

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury

Internal Revenue Service

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

OMB No 1545-0052
20 14

Open to Public Inspection

For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number FRANK M. AND OLIVE F. GILMAN FOUNDATION 03-0330527 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number C/O REGINALD JONES, PO BOX 979 (802)295-3358 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here WHITE RIVER JUNCTION, VT G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 39,576,839. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 3,221,482 N/A Contributions, gifts, grants, etc., received Check the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 51 51 STATEMENT $\overline{69}7,213$ 701,248 4 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 865,572 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 3,514,041. 865,572 7 Capital gain 8 Net short term capital pain 9 Income modifications Mas return 10a and allow 0 4 2015 c Gross profit of 1,693 1,693. STATEMENT 11 Other income Total. Add lines 1 through 11 790,046 564,529 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 5,910. STMT 5 0 5,910. **b** Accounting fees c Other professional fees 17 Interest
18 Taxes S
19 Depreciation and depletion
20 Occupancy
21 Travel, conferences, and meetings 77,385 12,253 STMT 6 0. 2,967 0 2,967. 22 Printing and publications STMT 7 7,965. 23 Other expenses 236,334 228,369 24 Total operating and administrative 322,596 16,842. expenses. Add lines 13 through 23 240,622 25 Contributions, gifts, grants paid 800,000. 1,800,000. 26 Total expenses and disbursements. 2,122,596 1,816,842. Add lines 24 and 25 240,622 27 Subtract line 26 from line 12: 2,667,450. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1,323,907 c Adjusted net income (if negative, enter -0-) 423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-PF (2014)

<u>Form</u>	ąg	00-PF (2014) FRANK M. AND OLIVE F. G.			-0330527 Page 2
Pa	rt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	1 112 247	075 760	075 760
		Savings and temporary cash investments	1,112,247.	975,768	975,768.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ► Pledges receivable ►			
ı	4	Less; allowance for doubtful accounts			
ĺ	5	Grants receivable			
l	-	Receivables due from officers, directors, trustees, and other			
ŀ	•	disqualified persons			
	7	Other notes and loans receivable			
ĺ		Less: allowance for doubtful accounts ▶			
छ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
⋖ ¹	0a	Investments - U.S. and state government obligations STMT 9	94,601.		
		Investments - corporate stock STMT 10			25,369,488.
		Investments - corporate bonds STMT 11	3,013,650.	3,071,182	3,100,500.
1	1	Investments - land, buildings, and equipment basis			
- 1.		Less accumulated depreciation			
	3	Investments - mortgage loans Investments - other STMT 12	8,335,703.	10,202,857	10,041,999.
		Land, buildings, and equipment: basis	0,333,7030	10/102/05/	10,011,030,
	7	Less accumulated depreciation		•	
1	5	Other assets (describe ► ACCRUED INTEREST)	32,416.	29,084	29,084.
		Total assets (to be completed by all filers - see the			
\perp		instructions. Also, see page 1, item I)	34,292,524.	33,905,714	39,576,839.
1	7	Accounts payable and accrued expenses			_
		Grants payable			_
ies		Deferred revenue			_
·= I		Loans from officers, directors, trustees, and other disqualified persons			
<u>;</u> ي:		Mortgages and other notes payable Other liabilities (describe ▶)			
	٠.	Other nationals (describe)		· · · · · · · · · · · · · · · · · · ·	
	3	Total liabilities (add lines 17 through 22)	0.	0	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ğ 2	4	Unrestricted	34,292,524.	33,905,714	
	25	Temporarily restricted			
80 2	6	Permanently restricted			_
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
ᡖ,	17	and complete lines 27 through 31 Capital stock, trust principal, or current funds			
ets	!7 !8	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	9	Retained earnings, accumulated income, endowment, or other funds			_
i je	10	Total net assets or fund balances	34,292,524.	33,905,714	
<u>_</u>	11	Total liabilities and net assets/fund balances	34,292,524.	33,905,714	<u>,</u>
Pa	rt	III Analysis of Changes in Net Assets or Fund Ba	alances		
1 T	otal	I net assets or fund balances at beginning of year - Part II, column (a), line			
		st agree with end-of-year figure reported on prior year's return)		1	34,292,524.
•		r amount from Part I, line 27a	** *	. 2	2,667,450.
3 0	the	r increases not included in line 2 (itemize) PRIOR PERIOI	ADJUSTMENT	3	9,846.
		tines 1, 2, and 3			36,969,820.
		eases not included in line 2 (itemize)		ATEMENT 8 5	3,064,106. 33,905,714.
6 T		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iuriin (d), iine 30		1 33.703./14.

	K M. AND OLIVE nd Losses for Tax on In			DA'I'	TON		1 <u>3 – 03:</u>	30527	Page 3
(a) List and descrit	be the kind(s) of property sold (e.g.	., real estate,		(b) Ho	w acquired Purchase Donation	(c) Date	acquired day, yr.)	(d) Date (mo., da	
1a PUBLICLY TRADED			תארי	υ-	P		ous	VARIO	
b CAPITAL GAINS D		111 111	311111		-	V11111		122020	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
<u>c</u>									
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale				Sain or (loss s (f) minus		
a 3,338,323.			2,648,46	9.					854.
b 175,718.					,			175,	718.
С									
d									
e		<u></u>	10.001.00						
Complete only for assets showing	gain in column (h) and owned by				((I) Gains ((Col. (h) gan not less tha	n minus an -O-) or	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Losses	(from col.	(h))	
a									854.
b				$-\!\!\!\!+$	-			175,	718.
C				+					· · · ·
d		_					_		
e		l		$\overline{}$					
2 Capital gain net income or (net capi	$\{ \text{ If gain, also enter} \\ \text{If (loss), enter -0} $			}	2			865,	572.
3 Net short-term capital gain or (loss		nd (6):							
If gain, also enter in Part I, line 8, co	olumn (c).			$ \cdot $			BT / 7		
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	Dodugod	Tay on Not	J Invo	3 etmont in	como	N/A		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify	on 4942 tax on the distributable amy under section 4940(e) Do not co	mplete this par	<u>t. </u>			·····		Yes [X No
1 Enter the appropriate amount in ea		istructions ben	ore making arry er			-		(d)	
(a) Base period years Calendar year (or tax year beginning			Net value of nor				Distri (col. (b) di	(d) bution ratio vided by col. (
2013		0,136.		<u>37,</u>	424,62	6.			18368
2012		8,600.			383,14				55919
2011		3,875.			608,22 524,95				57035 54492
2010		1,340. 7,890.			017,11				19283
2009	<u></u>	7,030-	·	<i>34,</i>	01/,11	- 		• 0 9	17203
2 Total of line 1, column (d)						2		. 26	55097
3 Average distribution ratio for the 5-	vear hase period - divide the total i	na line 2 by 5	or by the number	of vear	\$	1		• • • • •	,5051
the foundation has been in existence			or by alle liethbor	or , our	v	3_	-	.05	3019
4 Enter the net value of noncharitable	e-use assets for 2014 from Part X,	line 5				4	4	10,105,	168.
5 Multiply line 4 by line 3			•	•		5		2,126,	336.
6 Enter 1% of net investment income	(1% of Part I, line 27b)		-			6		13,	239.
7 Add lines 5 and 6						7		2,139,	<u>,575.</u>
8 Enter qualifying distributions from	Part XII, line 4					8_		1,816,	842.
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.				
423521 11-24-14								Form 990-F	PF (2014)

			<u>30527</u>		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49) 48 - se	e instru	ıctio	ns)
18	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)				
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1	2	6,4	78.
	of Part 1, line 27b				4
c	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3	2	6,4	78.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	2	6,4	78.
6	Credits/Payments:				-
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 40,000.	İ			
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld 6d	İ			
	Total credits and payments. Add lines 6a through 6d	7	4	0.0	00.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8		0 7 0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1	3 5	22.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11		<u> </u>	0.
	art VII-A Statements Regarding Activities				<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	n		Yes	No
	any political campaign?		1a		Х
ь	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		"		
	distributed by the foundation in connection with the activities.	3 07			
	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0 .		1	^	-
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		·		,
	managers. > \$ 0.		,		
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	-	x
2	If "Yes," attach a detailed description of the activities.				<u> </u>
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		,		
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4a 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	N/A			x
5	If "Yes," attach the statement required by General Instruction T		5		
c	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
0					
	By language in the governing instrument, or Purchase legislation that effectively amends the governing instrument as that as mandatory directions that conflict with the state is	· · · ·			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	aw		v	
7	remain in the governing instrument? Did the foundation have at least \$5,000 in secrets at any time during the unart? If #Ves # any slote Part V and Call and Call and Call a		6	X	├
′	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	X	
٥.	Fater the states to which the favordation are also as with which it is excitated (as a set with a section of the section of th				Ĵ
ъа	Enter the states to which the foundation reports or with which it is registered (see instructions)		-		
	VT		-		
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)			4.	
_	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calent	aar			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X

orm	990-PF (2014) FRANK M. AND OLIVE F. GILMAN FOUNDATION 03-0330	<u>)527</u>		Page 5
Pa	rt 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) STATEMENT 13 STMT 14	11	X	
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?	13	Х	
-	Website address ► N/A	·		·
14	The books are in care of ► BRENDA JONES Telephone no. ► (802)2	295~	335	8
•	Located at ► PO BOX 979, WHITE RIVER JCT., VT ZIP+4 ►05			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	10 1		
	foreign country	i		
Pa	ert VII-B Statements Regarding Activities for Which Form 4720 May Be Required	-1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
12	During the year did the foundation (either directly or indirectly):	 		
14	(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)	1 1		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(4) Fay compensation to, or pay of reimbalise the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			`
	termination of government service, if terminating within 90 days.) Yes X No			,
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 1		,
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 45		Х
	Organizations relying on a current notice regarding disaster assistance check here	1b	,	<u> </u>
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1	-	
Ü	before the first day of the tax year beginning in 2014?	1.		Х
2		1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1 1		,
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of the year 2014, did the foundation have any undestributed income (lines 5d and 5e. Part XIII) for the year(s) had appeared.			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If Yes, "list the years \(\bigs_{			
v				
	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.) N/A	25		
_	statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
C	in the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
0-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	•			1
Đ	If "Yes," did it have excess business holdings in 2014 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,			7.
_	Form 4720, to determine if the foundation had excess business holdings in 2014)	3b	-	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	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 2014?	I 4b l		X

Frank M. AND OLIVE F. GI			<u>03-03305</u>	27 F	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4/20 May Be F	sequired (contin	ued)	-, -,	
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire				
any voter registration drive?		•	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		—	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	·	n Regulations	/-		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	-	N/A	5 b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. —			
expenditure responsibility for the grant?		[/ A	es L No		
If "Yes," attach the statement required by Regulations section 53 494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		L Ye	es X No	.	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	••	<u> </u>	6b	<u>X</u>
If "Yes" to 6b, file Form 8870		r1	(757)		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		
b If 'Yes,' did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trust				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, rigni	y 		
1 List all officers, directors, trustees, foundation managers and their	, i -		1.65		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expo account,	ense other
(a) Name and address	to position	enter-0-)	compensation	allowar	ices
	SECRETARY				
B MAPLE HILL ROAD					
LEBANON, NH 03766	0.00	0.	0.		0.
	TREASURER				
14 NANCY'S WAY		_			
ENFIELD, NH 03748	0.00	0.	0.		<u>0.</u>
	PRESIDENT				
14 NANCY'S WAY		_	_		_
ENFIELD, NH 03748	2.00	0.	0.		0.
	VICE-PRESIDEN	${f r}$			
B MAPLE HILL ROAD		_	_		_
LEBANON, NH 03766	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) Contributions to	(e) Expe	2000
(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	account, allowar	other
NONE					
····					
					
					
 -					
	<u> </u>	L	<u> </u>		
Fotal number of other employees paid over \$50,000			▶		0

Form 990-PF (2014) FRANK M. AND OLIVE F. GILMAN FOUNDATION 03 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	<u>-0330</u>	527 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 PROVIDES GRANTS TO EDUCATIONAL 501(C) 3 ORGANIZATIONS THAT PROVIDE SCHOLARSHIPS TO HIGH SCHOOL SENIORS IN WINDSOR CTY AND ORANGE CTY IN VT AND GRAFTON CTY IN NEW HAMPSHIRE 2	<u> </u>	<u>,800,000.</u>
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	 	Amount
1 NONE		0.
2		<u> </u>
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.

For	rm 990-PF (2014) FRANK M. AND OLIVE F. GILMAN FOUNDATION	03-	0330527	Page 8
P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundations,	see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities	1a	39,393,	658.
b	Average of monthly cash balances	1b	1,322,	249.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	40,715,	907.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	40,715,	907.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4		739.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	40,105,	
6	Minimum investment return. Enter 5% of line 5	6	2,005,	
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	tions and certain		
	foreign organizations check here and do not complete this part.)			
1	Minimum investment return from Part X, line 6	1	2,005,	258.
2a	Tax on investment income for 2014 from Part VI, line 5	78.		
b	Income tax for 2014. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	2c	26,	478.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,978,	780.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	1,978,	780.
6	Deduction from distributable amount (see instructions)	6	<u> </u>	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,978,	780.
P	Part XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		 	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,816,	
b	Program-related investments - total from Part IX-B	1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
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	1,816,	842.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b	5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,816,	842.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculation whether the found	dation qualifies for	the section	

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				1 070 700
2 Undistributed income, if any, as of the end of 2014				1,978,780.
a Enter amount for 2013 only			0.	
b Total for prior years:				
, and the second second		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010 150, 156.	,			
c From 2011 260, 532.				
d From 2012 217,655.				
e From 2013				
f Total of lines 3a through e	628,343.			
4 Qualifying distributions for 2014 from				·
Part XII, line 4: ►\$ 1,816,842.	,			
a Applied to 2013, but not more than line 2a	<u> </u>		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	4 1	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount		-		1,816,842.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014	161,938.			161,938.
(If an amount appears in column (d), the same amount must be shown in column (a))	(3) (30)			
6 Enter the net total of each column as	, , , , , , , , , , , , , , , , , , ,			
indicated below.	466 405			>
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	466,405.	<u> </u>		
b Prior years' undistributed income. Subtract				•
line 4b from line 2b		0.		
c 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	ì	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	· ,	0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract	120		······	
lines 4d and 5 from line 1. This amount must				
be distributed in 2015	, *-			0.
7 Amounts treated as distributions out of		······································		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				·
Subtract lines 7 and 8 from line 6a	466,405.			
0 Analysis of line 9				
a Excess from 2010				
b Excess from 2011 248,750.				
c Excess from 2012 217, 655.				
d Excess from 2013				
e Excess from 2014				
23581				Form 990-PF (2014)

Form 990-PF (2014) FRANK M Part XIV Private Operating F		E. F. GILMAN		03-0:	330527 Page 10
1 a If the foundation has received a ruling of			1	_ H/ A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found	•	-	in section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ing touridation described i	Prior 3 years	1 4342(J)(3) UI L1 2	1942())(3)
•	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
income from Part I or the minimum	(4) 2014	(0) 2013	(6) 2012	(0) 2011	(6) 10(8)
investment return from Part X for			1		}
each year listed	1			<u> </u>	
b 85% of line 2a				ļ	
c Qualifying distributions from Part XII,					
line 4 for each year listed					ļ
d Amounts included in line 2c not					
used directly for active conduct of				1	
exempt activities					
e Qualifying distributions made directly	:				
for active conduct of exempt activities.		1			
Subtract line 2d from line 2c		Ì			
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
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		İ		Ì	
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				 	<u> </u>
an exempt organization					
(4) Gross investment income				 	
Part XV Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000 or m	ore in accets
at any time during t	he vear-see insti	ructions.)	ii tile loulidation	11au \$5,000 01 111	ore in assets
1 Information Regarding Foundatio					
a List any managers of the foundation who	_	than 2% of the total contr	abutions recoved by the	foundation before the ot-	on of any toy
year (but only if they have contributed m	ore than \$5,000), (See s	ection 507(d)(2).)	ibulions received by the	ioundation before the Cit	ise of any lax
NONE	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation (or an equally large portion	on of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi					
Check here L if the foundation of	nly makes contributions	to preselected charitable o	organizations and does n	ot accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc. (see instructions) to indiv	riduals or organizations ui	nder other conditions, co	omplete items 2a, b, c, an	d d.
a The name, address, and telephone number		he person to whom applic	cations should be addres	ssed:	
REGINALD JONES, 802-	295-3358				
PO BOX 979, WHITE RI	VER JUNCTIO	N, VT 05001			
b The form in which applications should b			ould include:		
LETTER OF REQUEST					
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards					
GRANTS TO SELECTED P			ORANGE COU	INTIES IN VE	RMONT AND
GRAFTON COUNTY IN NE	W HAMPSHIRE	•			
423601 11-24-14					Form 990-PF (2014)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or **Amount** contribution status of Name and address (home or business) recipient a Paid during the year NEW HAMPSHIRE CHARITABLE FOUNDATION NONE 501 (C)(3) EDUCATIONAL ASSISTANCE 37 PLEASANT ST CONCORD NH 03301 630,000. VERMONT STUDENT ASST. CORP NONE 509(A) EDUCATIONAL ASSISTANCE CHAMPLAIN MILL WINOOSKI, VT 05404 1,170,000. <u> 3a</u> Total 1 800 000 b Approved for future payment NONE Total

iter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code		code	Amount	Tanction income
ab	-				
b c	_ _				<u> </u>
					
de	_				
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	51.	
Dividends and interest from securities			14	701,248.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					· · · · · · · · · · · · · · · · · · ·
Other investment income			14	1,693.	
Gain or (loss) from sales of assets other			10	0.65 570	
than inventory			18	865,572.	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory					
Other revenue.				· · · · · · · · · · · · · · · · · · ·	
a b	- -				·.·
c					
d					
e					
Subtotal. Add columns (b), (d), and (e)		().l	1,568,564.	
Total. Add line 12, columns (b), (d), and (e)				13	1,568,56
ee worksheet in line 13 instructions to verify calculations.	.)				
art XVI-B Relationship of Activities	s to the Accom	plishment of	Exempt I	^O urposes	
ine No. Explain below how each activity for which in the foundation's exempt purposes (other the				ed importantly to the accomp	ishment of
N/A					

ne No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).					
	V/A					
-						

Form **990-PF** (2014)

(a) Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description of transfers, trans	actions, and sharing arrangements
		N/	′A		· · · · · · · · · · · · · · · · · · ·
··· · · · · · · · · · · · · · · · · ·					
		<u> </u>			
					
				1	
	•	•	o, one or more tax-exempt organiza	itions described	Yes X No
	on 501(c) of the Code (other	` ' ' ' '	n section 52/7		Yes X No
b II Yes,	complete the following sche (a) Name of orga		(b) Type of organization	(c) Description	of relationship
	N/A	ameuron	(b) type of organization	(0) 2000	
 	24/11				· · · · · · · · · · · · · · · · · · ·
. ,					
				<u></u>	
				latements, and to the best of my knowle tion of which preparer has any knowledg	
Sign Here	11 m en al	Homes	Whalu		shown below (see instr)?
	ignature of officer or trustee	y joya,	Date	PRESIDENT Title	X Yes No
	Print/Type preparer's nar	me Prenar			ıf PTIN
	AARON R. MA	1 / 1		and ampleued	t
Paid	CPA		ON R. MACASKIL	1/30/15 Sell-elliptoyed	P01217551
_		. PEISCH & CO		Firm's EIN	03-0210880
Prepare	- Liming manne - W + LT				
Prepare Use Onl					
	у	FARMVU DRIVE	· · · · · · · · · · · · · · · · · · ·		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	FF	ANK M. AND OLIVE F. GILMAN FOUNDATION	03-0330527
Organia	zation type (check o	ne)	
Filers o	of:	Section:	
Form 990 or 990-EZ		501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	90-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	le See instructions
Genera	l Rule		
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special	Rules		
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun line 1. Complete Parts I and II	or 16b, and that received from
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educaruelty to children or animals. Complete Parts I, II, and III	· · · · · · · · · · · · · · · · · · ·
	year, contributions is checked, enter his purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled movere the total contributions that were received during the year for an exclusively religious, complete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box , charitable, etc ,
but it m	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

FRANK M. AND OLIVE F. GILMAN FOUNDATION

03-0330527

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

T. T/CJT/17/	M. AND OBIVE F. GIDMAN FOUNDATION		7-0330341
Part Í	Contributors (see instructions) Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VALLEY LAND CORP. 220 HOLIDAY DR STE 27 WHITE RIVER JUNCTION, VT 05001	\$ <u>3,221,482.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onneash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for

Employer identification number

FRANK M. AND OLIVE F. GILMAN FOUNDATION

03-0330527

≁art II	NONCASH Property (see instructions). Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
·		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 -			
53 11-05-1			990, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** AND OLIVE F. GILMAN FOUNDATION

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Parl III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this into once)

\$\frac{103-0330527}{5}\$ FRANK M. Part III Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 990-PF II	NTEREST	ON	SAVINGS	AND	TEMPORA	RY	CASH	IN	VESTMENTS	ST	ATEMENT	1
SOURCE					(A) REVENUE ER BOOKS	}	NET	IN	(B) VESTMENT COME		(C) ADJUSTED ET INCOME	:
SMITH BARNEY					5	1.			51.			_
TOTAL TO PART	I, LINE	3			5	1.			51.			
FORM 990-PF		DIV	IDENDS A	ND II	NTEREST	FRO	M SE	CUR	ITIES	ST	ATEMENT	2
SOURCE			OSS DUNT	GA:	ITAL INS DENDS	RE	(A) VENUI BOOI		(B) NET INVES MENT INCO	_	(C) ADJUSTE NET INCO	
BOND AMORTIZATO DIVIDEND INCOME INTEREST INCOME	E	801 11	1,139. 3,784. 0,286. 4,035.	17!	0. 5,718. 0. 0.	6	41,13 28,06 10,28 4,03	66. 86.	110,28	6.		
TO PART I, LINE	E 4	870		17!		7	01,24	18.	697,21	3.		

FORM 990	-PF G	AIN OR (LOSS)	FROM SALE	OF A	SSETS		STAT	EMENT	
DESCRIPT	(A) ION OF PROPERTY				MANNER ACQUIRED	DA' ACQU	_	DATE S	SOLD
PUBLICLY SEE ATTA	TRADED SECURIT	_ IES-		P	URCHASED	VARI	ous	VARIO	ous
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
	SALES PRICE	OTHER BASIS	SALE	01	DEPREC	. (GAIN	OR LOS	SS
	3,338,323.	2,648,469.		0.		0.		689,8	354.
DESCRIPT	(A) ION OF PROPERTY				MANNER ACQUIRED	DA ^A		DATE S	SOLD
		_		P	URCHASED	06/3	0/96	12/3	L/14
	(B)	(C)	(D)		(E)			(F)	
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPREC	•	GAIN	OR LO	SS
	0.	5,399.		0.	5,39	99.			0.
NET GAIN	OR LOSS FROM S	ALE OF ASSETS						689,8	854.
CAPITAL (GAINS DIVIDENDS	FROM PART IV				_		175,	718.
TOTAL TO	FORM 990-PF, P.	ART I, LINE 6A				=		865,	572.
FORM 990	-PF	ОТНЕ	R INCOME		<u> </u>		STAT	EMENT	4
DESCRIPT	ION		(A) REVENT PER BOO		(B NET IN MENT II	VEST-		(C) ADJUSTI ET INCO	
OTHER IN	COME			L,693	•	1,693	•		
TOTAL TO	FORM 990-PF, P.	ART I, LINE 11		1,693	•	1,693	•		

FORM 990-PF	ACCOUNTI	S	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
AM PEISCH & COMPANY, LLP	5,910.	0.		5,910.	
TO FORM 990-PF, PG 1, LN 16B	5,910.	0.		5,910.	
FORM 990-PF	TAX	ES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX PAID FEDERAL INCOME TAXES	12,253. 65,132.	12,253.		0.	
TO FORM 990-PF, PG 1, LN 18 =	77,385.	12,253.		0.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DUES BROKER FEES POSTAGE VSAC ADMIN FEE MEETING EXPENSE	2,950. 228,369. 180. 4,000. 835.	0. 228,369. 0. 0.		2,950. 0. 180. 4,000. 835.	
TO FORM 990-PF, PG 1, LN 23	236,334.	228,369.		7,965.	

FORM 990-PF OTHER DECREASES IN NET ASSETS	OR FUND BALANCES	STATEMENT 8
DESCRIPTION		AMOUNT
ADJUSTMENT TO FMV OF WHOLLY OWNED SUBSIDIARY		3,057,000.
PRIOR PERIOD RECLASSIFICATION OF DIVIDENDS T DISTRIBUTIONS CHANGE IN ACCRUED INCOME	O NON-DIVIDEND	3,774. 3,332.
TOTAL TO FORM 990-PF, PART III, LINE 5		3,064,106.
FORM 990-PF U.S. AND STATE/CITY GOVER	NMENT OBLIGATIONS	STATEMENT 9
	THER OV'T BOOK VALUE	FAIR MARKET VALUE
STATE AND MUNICIPLE OBLIGATIONS	x 60,000.	60,000.
TOTAL U.S. GOVERNMENT OBLIGATIONS		
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGAT	ions 60,000.	60,000.
TOTAL TO FORM 990-PF, PART II, LINE 10A	60,000.	60,000.
FORM 990-PF CORPORATE ST	OCK	STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	19,566,823.	25,369,488.
TOTAL TO FORM 990-PF, PART II, LINE 10B	19,566,823.	25,369,488.
FORM 990-PF CORPORATE BO	NDS	STATEMENT 11
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
		·······
CORPORATE BONDS	3,071,182.	3,100,500.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT	12
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
MUTUAL FUNDS	COST	10,202,857.	10,041,9	99.
TOTAL TO FORM 990-PF, PART II, LINE	13	10,202,857.	10,041,9	99.

FORM 990-PF TRANSFERS FROM CONTROLLED ENTITIES PART VII-A, LINE 11	STATEMENT 13
NAME OF CONTROLLED ENTITY	EMPLOYER ID NO
VALLEY LAND CORPORATION	03-0190735
ADDRESS	
220 HOLIDAY DR. SUITE 27 WHITE RIVER JCT, VT 05001	
DESCRIPTION OF TRANSFER	
CHARITABLE CONTRIBUTION	
	AMOUNT OF TRANSFER
	3,221,482
TOTAL AMOUNT OF TRANSFERS FROM CONTROLLED ENTITIES	3,221,482

FORM 990-PF

LIST OF CONTROLLED ENTITIES
PART VII-A, LINE 11

STATEMENT 14

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

VALLEY LAND CORPORATION

03 - 0190735

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

220 HOLIDAY DR. SUITE 27 WHITE RIVER JCT, VT 05001

2014 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

_	
14	
2	
H	
0	
σ	
σ	

Current Year , Deduction	0 0	zation Deduction
Current Sec 179	o	L mercial Revitali
Accumulated Depreciation	5,399.	/age, Bonus, Com
Basis For Depreciation	5,399.	I I I I I I I I I I I I I I I I I I I
Reduction In Basis	o	OH.
Bus % Excl		
Unadjusted Cost Or Basis	5, 399.	(D) - Asset disposed
N 0 0	17	<u> </u>
Life	00.	
Method	2000B	
Date Acquired	063096200DB5	
Description	(D)FURNITURE & * TOTAL 990-PF PG 1 DEPR	
Asset		428102 05-01-14