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Form 990-PF

### **Return of Private Foundation**

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

Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Open to Public Inspection Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service , and ending 9/30/2014 For calendar year 2013 or tax year beginning 10/1/2013 A Employer identification number Name of foundation THE NANCY E BARTON FOUNDATION Room/suite Number and street (or P O box number if mail is not delivered to street address) 45-6656212 B Telephone number (see instructions) PO BOX 1501, NJ2-130-03-31 ZIP code State City or town 609-274-6834 08534-1501 PENNINGTON NJ Foreign country name Foreign postal code Foreign province/state/county C If exemption application is pending, check here ▶ G Check all that apply: D 1. Foreign organizations, check here Initial return Initial return of a former public charity ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, X Address change ■ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: X Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination end of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) 8,483,639 (Part I, column (d) must be on cash basis) Ine 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per ıncome income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ►X if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . . . . 205,914 203,374 5a b Net rental income or (loss) 178,170 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 178 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . 8 Income modifications . . . . Gross sales less returns and allowances Less. Cost of goods sold . . C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . . . . . . 12 Total、Add lines 1 through 11 . . . . . . . . . . 384,084 381,544 13 Compensation of officers, directors, trustees, etc. . 47,655 47,655 Operating and Administrative Expenses Other employee salaries and wages . . 14 Pension plans, employee benefits . . . . . . 15 16a Legal fees (attach schedule) . . . . . . . . . Accounting fees (attach schedule) . . . . . . b C Other professional fees (attach schedule) . 54,770 46,091 8,679 17 18 Taxes (attach schedule) (see instructions) . . . 75.804 1.838 19 Depreciation (attach schedule) and depletion . . 20 21 Travel, conferences, and meetings . . . . . 22 Printing and publications . . . . . 23 Other expenses (attach schedule) 1,460 1,410 50 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . . 179,689 49,339 56,384 25 Contributions, gifts, grants paid . . . . . 300,000 300,000 26 Total expenses and disbursements. Add lines 24 and 2 479,689 49,339 356,384 27 Subtract line 26 from line 12. -95,605 Excess of revenue over expenses and disbursements. Net investment income (if negative, enter -0-) 332,205 Adjusted net income (if negative, enter -0-) . .

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Form **990-PF** (2013)

For Paperwork Reduction Act Notice, see instructions.

45-6656212

Doub II	Balanca Shoots	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning or year	(b) Book Value	(c) Fair Market Value
Part II			(a) Book Value 4,656	3,796	
1	Cash—non-interes	t-bearing	4,000	638,006	
2	Savings and tempo	orary cash investments		636,000	000,000
3	Accounts receivable	e <b>&gt;</b>	<i></i>	,	
	Less <sup>-</sup> allowance fo	r doubtful accounts			
4	Pledges receivable	<b>•</b>		•	
	Less: allowance fo	r doubtful accounts 🔛			
5	Grants receivable				
6	Receivables due fr	om officers, directors, trustees, and other			
	disqualified person	s (attach schedule) (see instructions)			
7	Other notes and loans	receivable (attach schedule)		****	90
-	Less: allowance for do				
<u>v</u> 8	Inventories for sale	e or use			
set 9	Prenaid expenses	and deferred charges			
Assets 9 10a	Investments—U.S. and	d state government obligations (attach schedule)			0.704.004
b	Investments—corr	porate stock (attach schedule)	6,003,540	5,448,231	
C	Investments—corr	porate bonds (attach schedule)	1,309,838	1,150,340	1,140,546
11	Investments—land hi	uldings, and equipment. basis			1
''	Less accumulated de	preciation (attach schedule)			
12	Investments—moi	tgage loans			<u> </u>
13	Investments—oth	er (attach schedule)			
14	Land, buildings, and e			**	
'*	Loss accumulated de	preciation (attach schedule)			
15	Other assets (des	cribe			
16	Total assets (to b	pe completed by all filers—see the			
10	instructions Also	see page 1, item l)	7,318,034	7,240,37	8,483,639
17	Accounts payable	and accrued expenses			<b>.</b> ,
19	Grants payable				4
Liabilities 61 61 61 61 61	Deferred revenue				₫ .
20	Loans from officers	directors, trustees, and other disqualified persons			_
21   21	Mortgages and of	her notes payable (attach schedule)			-
	Other liabilities (d				
23	Total liabilities (	add lines 17 through 22)	0		<u>이</u>
- 25	Foundations tha	t follow SFAS 117, check here		Į.	
န္မ	and complete lif	nes 24 through 26 and lines 30 and 31.			
Ď 24	Unrestricted				4
Balances 25 25	Temporarily restr	icted			_
	Permanently rest	ricted			_
<b>1</b>	Foundations the	at do not follow SFAS 117, check here ► 🗵		ĺ	
리	and complete li	nes 27 through 31.			
Ö 27	Capital stock, tru	st principal, or current funds	7,318,034	7,240,37	3
Net Assets or Fun 30 31 32 34 35 36	Paid-in or capital	surplus, or land, bldg , and equipment fund			_
9 29	Retained earnings.	accumulated income, endowment, or other funds			4
AS 30	Total net assets	or fund balances (see instructions).	7,318,034	7,240,37	3
<u>5</u> 31	Total liabilities	and net assets/fund balances (see			
Ž "			7,318,034	7,240,37	[3]
Part III	Analysis of (	Changes in Net Assets or Fund Balances			<del></del>
1 Tota	al not assets or fund	d balances at beginning of year—Part II, column	(a), line 30 (must ag	ree with	
1 106	ai nei asseis oi iuni Lofvest figure repo	rted on prior year's return)		<u>  1</u>	
end a E-4	er amount from Par	t I. line 27a		2	
2 C/L	or increases not inc	cluded in line 2 (itemize) Cost Basis Adjust	ment	3	
3 UM	Hinoc 1 2 and 2			4	
4 Add	a mico I, Z, anu J procese not include:	d in line 2 (itemize) ► BOND AMORTIZATIO	1	1_3	
5 Dec	al not assets or fun-	d balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30	7,240,37

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Part	V Capital Gains and	d Losses for Tax on Investm	<u>nent Inc</u>	ome				
	• •	he kind(s) of property sold (e.g., real estate ouse, or common stock, 200 shs MLC Co			(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )
1a	See Attached Statement							
b_	See Attached Statement							
<u> </u>	See Attached Statement					<u> </u>		
<u>d</u>	See Attached Statement					ļ		
<u> </u>	See Attached Statement					├		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ise of sale			or (loss) ) minus (g)
<u>a</u>						<u> </u>		0
<u> </u>						-		0
<u>C</u> _						<del> </del>		0
d						<del> </del>		0
<u>e</u>	Complete only for assets sh	nowing gain in column (h) and owned	l by the for	undation	on 12/31/60	<del> </del>		0
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col	of col (I)		col (k), but not	(h) gain minus less than -0-) <b>or</b> om col (h))
а								0
b								0
С								0
<u>d</u>							· · · · · · · · · · · · · · · · · · ·	0
е								0
2	Capital gain net income of	r (net canital loss)	also ente , enter -0		•	2		178,170
3		n or (loss) as defined in sections , line 8, column (c) (see instruction			er-0-in ≀			
	Part I, line 8	<u> </u>			<u></u>	3		0
Part	V Qualification Und	<u>ler Section 4940(e) for Redu</u>	ced Tax	k on Ne	<u>et Investment</u>	Inco	me	
Was t	tion 4940(d)(2) applies, leav the foundation liable for the s," the foundation does not	ve this part blank. section 4942 tax on the distribut qualify under section 4940(e) De	able amo	ount of a	ny year in the b	ase pe	eriod?	☐ Yes 🗓 No
1	·	ount in each column for each yea				king a	ny entries.	
Cak	(a)  Base period years endar year (or tax year beginning in	(b)			(c) noncharitable-use a		Dist	(d)
Can	2012		5,659			1,367	(col (b) c	0,005021
	2011		1,875			1,820		0.003021
	2010		.,,,,,,		.,	,,020		0 000000
	2009							0 000000
	2008							0.000000
2	Total of line 1, column (d)		•				2	0 006450
3		for the 5-year base period—divid			 2 by 5 or by tl	 ne	-	0 000400
		dation has been in existence if les					3	0.003225
4	Enter the net value of non	charitable-use assets for 2013 fro	om Part )	X, line 5		.	4	8,444,184
5	Multiply line 4 by line 3 .						5	27,232
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)					_6	3,322
7	Add lines 5 and 6						7	30,554
8	Enter qualifying distributio						8	356,384
	If line 8 is equal to or grea Part VI instructions	ter than line 7, check the box in F	Part VI, li	ne 1b, a	nd complete the	at part	using a 1% t	ax rate. See the

orm 99	90-PF (2013) THE NANCY E BARTON FOUNDATION 45-668	6212	F	age 4
art	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	s)		
1a b	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.  Date of ruling or determination letter  (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check		3,322	
С	here ► X and enter 1% of Part I, line 27b			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .		n	ł
3	Add lines 1 and 2	;	3,322	l
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		3,322	
6	Credits/Payments.			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 51,563			
þ	Exempt foreign organizations—tax withheld at source 6b		1	
С	Tax paid with application for extension of time to file (Form 8868)		!	
_d	Backup withholding erroneously withheld	í		ł
7	Total credits and payments Add lines 6a through 6d	5	,563	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0	<del> </del>
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		3,241	
11	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 ► Refunded ► 11		3,241	
	VII-A Statements Regarding Activities		), <u>८</u> ५ ।	L
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Π	Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	_1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	[		
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	1		
_	(1) On the foundation ▶\$ (2) On foundation managers ▶\$	1		l
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. • \$			
2	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	-		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	1		
-	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	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_		X
	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:			
	By language in the governing instrument, or  Provided logical time that offsetively arranged the governing instrument so that no mandatory directions that			
	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	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	$\hat{\mathbf{x}}$	
, 8а	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CT			
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	L
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 Part XIV	9		_X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40		
	names and addresses	10		Х

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Par	t VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Χ	_^_
14	The books are in care of ▶ U.S. Trust, a division of Bank of America, N.A. Telephone no ▶ 609-274			
15	Located at ► 1300 MERRILL LYNCH DRIVE PENNINGTON NJ ZIP+4 ► 08534-1  Section 4947(a)(1) nonexempt charitable trusts 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 ► 15			▶ □
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	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country		I	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ь		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	[	Yes	No
1a	During the year did the foundation (either directly or indirectly)			<u> </u>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			ě
	(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)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fall to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	·	X
С	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?	1c		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)).			
а	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?			*
b	If "Yes," list the years 20, 20	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here 20 , 20 , 20 , 20			-
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			,
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)	3b	N/A	,
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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

Form 9	90-PF (2013)	THE NANCY E BARTON FOUN	IDATIC	N					45-66	56212	Р	age 6
Par	t VII-B	Statements Regarding Activities f	or Wh	ich Form 47	'20 Ma	y Be Requ	uired (	continue	ed)			
5a		e year did the foundation pay or incur an on propaganda, or otherwise attempt to	y amou	unt to:				Yes				
	directl	nce the outcome of any specific public e y or indirectly, any voter registration driv	e? .					Yes	⊠ No			,
		le a grant to an individual for travel, stud						☐ Yes	X No			
	sectio	le a grant to an organization other than a n 509(a)(1), (2), or (3), or section 4940(d	1)(2)? (	see instructio	ns) .		•	Yes	⊠ No			
	ригро	le for any purpose other than religious, on sets, or for the prevention of cruelty to ch	ııldren d	or animals?				Yes	<b>⊠</b> No			
b		wer is "Yes" to 5a(1)–(5), did <b>any</b> of the ns section 53 4945 or in a current notice								5b	N/A	
С	If the ans	tions relying on a current notice regardin wer is "Yes" to question 5a(4), does the t maıntained expendıture responsibılıty t	founda	tion claim ex	emptior		 ах	Yes	► □ □ No			
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d)  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?											
b		undation, during the year, pay premium	s, direc	tly or indirect	ly, on a	personal b	enefit c	contract?		6b		Х
_		o 6b, file Form 8870						<b></b>				
7a h	a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?								N/A			
		nformation About Officers, Directo								ploye	es,	
	а	nd Contractors										
_1_	List all o	fficers, directors, trustees, foundation										
		(a) Name and address	hou	e, and average irs per week ted to position	(If i	mpensation not paid, nter -0-)	emple	Contribution oyee benefit erred comp	plans	(e) Expe	nse ac allowan	
	N BARTON	N NY LOS ANGELES, CA 90004	TRUS	TEE 1 00		10,000						
		DENBACH	TRUS									
C&L I	BOX 2505	GREENWICH, CT 06836		40 00		37,655						
						0	_	_				
						0						
2	Compens "NONE."	sation of five highest-paid employees	(other	than those	include	ed on line	1—see	instruct	ions). If	none,	enter	•
	(a) Name an	d address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to pe	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ac allowan	
NON	E											
			••••							-		
												·
Total	number of	other employees paid over \$50,000 .							<b>&gt;</b>			0

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Form	990-PF (2013) THE NANCY E BARTON FOUNDATION 45-	-6656212 Page <b>7</b>
Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, ente	r "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO	NE	
Tot	al number of others receiving over \$50,000 for professional services	<b>&gt;</b>
Р	art IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
2		
3		
4		
P	art IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
2		
A	Il other program-related investments. See instructions	
3	NONE	
Tot	al. Add lines 1 through 3	··
		1

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Part	<del></del>	foundations,	,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	}	
	purposes:		0 470 004
a	Average monthly fair market value of securities	1a	8,476,961
þ	Average of monthly cash balances	1b	95,815
C	Fair market value of all other assets (see instructions)	1c	0.550.550
d	<b>Total</b> (add lines 1a, b, and c)	1d	8,572,776
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.570.770
3	Subtract line 2 from line 1d	3	8,572,776
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see	1 . 1	400 500
_	instructions)	4	128,592
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,444,184
6	Minimum investment return. Enter 5% of line 5	6	422,209
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here   □ and do not complete this part )		
4	<del></del>	1	422,209
1	Minimum investment return from Part X, line 6		422,209
2a	Tax on investment income for 2013 from Part VI, line 5	<b> </b>	
b	Income tax for 2013 (This does not include the tax from Part VI)	ا م	2 200
C	Add lines 2a and 2b	2c	3,322
3	Distributable amount before adjustments Subtract line 2c from line 1	3	418,887
4	Recoveries of amounts treated as qualifying distributions	4	440.007
5	Add lines 3 and 4	5	418,887
6	Deduction from distributable amount (see instructions)	6	<del></del>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	_	440.007
	line 1	7	418,887
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	356,384
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,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	356,384

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

3,322

353,062

5

6

Form 990-PF (2013)

THE NANCY E BARTON FOUNDATION

45-6656212

Pan	Undistributed income (see instructions)				
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
	line 7				418,887
2	Undistributed income, if any, as of the end of 2013				ž.
а	Enter amount for 2012 only			295,545	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2013:				
а	From 2008				*
b	From 2009				
C	From 2010				
d	From 2011				
e	From 2012				
_		0			
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2013 from Part XII,				
	line 4. ▶ \$ <u>356,384</u>				
	Applied to 2012, but not more than line 2a			295,545	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				×
	required—see instructions) .				
d	Applied to 2013 distributable amount				60,839
	Remaining amount distributed out of corpus				······································
5	Excess distributions carryover applied to 2013		—		
_	(If an amount appears in column (d), the same		A	· · · · · · · · · · · · · · · · · · ·	
	amount must be shown in column (a) )				
6	Enter the net total of each column as			1	
Ü	indicated below:			1	
_	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0		1	
a	·	U		<u> </u>	
b	Prior years' undistributed income. Subtract line 4b from line 2b		•		
		······································	0		· · · · · · · · · · · · · · · · · · ·
С	Enter the amount of prior years' undistributed			,	
	income for which a notice of deficiency has				, ,
	been issued, or on which the section 4942(a)				
	tax has been previously assessed .				
d	Subtract line 6c from line 6b. Taxable				*
	amount—see instructions				
е	Undistributed income for 2012. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			o	
f	Undistributed income for 2013. Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2014				358,048
7	Amounts treated as distributions out of corpus		· · · · · · · · · · · · · · · · · · ·		
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions) .			*	
8	Excess distributions carryover from 2008 not				
Ŭ	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.				
J					
40	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
a	Excess from 2009	İ			4
b	Excess from 2010				*
	Excess from 2011				
d	Excess from 2012				
е	Excess from 2013				

Form 9	90-PF (2013) THE NANCY E BARTO	IN FOUNDATION	N		40-00	DOZIZ Page IU
Part						N/A
1a	If the foundation has received a ruling of				}	
	foundation, and the ruling is effective for				L	
	Check box to indicate whether the foun		operating founda		section	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
	each year listed			<u> </u>	<del> </del>	
	85% of line 2a			ļ	<u> </u>	<u> </u>
C	Qualifying distributions from Part XII,			}	1	}
	line 4 for each year listed	<del> </del>		<u> </u>	<u> </u>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .			<del> </del>	<del> </del>	ļ <u>c</u>
е	Qualifying distributions made directly					ļ
	for active conduct of exempt activities					
	Subtract line 2d from line 2c			<b>_</b>	ļ	
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter:					_
	(1) Value of all assets			ļ		<u>_</u>
	(2) Value of assets qualifying under					
<b>L</b>	section 4942(J)(3)(B)(i)			<del> </del>		0
b	of minimum investment return shown in					_
	Part X, line 6 for each year listed .					
С	"Support" alternative test—enter.					
	(1) Total support other than gross investment income (interest.					İ
	dividends, rents, payments on			}		1
	securities loans (section					_
	512(a)(5)), or royalties) (2) Support from general public	<del></del>		<del> </del>	<del></del>	
	and 5 or more exempt		1	}		1
	organizations as provided in					_
	section 4942(j)(3)(B)(III)				<del></del>	
	(3) Largest amount of support from					_
	an exempt organization			<u> </u>	ļ <u> </u>	
_	(4) Gross investment income	<u> </u>	4 1 :641		165,000	
Part				e foundation ha	id \$5,000 or mo	re in assets at
	any time during the year—s		s.)			
1_	Information Regarding Foundation N List any managers of the foundation wh		-d than 20/ a	of the tetal contribu	tions received by	iha farindation
а	before the close of any tax year (but on					
NON		ily il tiley llave co	intributed friore tric	in φυ,υυυ <i>).</i> (Gee si	501011 507 (4)(2) )	
NONE		100/	6 4141/ -6	a comparation (or e	n agually laga sa	-tion of the
D	List any managers of the foundation who ownership of a partnership or other ent					rtion of the
NONE	·	ity) of which the it	Junuation has a T	0 % of greater litter	est.	
2	Information Regarding Contribution,	Grant Gift Loa	n Scholarchin o	to Programs:		<del></del> -
_	Check here ► ☐ if the foundation on		•	<del>-</del>	nizations and door	not accord
	unsolicited requests for funds. If the fou					
	under other conditions, complete items		, 5, (-	,		
	The name, address, and telephone nur	nher or e-mail add	dress of the nerso	n to whom applica	tions should be ad	dressed
u	The name, address, and telephone has	inder or e-mail ad-	areas or the perso	ii to whom applica	nons should be ad	urcoocu,
Allen	Barton 570 Lillian Way Los Angeles, CA	90004				
	The form in which applications should be		information and m	naterials they should	ld include	<del></del>
~		Jubilinga alla	omidaon and n	alog ollow		
WRIT	TEN REQUEST					
	Any submission deadlines.					
<u>N</u> ONE	-					
	Any restrictions or limitations on award:	s such as hy den	graphical areas	haritable fields kir	nds of institutions	or other
u	factors.	o, saon as by geo	grapinoai aicas, c		.as or montations, t	5, 00101
NONE						

Form 990-PF (2013) THE NANCY E BARTON FOUNDATION

45-6656212

Part XV Supplementary Information (conting 3 Grants and Contributions Paid During t	nued)	ed for Fut	ure Payment	
	If recipient is an individual,	Foundation		T
Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Attached Statement				
		ĺ		
		}		
		1		
		1		
Total				300,000
<b>b</b> Approved for future payment NONE				
Total		l <u>.</u>	▶ 3b	1
iulai				1 0

THE NANCY E BARTON FOUNDATION

		-A Analysis of Income-Producing Ac			<del></del>		
Ente	er gros	ss amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt function income
1	Drog	ram condes revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
•	_	ram service revenue:				· · · · · · · · · · · · · · · · · · ·	
			·		<del></del>		
					i		
					· · · · ·		
						<del></del>	
	f -						<del> </del>
		ees and contracts from government agencies			· · · · · · · · · · · · · · · · · · ·		
2	_	bership dues and assessments					
3		est on savings and temporary cash investments .			i		
4		lends and interest from securities		<del></del>	14	205,914	
5		rental income or (loss) from real estate.					· · · · · · · · · · · · · · · · · · ·
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property		<u> </u>			
7		er investment income					
8		or (loss) from sales of assets other than inventory			18	178,170	-
9		ncome or (loss) from special events					
10		ss profit or (loss) from sales of inventory					<del></del>
11		er revenue: a			<u> </u>		
	d _						
	е						
12	Subt	otal. Add columns (b), (d), and (e)		0		_384,084	0
13	Tota	I. Add line 12, columns (b), (d), and (e)				384,084 13	
13 (See	Tota work	II. Add line 12, columns (b), (d), and (e)	s.)				0 384,084
13 (See Pa	Tota work rt XV	II. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exempt	Purposes	13	384,084
13 (See Pa	Tota work	II. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
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13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
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13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084
13 (See Pa	Tota work rt XV e No.	II. Add line 12, columns (b), (d), and (e)  sheet in line 13 instructions to verify calculation  Relationship of Activities to the A  Explain below how each activity for which incom accomplishment of the foundation's exempt purpose.	s.) ccomplishme	ent of Exempt	Purposes XVI-A contributed	13	384,084

Part	XVII	Information Exempt Org	Regarding Transf	ers To and Trans	action	s and Rel	ationship	s With I	Noncharit	able		
1	Did th		lirectly or indirectly en	gage in any of the fo	ollowing	with any o	ther organi	zation des	scribed	-	Yes	No
	in sec		e Code (other than se									
	_		porting foundation to a	nanaharitahla ayan	ont orac	nization of						
		•	_							1a(1)		Х
		asıı ther assets .								1a(2)		X
	` '	r transactions								14(2)		<u> </u>
								1b(1)		Х		
			ets from a noncharitab							1b(2)		X
			, equipment, or other	• •						1b(3)		X
			rrangements							1b(4)		X
			rantees							1b(5)		X
			ervices or membership							1b(6)		X
			quipment, mailing lists							1c		X
			he above is "Yes," comp									
			er assets, or services giv							et .		
	value	in any transaction	or sharing arrangement	t, show in column (d) t	the value	of the good	s, other ass	ets, or ser	vices receive	ed.		
(a) Line		(b) Amount involved	<del>,</del>	aritable exempt organization					ions, and shar		naeme	nts
		<del></del>	Not Applicable			(1)					<u> </u>	
	$\neg$		Териодые									
	-											
			<del></del>									
				<del></del>				-			–	
			<del></del>	<del></del>	-							
								_				
				<u> </u>		<del></del>			<u> </u>			
										_		
	desci	ribed in section 5	ctly or indirectly affiliat 01(c) of the Code (oth following schedule							Yes	X N	О
	11 16	(a) Name of organ		(b) Type of org	anization	<del></del>		(e) Doscrip	tion of relation	ebin		
		(a) Hame of organ	inzation .	(b) Type of org	amza.ion			(C) Descrip	TOT OF TOTALION	p		
						<del></del>						
			<del></del>									
	-/											
	Under	penalties of penury. I dec	lare that I have examined this retu	rn, including accompanying sch	edules and	statements, and t	o the best of my	knowledge and	belief, it is true			
Sign			on of preparer (other than taxpaye						May the IRS	diamina	· ·	
Here		X/&\\	_	18/12/15		rusta	٤		with the prep			
пете	Sign	ajure of officer or trus	stee	Dale	Title	rusie			(see instruct	ions)?	Yes	∏No
		Print/Type preparer		Preparer's signature			Date	· [_	. D. P	TIN		
Paid		DONALD J ROM		0000			8/11/20	115 Che	eck X if employed F		1310	
Prepa	arer		PricewaterhouseCoo	ners II D			0/11/20	Firm's EIN			7010	
Use (	Only		600 GRANT STREET		15219			Phone no	412-35		<u> </u>	
		Timins address	OUT OINEE	i, i ii iobondii, FA	10213			rnone no		<b>QQ</b> I		/20123

THE NANCY E BARTON FOUND	ATION			45-665	6212 Page	1 of 4
Continuation of Part XV, Li	ne 3a (990-PF) -	Gran	ts and Cont	ributions Paid	d During th	ne Year
Recipient(s) paid during the year				·		-
Name						
BOSTON UNIVERSITY SCHOOL OF	LAW					
Street						
FINANCIAL AID OFFICE 765 COMMO	NWEALTH AVE					
City		1	Zip Code	Foreign Cour	ntry	
BOSTON		<u> MA</u>	02215			
Relationship	Foundation Status					
NONE Purpose of grant/contribution	IPC				Amount	
GENERAL OPERATING					Amount	50,000
GENERAL OF LIVATING	<del></del>		<del></del>		<del></del>	30,000
Name						
SAVE THE CHILDREN FEDERATION	INC					
Street	00					
501 KINGS HIGHWAY EAST SUITE 4 City	00	Ctoto	Zip Code	Foreign Cour	· · · · · · · · · · · · · · · · · · ·	
FAIRFIELD		CT	06825	Foreign Cour	iuy	
Relationship	Foundation Status		100023			
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING						42,000
Name						
TUFTS UNIVERSITY					<del>_</del>	
Street BALLOU HALL						
City	<del></del>	State	Zip Code	Foreign Cour	ntry.	<del></del>
MEDFORD		MA	02155	oreign cour	ili y	
Relationship	Foundation Status		102100			
NONE	PC					
Purpose of grant/contribution	<u></u>				Amount	<del></del>
GENERAL OPERATING						50,000
Name						
GREENWICH HOSPITAL Street	<del></del>					
5 PERRYRIDGE ROAD						
City	<del></del>	State	Zip Code	Foreign Cour	ntrv	
GREENWICH		СТ	06830-4697	J	<b>,</b>	
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	<del></del>
GENERAL OPERATING				_		2,000
Name						
GREENWICH LIBRARY						
Street						
101 WEST PUTNAM AVE						
City		State	Zip Code	Foreign Cour	ntry	
GREENWHICH		СТ	06830			
Relationship	Foundation Status		<del></del>			
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING					_L	2,000
Name						
KATSELAS THEATRE AKA SKLYLIGI	HT THEATRE COMPA	NY				
Street						
254 S ROBERSTON BLVD						
City			Zip Code	Foreign Cour	ıtry	
BEVERLY HILLS		CA	09211	l		
Relationship	Foundation Status					
NONE	PC				<del></del>	
Purpose of grant/contribution					Amount	r 000
GENERAL OPERATING					1	5.000

THE NANCY E BARTON FOUNDAT	TION			<u>45-665</u>	6212 <u>Page</u> 2	2 of 4
Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Conf	tributions Paid	During the	e Year
Recipient(s) paid during the year						
Name						
WOMEN'S BUSINESS DEVELOPMEN	CENTER INC					
Street	CENTENTINO	_			·	
2 ENTERPRISE DRIVE, SUITE 303						
City		State	Zip Code	Foreign Coun	trv	
SHELTON		CT	06484		<b>y</b>	
Relationship	Foundation Status		10 - 10 -			
NONE	PC					
Purpose of grant/contribution		-			Amount	
GENERAL OPERATING						1,000
Name						
SOUNDWATERS INC	<del></del>		<del></del>			
Street						
1281 COVE ROAD		Cénén	7in Code	Foreign Court	<u> </u>	
City STAMFORD		CT	<b>Zip Code</b> 06902	Foreign Coun	шу	
Relationship	Foundation Status	<u> </u>	100902			
NONE	PC PC					
Purpose of grant/contribution	IPC		·		Amount	
GENERAL OPERATING					Amount	2,300
GENERAL OPERATING						2,300
Name						
GREENWICH HISTORICAL SOCIETY I	INC					
Street	<u></u>					
39 STRICTLAND ROAD						
City		State	Zip Code	Foreign Coun	try	
COS COB		CT	06807-2727			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING					<u> </u>	2,500
Name						
SOUND BEACH FIRE DEPARTMENT I	N					
Street						
152 SOUND BEACH BLVD						
City	<del></del>	State	Zip Code	Foreign Coun	trv	
SOUND BEACH		NY	11789			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution				·	Amount	
GENERAL OPERATING						1,000
Name						
- 14	NUTURAL ACCULA	TC				
AMERICAN HEART ASSOCIATION SO Street	OTH WEST AFFILIA	<u> </u>		<del></del>	_ <del></del>	
105 DECKER COURT, SUITE 200 City		Ctata	Zip Code	Foreign Coun	ton e	
IRVING		TX	75062	Foreign Coun	uy	
Relationship	Foundation Status	1	1/5002	l		
NONE	PC					
Purpose of grant/contribution	FC				Amount	
GENERAL OPERATING					Amount	1 000
GENERAL OF ERATING						1,000
Name						
US HOLOCAUST MEMORIAL COUNCI	IL AKA UNITED STA	TES HO	LCAUST MEMO	ORIAL MUSEUM		
Street						
100 RAOUL WALLENBERG PL SW						
City			Zip Code	Foreign Coun	try	<u></u>
WASHINGTON		DC	20024			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution			<del></del>		Amount	
GENERAL OPERATING					I	1 200

THE NANCY E BARTON FOUNDA				45-665		
Continuation of Part XV, Lin	ne 3a (990-PF) -	Gran	ts and Cont	ributions Paid	I During th	e Year
Recipient(s) paid during the year						
Name						
AMERICAN NATIONAL RED CROSS						
Street						
964 MARCON BLVD, SUITE 220		Ctata	Zip Code	Foreign Coun	tm.	
City ALLENTOWN		PA	18109	Foreign Coun	uy	
Relationship	Foundation Status		110100		_ <del></del>	
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING					<u> </u>	1,500
Name						
LEGAL MOMENTUM						
Street						
5 HANOVER SQUARE STE 1502 City	<del></del>	State	Zip Code	Foreign Coun	trv	
NEW YORK		NY	10004	. 5.5.g., 55a	,	
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	0.000
GENERAL OPERATING					1	2,000
Name						
METROPOLITAN MUSEUM OF ART						
Street						
1000 FIFTH AVE City	<del></del>	State	Zip Code	Foreign Coun	trv	
NEW YORK		NY	10028-0198	i oreign coun	y	
Relationship	Foundation Status		1	_ · <del>  </del>		<u>.                                      </u>
NONE	PC				, .	
Purpose of grant/contribution					Amount	0.000
GENERAL OPERATING			<del></del>		<u> </u>	2,000
Name						
PLANNED PARENTHOOD FEDERAT	ION				<del></del>	
Street						
434 W 33RD ST City		State	Zip Code	Foreign Coun	trv	
NEW YORK		NY	10001-2601	i oreign coun	,	
Relationship	Foundation Status			<u> </u>		
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING	<del></del>				<u> </u>	2,000
Name						
MEMORAIL SLOAN KETTERING CAN	ICER CENTER					
Street 1275 YORK AVE						
City	<del></del>	State	Zip Code	Foreign Coun	trv	
NEW YORK		NY	10065	, orongin obain	,	
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	0.500
GENERAL OPERATING	<del></del>					9,500
Name						
UNITED WAY OF GREENWICH				<del></del>		
Street						
ONE LAFAYETTE COURT City	<del></del>	State	Zip Code	Foreign Coun	trv	
GREENWICH		CT	06830	. Greigh Godin	<b>J</b>	
Relationship	Foundation Status		, <del></del>		<del> </del>	
NONE	PC				_,	
Purpose of grant/contribution					Amount	
GENERAL OPERATING					1	9,000

THE NANCY E BARTON FOUNDAT				45-6656		4 of 4
Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Contri	butions Paid	<b>During th</b>	e Year
Recipient(s) paid during the year		_				
Name AMERICAN CIVIL LIBERATION UNION						
Street						
330 MAIN STREET, FIRST FLOOR City	<del></del>	State	Zip Code	Foreign Count	rv	
HARTFORD	,	CT	06106	) oreign count	y	
Relationship	Foundation Status					<u>-</u> -
NONE Purpose of grant/contribution	PC				Amount	
GENERAL OPERATING					Amount	14,000
Name						<u> </u>
AMERCARES INC						
Street		-				
88 HAMILTON AVE	<del></del>	Ctata	Zip Code	Foreign Count		
City STAMFORD			06902-3111	Foreign Count	ıy	
Relationship	Foundation Status		100002 0111			
NONE	PC				<u>r.                                    </u>	
Purpose of grant/contribution					Amount	25 000
GENERAL OPERATING					<b>L</b>	25,000
Name						
BUILDON INC Street						
PO BOX 16741						
City			Zip Code	Foreign Count	ry	
STAMFORD Relationship	Foundation Status	CT	06905			
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING					Amount	35,000
Name CHILD GUIDANCE CENTER OF SOUT	HERN CONNETICU	Г				
Street						
196 GREYROCK PLACE	<del> </del>	0	la: 0 t			
City STAMFORD		State	<b>Zip Code</b> 06901	Foreign Count	ry	
Relationship	Foundation Status		100001	<del>_</del>	·	_
NONE	PC				<del></del>	
Purpose of grant/contribution GENERAL OPERATING					Amount	40,000
		<del>-</del>			<del></del>	40,000
Name						
Street	<del></del>					
City		State	Zip Code	Foreign Count	ry	
Relationship	Foundation Status		1			
Purpose of grant/contribution	L			<del></del>	Amount	
Name			<del></del>	<del>_</del>	<u> </u>	
Street	<del></del>					
City	<del></del>	04-4	7:n Code	Faustina O		
City		State	Zip Code	Foreign Count	iry	
Relationship	Foundation Status				<u> </u>	
Purpose of grant/contribution	<u>.                                    </u>			<del></del>	Amount	

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Part I,	Line 6	Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory	Sale of Assets	Other Than Invent	ory										
							•	i	Totals	Gross		Cost, Other	Other	Net Gair	Sain
			Amount							Sales		Basis and Expenses	Expenses	or Loss	, ssc
		Long Term CG Distributions	200					Cal	Capital Gains/Losses		1,672,119		1,493,949		178,170
		Short Term CG Distributions						!	Other sales		0		Ó		0
L_												Expense			
					Check "X" If		-		_		_	of Sale and			
_	Check "X"				Purchaser							Cost of			
	to include		_		IS a	Date	Acquisition	Date	Gross Sales	Cost or	Valuation	Improve-			Net Gain
ل	in Part IV	rt IV Description	CUSIP#	Purchaser	Business	Acquired	Method	Sold	Price	Other Basis	Method	ments	Depreciation	Adjustments	or Loss
-	×	AMPHENOL CORP CL A NEW	032095101			5/7/2012		9/16/2014	51,589	27,617				0	23,972
7	×	AMPHENOL CORP CL A NEW	032095101			5/21/2012		9/16/2014	20,636	10,313				0	10,323
6	×	AMPHENOL CORP CL A NEW	032095101			1/31/2013		9/16/2014	51,589	33,933			_	•	17,656
•	×	AMPHENOL CORP CL A NEW	032095101	1	!	1/24/2013		9/16/2014	51,589	33,912				-	17,677
2	×	AMPHENOL CORP CL A NEW	032095101			7/25/2012		9/16/2014	30,953	17,486				-	13,467
9	×	BANK OF AMERICA CORP	06051GED7			7/25/2012	•	6/16/2014	51,700	50,629				0	1,071
7	×	DANONE-SPONS ADR	23636T100	,		7/25/2013		9/16/2014	96,483	108,962	_		_	0	-12,479
∞	×	HSBC USA INC SER F	40428H805			2/19/2013		9/16/2014	65,936	961,796				_	-1,860
6		LUXOTTICA GP SPA SPNDAD	55068R202			1/2/2013		9/16/2014	103,706	84,749				0	18,957
2	_	_	664397106			10/5/2012		9/16/2014	45,222	39,412		-			5,810
Ξ	×		664397106	1		1772013		9/16/2014	45,222	39,289		_		0	5,933
12			664397106			5/21/2012		9/16/2014	45,222	35,175	•		_	0	10,047
=	_		664397106	3		10/4/2012	1	9/16/2014	45,222	38,932	:	,	1	0	6,290
7	-1	_	72651A108		_	11/25/2013		9/16/2014	121,099	91,574				_	29,525
12	×	_	40414L109			8/16/2013	,	10/3/2013	289'08	79,234			_		1,453
16	_	_	670100205		_	11/1/2012		11/1/2013	133,189	129,384	•				3,805
11	-1	CHARLES SCHWABB	808513AJ4		_	7/31/2013	_	11/25/2013	55,536	24,897					639
18	_	_	172967FY2			7/25/2012		11/25/2013	51,032	50,571					461
6		_	384802104			11/22/2013		2/5/2014	115,737	128,165					-12,428
20	×	LVMH MOET	502441306			11/1/2013	-	1/8/2014	34,110	38,209	-•				4,099
21	× -	SAP	803054204			6/26/2013		5/15/2014	191,632	191,953					-321
22	×	POTLATCH CORPORATION	737630103			7/25/2012		1/14/2014	40,772	33,827	_				6,945
23	×	SIRONA DENTAL	82966C103			8/17/2012	-	3/4/2014	142,556	107,930	_	_		_, _! 	34,626

Part I, Line 16c (990-PF) - Other Professional Fees

		54,770	46,091	0	8,679
					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
L	Description	Books	Income	Income	(Cash Basis Only)
1	U.S TRUST FEES AS AGENT	16,300	7,621		8,679
2	CHARLES SCHWAB MANAGEMENT FEES	31,382	31,382		
3	BRADLEY, FOSTER & SARGENT MGMT FEES	7,088	7,088		

### <sup>\*</sup>8/11/2015 1:02.43 PM - JMB - LA - THE NANCY E BARTON FOUNDATION

Part I, Line 18 (990-PF) - Taxes

		75,804	1,838	Ō	0
		Revenue			Disbursements
ļ		and Expenses	Net Investment	Adjusted	for Charitable
	Description	per Books	Income	Net Income	Purposes
1	FOREIGN TAX WITHHELD	1,838	1,838		
2	ESTIMATED TAX PAYMENTS	57,363			
3	PY EXCISE TAX DUE	16,603			j

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Part I, Line 23 (990-PF) - Other Expenses

		1,460	1,410	0	50
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
<u>L</u>	Description	per Books	Income	Income	Purposes
1	ADR FEES	542	542		
2	PROBATE FEES	868	868		
3	OTHER EXPENSE	50			50

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990-PF)	

			0	5,448,231	0	6,701,291
		Num Shares/	Book Value	Book Value	FMV	FMV
	Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year
-						
7	SPIRAX-SARCO ENGR PLC SH	0		95,340		88,191
က	NIELSEN HOLDINGS B V	0		205,410		265,980
4	ANHEUSER-BUSCH INBEV ADR	0		79,065		110,850
2	COCA-COLA CO USD	0		143,369		127,980
9	DANAHER CORP COMMON	0		205,382		265,930
_	DEERE & COMPANY	0		126,007		122,985
œ	DISNEY (WALT) COMPANY HOLDING CO	0		237,245		311,605
6	EXXON MOBIL CORP	0		71,670		75,240
10	GENESEE & WYO INC	0		136,182		142,965
7	GOLDMAN SACHS GROUP INC	0		133,560		183,570
12	HSBC HLDGS PLC	0		161,597		147,552
13	J P MORGAN CHASE & CO	0		218,389		301,200
14	KANSAS CITY SOUTHN INDS INC	0		142,696		157,560
15	LVMH MOET HENNESSY LOUIS	0		99,305		97,170
16	-	0		131,920		184,935
17	MACQUARIE INFRASTRUCTURE	0		126,710		200,100
18	MC CORMICK & CO INC COM	0		120,064		133,800
19	MC DONALDS CORPORATION COMMON	0	The second secon	73,095		75,848
20	MERCK AND CO INC SHS	0		125,905		177,840
21	NESTLE S A SPONSORED ADR	0		125,700		147,260
22	NIKE INC CL B	0		149,512		142,720
23	NOVARTIS AG SPNSRD ADR	0		124,652		188,260
24	OCCIDENTAL PETROLEUM CORPORATIO	0		299,062		355,755
25	PEMBINA PIPELINE CORP	0		174,344		252,840
<b>5</b> 6	POTLATCH CORP NEW	0		30,302		40,210
27	PRAXAIR INC			51,533		64,500
28	PROCTER & GAMBLE CO COM	0		267,051		334,960
29		0		196,362		274,820
30		0		118,751		128,282
31	STERICYCLE INC	0		64,618		81,592
32	THERMO ELECTRON CORP	0		151,533		160,401
33	ĖΤ	0		123,510		140,910
34		0		234,886		316,800
35	$\overline{}$	0		173,558		191,310
36	WELLS FARGO & CO NEW	0		162,924		207,480
37	WESTLAKE CHEM CORP	0		80,112		173,180
38		0		132,160		143,960
39	ZOETIS INC	0		154,750		184,750

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Part II, Line 10c (990-PF) - Investments - Corporate Bonds

				0	1,150,340	0	1,140,546
		Interest	Maturity	Book Value	Book Value	FMV	FMV
	Description	Rate	Date	Beg. of Year	End of Year	Beg of Year	End of Year
-							
7	2 AMPHENOL CORP			0	103,441		104,786
က	3 BUNGE LIMITED FINANCE CO			0	51,467		51,786
4	4 FREEPORT-MCMORAN C & G			0	50,382		50,852
2	5 GOLDMAN SACHS GROUP INC		,	0	67,028		66,285
9	6 GOLDMAN SACHS GROUP INC			0	50,481		50,798
7	HEWLETT-PACKARD CO			0	50,03		53,096
8	8 NEWMONT MINING CORP			0	103,813		92,721
6	9 PETROBRAS INTL FIN CO			0	102,646		101,738
10	10 REALTY INCOME CORP			0	100,265		97,728
11	11 SPECTRA ENERGY PARTNERS			0	103,987		103,188
12	12 STANCORP FINANCIAL GROUP			0	101,407		105,597
13	13 THERMO FISHER SCIENTIFIC			0	155,864		154,476
14	14 YUMI BRANDS INC			0	108,866		107,495

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t Income	
Investmen	
r Tax on	
osses for	
Sains and [	
- Capital G	
(990-PF)	
Part IV	

Co. Company of the Co.												
Short Term CG Distributions 0				1,671,419	0	0	1,493,949	177,470	0	0		77,47
	1	-1-0					Cost or Other		777	Adjusted Basis	/413/0 000000	Gains Minus Excess
Description of Property Sold CUSIP#	Acquired	Acquired	Sold	Sales Price	Allowed	Adiustments	Expense of Sale	Gain or Loss	12/31/69	12/31/69	Over Adi Basis	Basis or Losses
0320		5/7/2012	9/16/2014	51,589		0	27 617	23 972	0	0		23 972
032095101		5/21/2012	9/16/2014	20 636		0	10 313	10 323	;	,		10 323
032095101	_	1/31/2013	9/16/2014	51,589	_	0	33 933	17 656	0	•		17,65
032095101		1/24/2013	9/16/2014	51 589		0	33 912	17,677	0	•	•	17,677
032095101		7/25/2012	9/16/2014			0	17 486	13,467	0	0		13 46
06051GED7		7/25/2012	6/16/2014	51,700		0	50 629	1 071	0	0		107
23636T100		7/25/2013	9/16/2014	96 483		0	108 962	-12,479	0	0		12 479
40428H805		2/19/2013	9/16/2014	65 936		0	967 79	-1 860	0	•		-1 86
LUXOTTICA GP SPA SPNDADR 55068R202	;	1/2/2013	9/16/2014	103 706		0	84,749	18 957		0		18 957
664397106	_	10/5/2012	9/16/2014	45,222		0	39 412	5 8 1 0	6	0		5,810
664397106		1/7/2013	9/16/2014	45 222		0	39,289	5 933	0	0		5 933
664397106		5/21/2012	9/16/2014	45 222		0	35 175	10 047	0	0		10 047
13 NORTHEAST UTILITIES COM 664397106	_	10/4/2012	9/16/2014	45 222		0	38 932	6,290	•	•		0 6 2 90
72651A108		11/25/2013	9/16/2014	121,099		0	91,574	29 525	0	0		29 525
404141109	_	8/16/2013	10/3/2013	80 687			79 234	1,453	0	0		1 453
670100205		11/1/2012	11/1/2013	133 189			129,384	3,805		0		3 805
808513AJ4		7/31/2013	11/25/2013	55 536			54 897	629	0	0		629
172967FY2		7/25/2012	11/25/2013	51 032			50,571	461	0	0		461
384802104		11/22/2013	2/5/2014	115,737			128,165	-12 428	0	0		12,428
502441306		11/1/2013	1/8/2014	34 110			38,209	660'4-		0		660,4
803054204		6/26/2013	5/15/2014	191,632			191,953	-321	o	-		1321
737630103		7/25/2012	1/14/2014	40 772			33 827)	6 945	0	•		6 945
829660103		8/17/7012	27477014	443 644			000.00		•	•		2.676

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									47,655	0	
Name	Check "X" if Business	Street	City	State	State Zip Code	Foreign Country	-	Avg Hrs Per Week	Compensation	Benefits	Expense
ALLEN BARTON		570 LILLIAN WAY	LOS ANGELES	A A	90004		TRUSTEE	1 00	10,000		
EDWARD F RODENBACH	s š	C&L BOX 2505	GREENWICH	5	06836		TRUSTEE	40 00	37,655		
2									_		

Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date	Amount
1	Credit from prior year return	1	
2	First quarter estimated tax payment	2	
	Second quarter estimated tax payment		
	Third quarter estimated tax payment		
	Fourth quarter estimated tax payment	5	
	Other payments	6	51,563
	Total		51,563

Distributable amounts for 2012 that remained undistributed at the beginning of the 2013 tax year .	1	295,545
	2	
	3	
	4	
	5	
	6	
	7	
	8	
	9	
Total	10	205 546

(Rev January 2014) Department of the Treasury

### Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868. Internal Revenue Service

• If you ar	e filing for an Additional (Not Automatic)  polete Part II unless you have already be	3-Month E	Extension, complete only Part II (	on page 2 of	this f	orm).	
a corporation 8868 to record Return for	filing (e-file). You can electronically file Form required to file Form 990-T), or an additionable and extension of time to file any of the formsfers Associated With Certain Personals). For more details on the electronic filing o	onal (not a forms listed I Benefit C	utomatic) 3-month extension of time d in Part I or Part II with the exception ontracts, which must be sent to the	You can el on of Form 8 IRS in paper	lectro 870, r form	nically Informa at (see	file Form ation e
Part I	Automatic 3-Month Extension of T	ime. Onl	y submit original (no copies need	ded).			
A corporati Part I only All other co	on required to file Form 990-T and requesti	ng an auto	matic 6-month extension—check th	is box and control of the control of	 t an e	xtensi	on of
Type or	Name of exempt organization or other filer, se	e instruction	ns	Employer iden	tıficatı	on numb	er (EIN) or
print							
File by the	Number, street, and room or suite no If a P O	. box, see ır	nstructions	Social secur	ity nu	mber (S	SSN)
due date for	P O BOX 1501, NJ2-130-03-31						
filing your	City, town or post office, state, and ZIP code	For a foreig	n address, see instructions				
return See instructions	PENNINGTON, NJ 08534-1501	ŭ	·				
•	teturn code for the return that this application	on is for (fil	e a separate application for each re	turn)			04_
Application is For	on	Return Code	Application Is For				Return Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)				07
Form 990-		02	Form 1041-A				08
	) (ındivıdual)	03	Form 4720 (other than individual)				09
Form 990-		04	Form 5227				10
	T (sec 401(a) or 408(a) trust)	05	Form 6069				11
	T (trust other than above)	06	Form 8870				12
Telepho If the or If this is for the who list with the I req until is for  I list for	names and EINs of all members the extenuest an automatic 3-month (6 months for a	of busines s four digit If it is for p sion is for. corporation exempt or	Fax No. ▶ ss in the United States, check this be Group Exemption Number (GEN) part of the group, check this box. n required to file Form 990-T) exten ganization return for the organizatio , and ending	sion of time n named abo	ove.		this is and attach a tension
	s application is for Forms 990-BL, 990-PF,	990-T 472	0 or 6069 enter the tentative tax le	ess anv			
nonr	efundable credits See instructions		<u> </u>		3a	\$	3,322
	s application is for Forms 990-PF, 990-T, 41				3b	e e	E4 EC2
	nated tax payments made. Include any prio Ince due. Subtract line 3b from line 3a. Incl			v usina	30	<b>&gt;</b>	51,563
EFT	PS (Electronic Federal Tax Payment Syster	n) See ins	structions.		3с		0
Caution. If y	ou are going to make an electronic funds withdr tructions	awal (dırect	debit) with this Form 8868, see Form 84	153-EO and F	orm 8	879-EC	for

Form 8866	5 (Rev 1-2014)					Page ∠
• If you	u are filing for an Additional (Not Automatic)	3-Month	Extension, complete only Part II	and check this bo	ж	. <b>►</b> X
Note. O	nly complete Part II if you have already been	granted an	automatic 3-month extension on a	a previously filed f	orm 886	i8.
<ul> <li>If you</li> </ul>	u are filing for an Automatic 3-Month Extens	ion, comp	lete only Part I (on page 1)			
Part II	Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origina	l (no copies nee	ded).	
			Enter file	r's identifying nun	ber, see	instructions
Type or	Name of exempt organization or other filer, se	ee instructioi	ns E	mployer identification r	number (Ell	<b>1</b> ) or
print	THE NANCY E BARTON FOUNDATION		4:	5-6656212		
•	Number, street, and room or suite no. If a P C	box, see ii	nstructions.	ocial security numb	er (SSN)	
File by the due date for	P O BOX 1501, NJ2-130-03-31					
filing your	City, town or post office, state, and ZIP code.	For a foreig	n address, see instructions			
return See instructions	PENNINGTON, NJ 08534-1501					
	e Return code for the return that this applicati	on is for (fil	e a separate application for each r	eturn)		. 04
		<del></del>		· · · · · · · · · · · · · · · · · · ·		
Applica	ation	Return	Application			Return
Is For		Code	Is For			Code
	90 or Form 990-EZ	01				<u> </u>
Form 9		02	Form 1041-A			08
	720 (individual)	03	Form 4720 (other than individual	)		09
Form 9		04	Form 5227	······································		10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
4   1   5   F   6   [	the names and EINs of all members the exterrequest an additional 3-month extension of time or calendar year, or other tax year bettee tax year entered in line 5 is for less than 1 Change in accounting period tate in detail why you need the extension An a	nsion is for.  ne until eginning 2 months,	8/15/2015 10/1/2013 , an check reason.	d ending	9/30/201 Irn	
ta	timely fashion, but the information was not fur xpayer personally visited an IRS office for the RS representative					ı an
8a If	this application is for Forms 990-BL, 990-PF,	990-T, 472	0, or 6069, enter the tentative tax,	less any	Τ	
	onrefundable credits. See instructions.			8a	\$	3,322
b If	this application is for Forms 990-PF, 990-T, 4	720, or 606	9, enter any refundable credits an	d		
es	stimated tax payments made. Include any prio	r year over	payment allowed as a credit and a	iny [	1	
ar	mount paid previously with Form 8868.			8b	\$	51,563
	alance due. Subtract line 8b from line 8a. Inc FTPS (Electronic Federal Tax Payment Syste			by using 8c	\$	0
			nust be completed for Part II		_1_Ψ	
	enalties of perjury, I declare that I have examined th ge and belief, it is true, correct, and complete, and th	ıs form, ınclu	ding accompanying schedules and sta	•		ny