | (b) How acquired P — Purchase D — Donation | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|--|--|---|--|--|--|
| 1 a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | ···· | | | | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis | | (h) Gain or (e) plus (f) m | (loss) nus (g) |
| a | | <u>-</u> | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e Campleto anti-for acceta cha | in a subject to the s | 40/04/00 | | | |
| (i) Fair Market Value | wing gain in column (h) and owned by the | (k) Excess of column (| | (1) Gains (Co gain minus column (I | |
| as of 12/31/69 | as of 12/31/69 | over column (J), if any | | han -0-) or Losses (fr | |
| <u>a</u> | | | | | |
| b | | | | | |
| | | | | · | |
| d | | | | | |
| <u>e</u> | | | | | |
| 2 Capital gain net income or (ne | et capital loss). If gain, also If (loss), ent | enter in Part I, line 7 er -0- in Part I, line 7 | 2 | | |
| 3 Net short-term capital gain or | (loss) as defined in sections 1222(5) an | d (6). | | | |
| If gain, also enter in Part I, lin | e 8, column (c) (see instructions) If (los | s), enter -0- | 3 | | |
| | ler Section 4940(e) for Reduce | | ent Incom | e | |
| If Yes,' the foundation does not qua | ction 4942 tax on the distributable amou flify under section 4940(e) Do not comp in each column for each year, see the ii | lete this part | | · · · · Yes | No |
| (a) Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | (c) Net value of noncharitable-use asse | | (d) Distributior lumn (b) divided t | |
| 2012 | 90,050. | 2 550 | ,837. | | 0.035192 |
| 2012 | 84,462. | | ,791. | | 0.033132 |
| 2010 | 61,000. | | ,237. | | 0.046379 |
| 2009 | 57,002. | | ,267. | | 0.097729 |
| 2008 | 55,297. | | ,821. | | 0.071738 |
| 2 Total of line 1, column (d) | | | 2 | | 0.289644 |
| | he 5-year base period — divide the total on has been in existence if less than 5 ye | | | | 0.057929 |
| number of years the loundation | of has been in existence if less than 5 ye | 3015 | | | 0.057925 |
| 4 Enter the net value of noncha | ritable-use assets for 2013 from Part X, | line 5 | 4 | | 2,565,150. |
| 5 Multiply line 4 by line 3 · · · | | | 5 | | 148,597. |
| 6 Enter 1% of net investment in | come (1% of Part I, line 27b) | | 6 | | 265. |
| 7 Add lines 5 and 6 | | | 7 | | 148,862. |
| 8 Enter qualifying distributions f | rom Part XII, line 4 | | 8 | | 144,532. |
| If line 8 is equal to or greater Part VI instructions. | than line 7, check the box in Part VI, line | e 1b, and complete that part u | ising a 1% tax | rate. See the | |

Yes No 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 1 a participate or intervene in any political campaign? Χ b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? 1 b Х If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? 1 c Х 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 * \$ Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 Х If 'Yes,' attach a detailed description of the activities. 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 Х 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4 a Х 4 h Was there a liquidation, termination, dissolution, or substantial contraction during the year? . 5 Х If 'Yes,' attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 Х Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV 7 Х 8 a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 8 b Х 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 Part XIV 9 Χ

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Form 990-PF (2013)

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

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| | m 990-PF (2013) TULGEY WOOD FOUNDATION C/O EMILE W JACQUES 06-106266 Int VII-A Statements Regarding Activities (continued) | 1 | P | age 5 |
|----|--|-------------|------------|--------------|
| | | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | 11 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | X |
| 13 | | 13 | Х | |
| 14 | The books are in care of EMILE W JACQUES Telephone no. (203) Located at 19 FIELD POINT ROAD GREENWICH CT ZIP+4 06830 | <u>629</u> | -248 | 34 |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | | , - | |
| | | | Yes | No |
| 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? | 16 | 163 | Х |
| 5 | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country | | | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | , | , |
| | File Form 4720 if any Item Is checked in the 'Yes' column, unless an exception applies. | <u> </u> | Yes | No |
| 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | | |
| | (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)? | 1 b | , | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| | c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? | 1 c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | , | |
| i | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? | | | |
| İ | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions) | 2 b | , . |) · |
| 1 | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20 | | | |
| 3 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | Ì |
| 1 | b If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013) | 3 b | | |
| 4 | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | | х |

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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?

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| Form 990-PF (2013) TULGEY WOOD FOUNDA Part VII-B Statements Regarding Activiti | TION C/O EMILE | W JACQUES 1 4720 May Be Req | 06-106 uired (continued) | 52661 Page 6 |
|--|---|--|---|--|
| 5 a During the year did the foundation pay or incur a | | | <u> </u> | - |
| (1) Carry on propaganda, or otherwise attempt to | - | ection 4945(e))? | Yes X | No |
| (2) Influence the outcome of any specific public on, directly or indirectly, any voter registration | election (see section 495 | 5), or to carry | ∏Yes 🏻 | No |
| (3) Provide a grant to an individual for travel, stu | dy, or other similar purpo | oses? | \vdash | No |
| (4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49. | 40(d)(2)? (see instruction | ns) | · · · · · Yes X | No |
| (5) Provide for any purpose other than religious, educational purposes, or for the prevention of | , charitable, scientific, lite of cruelty to children or ai | rary, or nimals? | · · · · · Yes X | No |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)? | current notice regarding | disaster assistance | | 5b |
| Organizations relying on a current notice regards | ng disaster assistance ch | neck here | ▶ 🗍 | |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib | foundation claim exempt | ion from the | Yes | No - |
| If 'Yes,' attach the statement required by Regulat | tions section 53.4945-5(d | 1) | | |
| 6 a Did the foundation, during the year, receive any to on a personal benefit contract? | | · · · · · · · · · · · · · · · · · · · | | No |
| b Did the foundation, during the year, pay premium | ns, directly or indirectly, o | n a personal benefit con | tract? | 6b X |
| If 'Yes' to 6b, file Form 8870. | | | | |
| 7 a At any time during the tax year, was the foundati b If 'Yes,' did the foundation receive any proceeds | | | | |
| Part VIII Information About Officers, D | | | | |
| and Contractors | , 1140.000, | T Garragues in inches | goro, g y . a. a . | -mpioy 000, |
| 1 List all officers, directors, trustees, foundation | n managers and their c | ompensation (see inst | ructions). | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c)Compensation (If not paid, enter -0-) | (d)Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| KATHERINE R SHUBART | | | | |
| 144 MAGIC HILL ROAD HINESBURG VT 05461 | PRES, DIR 0.00 | 0. | 0. | 0. |
| NICHOLAS B DEANE | | | | : |
| 120 FULTON ST | VP ASST SEC | | | |
| BOSTON MA 02109 | 0.00 | 0. | 0. | 0. |
| DR CLINTON B WRIGHT | IID NOOM ONG | | | |
| 3976_WOOD_AVENUE MIAMI, FL 33133 | VP ASST SEC | 0 | _ | _ |
| MIAMI, FL 33133 EMILE W JACQUES, ESQ | 0.00 | 0. | 0. | 0. |
| 19 FIELD POINT DRIVE | SEC TREAS/ DIR | | | |
| GREENWICH CT 06830 | 0.00 | 0. | 0. | 0. |
| 2 Compensation of five highest-paid employee | s (other than those inc | luded on line 1 – see ii | nstructions). If none, er | nter 'NONE.' |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d)Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | - |
| | | <u> </u> | | |
| | | | • | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 . | TEEA0306 07 | | | None Form 990-PF (2013) |

| Form 990-PF (2013) TULGEY WOOD FOUNDATION C/O EMILE W JACQUES 06-106 | 2661 Page 7 |
|--|-----------------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued) | mployees, |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.' | |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NONE | |
| | |
| | |
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| | |
| | |
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| | |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | None |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | |
| | |
| | 0. |
| 2 | |
| | |
| 3 | |
| <u> </u> | |
| | |
| 4 | |
| | |
| | |
| Part IX-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 N/A | |
| | 0 |
| 2 | 0. |
| 4 | |
| | |
| All other program-related investments. See instructions. | |
| 3 | |
| | |
| Total Add lines 1 through 2 | No |
| Total. Add lines 1 through 3 | None Form 990-PF (2013) |
| | () |

qualifies for the section 4940(e) reduction of tax in those years.

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: 1 a 2,498,727. 1 b 47,650. 1 c 57,836. 1 d 2,604,213. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 2 3 2,604,213. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 4 39,063. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 2,565,150. 6 128,258. Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here 🕒 🗌 and do not complete this part.) Minimum investment return from Part X, line 6 128,258. 2 a Tax on investment income for 2013 from Part VI, line 5 b Income tax for 2013. (This does not include the tax from Part VI)..... 2 c 531 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 127,727. 4 5 127 727 6 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 127,727. Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 144,532. 1 b 0. Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes . . 2 3 a 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 144,532 5 144 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

BAA

Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|---------------|----------------------------|--------------|-------------|
| 1 Distributable amount for 2013 from Part XI, | | | , | _ |
| 2 Undistributed income, if any, as of the end of 2013. | • | | | 127,727 |
| a Enter amount for 2012 only | | | * ** * | |
| b Total for prior years: 20 0 9 , 20 , 20 | | 15 057 | | <u> </u> |
| 3 Excess distributions carryover, if any, to 2013 | , | 15,857. | | |
| a From 2008 | | | | |
| b From 2009 | - | | | - |
| c From 2010 | , | | | |
| d From 2011 | | | | |
| e From 2012 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2013 from Part | | | | |
| XII, line 4: \$ 144,532. | | | | |
| a Applied to 2012, but not more than line 2a | | | | |
| Applied to undistributed income of prior years (Election required — see instructions) | * * | | | |
| · | | | , | <u> </u> |
| c Treated as distributions out of corpus (Election required — see instructions) | | | , | • |
| d Applied to 2013 distributable amount | | | * | |
| e Remaining amount distributed out of corpus | 17,112. | | | 127,420. |
| 5 Excess distributions carryover applied to 2013 | | | | |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | , | | | |
| damo amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: |) m) h | , | , | * |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 17,112. | , | * . | , , |
| b Pnor years' undistributed income. Subtract line 4b from line 2b · · · · · · · · · · · · · · · · · · | | 15,857. | ^ ^ | , , |
| c Enter the amount of prior years' undistribut- | · , . | 13,037. | <u> </u> | |
| ed income for which a notice of deficiency has been issued, or on which the section | * , | | , | |
| has been issued, or on which the section 4942(a) tax has been previously assessed | , , | | , | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount – see instructions | | 15,857. | * | |
| e Undistributed income for 2012 Subtract line 4a from | ,- | , | | |
| line 2a Taxable amount — see instructions | | , | 0. | r |
| f Undistributed income for 2013 Subtract lines | _ | | | |
| 4d and 5 from line 1. This amount must be distributed in 2014 | | , | | |
| 7 Amounts treated as distributions out of | | | | 307. |
| corpus to satisfy requirements imposed | | ` · · | | , , , |
| by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | ** | , , , |
| , | | <u> </u> | | |
| 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) | 0. | | * * * * * * | |
| 9 Excess distributions carryover to 2014 | | | * | |
| Subtract lines 7 and 8 from line 6a | 17,112. | | ĺ | e s |
| O Analysis of line 9. | | | | |
| a Excess from 2009 0 . | _ | İ | | , |
| b Excess from 2010 0. | | | | |
| c Excess from 2011 0. | • | į | | |
| d Excess from 2012 0. | | ٠ , | | , |
| e Excess from 2013 17,112. | • | | | |

| Form 990-PF (2013) TULGEY WOOD FOUND Part XIV Private Operating Foundat | ATION C/O EN | ILE W JACQUE | S /II-A guestion 9 | 06-106266 | N/A Page 10 | | | | |
|--|-----------------------------------|--|---|-------------------------|-----------------|--|--|--|--|
| 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling. | | | | | | | | | |
| b Check box to indicate whether the foundation | n is a private operati | ng foundation descri | bed in section | 4942(J)(3) or | 4942(j)(5) | | | | |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | | | | | |
| investment return from Part X for each year listed | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | (e) Total | | | | |
| b 85% of line 2a | | | | | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | | | | | |
| a 'Assets' alternative test — enter: | | İ | [| | | | | | |
| (1) Value of all assets | | | <u> </u> | <u> </u> | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | | | | | |
| c 'Support' alternative test — enter: | | | | | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | | | | | |
| (4) Gross investment income | | <u> </u> | <u> </u> | | | | | | |
| Part XV Supplementary Information assets at any time during th | (Complete this e year – see in | part only if the structions.) | foundation had | d \$5,000 or more | in | | | | |
| Information Regarding Foundation Manag a List any managers of the foundation who have close of any tax year (but only if they have co | e contributed more | than 2% of the total of \$5,000). (See section | contributions receive on 507(d)(2).) | d by the foundation b | efore the | | | | |
| b List any managers of the foundation who own | 10% or more of the | stock of a corporati | on (or an equally lar | ge portion of the own | ership of | | | | |
| a partnership or other entity) of which the fou | ndation has a 10% (| or greater interest. | | | | | | | |
| 2 Information Regarding Contribution, Gran Check here In the foundation only ma requests for funds. If the foundation makes gromplete items 2a, b, c, and d. | kes contributions to | preselected charitab | le organizations and | d does not accept uns | policited gons, | | | | |
| a The name, address, and telephone number of | or e-mail of the perso | on to whom application | ons should be addre | ssed. | | | | | |
| | | | | | | | | | |
| | · | | | | | | | | |
| b The form in which applications should be sub | mitted and informat | on and materials the | y should include: | | | | | | |
| c Any submission deadlines: | | | | | | | | | |
| d Any restrictions or limitations on awards, such | h as by geographica | l areas, chantable fie | elds, kinds of institut | ions, or other factors: | | | | | |
| | | | | | | | | | |

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or contribution show any relationship to any status of recipient Amount foundation manager or Name and address (home or business) substantial contributor a Paid during the year STATEMENT ATTACHED PUBLIC CHARITY SUPPORT OF ORG 112,047. 112,047. b Approved for future payment 3 b

| Part XVI-A | Analysis | of Income-Producii | na Activities |
|------------|----------|--------------------|---------------|
| | | | |

Enter gross amounts unless otherwise indicated.

| nter gross amounts unless otherwise indicated. | Unrelate | ed business income | Excluded | by section 512, 513, or 514 | (e) | |
|---|-------------------------|--|--|-----------------------------|--|--|
| Program service revenue: | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) | |
| a | | | Code | | | |
| b | 1 | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | ļ | | | | | |
| f | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | 1.1 | | | |
| Interest on savings and temporary cash investmentsDividends and interest from securities | | <u> </u> | 14 | 683. | | |
| 5 Net rental income or (loss) from real estate: | | <u> </u> | 14 | 60,366. | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| 6 Net rental income or (loss) from personal property | | | }} | | | |
| 7 Other investment income | - | | 1 | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | -43,173. | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue. | , | | | | . 5 | |
| a | | | | | | |
| b | | | | | · | |
| c | <u> </u> | | | | / | |
| d | | <u> </u> | | | <u></u> | |
| 12 Subtotal. Add columns (b), (d), and (e) | ļ | | - | | | |
| Subtotal. Add columns (b), (d), and (e) | | <u> </u> | ــــــــــــــــــــــــــــــــــــــ | 61,049. | -43,173. | |
| See worksheet in line 13 instructions to verify calculations | | | | | 17,876. | |
| | | | | | | |
| Part XVI-B Relationship of Activities to the | e Accomp | lishment of Exemp | ot Purp | oses | | |
| Line No. Explain below how each activity for which inc accomplishment of the foundation's exempt p | ome is report | ed in column (e) of Part | XVI-A cor | ntributed importantly to t | he | |
| ▼ accomplishment of the foundation's exempt p | urposes (oth | er than by providing fund | is for such | n purposes). (See instru | ctions) | |
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Form 990-PF (2013) TULGEY WOOD FOUNDATION C/O EMILE W JACQUES 06-1062661 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| 1 Die | d the o | rganization directly | or indirectly end | gage in any of th | e following with | any other | organization | | | Yes | No |
|---------------|--------------------|------------------------------------|----------------------|---|---------------------------------------|--------------|--------------------------|--|--------------------------|-------------|----------|
| de | scribe | d in section 501(c) | of the Code (oth | er than section | 501(c)(3) organ | zations) o | r in section 527, | | |] | |
| | • | o political organizat | | | | _ | | | j | | |
| | | from the reporting | | | _ | | | | | | |
| | | | | | | | | | 1 a (1) | | X |
| (2) | Othe | r assets | | • • • • • • • | | | | | 1 a (2) | | X |
| b Ot | her tra | nsactions: | | | | | | | | | |
| (1) | Sale | s of assets to a nor | icharitable exem | pt organization | <i></i> | <i></i> . | | | 1 b (1) | | Х |
| (2) | Purc | hases of assets fro | m a noncharitat | le exempt organ | nization | | | | 1 b (2) | | X |
| | | | | | | | | <i></i> | 1 b (3) | | X |
| (4) | Reim | bursement arrange | ements | . | | | | | 1 b (4) | | X |
| | | s or loan guarante | | | | | | | 1 b (5) | | X |
| | | _ | | | | | | | | | |
| | | of facilities, equipme | | | | | | | | | X |
| CSII | aring t | or racilities, equipm | ent, maning iists | , other assets, o | r paid employer | ·s | | | 1 c | | <u>X</u> |
| dift | he ans | wer to any of the a | hove is 'Yes' co | mplete the follo | wing schedule | Column (t | l should always s | how the fair market i | alue of | | |
| the | a acod: | s, other assets, or s | services given b | v the reporting f | oundation If the | foundation | on received less th | an fair market value | in | | |
| | | action or sharing a | | | | | | | | | |
| (a) Line | no. | (b) Amount involved | (c) Name | of noncharitable ex | empt organization | | (d) Description of tran | sfers, transactions, and | sharing arran | gements | 5 |
| | | | | | | | | | | | |
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| Zailsi de: | ine tou scriber | indation directly or i | indirectly attiliate | ed with, or relate er than section ' | ed to, one or mo | e tax-exe | mpt organizations | | . Tyes | x | No |
| | | omplete the following | | Ci man oconom | | echon 52 | ,, . , | | . [_] '63 | | 140 |
| | | Name of organizat | | (5) T. | pe of organization | | |) Description of relat | ! | | |
| | (4) | Ivame of organizat | 1011 | (0) 19 | pe or organization | on | |) Description of relat | ionsnip | | |
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| | | | | <u> </u> | | | | | | | |
| | | | | 1 | | | <u> </u> | | | | |
| | Under pe | enalties of perjury, I declaration | e that I have examin | ed this return, includir | ng accompanying sch | edules and s | tatements, and to the be | est of my knowledge and be | elief, it is true, | | |
| | correct, a | and complete. Declaration | o preparer (other th | an (axpayer) is based | on all information of | wnich prepa | rer nas any knowledge | | 1 24 1 20 1 | 00 / | |
| Sign | | / 3// | _ | | 16/16/ | | • | | May the I this return | with the | . |
| Here | \leq | | | | 16/7/ | 13 | TREASURER | | preparer (see instr | | |
| | Signat | ure of officer or trustee | | | Date | | Title | | | Yes | No |
| | | Print/Type preparer's na | me | Prepare | s signature | | Date | Check X if | PTIN | | |
| Paid | | JOHN A HESS | ; | $\mathcal{N} \sim$ | ₩ U. Y | 1111 | 18/12/15 | self-employed | P01269 | 277 | |
| repar | or. | | JOHN A HE | SS CPA | <u></u> | V-V-Y | 1 2 1 1 2 1 1 2 | | 357861 | | |
| Use Oi | | | 6 LANDMAR | | PTH FIOOP | | | | | | |
| use UI | ıı y | - | STAMFORD | 5 01 | VIII LHOOK | CT 0 | 6901 | Phone no (203 |) 359- | 5606 | |
| BAA | | <u> </u> | OTHE OND | | | Ci O | 0901 | 11.10116110 [203 | | | 043 |
| DAA | | | | | | | | | Form 990 | J-PF (2 | :013) |

Form 8949

Department of the Treasury Internal Revenue Service Name(s) shown on return

Sales and Other Dispositions of Capital Assets

Information about Form 8949 and its separate instructions is at www.irs.gov/form8949, File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

OMB No 1545-0074

2013 Attachment Sequence No 12A

SSN or taxpayer Identification no

TULGEY WOOD FOUNDATION C/O EMILE W JACQUES

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 longterm 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 Adjustment, If any, to gain or loss if you enter an amount in column (g), enter a code in column (f). (h) (b) (a) (d) (e) Gain or (loss) Subtract column Description of property (Example 100 shares XYZ Co) Date acquired Date sold or Proceeds Cost or other basis (Mo, day, yr) disposed (Mo, day, yr) See the separate instructions (sales price) See the Note below (e) from column (f) Code(s) from the result with instructions instructions adjustment column (g) Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is

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.

checked), line 2 (if Box B above is checked), or line 3 (if

Box C above is checked).

| Form | 8949 (| (2013) | ١ |
|------|--------|--------|---|
|------|--------|--------|---|

Attachment Sequence No 12A

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

06-1062661

| TULGEY | WOOD | FOUNDATION | C/O | EMILE | W | JACQUES |
|--------|------|------------|-----|-------|---|---------|
| | | | | | | |

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.

Long-Term. Transactions involving capital assets you held more than one year are long-term. For Part II 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).

| Form 8949, page 2, for each ap complete as many forms with the (D) Long-term transaction (E) Long-term transaction (F) Long-term transaction (F) Long-term transaction (F) Long-term transaction (F) Long-term transaction (F) | plicable box. If you e same box check ons reported on Fo ons reported on Fo | have more long-te ed as you need rm(s) 1099-B show rm(s) 1099-B show | rm transactions th ring basis was rep ing basis was not | an will fit on this pa | age for one or ee Note abov | more of the boxe | separate s, |
|--|--|---|--|--|---------------------------------------|--|--|
| 1 (a) Description of property (Example 100 shares XYZ Co) | (b) Date acquired (Mo, day, yr) | (c) Date sold or disposed (Mo, day yr) | (d) Proceeds (sales price) (see instructions) | (e) Cost or other basis See the Note below and see Column (e) in the separate instructions | if you enter an enter a co | any, to gain or loss amount in column (g), de in column (f) arate instructions. (g) Amount of adjustment | (h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (q) |
| SCHEDULE ATTACHED | Various | Various | 192,485. | 236,935. | | | -44,450. |
| | | | | | | | |
| | | | | | | | |
| | | | | , | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| 2 Totals. Add the amounts (subtract negative amount include on your Schedule checked), line 9 (if Box E Box F above is checked) | ts). Enter each tota D, line 8b (if Box l above is checked) | I here and O above is . or line 10 (if | 192,485. | 236,935. | | | -44,450. |

Form 8949

Sales and Other Dispositions of Capital Assets

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

SSN or taxpayer identification no.

2013

OMB No. 1545-0074

Attachment Sequence No 12A

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

TULGEY WOOD FOUNDATION C/O EMILE W JACQUES 06-1062661

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-Part I 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 Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). (h) (a) (d) (e) Gain or (loss). Subtract column Description of property (Example 100 shares XYZ Co) Date acquired Date sold or Proceeds Cost or other basis disposed (Mo, day, yr) See the separate instructions. (Mo, day, yr) See the Note below (sales price) (e) from column and see Column (e)
In the separate
Instructions (d) and combine the result with instructions adjustment column (g) Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is

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

checked), line 2 (If Box B above is checked), or line 3 (If

Box C above is checked).

| | (2013 | |
|--|-------|--|
| | | |

of the adjustment.

Attachment Sequence No 12A Page 2

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

SSN or taxpayer identification no.

TULGEY WOOD FOUNDATION C/O EMILE W JACQUES

06-1062661

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 Form 8949, page 2, for each approximately complete as many forms with the | F below. Check or plicable box. If you e same box check | nly one box. If mo have more long-te ed as you need | re than one box ap rm transactions th | plies for your long an will fit on this pa | term transac age for one or | tions, complete a more of the boxe | separate es, |
|--|--|---|--|---|--|------------------------------------|--|
| (D) Long-term transaction | | • | ving basis was rep | orted to the IRS (s | ee Note abov | re) | |
| (E) Long-term transaction | ons reported on Fo | rm(s) 1099-B shov | ing basis was not | reported to the IR | s | | |
| X (F) Long-term transaction | ons not reported to | you on Form 1099 | -B | | | | |
| 1 (a) Description of property (Example 100 shares XYZ Co) | (b) Date acquired (Mo, day, yr) | (C) Date sold or disposed (Mo, day, yr) | (d) Proceeds (sales price) | (e) Cost or other basis See the Note below | 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) from column |
| | | (| (see instructions) | and see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | (d) and combine the result with column (g) |
| FROM PARTNERSHIP K-1S | | | | | | | J |
| | Various | Various | 1,204. | 0. | | | 1,204. |
| | | | | | | - | |
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| | | | | | | | |
| 2 Totals. Add the amounts (subtract negative amount include on your Schedule checked), line 9 (if Box E Box F above is checked). | s). Enter each tota D, line 8b (if Box l above is checked) | I here and D above is , or line 10 (if | 1,204. | 0. | , | | 1,204. |
| Note. If you checked Box D abo | ve but the basis re | ported to the IRS v | vas incorrect, ente | r in column (e) the | basis as repo | orted to the IRS, a | nd |

Net Gain or Loss From Sale of Assets

2013

| Name | | Employer Identification Number |
|-----------------------------|---|---|
| TULGEY WOOD FOUNDATION C/O | EMILE W JACQUES | 06-1062661 |
| Asset Information: | | |
| Description of Property: UB | S SCHEDILE ATTACHED | |
| Date Acquired: Various | How Acquired Purchased | |
| Date Sold Various | | |
| | Cost or other basis (do not reduce by depreciation) | 236 035 |
| Sales Expense: . | | 230,733. |
| Total Gain (Loss): | 450. Accumulation Depreciation | · |
| Description of Property: FR | OM DADTNERSHIDS | |
| Date Acquired: Various | How Acquired Purchased | |
| Date Sold: Various | | |
| | Cost or other basis (do not reduce by depreciation) | ······································ |
| | | |
| Sales Expense: . | | |
| Total Gain (Loss):1 | . 277. Accumulation Depreciation | |
| Description of Property | How Anguerds | |
| Date Acquired: | How Acquired | |
| Date Sold: | Name of Buyer | |
| Sales Price: | | |
| Sales Expense. | Valuation Method | |
| Total Gain (Loss) | Accumulation Depreciation | |
| Description of Property: | | |
| Date Acquired· . | How Acquired | |
| Date Sold: | Name of Buyer | |
| Sales Price: | Cost or other basis (do not reduce by depreciation) | |
| Sales Expense: | Valuation Method | |
| Total Gain (Loss): | Accumulation Depreciation | |
| Description of Property: | | - |
| Date Acquired: . | How Acquired | |
| Date Sold: · · · | Name of Buyer | |
| Sales Price: | Cost or other basis (do not reduce by depreciation) | • • • |
| Sales Expense | Valuation Method | |
| Total Gain (Loss) | Accumulation Depreciation | |
| Description of Property: | | |
| Date Acquired: | How Acquired | |
| Date Sold | Name of Buyer | |
| Sales Price: | Cost or other basis (do not reduce by depreciation) | |
| Sales Expense: . | Valuation Method | |
| Total Gain (Loss) | Accumulation Depreciation | |
| Description of Property: | | |
| Date Acquired: . | How Acquired | |
| Date Sold | Name of Buyer | |
| Sales Price: | | • |
| Sales Expense: | | |
| Total Gain (Loss): | Accumulation Depreciation | |
| Description of Property: | | |
| Date Acquired: | How Acquired | |
| Data Sald: | Name of Buyer | |
| Sales Price: | Cost or other basis (do not reduce by depreciation) | |
| Sales Expense: | Valuation Method: | |
| Total Gain /Loss): | | |
| Total Gain (Loss): | Accumulation Depreciation: | |

Miscellaneous Statement

| STATEMENT 2 - DIVS AND INT FROM SECURITIES | | |
|--|---------|---|
| ENERGY EQUITY PARTNERS | 982. | _ |
| ENERGY TRANSFER PARTNERS | 430. | |
| UBS A/C 00959 - INTEREST | 2. | |
| UBS A/C 00959 - DIVIDENDS | 58,922. | |
| | | |

Total <u>60,336.</u>

Miscellaneous Statement

| STATEMENT 1 INTEREST ON TEMPORARY SAVINGS | | |
|---|------|--|
| ENERGY EQUITY PARTNERSHIP | 359. | |
| ENERGY TRANSFER PARTNERSHIP | 320. | |
| MAGELLAN MIDSTREAM PARTNERS | 2. | |
| TARGA RESOURCES PARTNERS | 2. | |

Total ______683.

| Micon | Hansous | Statement |
|-------|---------|-----------|
| MISCE | แลกคดแร | Statement |

| STATEMENT 3 - OTHER INCOME (LOSS) | | |
|-----------------------------------|---------|--|
| ENERGY EQUITY PARTNERS | 2,417. | |
| ENERGY TRANSFER PARTNERS | -958. | |
| 511 PLAZA LIMITED | 4,248. | |
| MAGELLAN MIDSTREAM PARTNERS | 1,273. | |
| PVR PARTNERS | -3,310. | |
| TARGA RESOURCE PARTNERS | -2,402. | |
| PVR PARTNERS ROYALTIES | 185. | |
| MISC DEPOSITS | 3,802. | |
| | | |
| Total | 421. | |
| | | |

06-1062661

1

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

| Taxes | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb |
|---------|--------------|-------------|-------------|--------------|
| FEDERAL | 1,451. | 1,451. | | |
| FOREIGN | 215. | 215. | | |

Total <u>1,666.</u> <u>1,666.</u>

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

| | End of Year | | | |
|--------------------------------|---------------|----------------------|--|--|
| Line 13 - Investments - Other: | Book Value | Fair Market Value | | |
| PARTNERSHIPS | 173,226. | 351,840. | | |
| Total | 173,226. | 351,840. | | |

| TULGEY WOOD FOUNDATION ID 06-1062661 990 PF 2013 | | 1 OF 6 |
|--|------|--------|
| GRANTS AND CONTRIBUTIONS PAID | | |
| ACLU FOUNDATION | 1000 | |
| ARTHUR HOPKIN MEMORIAL | 500 | |
| PLYMOUTH PRESCHOOL | 1000 | |
| VERMONT DISMAS HOUSE | 750 | |
| HOMEWARD BOUND CAP CAMP | 500 | |
| HOPE WORKS | 350 | |
| ADDISON CTY PARENT CHILD CTR | 500 | |
| VISITING NURSE ASSN | 500 | |
| VT INTL FILM FESTIVAL | 2500 | |
| PUBLIC ASSETS INST | 300 | |
| VT GRANITE MUSUEM | 1000 | |
| NATL RESOURCE DEF COUNCIL | 1000 | |

147

400

1500

HEARST SOCO PAPERS

INTL REBECCA WEST SOC

AMER HEART ASSN

| TULGEY WOOD FOUNDATION |
|-------------------------------|
| ID 06-1062661 |
| 990 PF 2013 |

2 OF 6

GRANTS AND CONTRIBUTIONS PAID

| VT PUBLIC RADIO | 1000 | |
|--|------|--|
| AMER BALLET THEATER | 500 | |
| CHAMPLAIN HOUSING TRUST | 500 | |
| ROCOBY MUSUEM | 250 | |
| P & S ANNUAL FUND | 2000 | |
| JFK CENTER FOR THE ARTS | 3000 | |
| NATIONAL GALLERY | 2000 | |
| MASS HISTORICAL SOCIETY | 500 | |
| ACLU FND VT 137 ELM ST MONTPELIOR VT 05602 | 1500 | |
| ALOHA FOUNDATION 465 PENNELL ROAD CHESTER VT 06143 | 500 | |
| AMREF USA 19 W 44TH ST NEW YORK NY 10036 | 1000 | |
| APNE AAP WOMEN WORLD WIDE 1615 Q ST NW 208 WASHINGTON DC | 1000 | |
| ASSOC BOSTON PUBLIC LIBRARY BOSTON MA 02116 | 450 | |
| BARRE HISTORICAL SOC | 1500 | |

| BOSTON ATHENAEUM BOSTON MA | 2000 |
|---|------|
| BROWN UNIV ANNUAL FD BOX 1893 PROVIDENCE R I 02912 | 3000 |
| CAMFED USA FDN 221 MAIN ST SAN FRANCISCO CA 94105 | 1000 |
| CARE INTL 151 ELLIS ST NE ATLANTA GA 30303 | 2000 |
| CHAPMAN PARTNERSHIP 1550 NORTH MIAMI AVE MIAMA FL 33136 | 2000 |
| CHARITY WATER 200 VARICK ST SUITE 201 NEW YORK NY 10014 | 2000 |
| CHARLES RIVER CONSERVANCY 4 BRATTLE ST CAMBRIDGE MA 02138 | 300 |
| COLUMBIA UNIV MED CTR 630 W 168TH ST NEW YORK NY 10032 | 1000 |
| COMMUNITY BOATING 21 DAVID MUGAR WAY BOSTON MA 02114 | 250 |
| CONCORD ACADEMY ANN FUND 166 MAIN ST CONCORD MA 02114 | 1500 |
| CRADLE TO GRAVE ARTS P O BOX 8 CHELSEA VT 05038 | 1500 |
| DIANE FOSSEY GORILLA FUND 800 CHEROKEE AVE ATLANTA GA 30315 | 500 |
| DIRECT RELIEF INTL 27 SOUTH LA PATERA LANE SANTA BARBARA CA 93117 | 1000 |
| DOCTORS WITHOUT BORDERS 6 E 39TH ST NEW YORK, NY 10016 | 3000 |

| TULGEY. WOOD FOUNDATION ID 06-1062661 990 PF 2013 | 4 OF 6 |
|---|--------|
| EMMA WILLARD SCHOOL TROY NEW YORK | 2500 |
| FAUNA & FLORA INTL INC P O BOX 43575 WASHINGTON DC 20015 | 2500 |
| FINCA INTL P O BOX 98048 WASHINGTON DC 20090 | 1000 |
| FORT TICONDEROGA FORT ROAD TICONDEROGA NY | 1000 |
| FRATERNITE NOTRE DAME 2290 FIRST AVENUE NEW YORK, NY 10035 | 1000 |
| FREE THE SLAVES 1320 19TH ST NW WASHINGTON, DC | 3000 |
| FRIENDS OF WLRN 169 EAST FLAGLER MIAMA FL 33131 | 1000 |
| GREATER BATON ROUGE FOOD BSK 5546 CHOCTAX DR BATON ROUGE LA 70805 | 1000 |
| HARVARD COLLEGE FUND MASS HALL CAMBRIDGE MA 02138 | 1950 |
| HEIFER PROJECT INTL 1 WORLD AVENUE LITTLE ROCK AK 72202 | 3000 |
| HISTORIC NEW ENGLAND 141 CAMBRIDGE ST BOSTON MA 02114 | 3500 |
| HOMESHARE VERMONT 412 FARREL ST SOUTH BURLINGTON VT 05403 | 500 |
| HOPE FOR HAITI'S CHILDREN P O BOX 864311 ORLANDO FL 32886 | 5000 |
| HOPKINS SCHOOL FOREST ROAD NEW HAVEN CT 06505 | 500 |

| TULGEY WOOD FOUNDATION ID 06-1062661 990 PF 2013 | | 5 OF 6 |
|---|------|--------|
| INTERFAITH CENTER OF NY 570 LEXINGTON AVE NEW YORK NY 10022 | 500 | |
| INTL RESCUE COMMITTEE P O BOX 98125 WASHINGTON DC 20077 | 2000 | |
| ISABELLA STUART GARDNER MUS BOSTON MA 02115 | 3500 | |
| LAMOILLE CTY CONS DISTRICT 109 PROFESSIONAL DR MORRISVILLE VT 05661 | 350 | |
| LIBRARY FDN OF LOS ANGELES 630 WEST FIFTH STREET LOS ANGELES CA 90071 | 100 | |
| LOS ANGELES CONSERVANCY 523 W SIXTH ST LOS ANGELES CA 90014 | 100 | |
| MORRISTOWN CENTENNIAL LIBRARY 7 RICHMOND ST MORRISVILLE VT 05661 | 150 | |
| MUSEUM OF FINE ARTS 465 HUNTINGTON AVENUE BOSTON MA 02115 | 800 | |
| NATIONAL PARKS CONSERVATION P O BOX 97202 WASHINGTON DC 20077 | 500 | |
| NATURE CONSERVANCY 4245 N FAIRFAX DR ARLINGTON VA 22203 | 1000 | |
| NEW YORK PUBLIC LIBRARY NEW YORK NY | 100 | |
| NORTH BENNET ST SCHOOL 39 NORTH BENNET ST BOSTON MA 02113 | 1500 | |
| OCCUPY SANDY ALL FOR JUSTICE 1247 E ST SE WASHINGTON DC 20003 | 100 | |
| OVERTOWN YOUTH CENTR 450 NORTHWEST 14TH ST MIAMI FL 33136 | 2000 | |

| TULGEY, WOOD FOUNDATION ID 06-1062661 990 PF 2013 | (| 6 OF 6 |
|--|--------|--------|
| PHILLIPS EXETER ACADEMY EXETER NH | 3500 | |
| PLANNED PARENTHOOD S FL 2300 N FLORIDA MANGO RD WEST PALM BEACH FL 34409 | 1500 | |
| PLANNED PARENTHOOD OF MASS 1055 COMMONWEALTH AVE BOSTON MA 02215 | 500 | |
| READING IS FUNDAMENTAL 1255 23RD ST WASHINGTON DC 20037 | 2000 | |
| SHADY HILL SCHOOL 178 COOLIDGE HILL RD SHELBURNE VT 05482 | 1000 | |
| ST STEPHENS EPIS SCHOOL 3439 MAIN HGY COCONUT GROVE FL 33133 | 2000 | |
| STERN CENTER FOR LANGUAGE 135 ALLEN BROOK LANE WILLISTON VT 05495 | 1000 | |
| STRAWBERRY BANKE P O BOX PORTSMOUTH NH 03801 | 350 | |
| CENTER FOR SEXUAL ASSAULT 700 CANAL ST SUITE 22B STAMFORD, CT 06902 | 1000 | |
| VERMONT FOLK LIFE CENTER 2 COURT ST MIDDLEBURY VT 05753 | 1350 | |
| VERMONT JOURNALISM TRUST BOX 2 EAST HARDWICK VT 05836 | 5000 | |
| VERMONT LAND TRUST 8 BAILEY AVENUE MONTPELIOR VT 05602 | 500 | |
| WELLESLEY COLLEGE FUND WELLESLEY MA | 3500 | |
| TOTAL DONATIONS | 112047 | |

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LEGAL NOTICE

The annual report of the Tulgey Wood Foundation, Inc. for 2013 is available at the address noted below, for inspection during regular business hours, by any citizen who so requests within 180 days after publication of this notice of its availablility.

THE TULGEY WOOD FOUNDATION
C/O EMILE W. JACQUES, P. C.
19 FIELD POINT DRIVE
GREENWICH, CT 06830
The Principal Manager is:
Emile W. Jacques, Secretary

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

| Department of the | | | • • | nstructions is at www.irs.gov/form8868. | | |
|--|---|---|--|---|--|--|
| | | | | art I and check this box | | ► X |
| | | | | complete only Part II (on page 2 of this fo | | ــــــــــــــــــــــــــــــــــــــ |
| | | | | tic 3-month extention on a previously filed F | | |
| Electronic fi corporation re request an ex Associated V | lling (e-file). Yo equired to file F xtension of time Vith Certain Pe | ou can electronically file Form 8868 r Form 990-T), or an additional (not au e to file any of the forms listed in Par | f you need a tomatic) 3-m t I or Part II t t be sent to t | a 3-month automatic extension of time to file nonth extension of time. You can electronics with the exception of Form 8870, Informations in the IRS in paper format (see instructions). | e (6 months for a ally file Form 8868 to on Return for Transfe | rs |
| Part li | Automatic | 3-Month Extension of Time | . Only sul | omit original (no copies needed). | | |
| A corporation | n required to file | Form 990-T and requesting an auto | omatic 6-mo | nth extension - check this box and comple | te Part I only | ► [|
| All other com | oorations (include eturns. | ding 1120-C filers), partnerships, RE | MICs, and ti | rusts must use Form 7004 to request an ex | | |
| | Name of exempt | organization or other filer, see instructions | | Enter mer staenu | fying number, see is Employer identification nu | |
| Type or | | · | | | | |
| print | TULGEY W | OOD FOUNDATION C/O EM | ILE W J | ACOUES | 06-1062661 | |
| File by the | Number, street, a | nd room or suite number. If a P O box, see instr | uctions | | Social security number (S | SN) |
| due date for filing your | | POINT ROAD' | | | | |
| nstructions | City, town or post | office, state, and ZIP code. For a foreign address | s, see instructio | ns | | |
| | GREENWIC | Н | | | CT 0683 | 0 |
| Enter the Rel | turn code for th | e retum that this application is for (fil | | application for each return) | | <u> </u> |
| ls For | | | Return Code | Application Is For | | Return Code |
| Form 990 or | Form 990-EZ | | 01 | Form 990-T (corporation) | | 07 |
| Form 990-BL | · | | 02 | Form 1041-A | | 08 |
| Form 4720 (II | ndividual) | | 03 | Form 4720 (other than individual) | | 09 |
| Form 990-PF | : | | 04 | Form 5227 | | 10 |
| | | or 408(a) trust) | 05 | Form 6069 | | 11 |
| Form 990-T (| trust other than | above) \ | 06 | Form 8870 | · —— · — · — · — · — · — · | 12 |
| Telephon If the orga If this is for check this the extense the content of the c | anization does or a Group Retus box basion is for. | not have an office or place of busine urn, enter the organization's four digi | Fax No ss in the Un t Group Exe ck this box. | nted States, check this box | this is for the whole o | roup. |
| _ | calendar year | e organization's return for: 20 <u>13</u> or ning, 20 | and ending | 20 | | |
| _ | | in line 1 is for less than 12 months, o | | | al return | |
| 3 a If this ap | pplication is for ndable credits. | Forms 990-BL, 990-PF, 990-T, 4720 See instructions |), or 6069, e | nter the tentative tax, less any | 3 a \$ | 838. |
| tax payr | ments made. In | Forms 990-PF, 990-T, 4720, or 6069 clude any prior year overpayment al | lowed as a c | credit | 3 b \$ | |
| c Balance EFTPS | e due. Subtract (Electronic Fed | line 3b from line 3a. Include your pa leral Tax Payment System). See inst | yment with | this form, if required, by using | 3 c \$ | 838. |
| Caution. If yo | ou are going to a | make an electronic funds withdrawal | (direct debi | t) with this Form 8868, see Form 8453-EO | and Form 8879-EO f | or |