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Form 990-PF

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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F	or ca	lendar year 2014 or tax year beginning		, 2014, and endin		
	Name	of foundation			A Employer identification number	
_	THE	AUSOLUS TRUST			04-3368079	
	Numb	er and street (or PO box number if mail is not delivere	d to street address)	Room/suite	B Telephone number (see instructions)	_
	C/0	GEORGE P. BEAL, THE BOSTON E	FAMILY OFFICE		(617) 624-0800	
	88	BROAD STREET, 2ND FLOOR				
	City o	r town, state or province, country, and ZIP or foreign po	ostal code			
					C If exemption application is pending, check here	7
_	BOS	TON, MA 02110			pontaing, on sox hard	_
G	Che	eck all that apply Initial return	Initial return	of a former public chard	ty D 1 Foreign organizations, check here ▶]
		Final return	Amended re	turn	2 Foreign organizations meeting the	_
_		Address change	Name chang	е	85% test, check here and attach computation	
H	Che	eck type of organization. X Section 501	(c)(3) exempt private f	oundation	E If private foundation status was terminated	
1	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundation	under section 507(b)(1)(A), check here]
I	Fair	market value of all assets at JAcco	ounting method: X C	ash Accrual	F If the foundation is in a 60-month termination	
	end	of year (from Part II, col. (c), line	ther (specify)		under section 507(b)(1)(B), check here .]
_	16)	▶ \$ 20,632,779. (Part I,	column (d) must be on cas	sh basis)		
G	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursements for charitable	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	income	income purposes	
_		column (a) (see instructions))	books		(cash basis only)	
	1	Contributions, giffs, grants, etc., received (attach schedule).	1,000,000.	1: (1)	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	;
	2	Check Line to the foundation is not required to attach Sch B		. 3 `	* `	
	3	Interest on savings and temporary cash investments.	110.000	054 500		
	4	Dividends and interest from securities	119,203.	356,783.	ATCH 1	_
	5a	Gross rents				
	b Net rental income or (loss)		0.155			
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all 1 395 565	-2,155.	, , ,	RECEIVED	- '
en	١	assets on line 6a 1,395,565.		3 7 8	ن	_
è	7	Capital gain net income (from Part IV, line 2) .		1,286,035.	S 14AV 18 2005 8	
_	8	Net short-term capital gain	-		S MAY 19 COD J	
	9	Income modifications			- R	
		and allowances · · · ·			- I - OGD∉N, UT - I	
	l .	Less Cost of goods sold .				 ,
	5	Gross profit or (loss) (attach schedule)	404.	-2,399.		
	11 12	Other income (attach schedule) ATCH. 2	1,117,452.	1,640,419.		_
-	_	Total. Add lines 1 through 11	1,117,432.	1,040,419.	<u> </u>	
Ś	13	Compensation of officers, directors, trustees, etc				—
nses	14	Other employee salaries and wages		<u> </u>		—
		Pension plans, employee benefits				—
and Administrative Expe	16a	Legal fees (attach schedule)	4,500.		4,50	<u> </u>
ě	6	Other professional fees (attach schedule).[4]	61,541.	30,771.	30,77	
ati	4.7 C		01/0111	30,7711	30777	
str	10	Interest	60,104.	2,446.		_
Ξ	10	Depreciation (attach schedule) and depletion.	,		-	_
퉏	20	Occupancy				_
₹	21	Travel, conferences, and meetings		· ·		—
Ē	22	Printing and publications				—
6	23	Other expenses (attach schedule) ATCH .6.	500.	322,136.	50	<u> </u>
Ë	23 24 25	Total operating and administrative expenses.		,		<u> </u>
era		Add lines 13 through 23	126,645.	355,353.	35,77	10
č	25	Contributions, gifts, grants paid	876,000.		876,00	
_	26	Total expenses and disbursements Add lines 24 and 25	1,002,645.	355,353.	d 911,77	_
_	27	Subtract line 26 from line 12		· · · · · · · · · · · · · · · · · · ·		_
	l	Excess of revenue over expenses and disbursements	114,807.		İ	
	l	Net investment income (if negative, enter -0-)		1,285,066.		_
		Adjusted net income (if negative, enter 0.)		· · · · · · · · · · · · · · · · · · ·	d	—

JSA For Paperwork Reduction Act Notice, see instructions. $^{4E1410\ 1\ 000}$ G7V05N 2912 4/21/2015 3:00:

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Form 990-PF (2014

Form 990-PF (2014) THE AUSOLUS TRUST 04-3368079

Form 990-PF (2014)		P-PF (2014) THE A	USOLUS TRUST				04-3368079 Page 2		
	art I	Balance Sheets Attached schedu description colur	les and amounts in the	Beginning of year	<u></u>	End o	f year	-	
Li —	ant ii	amounts only (S	ee instructions)	(a) Book Value	(b) Book Value		(c) Fair Marke	t Value	
	1	Cash - non-interest-bearing							
	2	Savings and temporary cash investment		1,022,162.	773,	L59.	7	73,159	
	3	Accounts receivable ▶							
		Less allowance for doubtful accounts							
	4	Pledges receivable							
		Less allowance for doubtful accounts ▶	· · · · · · · · · · · · · · · · · · ·						
	5	Grants receivable			<u> </u>				
	6	Receivables due from officers, directo							
	1	disqualified persons (attach schedule) (s	see instructions)						
	7	Other notes and loans receivable (attach							
	-	Less allowance for doubtful accounts ▶				_			
s	8	Inventories for sale or use					-		
Assets	9	Prepaid expenses and deferred charges							
As	10 a	Investments - U S and state government oblig							
		Investments - corporate stock (attach so		4,163,147.	4,914,8	135	4.9	14,835	
		Investments - corporate bonds (attach so		1/100/11/1	1,521,	,,,,,,		11,000	
	11	lacantaranta lond buildinas .					<u> </u>		
	ĺ	and equipment basis Less accumulated depreciation (attach schedule)		7 77 7 9				* *	
		(attach schedule)							
	12 13	Investments - mortgage loans	· · · · · · · · · · ·						
	14	Investments - other (attach schedule) Land, buildings, and			* * * * * * * * * * * * * * * * * * * *			1 4 1	
		equipment basis Less accumulated depreciation	·					251	
		equipment basis Less accumulated depreciation (attach schedule)		14,723,943.	14 044 "	705	14 0	14 705	
	15	Other assets (describe		14,723,943.	14,944,	85.	14,94	44,785	
	16	Total assets (to be completed by		10 000 050	20 622 5	, , ,	20.6	220	
_	 	instructions Also, see page 1, item I) .		19,909,252.	20,632,7	79.	20,6.	32 , 779.	
	17	Accounts payable and accrued expenses			 				
	18								
ies	19	Deferred revenue						4	
Liabilities	20	Loans from officers, directors, trustees, and of	· · · · · · · · · · · · · · · · · · ·		••		* 1 2	`),	
į	21	Mortgages and other notes payable (att						!	
_	22	Other liabilities (describe)					1	
_	23	Total liabilities (add lines 17 through 22		0				*	
		Foundations that follow SFAS 117							
Ces		and complete lines 24 through 26	and lines 30 and 31.						
2	24	Unrestricted		19,909,252.	20,632,	779.			
3ali	25 26 27 28 29 30	Temporarily restricted					8	> 1	
펄	26	Permanently restricted		-				į	
Ę		Foundations that do not follow SF	AS 117, ▶ 📖						
5		check here and complete lines 27	-						
ţ	27	Capital stock, trust principal, or current f							
Se	28	Paid-in or capital surplus, or land, bldg, and e							
Ř	29	Retained earnings, accumulated income, end							
ě	30	Total net assets or fund balances (see		19,909,252.	20,632,	779.			
_	31	Total liabilities and net assets	, 1						
		instructions)		19,909,252.	20,632,7	779.		t t	
_		Analysis of Changes in Net A							
1		al net assets or fund balances at be			-				
		-of-year figure reported on prior yea	r's return)			1	19,90	09,252.	
		er amount from Part I, line 27a				2		14,807	
		er increases not included in line 2 (if	emize) ► ATCH 9			3	60	08 , 720.	
4	Add	I lines 1, 2, and 3	 			4	20,63	32,779.	
5	Dec	creases not included in line 2 (itemize	a) 🗪			5			
6	Tot	al net assets or fund balances at en	d of year (line 4 minus	line 5) - Part II, column (b), line 30	6	20,63	32,779.	

Capital Gains and Losses for Tax on Investment Income

Part IV

_	~
эле	.5

	(a) List and 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a	SEE PART IV SCHEI	DULE				
b					1	
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
а						
b						
С						
d						
е		·	<u> </u>		· = · · · · · · · · · · · · · · · ·	
	Complete only for assets	showing gain in column (h) and owne	ed by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
	(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col	(k), but not less t Losses (from co	
а				<u> </u>		
b						
С				ļ		
d					· · · · · · · · · · · · · · · · · · ·	
е				ļ		
2	Capital gain net income o	or (net capital loss)	f gain, also enter in Part I, line 7 } (loss), enter -0- in Part I, line 7	2	1,	286,035.
3		ain or (loss) as defined in sections				
	Part I, line 8			3		0
Pa	art V Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
		the section 4942 tax on the distril not qualify under section 4940(e)	butable amount of any year in the b Do not complete this part	ase perio	d?	Yes X No
1	Enter the appropriate am	nount in each column for each yea	ar, see the instructions before makin	ng any ent	ries.	
Ca	(a) Base penod years Ilendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2013	736,472.	18,878,994.			0.039010
	2012	676,818.	14,969,620.			0.045213
	2011	640,696.	13,504,844.			0.047442
	2010	588,822.	13,369,631.			0.044042
	2009	499,976.	11,722,415.			0.042651
2	Total of line 1, column (d	n		2		0.218358
3	-		de the total on line 2 by 5, or by the	3		0.043672
4	Enter the net value of no	o for the 5-year base period - divid ndation has been in existence if le	ss man 5 years			
		ndation has been in existence if le	rom Part X, line 5	4	20,	336,741.
5	Multiply line 4 by line 3	ndation has been in existence if le	•	4 5		
5 6		ndation has been in existence if le	rom Part X, line 5			336,741.
	Enter 1% of net investme	ndation has been in existence if less ncharitable-use assets for 2014 from the control of the co	rom Part X, line 5	5		336,741. 888,146.
6	Enter 1% of net investment Add lines 5 and 6	ndation has been in existence if less incharitable-use assets for 2014 from the company of Part I, line 27b)	rom Part X, line 5	5 6 7 8	-	336,741. 888,146. 12,851. 900,997.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uction	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		y : \$	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			ا کا جائیں۔ اند سامیرا
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		12,	851.
	here ► X and enter 1% of Part I, line 27b		~sil∳	<u>, </u>
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)	ن لا ئ	-LILI	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		12,	851.
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		12,	851.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 41,073.			4 .
b	Exempt foreign organizations - tax withheld at source		4 III -	
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld	136 X '		
7	Total credits and payments Add lines 6a through 6d		41,	073.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		28,	222.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax			
	rt VII-A Statements Regarding Activities	_	1	т
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	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	1b		x
	Instructions for the definition)?	10		<u>Γ</u> Δ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	l	1 15 4	
_	published or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?	1c	1 : :	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	··		1
u	(1) On the foundation (1) (2) On foundation managers \$, (
A	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	,	X
_	If "Yes," attach a detailed description of the activities		2.3	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_	<u>.</u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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) 8°
	By language in the governing instrument, or		, ,	# 10 m
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			1 1
	conflict with the state law remain in the governing instrument?	6	X	
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_	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) MA,	4		\$
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	Х	ļ
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			1
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
	Fr	om 99	0-PF	(2014)

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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).	ıl	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)	2	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1	
	Website address N/A		
14	The books are in care of ▶ THE BOSTON FAMILY OFFICE Telephone no ▶ 617-624-08	300	
	Located at ▶C/O GEORGE P. BEAL, 88 BROAD ST 2ND FL BOSTON, MA ZIP+4 ▶ 02110		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	>	\Box
	and enter the amount of tax-exempt interest received or accrued during the year		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	Yes	No
	over a bank, securities, or other financial account in a foreign country?	5	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If		
	"Yes," enter the name of the foreign country		Ì
Рa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes	No
1 a	a During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		
	disqualified person? Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		
	the benefit or use of a disqualified person)? Yes X No		١,
	(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)		
ı	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	2	
	Organizations relying on a current notice regarding disaster assistance check here		;
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		
_	were not corrected before the first day of the tax year beginning in 2014?		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		t
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
•	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?		F
	If "Yes." list the years		
1	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		ŧ
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		
	all years listed, answer "No" and attach statement - see instructions)	,	X
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		<u> </u>
	>		
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		
	at any time during the year?		
ı	b 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, Form 4720, to determine if the		
	foundation had excess business holdings in 2014)	<u> </u>	X
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	1	X
1	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 2014?) 	X

Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)	
5a '	During the year did the foundation pay or incur any amou	unt to			
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	<u> </u>
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or	 I,	* :
	directly or indirectly, any voter registration drive?				
	(3) Provide a grant to an individual for travel, study, or of				
	(4) Provide a grant to an organization other than a				
	section 4945(d)(4)(A)? (see instructions)	_		Yes X No	
	(5) Provide for any purpose other than religious, ch			. <u>——</u> al	,
	purposes, or for the prevention of cruelty to children		-		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				
	Regulations section 53 4945 or in a current notice regard				5b
	Organizations relying on a current notice regarding disas	ster assistance check	here		
С	If the answer is "Yes" to question 5a(4), does the				_
•	because it maintained expenditure responsibility for the g		•		
	If "Yes," attach the statement required by Regulations sec				
6a	Did the foundation, during the year, receive any fun		ectly to pay premiur	ns	
ou	on a personal benefit contract?	=		Yes X No	
b	Did the foundation, during the year, pay premiums, dire			ict?	6b X
_	If "Yes" to 6b. file Form 8870	on, or manoon, on a			
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited ta	x shelter transaction?	Yes X No	
	If "Yes," did the foundation receive any proceeds or have			• — —	7b X
	t VIII Information About Officers, Director				
_	and Contractors			impturetiems)	· · · · · · · · · · · · · · · · · · ·
	List all officers, directors, trustees, foundation n	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evange consult
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATC	H 10		0	d	0
2	Compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instruction	ons). If none, enter
	"NONE."	·		L (DO: 1) (
(2)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
(4)	Traine and address of each employee paid more than \$60,000	devoted to position	(b) Compondation	plans and deferred compensation	other allowances
	NONE				
				1	
Tota	I number of other employees paid over \$50,000.				
. J.a	Thamber of other employees paid over 400,0001 1				Form 990-PF (2014)

Form 990-PF (2014) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NOT APPLICABLE Total number of others receiving over \$50,000 for professional services. Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Part IX-B Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NOT APPLICABLE All other program-related investments. See instructions 3 NONE Total. Add lines 1 through 3.

Form **990-PF**(2014)

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

Form 990-PF (2014)

911,770.

12,851.

4

6

b Cash distribution test (attach the required schedule)

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

THE AUSOLUS TRUST 04-3368079 Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) 2013 2014 Corpus Years prior to 2013 Distributable amount for 2014 from Part XI. 1,003,986. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only 869,517. Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 a From 2009 **b** From 2010 c From 2011 d From 2012 e From 2013 Total of lines 3a through e Qualifying distributions for 2014 from Part XII. line 4 ▶ \$ 911,770. 869,517 a Applied to 2013, but not more than line 2a 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 2014 distributable amount 42,253 e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be 961,733. distributed in 2015 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9

Form 990-PF (2014)

a Excess from 2010 . . .
b Excess from 2011 . . .
c Excess from 2012 . . .
d Excess from 2013 . . .
e Excess from 2014 . . .

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

JSA 4E1490 1 000

factors:

NO PARTICULAR FORMAT

c Any submission deadlines:

NONE

DECEMBER 1ST

Page 11

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Name and address (home or business) Amount Amount								
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	,,,,,				
a Pala during the year								
SEE ATTACHED	NOT RELATED	PC	EXEMPT PURPOSE	876,000.				
	1			i				
		ŀ						
		1	1					
		1						
]							
			•					
		1						
	1		L					
Total	<u> </u>	<u></u>	▶ 3a	876,000.				
b Approved for future payment]				
•								
		1						
		1						
			1					
Total		• • • • • •	▶ 3b					

Part XVI-A Analysis of Income-Produ	cing Activ	vities		<u> </u>	-
Enter gross amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
					(See instructions)
a b					
	-				
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	119,203.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-2, 155.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b ATCH 13				404.	
C					
d					<u> </u>
e				117 150	
12 Subtotal Add columns (b), (d), and (e)	L			117,452.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calc	ulations)		• • • • • •	¹³	117,452.
Part XVI-B Relationship of Activities		complishment of Ex	omnt Durn		
Line No. Explain below how each activit					
▼ accomplishment of the foundation	on's exemp	t purposes (other than I	by providing	funds for such purpose	s) (See instructions)
			*		
			-	 .	
		•			
		· 			-
				<u> </u>	
			-		
					
		 			
					
				 	
					
		···			
I					

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Form 991	U-PF (20	14)	THE AUSC	DEOS TRUS	ST		04-33	58079	Pa	ge 13
Part 2	XVII ·	Information R Exempt Orga	legarding Tr nizations	ansfers T	o and Trans	actions	and Relationships With No	nchar		
1 D	ıd the	organization direct	tly or indirectly	engage in	any of the follo	wing with	any other organization described	\Box	Yes	No
							in section 527, relating to politica			
01	rganiza	ations?								
a T	ransfe	rs from the reportir	ng foundation to	a nonchar	itable exempt o	rganızatıor	n of [.]	-		
(1	I) Casl	۱						. 1a(1)		Х
(2	2) Othe	er assets						. 1a(2)		X
		ansactions [.]								
(1	I) Sale	s of assets to a no	ncharitable exe	empt organiz	ation			. 1b(1)		Х
(2	2) Purc	hases of assets fr	om a noncharit	able exempt	organization			. 1b(2		X
(3	3) Ren	tal of facilities, equ	ipment, or othe	rassets				. 1b(3		X
(4	l) Reir	nbursement arrang	ements					. 1b(4		Х
(5	5) Loai	ns or loan guarante	es					. 1b(5)		X
(€	3) Perf	ormance of service	es or members	hip or fundr	aising solicitation	ns		. 1b(6		Х
										_ X
							le. Column (b) should always sho			ıarke
							ion. If the foundation received les			
va	alue in	any transaction o	r sharing arran	gement, sh	ow in column (d) the val	lue of the goods, other assets, or	service	es rec	eıved
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(b)	Description of transfers, transactions, and s	nanng am	angeme	nts
		N/A				N/	A			
	_									
						!				
			<u> </u>	_						
2a Is	the f	oundation directly	or indirectly a	ffiliated with	n, or related to,	one or r	more tax-exempt organizations			
							ction 527?	Y	es X	No
	"Yes,'									_
		(a) Name of organization	on	(b) Type of organization	on	(c) Description of relation	nship		
					-					
							and statements, and to the best of my knowle	dge and	belief, ıt	ıs true
Sign	correct	and complete Declaration of	or preparer (otner than	taxpayer) is based	on all information of w	vnicn preparer). 'a "			
	 	JEON at l	u aux		5-12-15	_		RS discus preparer		return below
Here	Signa	ature of officer or trustee		Date	9	Title	(see instruct		Yes	No
				A			<u>` </u>			
<u> </u>		Print/Type preparer's na	ame	Prepre	sagnature	1 -	Date Check If	PTIN		
Paid	- 1	ANTHONY T CARIDEO J	R, CPA		Kay V/1/2/	1K/YX	self-employed	P001	7157	9
Prepa	irer	Firm's name ► WC	OLF & COMPA	ANY, PC	A.	/ `` '	Firm's EIN ▶04-			
Use Only Firm's address ▶ 99 HIGH STREET, 21ST FLOOR										

02110

Form **990-PF** (2014)

617-439-9700

Phone no

BOSTON,

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

THE AUSOLUS TRUST		Employer identification number							
		04-3368079							
Organization type (check one):	Organization type (check one):								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ındation							
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundary	tion							
	501(c)(3) taxable private foundation								
	ered by the General Rule or a Special Rule. 8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See							
X For an organization filir	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributoroperty) from any one contributor. Complete Parts I and II. See instructions.	_							
Special Rules									
regulations under secti 13, 16a, or 16b, and th	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 nat received from any one contributor, during the year, total contributions e amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 C	or 990-EZ), Part II, line s of the greater of (1)							
contributor, during the	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ryear, total contributions of more than \$1,000 exclusively for religious, chapurposes, or the prevention of cruelty to children or animals Complete F	naritable, scientific,							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).									

Name of organization THE AUSOLUS TRUST

Employer identification number 04-3368079

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
11	GEORGE & NANCY PUTNAM C/O BFO, 88 BROAD STREET, 2ND FLOOR BOSTON, MA 02110	\$1,000,000.	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 Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		- - \$ -	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		- - \$ -	Person Payroll Noncash (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)			

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

Name of organization THE AUSOLUS TRUST

Employer Identification number

04	-3	3	6	R	n	7	9

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

04-3368079

	following line entry. For organizations contributions of \$1,000 or less for the Use duplicate copies of Part III if additional and the state of the	completing Part III, e year. (Enter this in	enter the total of formation once. S	exclusively religious, charitable, etc.,
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Part I				
		(e) Transf	er of nift	
		(o) Transi	or or gire	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
				·
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		()-		
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	enship of transferor to transferee
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
-				
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	onship of transferor to transferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10)

Ausolus Trust Chartiable Gifting 2014

<u>Date</u>	Charity	Street Address	<u>City</u>	State	<u>Zip</u>	Amount
23-Jan	Abbe Museum	26 Mt. Desert Street	Bar Harbor	ME	04609	\$1,500 00
4-Dec	Abbe Museum	26 Mt. Desert Street	Bar Harbor	ME	04609	\$5,000 00
23-Jan	American Academy of Arts and Sciences	136 Irving Street	Cambridge	MA	02138	\$10,000 00
23-Jan	Beatrix Farrand Society	P.O. Box 111	Mt. Desert	ME	04660	\$1,000 00
23-Jan	Beverly Hospital	85 Herrick Street	Beverly	MA	01915	\$2,500.00
23-Jan	Boston Athenaeum	10 1/2 Beacon Street	Boston	MA	02108	\$1,000.00
23-Jan	Boston Museum of Science	1 Science Park	Boston	MA	02114	\$1,000 00
23-Jan	Boston Symphony	301 Massachusetts Avenue	Boston	MA	02115	\$1,000 00
4-Dec	Cape Ann Animal Aid Society	4 Paws Lane	Gloucester	MA	01930	\$5,000 00
23-Jan	Cape Ann Historical Museum	27 Pleasant Street	Gloucester	MA	01930	\$2,500 00
4-Dec	Cape Ann Historical Museum	27 Pleasant Street	Gloucester	MA	01930	\$2,500 00
4-Dec	Cape Ann Symphony	P.O. Box 1343	Gloucester	MA	01931	\$2,500 00
23-Jan	Center for Plant Conservation	P.O. Box 299	St Louis	мо	63166	\$2,500.00
23-Jan	Coastal Maine Botanical Garden	P.O. Box 234	Boothbay	ME	04537	\$1,000 00
4-Dec	Coastal Maine Botanical Garden	P O Box 234	Boothbay	ME	04537	\$10,000 00
23-Jan	College of the Atlantic	105 Eden Street	Bar Harbor	ME	04609	\$5,000.00
4-Dec	College of the Atlantic	105 Eden Street	Bar Harbor	ME	04609	\$10,000 00
23-Jan	Colonial Williamsburg Foundation	301 1st Street	Williamsburg	VA	23185	\$10,000 00
23-Jan	Emmanuel Church - Manchester	24 Masconomo Street	Manchester-by-the-S	MA	01944	\$1,000.00
23-Jan	Epiphany School	154 Centre Street	Dorchester	MA	02124	\$25,000.00
23-Jan	Essex County Greenbelt	82 Eastern Avenue	Essex	MA	01929	\$5,000 00
23-Jan	Friends of Acadia	P O. Box 45	Bar Harbor	ME	04609	\$5,000 00
4-Dec	Friends of the Public Garden	69 Beacon Street	Boston	МА	02108	\$10,000 00
23-Jan	Harbor House	329 Main Street	Southwest Harbor	ME	04679	\$5,000 00
Void	Harbor House - 6/13/2013	329 Main Street	Southwest Harbor	ME	04679	(\$2,500 00)
	Harvard University	124 Mt Auburn Street	Cambridge	МА	02138	\$75,000 00
23-Jan	Historic New England	141 Cambridge Street	Boston	МА	02114	\$2,500 00
	Hooper Fund	P.O. Box 544	Manchester	МА	01944	\$1,500.00
	Isabella Gardner Museum	280 The Fenway	Boston	MA	02115	\$2,500 00
4-Dec	Island Institute	386 Main Street	Rockland	ME	04841	\$50,000 00
	Island Readers & Writers	990 Crooked Road, Town Hill Village	Bar Harbor	ME	04660	\$25,000.00
4-Dec	Island Readers & Writers	990 Crooked Road, Town Hill Village	Bar Harbor	ME	04660	\$50,000 00
4-Dec	Kısma Preserve	P O. Box 84	Mount Desert	ME	04660	\$10,000.00
	Lasell College	1844 Commonwealth Avenue	Newton	MA	02466	\$10,000.00
	Lasell College	1844 Commonwealth Avenue	Newton	MA	02466	\$10,000 00
	Maine Coast Heritage Trust	1 Bowdoin Mill Island	Topsham	ME	04086	\$10,000 00
23-Jan	Maine Community Foundation	245 E Main Street	Ellsworth	ME	04605	\$2,500 00
	Manchester Essex Conservation Trust	P O Box 1486	Manchester	MA	01944	\$1,500 00
	Manchester Historical Society	10 Union Street	Manchester	МА	01944	\$1,000 00
4-Dec	Massachusetts General Hospital	100 Cambridge Street, 1310	Boston	MA	02114	\$10,000 00
23-Jan	Massachusetts Historical Society	1154 Boylston Street	Boston	MA	02215	\$1,500 00
	MDI Biological Labs	P O Box 35	Salisbury Cove	ME	04672	\$2,500 00
-	MDI Historical Society	P O Box 653	Mount Desert	ME	04660	\$10,000 00
	MGH Institute	36 First Avenue	Boston	MA	02129	\$10,000 00
23-Jan	Mount Desert Historical Association	P.O Box 653	Mount Desert	ME	04660	\$2,500 00
23-Jan	Mount Desert Island Hospital	10 Wayman Lane	Bar Harbor	ME	04609	\$2,500 00
	Mount Desert Land and Garden Preserve	P O. Box 208	Seal Harbor	ME	04675	\$10,000 00
23-Jan	MSPCA - Angeli Memorial Hospital	350 South Huntington Avenue	Boston	MA	02130	\$15,000 00
	MSPCA - Angell Memorial Hospital	350 South Huntington Avenue	Boston	MA	02130	\$10,000 00
	Mt Desert Land & Garden Preserve	P O Box 208	Seal Harbor	ME	04675	\$15,000 00
	Museum of Fine Arts - Boston	465 Huntington Avenue	Boston	MA	02115	\$10,000 00
	Museum of Fine Arts Boston	465 Huntington Avenue	Boston	MA	02115	\$20,000 00
	Museum of Fine Arts Boston	465 Huntington Avenue	Boston	МА	02115	\$10,000 00
~	Museum of Fine Arts School	230 The Fenway	Boston	МА	02115	\$1,000 00
		14 Maine Street, Suite 401	Brunswick	ME	04011	\$1,000 00
23-Jan	Nature Conservancy of Maine			,	+	+ -,
	Nature Conservancy of Maine New England Aquarium		Boston	MA	02110	\$1,000,00
23-Jan	New England Aquarium	One Central Wharf	Boston Boston	MA MA	02110	\$1,000 00
23-Jan 23-Jan	New England Aquarium New England Historic Genealogical Society	One Central Wharf 111 Newbury Street	Boston	МА	02116	\$1,500 00
23-Jan 23-Jan 23-Jan	New England Aquarium	One Central Wharf		+		

Ausolus Trust Chartiable Gifting 2014

<u>Date</u>	Charity	Street Address	City	State	Zip	Amount
23-Jan	Peabody Essex Museum	161 Essex Street	Salem	MA	01970	\$15,000.00
4-Dec	Peabody Essex Museum	161 Essex Street	Salem	MA	01970	\$10,000.00
23-Jan	Southwest Harbor Public Library	338 Main Street	Southwest Harbor	ME	04679	\$5,000 00
4-Dec	SPCA of Hancock County	141 Bar Harbor Road	Trenton	ME	04605	\$5,000.00
23-Jan	St Mark's School	25 Marlboro Road	Southborough	MA	01772	\$15,000 00
4-Dec	St. Mark's School	25 Marlboro Road	Southborough	MA	01772	\$10,000 00
23-Jan	Student Conservation Association	P.O Box 550	Charlestown	NH	03603	\$1,500 00
23-Jan	Thornton Burgess Society	6 Discovery Hill Road	East Sandwich	MA	02537	\$10,000 00
4-Dec	Thornton Burgess Society	6 Discovery Hill Road	East Sandwich	МА	02537	\$25,000 00
4-Dec	Tower Hill Botanical Garden	P O Box 598	Boylston	MA	01505	\$10,000 00
23-Jan	Trustees of Reservations	527 Essex Street	Beverly	MA	01915	\$15,000.00
10-Mar	Trustees of Reservations	527 Essex Street	Beverly	MA	01915	\$25,000 00
4-Dec	Trustees of Reservations	527 Essex Street	Beverly	MA	01915	\$10,000 00
4-Dec	Victoria Mansion	109 Danforth Street	Portland	ME	04101	\$10,000 00
4-Dec	WGBH Annual Fund	One Guest Street	Boston	MA	02135	\$10,000.00
23-Jan	WGBH Educational Foundation	One Guest Street	Boston	MA	02135	\$15,000 00
4-Dec	WGBH Masterpiece Trust	One Guest Street	Boston	MA	02135	\$50,000 00
23-Jan	Woodlawn Museum	P O. Box 1478	Ellsworth	ME	04605	\$20,000 00
4-Dec	Woodlawn Museum	P.O Box 1478	Ellsworth	ME	04605	\$25,000 00
4-Dec	Woodlawn Museum Project Fund	P.O. Box 1478	Ellsworth	ME	04605	\$75,000 00
	Total					\$876,000 00

SECURITIES
FROM
INTEREST
AND
DIVIDENDS AND 1
PART]
990PF,
FORM

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	119,169. 34. 23,609. 213,971.	356,783.
REVENUE AND EXPENSES PER BOOKS	119,169.	119,203.
DESCRIPTION	DIVIDEND INCOME BNY MELLON INTEREST INCOME BNY MELLON DIVIDEND PASSTHRU K-1 PARTNERSHIP INTEREST PASSTHRU K-1 PARTNERSHIP	TOTAL

ATTACHMENT 2

- OTHER INCOME

FORM 990PF, PART I

	NET	INVESTMENT	INCOME	40 -2,80
REVENUE	AND	EXPENSES	PER BOOKS	404.
				MENTS LOSS)
			DESCRIPTION	CLASS ACTION SETTLEMENTS SECTION 988 INCOME(LOSS)

ADJUSTED NET INCOME

404.

-2,399.

404.

TOTALS

04-3368079

ATTACHMENT 3

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FORM

CHARITABLE PURPOSES	4,500.	4,500.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	4,500.	4,500.
		TOTALS
DESCRIPTION	WOLF & COMPANY, P.C.	

4

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE <u>PURPOSES</u>	30,770.	30,770,
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	30,771.	30,771.
REVENUE AND EXPENSES PER BOOKS	61,541.	61,541.
DESCRIPTION	INVESTMENT MGT & ADMIN FEES	TOTALS

S

ATTACHMENT

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CHARITABLE <u>PURPOSES</u>		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,104.	2,446.
REVENUE AND EXPENSES PER BOOKS	2,104. 58,000.	60,104.
DESCRIPTION	FOREIGN TAXES WITHHELD FEDERAL EXCISE TAX ESTIMATES PASS THRU FOREIGN TAXES PAID	TOTALS

FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE PURPOSES 500.	500.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME 322,136.	322,136.
REVENUE AND EXPENSES PER BOOKS	500.
	TOTALS
DESCRIPTION OTHER PORTFOLIO EXPENSES MA FILING FEES	

ENDING <u>FMV</u>	4,914,835.	4,914,835.
ENDING BOOK VALUE	4,914,835.	4,914,835.
BEGINNING BOOK VALUE	4,163,147.	4,163,147.
DESCRIPTION	PUBLICLY TRADED EQUITIES	TOTALS

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	BEGINNING BOOK VALUE	12,486,846. 2,237,097.
FORM 990PF, PART II - OTHER ASSETS		
PART		ON LP
990PF,	DESCRIPTION	NEW GENERATION NEW PROVIDENCE
FORM	DESCI	NEW C

ENDING <u>EMV</u>	12,629,283. 2,315,502.	14,944,785.
ENDING BOOK VALUE	12,629,283. 2,315,502.	14,944,785.
BEGINNING BOOK VALUE	12,486,846. 2,237,097.	14,723,943.
		TOTALS
NOIL	ERATION LP VIDENCE LP	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

CHANGE IN UNREALIZED GAIN

608,720.

TOTAL

608,720.

THE AUSOLUS TRUST

FORM 990-PF - PART IV

Kınd of F	Property		Desci	ription		P o D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT- PARTNERSHIP ESTATES OR	, S CORPORA	TION, AND O			97,044.	
		TOTAL LONG-! PARTNERSHIP ESTATES OR !	, S CORPORA	TION, AND O			1,191,146.	
		TOTAL CAPITA	AL GAIN DIS	TRIBUTIONS			4,752.	
61,574.		VANGUARD INT				P	09/12/2011	04/29/201
01/3/1.		VANGUARD IN:	TL EQUITY IN	IDEX FD		P		04/29/201
41,049.		PROPERTY TY:	PE: SECURIT	IES			-7,821.	
TAL GAIN(L	oss)			•••••			1,286,035.	
į								

, AND TRUSTEES	
AND	
LIST OF OFFICERS, DIRECTORS,	
OFFICERS,	
OF	
- LIST	
VIII	
, PART VIII	
PF	
FORM 990	

UTIONS EXPENSE ACCT OYEE AND OTHER PLANS ALLOWANCES	0	0	0 0
CONTRIBUTIONS TO EMPLOYEE	0	0	0
COMPENSATION			
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	GEORGE PUTNAM C/O GEORGE P. BEAL, THE BOSTON FAMI 88 BROAD STREET, 2ND FLOOR BOSTON, MA 02110	NANCY PUTNAM C/O GEORGE P. BEAL, THE BOSTON FAMI 88 BROAD STREET, 2ND FLOOR BOSTON, MA 02110	

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

GEORGE PUTNAM NANCY PUTNAM

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

THE AUSOLUS TRUST C/O BFO, 88 BROAD STREET, 2ND FLOOR BOSTON, MA 02110 617-624-0800 04-3368079

. 13	RELATED OR EXEMPT FUNCTION INCOME	
ATTACHMENT 13	AMOUNT	404.
	EXCLUSION	0.1
	AMOUNT	
	BUSINESS	
FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE	DESCRIPTION	CLASS ACTION SETTLEMENTS

TOTALS

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

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

2014

OMB No 1545-0092

Name of estate or trust Employer identification number THE AUSOLUS TRUST 04-3368079 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments the lines below. Subtract column (e) Proceeds to gain or loss from from column (d) and Form(s) 8949, Part I, This form may be easier to complete if you round off cents (or other basis) combine the result with (sales price) line 2, column (g) column (g) to whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 97,044. 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2013 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on 97,044. Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments the lines below. Cost to gain or loss from Form(s) 8949, Part II, from column (d) and combine the result with This form may be easier to complete if you round off cents (sales price) (or other basis) column (g) line 2, column (g) to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 102,623. 109,530. -6,907.Totals for all transactions reported on Form(s) 8949 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 1,191,146. 12 12 4,752. 13 13 14 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2013 Capital Loss Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on 1,188,991

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

Schedule D (Form 1041) 2014

43

43

44

Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

G, line 1a (or Form 990-T, line 36)

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

orm.	DADR	(2014)	

Attachment Sequence No 12A

Page 2

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

Social security number or taxpayer identification number

04-3368079

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

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

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

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

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

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired		(d) Proceeds (sales proce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		Gain or (loss). Subtract column (e)
	(Mo,day,yr)				(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
VANGUARD INTL EQUITY							
INDEX FD	09/12/2011	04/29/2014	61,574.	60,660.			914.
VANGUARD INTL EQUITY	07/06/0011						
INDEX FD	07/06/2011	04/29/2014	41,049.	48,870.			-7,821.
				-			
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			102,623.	109,530.			-6,907.

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