



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 instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation DE BEAUMONT FOUNDATION INC		A Employer identification number 04-3467074	
Number and street (or P O box number if mail is not delivered to street address) 7501 WISCONSIN AVENUE NO 1310E		B Telephone number (see instructions) (301) 961-5800	
City or town, state or province, country, and ZIP or foreign postal code BETHESDA, MD 20814		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 184,020,773		J Accounting method ☐ Cash ☐ Accrual ☒ Other (specify) <u>Modified Cash</u> (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	3,352,564			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	32	32		
	4 Dividends and interest from securities.	2,500,764	2,500,764		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	653,195			
	b Gross sales price for all assets on line 6a 15,989,604				
	7 Capital gain net income (from Part IV, line 2) . . .		653,195		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	6,506,555	3,153,991		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	272,244	0		183,071
	14 Other employee salaries and wages	657,898	0		463,194
	15 Pension plans, employee benefits	129,746	0		92,676
	16a Legal fees (attach schedule)	35,871	0		0
	b Accounting fees (attach schedule)	41,149	0		0
	c Other professional fees (attach schedule)	507,660	318,694		134,976
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	51,804	0		0
	19 Depreciation (attach schedule) and depletion . . .	9,533	0		
	20 Occupancy	139,640	0		99,743
	21 Travel, conferences, and meetings	117,773	0		97,364
	22 Printing and publications				
	23 Other expenses (attach schedule)	603,273	0		567,048
	24 Total operating and administrative expenses. Add lines 13 through 23	2,566,591	318,694		1,638,072
	25 Contributions, gifts, grants paid	6,076,287			6,076,287
	26 Total expenses and disbursements. Add lines 24 and 25	8,642,878	318,694		7,714,359
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-2,136,323			
	b Net investment income (if negative, enter -0-)		2,835,297		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	33,606,748	29,440,331	29,440,331
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	141,070,053	143,059,543	154,501,849
	14	Land, buildings, and equipment basis ▶ _____ 93,336 Less accumulated depreciation (attach schedule) ▶ 30,399	22,333	62,937	62,937
15	Other assets (describe ▶ _____)	15,656	15,656	15,656	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	174,714,790	172,578,467	184,020,773	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	174,714,790	172,578,467	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	174,714,790	172,578,467	
	31	Total liabilities and net assets/fund balances (see instructions) . . .	174,714,790	172,578,467	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	174,714,790
2	Enter amount from Part I, line 27a	-2,136,323
3	Other increases not included in line 2 (itemize) ▶ _____	0
4	Add lines 1, 2, and 3	172,578,467
5	Decreases not included in line 2 (itemize) ▶ _____	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	172,578,467

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table		
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table		
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	653,195
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

☐ Yes ☒ No

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	4,969,136	141,789,561	0 035046
2012	4,755,832	95,415,003	0 049844
2011	2,317,779	13,664,596	0 169619
2010	562,723	12,202,345	0 046116
2009	1,829,797	12,647,380	0 144678

2	Total of line 1, column (d).	2	0 445303
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 089061
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	186,159,866
5	Multiply line 4 by line 3.	5	16,579,584
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	28,353
7	Add lines 5 and 6.	7	16,607,937
8	Enter qualifying distributions from Part XII, line 4.	8	7,714,359

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		1	56,706
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	56,706
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	56,706
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	56,706	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments. Add lines 6a through 6d.		7	56,706
8		Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached		8	242
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	242
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ Refunded ☐		11	

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
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? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions): ☐ DE, MD			
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? <i>If "No," attach explanation.</i>	8b	Yes	
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)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address WWW DEBEAUMONT ORG				
14	The books are in care of ARIEL MOYER Telephone no (301) 961-4948 Located at 7501 WISCONSIN AVENUE SUITE 1310E BETHESDA MD ZIP +4 20814			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part 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
1a	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 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). Yes No			
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)? Organizations relying on a current notice regarding disaster assistance check here.	1b		No
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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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? Yes No If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No			
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.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☒

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRIAN CASTRUCCI 640 BLOSSOM DRIVE ROCKVILLE, MD 20850	CHIEF PROGRAM & STRA 40 00	170,000	14,471	0
ARIEL MOYER 2000 GATEWOOD PLACE SILVER SPRING, MD 20903	CHIEF OPERATING OFFI 40 00	162,960	8,866	0
JONATHON LEIDER 1418 THORNDEN RD ROCKVILLE, MD 20851	SENIOR RESEARCH & EV 40 00	105,709	11,039	0
ADAM JUDGE 744 BEALL AVENUE ROCKVILLE, MD 20850	SENIOR LEARNING OFFI 40 00	87,826	6,825	0
MELISSA MONBOUQUETTE 2480 16TH STREET NW APT 839 WASHINGTON, DC 20009	PROGRAM OFFICER 40 00	55,825	10,391	0
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PRIME BUCHHOLZ & ASSOCIATES INC 273 CORPORATE DRIVE PORTSMOUTH, NH 03801	INVESTMENT ADVISORY	219,292
PR COLLABORATIVE 2900 M STREET NW SUITE 200 WASHINGTON, DC 20007	COMMUNICATIONS CONSULTING	113,910
PHILIPPA BENSON 6001 WALTON ROAD BETHESDA, MD 20817	EDITORIAL CONSULTING	74,504
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 PRACTICAL PLAYBOOK - EVENT TO LAUNCH THE PRACTICAL PLAYBOOK--AN ONLINE RESOURCE/TOOL THAT ENCOURAGES INTERGRATION OF PUBLIC HEALTH AND PRIMARY CARE EXPENSES ASSOCIATED WITH THE DEVELOPMENT OF A HARD COPY PRACTICAL PLAYBOOK TEXTBOOK TO BE USED BY BOTH PUBLIC HEALTH AND PRIMARY CARE STUDENTS AND PRACTITIONERS	108,471
2 INFORMATICS CONVENING - CONVENING OF NATIONAL LEADERS TO DISCUSS PH INFORMATICS NEEDS/ISSUES	103,959
3 BCHC SUPPLEMENT - JOURNAL SUPPLEMENT FEATURING ARTICLES AND DATA FROM THE BIG CITIES HEALTH COALITION (BCHC)	54,980
4 JPHMP STRATEGIC PLANNING - STRATEGIC PLANING RETREAT AND REPORT FOR THE JOURNAL OF PUBLIC HEALTH MANAGEMENT AND PRACTICE (JPHMP)	49,864

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	157,885,439
b	Average of monthly cash balances.	1b	31,109,349
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	188,994,788
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	188,994,788
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	2,834,922
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	186,159,866
6	Minimum investment return. Enter 5% of line 5.	6	9,307,993

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	9,307,993
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	56,706
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	56,706
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	9,251,287
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	9,251,287
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	9,251,287

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	7,714,359
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		
a	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	7,714,359
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 (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	7,714,359

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 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				9,251,287
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.	1,204,474			
b From 2010.	467,890			
c From 2011.	1,542,550			
d From 2012.	36,433			
e From 2013.				
f Total of lines 3a through e.	3,251,347			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 7,714,359				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2014 distributable amount.				7,714,359
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	1,536,928			1,536,928
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,714,419			
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.		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 instructions			0	
f Undistributed income for 2014 Subtract 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 (see instructions) . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	1,714,419			
10 Analysis of line 9				
a Excess from 2010. . . .	135,436			
b Excess from 2011. . . .	1,542,550			
c Excess from 2012. . . .	36,433			
d Excess from 2013. . . .				
e Excess from 2014. . . .				

Part XIV

4942(j)(3) or 4942(j)(5)

3 Complete 3a, b, or c for the alternative test relied upon

1 Information Regarding Foundation Managers:

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

b The form in which applications should be submitted and information and materials they should include

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

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2014)

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
FIRST AMER GOVT OBLIG FUND			
PARAMETRIC EMERGING MARKETS - CAPTIAL GAIN DISTRIBUTION			
PARAMETRIC EMERGING MARKETS - CAPTIAL GAIN DISTRIBUTION			
RS GLOBAL NATURAL RESOURCES - CAPITAL GAIN DISTRIBUTION			
PIMCO TOTAL RETURN FUND			
FPA CRESCENT PORFOLIO - CAPITAL GAIN DISTRIBUTION			
ABSOLUTE RETURN CAYMAN - CAPITAL GAIN DISTRIBUTION			
MONDRIAN GLOBAL FIXED INCOME			
NEWBURY EQUITY PARTNERS			
SAGE REAL ESTATE FUND			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
10,211,386		10,211,386	0
		4,860	-4,860
41,214			41,214
220,289			220,289
4,773,438		4,874,448	-101,010
216,310			216,310
36,156		41,970	-5,814
23,074		113,734	-90,660
74,103		74,103	0
15,850		15,908	-58

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			-4,860
			41,214
			220,289
			-101,010
			216,310
			-5,814
			-90,660
			0
			-58

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
TIFF - CAPITAL GAIN DISTRIBUTION			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
377,784			377,784

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			377,784

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMES B SPRAGUE MD 4851 INDIAN LANE NW WASHINGTON,DC 20016	CHAIRMAN/CEO 40 00	234,744	26,792	0
CAROL HUFFMAN MASSONI 29 BROOK STREET EASTHOMPTON,MA 01027	DIRECTOR 1 00	25,000	0	0
MURRAY BRENNAN MD 220 SAW MILL RIVER ROAD YORKTOWN HEIGHTS,NY 10598	VICE-CHAIRMAN 1 00	12,500	0	0
LEROY M PARKER MD 20 LINCOLN RD WAYLAND,MA 01778	SECRETARY/TREASURER 1 00	0	0	0
JOHN STEVENS 26 SIMON WILLARD RD CONCORD,MA 01742	DIRECTOR 1 00	0	0	0
RICHARD BURNES 16 ACORN LANE BOSTON,MA 02108	DIRECTOR 1 00	0	0	0
GREGORY M WAGNER MD 61 BROOK STREET BROOKLINE,MA 02445	DIRECTOR 1 00	0	0	0
JOHN AUERBACH 360 HUNTINGTON AVENUE BOSTON,MA 02115	DIRECTOR 1 00	0	0	0

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ASTHO 2231 CRYSTAL DRIVE SUITE 450 ARLINGTON,VA 22202		PC	MEDICAID & PUBLIC HEALTH INTEGRATION PROJECT	318,513
ASTHO 2231 CRYSTAL DRIVE SUITE 450 ARLINGTON,VA 22202		PC	SENIOR DEPUTIES PROGRAM	130,000
BALTIMORE CITY HEALTH DEPARTMENT 101 E FAYETTE STREET BALTIMORE,MD 21202		GOV	GENERAL OPERATING SUPPORT	5,000
BIKES NOT BOMBS 284 ARMORY STREET JAMAICA PLAIN,MA 02130		PC	GENERAL OPERATING SUPPORT	5,000
BLOOMBERG SCHOOL OF PUBLIC HEALTH 615 N WOLFE STREET BALTIMORE,MD 21205		PC	A NEW PUBLIC HEALTH FINANCE DATASET TO ASSESS THE COST- EFFECTIVENESS OF PUBLIC HEALTH	168,651
CABIN CREEK HEALTH SYSTEMS PO BOX 70 DAWES,WV 25054		PC	GENERAL OPERATING SUPPORT	8,300
CABIN CREEK HEALTH SYSTEMS PO BOX 70 DAWES,WV 25054		PC	GENERAL OPERATING SUPPORT	20,000
CAMBRIDGE COMMUNITY FOUNDATION 99 BISHOP ALLEN DRIVE CAMBRIDGE,MA 02139		PC	GENERAL OPERATING SUPPORT	10,000
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DRIVE SUITE 700 ARLINGTON,VA 22202		PC	GENERAL OPERATING SUPPORT	5,090
DANA-FARBER CANCER INSTITUTE 44 BINNEY ST BOSTON,MA 02115		PC	GENERAL OPERATING SUPPORT	5,000
DANA-FARBER CANCER INSTITUTE 44 BINNEY ST BOSTON,MA 02115		PC	GENERAL OPERATING SUPPORT	5,000
DUKE UNIVERSITY BOX 2914 MEDICAL CENTER DURHAM,NC 27710		PC	PRACTICAL PLAYBOOK	411,834
DUKE UNIVERSITY BOX 2914 MEDICAL CENTER DURHAM,NC 27710		PC	PRACTICAL PLAYBOOK	182,560
DUKE UNIVERSITY BOX 2914 MEDICAL CENTER DURHAM,NC 27710		PC	PRACTICAL PLAYBOOK	522,133
DUKE UNIVERSITY BOX 2914 MEDICAL CENTER DURHAM,NC 27710		PC	PRACTICAL PLAYBOOK	557,405
Total ▶ 3a				6,076,287

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FRIENDS OF BOSTON HOMELESS INC 12 WISE ST BOSTON,MA 02130		PC	GENERAL OPERATING SUPPORT	15,000
FUND FOR PUBLIC HEALTH IN NEW YORK 291 BROADWAY 17TH FLOOR NEWYORK,NY 10007		PC	EPI SCHOLARS UNUSED GRANT FUNDS	-1,199
FUND FOR PUBLIC HEALTH IN NEW YORK 291 BROADWAY NW NEWYORK,NY 10007		PC	CUNY HANES LAB WORK	338,359
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS 1725 DESALES STREET NW STE 404 WASHINGTON,DC 20036		PC	GENERAL OPERATING SUPPORT	3,050
GRANTMAKERS IN HEALTH 1100 CONNECTICUT AVE NW 1200 WASHINGTON,DC 20036		PC	GENERAL OPERATING SUPPORT	2,875
HEALTH CARE FOR ALL 30 WINTER ST 19TH FLOOR BOSTON,MA 02108		PC	GENERAL OPERATING SUPPORT	8,000
LOS ANGELES COUNTY DEPARTMENT OF HEALTH 241 N FIGUEROA ST SUITE 275 LOS ANGELES,CA 90012		GOV	EPI SCHOLARS UNUSED GRANT FUNDS	-25,849
LOS ANGELES COUNTY DEPARTMENT OF HEALTH 241 N FIGUEROA ST SUITE 275 LOS ANGELES,CA 90012		GOV	EPI SCHOLARS UNUSED GRANT FUNDS	-5,683
MENTAL HEALTH ASSOCIATION IN TULSA INC 1870 SOUTH BOULDER AVE TULSA,OK 74119		PC	GENERAL OPERATING SUPPORT	15,000
NACCHO 100 17TH ST NWSUITE 200 WASHINGTON,DC 20036		PC	BIG CITIES HEALTH COALITION	160,000
NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE BOSTON,MA 02115		PC	GENERAL OPERATING SUPPORT	8,000
OXFORD UNIVERSITY PRESS 2001 EVANS ROAD CARY,NC 27513		PC	PRACTICAL PLAYBOOK TEXTBOOK	20,000
PEW CHARITABLE TRUSTS 901 E STREET NW WASHINGTON,DC 20004		PC	BUILDING CAPACITY FOR HEALTH IMPACT ASSESSMENT IN CITIES	473,564
PUBLIC HEALTH INSTITUTE OF METROPOLITAN CHICAGO 180 NORTH MICHIGAN AVENUE SUITE 1200 CHICAGO,IL 60601		PC	GENERAL OPERATING SUPPORT	5,000
PUBLIC HEALTH--SEATTLE & KING COUNTY 401 5TH AVE SUITE 1300 SEATTLE,WA 98104		GOV	BURDEN OF DISEASE ASSESSMENT TOOL	199,998
Total  3a				6,076,287

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PUBLIC INTEREST PROJECTS 45 WEST 36TH STREET 6TH FLOOR NEWYORK,NY 10018		PC	HEALTHIER CITIES INITIATIVE	143,050
PUBLIC INTEREST PROJECTS 45 WEST 36TH STREET 6TH FLOOR NEWYORK,NY 10018		PC	HEALTHIER CITIES INITIATIVE	557,405
RESEARCH FOUNDATION OF CUNY 230 WEST 41ST ST 7TH FLOOR NEWYORK,NY 10036		PC	CUNY HANES GRANT	1,245,242
RESEARCH FOUNDATION OF CUNY 230 WEST 41ST ST 7TH FLOOR NEWYORK,NY 10036		PC	HANES SURVEY GRANT DISTRIBUTION	100,000
SEA EDUCATION ASSOCIATION (SEA) PO BOX 6 WOODS HOLE,MA 02543		PC	GENERAL OPERATING SUPPORT	25,000
TASK FORCE FOR GLOBAL HEALTH 325 SWANTON WAY DECATUR,GA 30030		PC	PUBLIC HEALTH INFORMATICS TRAINING NETWORK	85,560
UCLA FIELDING SCHOOL OF PUBLIC HEALTH BOX 951406 11000 KINROSS BLDG STE 211 LOS ANGELES,CA 90095		PC	QUANTITATIVE POLICY TOOLS FOR BIG CITIES	99,948
UNIVERSITY OF MIAMI UNIVERSITY OF MIAMI OFFICE OF RESEARCH ADMINISTRATION 1320 SOUTH CORAL GABLES,FL 33129		PC	BUSINESS SKILLS PLANNING GRANT	80,689
UNIVERSITY OF OTAGO IN AMERICA INC 800 TOWNSHIP LINE RD SUITE 250 YARDLEY,PA 19067		PC	GENERAL OPERATING SUPPORT	12,500
UNIVERSITY OF WASHINGTON 3917 UNIVERSITY WAY NE SEATTLE,WA 98195		PC	PUBLIC HEALTH MANAGEMENT CERTIFICATE UNUSED GRANT FUNDS	-10,783
UPMC CENTER FOR HEALTH SECURITY 621 EAST PRATT STREET SUITE 210 BALTIMORE,MD 21202		PC	MEASURING AND MOTIVATING HEALTH DEPARTMENT EXCELLENCE AND COMMUNITY ENGAGEMENT IN PREPAREDNESS	157,200
VICTORY PROGRAMS INC 965 MASSACHUSETTS AVE BOSTON,MA 02115		PC	GENERAL OPERATING SUPPORT	9,000
WASHINGTON GRANTMAKERS 1400 16TH ST NW SUITE 740 WASHINGTON,DC 20036		PC	GENERAL OPERATING SUPPORT	875
Total  3a				6,076,287

TY 2014 Accounting Fees Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	41,149	0		0

TY 2014 Investments - Other Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
TIFF MULTI ASSET FUND	AT COST	6,355,472	5,816,430
VANGUARD MUTUAL EQUITY FUND	AT COST	69,594,863	78,699,299
PIMCO TOTAL RETURN INST FUND	AT COST	0	0
MONDRIAN FIXED INCOME FUND	AT COST	5,212,763	4,775,152
ABSOLUTE RETURN CAYMAN	AT COST	4,934,170	4,367,592
MASON CAP	AT COST	5,000,000	4,965,928
CONVEXITY	AT COST	5,000,000	5,020,586
FPA CRESCENT PORTFOLIO	AT COST	5,778,838	6,858,767
DAVIDSON KEMPNER INSTITUTIONAL	AT COST	5,000,000	5,981,225
HIGHFIELDS CAPITAL	AT COST	6,750,000	8,852,400
RUTABAGA SMALL CAP	AT COST	5,000,000	6,273,690
PARAMETRICS	AT COST	8,025,760	7,602,226
SSGA REAL	AT COST	5,484,092	5,222,097
RS GLOBAL	AT COST	3,790,606	2,789,552
NYES LEDGE	AT COST	2,000,000	2,092,827
ADAMAS	AT COST	4,000,000	4,121,507
AETHER REAL	AT COST	257,082	261,361
NEWBURY	AT COST	575,897	519,729
LEGACY VENTURE	AT COST	300,000	281,481

TY 2014 Legal Fees Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	35,871	0		0

TY 2014 Other Assets Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEPOSITS	15,656	15,656	15,656

TY 2014 Other Expenses Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	11,236	0		8,026
COMPUTER SERVER WEB	22,094	0		15,781
PAYROLL SERVICE FEES	10,448	0		7,463
TELEPHONE	11,532	0		8,237
MISCELLANEOUS	1,044	0		798
POSTAGE & SHIPPING	2,406	0		1,719
DUES & SUBSCRIPTIONS	4,342	0		3,102
D&O INSURANCE	3,093	0		2,209
CORPORATE FILING FEES	406	0		290
GRAPHIC DESIGN	13,322	0		9,516
MOVING EXPENSE	30,751	0		21,965
DIRECT CHARITABLE ACTIVITIES, PART IX-A	480,812	0		480,812
EMPLOYEE TRAINING AND DEVELOPMENT	9,982	0		7,130
EQUIPMENT EXPENSE	1,805	0		0

TY 2014 Other Professional Fees Schedule**Name:** DE BEAUMONT FOUNDATION INC**EIN:** 04-3467074

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEE	318,694	318,694		0
CONSULTING FEES	188,966	0		134,976

TY 2014 Taxes Schedule

Name: DE BEAUMONT FOUNDATION INC

EIN: 04-3467074

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	51,804	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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 DE BEAUMONT FOUNDATION INC	Employer identification number 04-3467074
---	---

Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation
--	---

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

[illegible]

Name of organization DE BEAUMONT FOUNDATION INC	Employer identification number 04-3467074
---	---

Part II **Noncash Property** (see instructions) Use duplicate copies of Part 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. 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
_____	_____ _____ _____ _____	_____ \$	_____

Name of organization DE BEAUMONT FOUNDATION INC	Employer identification number 04-3467074
---	---

Part III	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 Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)  \$ _____ 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			
Transferee's name, address, and ZIP 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	