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Schedule B

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

Schedule of Contributors

OME No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

2014

	f the organization	Employer Identification number					
	rn Foundation	46-0903481					
Organization type (check one):							
Filers of:		Section:					
Form 990 or 990-EZ		√ 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	Only a section 501(c)(7) Jons.	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule a	nd a Special Rule. See				
Ø	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ). Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of	organization	En	ployer identification number
Hawthorn	Foundation	46-0903481	
Part i	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	CS Oconnell PO Box 2693 Casper, WY 82602	\$ 388,231	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	CS Oconnell PO Box 2693 Casper, WY 92602	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
•••		\$	Person
(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 Moncash Complete Part II for noncash contributions.)

Name of organization Employer identification number Hawthorn Foundation 46-0903481 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 140 Shares Walt Disney Corp. 9,309 (a) No. (c) (d) Date received (b) from FMV (or estimate) Description of noncash property given Part I (see instructions) 2000 Shares Gilead Corp. 129,590 10-16-13 (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given **Date received** (see instructions) Part I 2675 Shares GE Corp. 1 72,760 115-15-13 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 1228 Gilead Corp. 83,185 11-15-13 (a) No. (d) from FMV (or estimate) Description of noncash property given Date received Part I (see Instructions) 920 Shares Illinois Tool Works 11-15-13 73,370 (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 215 Shares Schlumberger 20,017 11-15-13

Name of or	genization			Employer identification number			
Part III	(10) that total more than \$1,000 for	or the year from any ations completing Pa the year. (Enter this in	one contributor. (irt III, enter the total information once. Se	corribed in section 501(c)(7), (8), or Complete columns (a) through (e) and of exclusively religious, chantable, etc., se instructions.) \$ \$			
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address,	ship of transferor to transferee					
(a) No.	41.2			40.00.00.00.00.00.00.00.00.00.00.00.00.0			
from Part i	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
ļ-	- (e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift (c) L		of gift	(d) Description of how gift is held			
				+466947-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
	(e) Transfer of gift						
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
	***************************************	89***************					
(a) No. from Part I	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held			
		P		,f89r			
-		(a) Trans	for of nift				
	(e) Transfer of gift Transferee's пате, address, and ZIP + 4 Relationship of transferor to transferee						
-	The state of the s						

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