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Form 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

2014

De	partm	ent of the Treasury				ırıty numbers o		-			<u> </u>	
_		Revenue Service			1 990-PF	and its separa				v/form990pf.	Open to Public Ir	nspection
_		lendar year 2014 of foundation	or tax year b	eginning			, 2014	, and endi	ng	A Employed 1-1	- Aldi Al	, 20
			TT CNI							•	ntification number	
_		RMONT FOUNDA		l in met delivere				L B	_	04-67726		
		•		i is not delivered	i to street a	address)		Room/suit	е	•	mber (see instruction	•
		HOWARD COX								(617) 563-1	900
		SEAPORT BLV		ID 4	-1-11-			l <u></u>				
,	City or	r town, state or provir	nce, country, and Z	IP or foreign po	stal code					•		 1
			_							C If exemption appending, check I	plication is nere • • • • •	. ▶Ш
		TON, MA 0221	- 			1						
G	Che	ck all that apply	Initial r			Initial return	•	oublic char	ity	D 1 Foreign organ	nizations, check here .	. ▶ 🔲
			Final re			Amended re					nizations meeting the ick here and attach	
_		 	X Addres			Name chang						. ▶□
H	\neg	ck type of organi								E If private found	ation status was termine	ated
Ţ		ection 4947(a)(1) i				her taxable pr				under section 50	07(b)(1)(A), check here	. ▶∟_
1		market value o			-		ash Acc	crual		F If the foundation	n is in a 60-month termi	ination
		of year (from Pa			ther (sp					under section 50	77(b)(1)(B) check here	. ▶∟
			262,291.		olumn (d) must be on cas	sh basis)				T (1) D	
Li	art	Analysis of Retotal of amounts in				Revenue and	(b) Net inv	estment	(0	:) Adjusted net	(d) Disburs for chari	
		may not necessar	rily equal the am		exp	oenses per books	incon		,	income	purpos	ses
\neg		∞lumn (a) (see ın		- 							(cash basi	s only)
	1	Contributions, gifts gran	its, etc., received (atta ie foundation is no	ich schedule) t required to	•	4,020,250.						
	2	atta	cn Scn B									
	3	Interest on savings a				30,537.		0,444.		***************************************	ATCH 1	
	4	Dividends and inte				30,337.	3	, 444.			ATCH 1	
	5 a	Gross rents										
		Net rental income or	-			4,056,292.						
ıπ		Net gain or (loss) fro Gross sales price for		ot on line 10 096,364.	<u>.</u>	4,030,292.				-		
Revenue		assets on line 6a					4 05	6 202				
Re	7	Capital gain net in	•	•			4,05	6,292.				
	8	Net short-term ca	-									
	9 10 a	Income modification Goss sales less retur					<u> </u>					
		and allowances										
		Less Cost of goods s Gross profit or (los		lulo)	<u></u>							
	11	Other income (att				136.					-	
	12	Total Add lines 1				3,107,215.	4,08	6,736.			<u> </u>	
_	13	Compensation of off				C	<u> </u>		-			
es	14	Other employee s										
S	15	Pension plans en										
g	14 15 16 a 17 18 19 20 21 22	Legal fees (attach										
ω	B.	CAccounting fees (
ĕ.	[8	ther Manysanong	il fees cattach Sc	nedule).[3]		11,259.]]	1,164.				
rat	17	Interest	. cola &									
ist	18	Taxes (attach sche	edule) (see instri	uctions)		1						
듣	19	Depreciation (atta								,		
뒫	20	Occupancy										
d A	21	Travel, conference										
ā	22	Printing and publi	cations									
ğ	23 24 25	Other expenses (a				750.						750.
atii	24	Total operating a	nd administrativ	ve expenses								
ě		Add lines 13 throu	ugh 23			12,009.]	1,164.				750.
Ö	25	Contributions, gift	ts, grants paid .			2,193,810.					2,1	.93,810.
_	26	Total expenses and dis	bursements Add III	nes 24 and 25	- 2	2,205,819.]]	1,164.			2,1	94,560.
	27	Subtract line 26 f	rom line 12									
	a	Excess of revenue over	r expenses and disbi	ursements		5,901,396.						
	ь	Net investment in	ncome (if negativ	ve, enter -0-)			4,07	75,572.				
	С .	Adjusted net inco	ome (if negative,	enter -0-)								

JSA For Paperwork Reduction Act Notice, see instructions. 2878IX U468 7/9/2015 1:27:

1:27:47 PM V 14-5F Form 990-PF (2014)

SCANNED NOV 12 2015

CLERMONT FOUNDATION Form 990-PF (2014) 04-6772671 Page 2 Attached schedules and amounts in the Beginning of year End of year Part II Balance Sheets description column should be for end-of-year (a) Book Value (b) Book Value (c) Fair Market Value amounts only (See instructions) -98. 3,900,670. 5,812,291. 5,812,291 Accounts receivable Less allowance for doubtful accounts ▶ _ _ _ _ _ Pledges receivable Less allowance for doubtful accounts ▶ _____ 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 ▶ _ _ _ Inventories for sale or use 8 10 a Investments - U.S. and state government obligations (attach schedule) b Investments - corporate stock (attach schedule) ATCH 5 105,000. 450,000 c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 Investments - other (attach schedule) 13 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe >_ 16 Total assets (to be completed by all filers - see the 3,900,572. 5,917,291. 6,262,291. 17 Accounts payable and accrued expenses 18 19 Liabilities 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here . ▶ ___ and complete lines 24 through 26 and lines 30 and 31. Balances 24 25 26 Fund Foundations that do not follow SFAS 117, . . . $\blacktriangleright X$ check here and complete lines 27 through 31. 5 Capital stock, trust principal, or current funds 27 3,900,572. 5,917,291. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds . . Total net assets or fund balances (see instructions)..... Š 3,900,572. 5,917,291. 30 Total liabilities and net assets/fund balances (see 3,900,572. 5,917,291

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) 3,900,572. 2 Enter amount from Part I, line 27a 2 5,901,396. 3 Other increases not included in line 2 (itemize) ▶ ATCH 6 105,000. 3 9,906,968. 5 Decreases not included in line 2 (itemize) ► ____ATCH_7_ 3,989,677. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30. 5,917,291.

Form 990-PF (2014)

Form 990-PF (2014) Part IV Capital Gains	s and Losses for Tax on Inve	estment Income			Page
	d describe the kind(s) of property sold (e	The state of the s	(b) How acquired	(c) Date	(d) Date sold
	prick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr)	(mo , day, yr)
la SEE PART IV SCHE	DULE	· · · · · · · · · · · · · · · · · · ·			
<u>b</u>					
<u>C</u>			 		
<u>d</u> e					
	(f) Depreciation allowed	(g) Cost or other basis	<u> </u>	(h) Com or (le	1
(e) Gross sales price	(or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u> b			<u> </u>		
C					
d				···	·
e					
	showing gain in column (h) and owned	d by the foundation on 12/31/69		Color (Col. (b) o	0.0 0.00
(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		Gains (Col. (h) g (k), but not less t Losses (from co	than -0-) or
a				-	
b					
С					
d			L		
е					
2 Capital gain net income	or (not capital loss)	gain, also enter in Part I, line 7			
. •	i i i i i i i i i i i i i i i i i i i	(loss), enter -0- in Part I, line 7	2	4,	056,292.
	ain or (loss) as defined in sections 1				
	art I, line 8, column (c) (see inst				
	Under Section 4940(e) for Rec		3		0_
	, leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	d? [Yes X No
	nount in each column for each year	<u></u>	any ent	rios	
(a)	(b)	(c)	g any ent	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ration (col (b) divided by	
2013	1,439,250.	2,381,329.		<u> </u>	0.604389
2012	1,853,938.	1,826,918.			1.014790
2011	2,227,953.	712,965.			3.124912
2010	1,661,342.	2,323,871.	_		0.714903
2009	1,606,810.	3,700,108.			0.434260
					
	d)		2		5.893254
	o for the 5-year base period - divid				
number of years the fou	indation has been in existence if les	s than 5 years	3		1.178651
_					
4 Enter the net value of no	oncharitable-use assets for 2014 fro	om Part X, line 5	4	5,	333,255.
5 Multiply line 4 by line 3			5	6,	286,046.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		40,756.
			7	6,	326,802.
					194,560.
	tions from Part XII, line 4				

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CLERMONT FOUNDATION

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Dane	4

Par	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ction	<u>s) </u>
1a `	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	-	-	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		81,5	511.
	here Land enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J 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			
3	Add lines 1 and 2		81,5	511.
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		81,5	511.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 21,681.			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 105,000.			
d	Backup withholding erroneously withheld			- 0 -
7	Total credits and payments Add lines 6a through 6d		126,6	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			182.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		43 0	200
10 11	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		43,9	200.
	t VII-A Statements Regarding Activities			
			Voo	No
14	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 X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	10		1
b	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
Ī	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u></u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• 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	X	<u> </u>
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	-
₿a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► MA,			
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	
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,"			
	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
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Par	VII-A Statements Regarding Activities (continued)			
11 '	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within t	he	1	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualif			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application			
	Website address ► N/A			
14	The books are in care of ► BROWN ADVISORY CORP Telephone no ► 857-2	44-22	02	
	Located at ▶99 HIGH STREET, 10TH FLOOR BOSTON, MA ZIP+4 ▶ 02110			
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			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other auth-	ority .	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1)	lf		
_	Yes," enter the name of the foreign country			<u> </u>
Pai	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	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 🔣 N	o		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Ì		
	disqualified person? Yes X N	ა		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N	>		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	>		
	(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 N	>		
	(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)			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation			x
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· · <u>1b</u>	+	 ^
_	Organizations relying on a current notice regarding disaster assistance check here			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the version of the first day of the tay year beginning in 20142.			x
2	were not corrected before the first day of the tax year beginning in 2014?		 	+
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ne		
	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	İ		
	6e, Part XIII) for tax year(s) beginning before 2014?	,		-
	If "Yes," list the years			
	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)			
	all years listed, answer "No" and attach statement - see instructions)			
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	1		
3 8	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	- 1		
	at any time during the year?	0		
i	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			
	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	he		
	foundation had excess business holdings in 2014)	3b	_	<u> </u>
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose			X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	ıts		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201			Х
		Form 9	90-PF	(2014

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CLERMONT	FOUNDATION

04-6772671	Page 6
(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))?	Part VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly, any voter registration drive?. (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A) (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to 54(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)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Sb Organizations relying on a current notice regarding disaster assistance (see instructions)? Sb No B D D D D D D D D D D D D D D D D D D	5a' During the year did the foundation pay or incur any amo	unt to				-
directly or indirectly, any voter registration drive?. (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an originatization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). (6) Provide for any purpose other than religious, charitable, etc., organization described in purposes, or for the prevention of cruelty to children or animals? (7) Pyes X No organization 53 (4)(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)? (8) Frovair granizations relying on a current notice regarding disaster assistance (see instructions)? (9) If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (1) If the sanswer is "Yes" to guestion 5a(4), does the foundation exemption from the tax because it maintained expenditure responsibility for the grant? (1) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (2) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (3) A lary time during the tax year, pay premiums, directly or indirectly, on a personal benefit contract. (a) Name and address of the foundation a party to a prohibited tax shelter transaction? (b) If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract. (a) Name and address foundation and party to a prohibited tax shelter transaction? (b) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? (a) Name and address foundation and party to a prohibited tax shelter transaction? (b) If the and	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	Yes X No	,	
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(4)(4)/2 (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? 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)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions). If "Yes," attach the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53 4945-5(d) For the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Organization About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Orntractors I List all officers, directors, trustees, foundation managers an	(2) Influence the outcome of any specific public ele	ection (see section 4	1955), or to carry or	n,		
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b if any answer is "Yes" to 56(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 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? b Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? c At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The part VIIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average (c) Compensation (see instructions). (a) Name and address feach employee paid more than \$50,000 (b) Title, and average (c) Compensation (see instructions). (c) Compensation (see instructions). (d) Contributions to employee benefit enter allowances devoted to position (e) Expense account, other allowances (e) Compensation (see instructions). (d) Contributions to employee benefit enter allowances (c) Compensation (see instructions). (e) Expense account, other allowances (e) Compensation (see instructions). (e) Expense account, other allowances (e) Compensation (see instructions). (e) Expense account, other allowances (e) Compensation (see instructions).	directly or indirectly, any voter registration drive?			. Yes X No	, [
section 4945(d)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) 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)? (8) Organizations relying on a current notice regarding disaster assistance check here (9) 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? (9) If the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (1) Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? (1) Did the foundation, during the year, was the foundation a party to a prohibited tax shelter transaction? (2) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (3) If "Yes" did the foundation receive any proceeds or have any net income attributable to the transaction? (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (1) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and deferred compensation (enter 3.) (1) Compensation (e) Expense account, other allowances of each employee paid more than \$\$5,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compe	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?		. Yes X No	,	
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purposes, or for the prevention of cruelty to children or animals?	section 4945(d)(4)(A)? (see instructions)			. Yes X 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)? Croganizations relying on a current notice regarding disaster assistance (see instructions)? 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? If "Yes," attach the statement required by Regulations section 53 4945-5(d) But the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average devoted to position directly on the foundation to since the foundation of five highest-paid employees (other than those included on line 1 - see instructions). (c) Compensation (d) Contributions to employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 Did the foundation in a current notice regarding disaster assistance cleek einstructions). (e) Expense account, other allowances of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 (d) Contributions to employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances	(5) Provide for any purpose other than religious, ch	naritable, scientific, l	iterary, or educationa	al le		
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. 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? Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? A ray time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The part Ville Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (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 of employee benefit plans to employee benefit	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	,	
Organizations relying on a current notice regarding disaster assistance check here c f the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? 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? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? fi "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? 1 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) Tile, and average hours proved to position (c) Compensation ATCH 8 C 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 (the than those included on line 1 - see instructions). If none, enter "NONE." (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (c) Compensation (d) Contributions to employee benefit plans employee benefit contract? (c) Compensation (d) Contributions to employee benefit plans employee to the rail owances of the employee benefit contract? (d) Contributions to employee benefit contract? (e) Expense account, other allowances compensation (c) Compensation (c) Compensation (e) Expense account, other allowances compensation (c) Compensation (c) Compensation (e) Expense account, other allowances compensation (c) Compensation (c) Compensation (c) Compensation (e) Expense account, other allowances compensation (c) Compensation (c) Compensation (c) Compensation (c) Expense account, other allowa	b If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	ո	
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?	Regulations section 53 4945 or in a current notice regar	ding disaster assistan	ce (see instructions)?		5b	
because it maintained expenditure responsibility for the grant?	Organizations relying on a current notice regarding disas	ster assistance check	here			
If "Yes," attach the statement required by Regulations section 53 4945-5(d)	c If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax	ŀ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	because it maintained expenditure responsibility for the	grant?		. Yes No	,	
on a personal benefit contract?	If "Yes," attach the statement required by Regulations se-	ction 53 4945-5(d)				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiur	ms		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	on a personal benefit contract?			Yes X No	,	
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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 devoted to position ATCH 8 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 and deferred compensation of the highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE." (b) Title, and average hours per week devoted to position of the highest-paid employee benefit plans and deferred compensation of the allowances of each employee benefit plans and deferred compensation of the allowances of each employee benefit plans and deferred compensation of the allowances of each employee benefit plans and deferred compensation of the allowances of each employee benefit plans and deferred compensation of the plant employee benefit	7a At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?.	Yes X No	,	
ATCH 8 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Expense account, other allowances (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of the included on line 1 - see instructions). If none, enter (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Expense account, ot	b If "Yes," did the foundation receive any proceeds or have	ve any net income attr	butable to the transact	on?		
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-) (if not paid, ent	Part VIII Information About Officers, Director	rs, Trustees, Fou	indation Manager	s, Highly Paid Em _l	oloyees,	
(a) Name and address (b) Title, and average hoves per week devoted to position (lif not paid, enter -0-) ATCH 8 (c) Compensation (lif not paid, enter -0-)		nanagers and their	r compensation (see	instructions)		
ATCH 8 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 other allowances (e) Expense account, other allowances (e) Expense account, other allowances		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e account.
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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						
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(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						
(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						
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(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						
(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		(other than thos	e included on lin	e 1 - see instructi	ons). If n	one, enter
(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) Expense account, other allowances	"NONE."	T		(d) Contributions to		
devoted to position compensation	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	`employee benefit		
NONE		devoted to position			Other an	Owances
NONE						
	NONE					
						<u> </u>
Total number of other employees paid over \$50,000						

,		
	04~6772671	

Part VIII - Information About Officers, Directors, Trustees, Foundationand Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	Ε."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include relevant organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
·		
2		
3		
	The state of the s	
4		
Don't IV D. Common of Drawon Dalated Investments (co.)		
Part IX-B Summary of Program-Related Investments (see instruction		Amount
Describe the two largest program-related investments made by the foundation during the tax year of NONE	on lines 1 and 2	Amount
1 10011		
2		
		1
All other program-related investments. See instructions		
3 NONE		
		ļ
Total Add lines 1 through 2		1

Form 990-PF (2014)

CLERMONT FOUNDATION

Form 990-PF (2014) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 450,000. 4,964,472. 1b Fair market value of all other assets (see instructions). 1c 5,414,472. Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 5,414,472. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 81,217. instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5,333,255. 5 266,663. 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) 266,663. Minimum investment return from Part X, line 6 2a Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014 (This does not include the tax from Part VI). 2b 81,511. 185,152. 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 185,152. Add lines 3 and 4 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 185,152. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1a 2,194,560. b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes ______ 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 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 2,194,560.

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)

2,194,560.

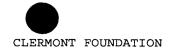
5

6

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

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



Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (d) Corpus Years prior to 2013 2013 2014 Distributable amount for 2014 from Part XI, 185,152. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 1,423,085 From 2009 **b** From 2010 1,562,418. c From 2011 2,211,723 1,815,518. d From 2012 e From 2013 1,387,519. f Total of lines 3a through e 8,400,263 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 2,194,560. 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 185,152. 2,009,408. 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: 10,409,671. 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 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be 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) . . . 1,423,085 Excess distributions carryover to 2015. 8,986,586. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 1,562,418. a Excess from 2010 . . . 2,211,723. b Excess from 2011 . . . 1,815,518. c Excess from 2012 . . . 1,387,519. d Excess from 2013 . . . 2,009,408. e Excess from 2014 .

Form 990-PF(2014)

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CLERMONT FOUNDATION

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Pai	rt XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private oper	ating	
	foundation, and the ruling					
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942()(3) or 4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year		Prior 3 years		43.7.4.1
4 a	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment	· · · · · · · · · · · · · · · · · · ·			(-/,	
	return from Part X for each year listed					
L						
D	85% of line 2a					
С	Qualifying distributions from Part					
ч	XII, line 4 for each year listed . Amounts included in line 2c not					
u	used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line					
	2d from line 2c					
3	Complete 3a, b or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties)					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					
_	(4) Gross investment income				1	<u> </u>
Рa				t only if the found	dation had \$5,000	or more in assets
_		e during the year -s				
1	Information Regardin List any managers of	-		a than 20/ of the tot	al aantributiona raas	und bu the foundation
a	before the close of an	y tax year (but only if th	nave contributed mor	e man 2% of the tot note than \$5 000) (S	See section 507(d)(2)	ved by the foundation
			io y mavo commisatou i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,00 000(1011 007 (47(27)	
	HOWARD E. C		100/			
b	List any managers of			•	•	ly large portion of the
	ownership or a partner	rship or other entity) o	i which the foundation	i nas a 10% or greate	i interest	
_	NONE					
2		•		• • •		
	Check here ► X If	the foundation only	makes contributions	to preselected char	ritable organizations	and does not accept
				ants, etc (see instruc	ctions) to individuals	or organizations under
		plete items 2a, b, c, an				
а	The name, address, a	ind telephone number	or e-mail address of	the person to whom ar	oplications should be ad	ddressed
						·
b	The form in which app	olications should be su	bmitted and information	on and materials they	should include	
	Any submission deadl	ines			_	
C	Tily subillission dead	m 103				
d	Any restrictions or I	imitations on awards	, such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other
-	factors		, 33.	,		

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Part XV Supplementary Information (continued) -	-		
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appl	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	_
a Paid during the year				
ATCH 9				
	1			
]		
Total				2 102 010
b Approved for future payment	 			2,193,810.
• Approved for luture payment				
		1		
Total	1	' 	> 2h	

JSA 4E1491 1 000

Form 990-PF (2014)

Form 990-PF (2014)

Page **12**

CLERMONT	FOUNDATION

Part XVI-A Analysis of Income-Production of Income-		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					
	-		+		
		- -	-		
		_	- 		
e f					
			- · · · · · · · · · · · · · · · · · · 		
g Fees and contracts from government agencies			-		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash investments			14	30,537.	
4 Dividends and interest from securities5 Net rental income or (loss) from real estate			1 1 1	30,337.	
a Debt-financed property			· · · · · · · · · · · · · · · · · · ·		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			18	4 056 202	
8 Gain or (loss) from sales of assets other than inventory			10	4,056,292.	
9 Net income or (loss) from special events					····
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a			-	126	
b ATCH 10				136.	
c					
d			-		
e			 	4 000 005	
12 Subtotal Add columns (b), (d), and (e)				4,086,965.	4 006 0CE
13 Total Add line 12, columns (b), (d), and (e).				13	4,086,965.
(See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities		complishment of F	xempt Purn	inses	
Explain below how each activity accomplishment of the foundation					
•					
					······································
		Page 14 14 2 - 14 14 14 14 14 14 14 14 14 14 14 14 14			
			· - · ·		
I					

JSA 4E1492 1 000

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

(a)	in s org; (1) (2) Oth (1) (2) (3) (4) (5) (6) Shaddiff the value	the organization direction 501(c) of the Canizations? Insfers from the report Cash	code (other than ing foundation to incomply the incomply than incomply the incomply that incomply the incomplete that incomply the incomplete that incomply the incomplete that incomply the incomplete that incomplete the incom	empt organization able exempt organization assets hip or fundraising sts, other assets, es," complete the rices given by the	exempt organ exemp	s) or in securization of	tion 527,	relating to politic	1a(1) 1b(1) 1b(2) 1b(3) 1b(5) 1b(6) 1c how the	X X X X X X X X X X A X A A A A A A A A
(a)	org: (1) (2) Oth (1) (2) (3) (4) (5) (6) Shad If th valu	anizations? Insfers from the report Cash Cash Cother assets Inster transactions Sales of assets to a report Purchases of assets to a report Rental of facilities, equency Reimbursement arrant Loans or loan guarant Performance of service In any facilities, equipment In any transaction (b) Amount involved	ing foundation to	empt organization, able exempt organization, able exempt organization, assets hip or fundraising sts, other assets, es," complete the gement, show in	exempt organ	ees	lumn (b) the found	should always s	1b(1) 1b(2) 1b(3) 1b(4) 1b(6) 1c how the ess than or service	X X X X X X X X X A X A A A A A A A A A
(a)	(1) (2) Oth (1) (2) (3) (4) (5) (6) Sha	nsfers from the report Cash Other assets er transactions Sales of assets to a n Purchases of assets to Rental of facilities, eq Reimbursement arran Loans or loan guarant Performance of servic iring of facilities, equip ne answer to any of ite of the goods, othe ite in any transaction (b) Amount involved	ioncharitable exe from a noncharita uipment, or other gements ees ces or membersl oment, mailing lis the above is "Ye r assets, or serv or sharing arrange	empt organization able exempt organization assets hip or fundraising sts, other assets, es," complete the gement, show in	solicitations or paid employ e following so e reporting four column (d) the	ees	lumn (b) the found	should always s	1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1chow the ess than or service	X X X X X X X X X X A X A A A A A A A A
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(a)	(2) Oth (1) (2) (3) (4) (5) (6) Shall if the value	Other assets	ioncharitable exe from a noncharita uipment, or other gements ees ces or membersh oment, mailing lis the above is "Ye r assets, or serv or sharing arran	empt organization, able exempt organization, assets hip or fundraising sts, other assets, es," complete the prices given by the gement, show in	nization	ees	lumn (b) the found	should always s	1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1chow the ess than or service	X X X X X X X X X X A X A A A A A A A A
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(a)	(3) (4) (5) (6) Sha I If the value	Rental of facilities, eq Reimbursement arran Loans or loan guarant Performance of service iring of facilities, equip he answer to any of the goods, othe tie in any transaction (b) Amount involved	uipment, or other gements	r assets hip or fundraising sts, other assets, es," complete the circes given by the gement, show in	solicitations or paid employe following soe reporting founced to column (d)	ees	lumn (b) the found	should always s dation received k	1b(3) 1b(4) 1b(5) 1b(6) 1c how the ess than or service	X X X X X fair market fair market es received
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(a)	Sha I If the value	iring of facilities, equipme answer to any of the goods, other in any transaction (b) Amount involved	oment, mailing lis the above is "Ye r assets, or serv or sharing arran	sts, other assets, es," complete the rices given by the gement, show in	or paid employ e following so e reporting fou column (d) the	ees hedule Co undation If ne value of	lumn (b) the found	should always s dation received le s, other assets, o	1c how the ess than or service	fair market fair market fair market es received
(a)	I If the value	ne answer to any of the of the goods, othe tie in any transaction (b) Amount involved	the above is "Ye r assets, or serv or sharing arran	es," complete the rices given by the gement, show in	e following so e reporting fou column (d) th	hedule Co undation If ne value of	lumn (b) the found the goods	should always s dation received los, other assets, o	how the ess than or service	fair market fair market es received
(a) 2a	valu valu	te of the goods, other in any transaction (b) Amount involved	r assets, or serv or sharing arran	rices given by the gement, show in	e reporting fou column (d) the	undation If ne value of	the found	dation received less, other assets, o	ess than or service	fair market es received
2a	valu	(b) Amount involved	or sharing arran	gement, show in	column (d) th	ne value of	the good	s, other assets, o	or service	s received
2a	valu	(b) Amount involved	or sharing arran	gement, show in	column (d) th	ne value of	the good	s, other assets, o	or service	s received
2a	Line no		(c) Name of	noncharitable exempt	organization	(d) Descri	-4		sharing arra	ingements
		N/A					otion of trans	fers, transactions, and		
				~		N/A				
					-			.,		
									· · ·	
				· · · · · · · · · · · · · · · · · · ·				· · · · · ·		
										
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	ı İşt	he foundation directly	v or indirectly at	ffiliated with, or	related to, one	e or more	tax-exemp	t organizations		
_ <u>t</u>		cribed in section 501(\square_{Y}	es X No
		res," complete the fol				0000.0				110
		(a) Name of organiza		(b) Type	of organization			(c) Description of rela	ationship	
				(27.77				(o) bodonphon or ton		
						<u> </u>				<u> </u>
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			-							
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	1.	lader penaltics of penum. I di	palara that I have aver	and the sature include				1- 15- 5 1 1	.1	
	6	Inder penalties of perjury, I de correct, and complete Declaration	o preparer (other than	taxpayer) is based on ally	ing accompanying so Information of which	preparer has any	knowledge,	to the dest of my kno	wiedge and i	seller it is true,
Sig	an li		1_	1.0/	クコノノ	P	1 Dans	May the	IRS discus	ss this return
He	1	/// / W	Ъ		<i>f [[[]</i>	rev	WIV			shown below
116	16	Signature of officer or rust	f e ′	Date /		Title		(see instr	uctions)?	Yes No
		/ · / ·								
D-	7	Print/Type preparer's	name	parer's sign	sture W		Date	Check	ıf PTIN	
Pai	ıa	JAMES M MEDE	IROS	twell	VI VIII ledein	<i>∞</i>	10/26/2		d P002	37396
Pro		er Firm's name	PRICEWATERHO	OUSE DOPERS	LLP				-40083	
Us	epar		125 HIGH STR							
	epar			V		0211	n	Phone no 617	-530-7	353
		=	BOSTON, MA							

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

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

Internal Revenue Service Name of the organization Employer identification number CLERMONT FOUNDATION 04-6772671 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 foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % 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 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

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)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

Employer identification number 04-6772671

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	HORWARD E COX JR 200 SEAPORT BLVD., S7A BOSTON, MA 02210	\$4,020,250.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

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

Name of organization CLERMONT FOUNDATION

Employer identification number

04-6772671

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is nee	ded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	15,000 SHS FACEBOOK INC	\$1,018,800.	_02/20/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	15,000 SHS FACEBOOK INC	\$1,049,850.	02/24/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	20,000 SHS PALO ALTO NETWORKS	\$1,951,600.	10/16/2014
(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
		\$	

Schedule	R	(Form	990	990-F7	or 990-PF)	(20	14
Schledule	0	(FQIIII	33U.	99U-EZ.	01 330-66	120	14

Name of organization CLERMONT FOUNDATION

Employer identification number

04-6772671

	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 exclusively 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) Transf	er of gift			
	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) 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, an	nd ZIP + 4	Relation	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) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of transferor to transferee		



CLERMONT FOUNDATION 04-677267:
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

· <u> </u>	APITAL GAI	NS AND LC	122F2 LOP	CIAX UNI	MAF211	VII	ENT INCOM	
Kınd of I	Property		Descr	ption		D 20	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	U	Gain or (loss)	
2,101,600.	anowayic	30,000 SHS 1 15,584.			auj basis		04/19/2006 2,086,016.	12/31/2014
1,994,764.		20,000 SHS 1 24,488.	PALO ALTO NE	TWORKS			04/11/2005 1,970,276.	12/31/2014
TOTAL GAIN(L	oss)						4,056,292.	
,								
							į	

ATTACHMENT

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT <u>INCOME</u>	15,000. 15,000. 212. 232.	30,444.
REVENUE AND EXPENSES PER BOOKS	15,000. 15,000. 212. 232. 93.	30,537.
	INC	TOTAL
DESCRIPTION	MEDICAL INFORMATION TECHNOLOGY, MEDICAL INFORMATION TECHNOLOGY, MERRILL LYNCH FIDELITY -EXEMPT INT DIVIDENDS	

ATTACHMENT 1

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
PER BOOKS

136.

DESCRIPTION FEDERAL TAX REFUND

TOTALS

136.

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	
REVENUE	AND	EXPENSES	PER BOOKS	
			DESCRIPTION	

. 199	10,497.	11,164.
667.	10,497.	11,259.
MERRILL LYNCH TRUSTEE FEES	FIDELITY MANAGEMENT FEES	TOTALS

04-6772671

ATTACHMENT

ATTACHMENT

- OTHER EXPENSES FORM 990PF, PART I

REVENUE AND EXPENSES PER BOOKS 750.

DESCRIPTION STATE AG FEES

750.

TOTALS

CHARITABLE PURPOSES

750.

ATTACHMENT 4

1:27:47 PM V 14-5F 2878IX U468 7/9/2015

DESCRIPTION

MEDICAL INFORMATION TECHNOLOGY

ENDING BOOK VALUE

ENDING FMV

450,000.

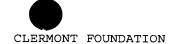
105,000.

TOTALS

105,000.

450,000.

ATTACHMENT 5



ATTACHMENT	6	

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

DESCRIPTION

AMOUNT

MEDICAL INFORMATION TECHNOLOGY

105,000.

TOTAL

105,000.

ATTACHMENT 7

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

DESCRIPTION

AMOUNT

GRANTS PAID IN 2013, CLEARED IN 2014 EXCESS FMV OVER COST ASSETS CONTRIBUTED

9,500. 3,980,177.

TOTAL

3,989,677.

CLERMONT FOUNDATION

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

04-6772671

ATTACHMENT 8

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

HOWARD E. COX JR 200 SEAPORT BLVD., S7A BOSTON, MA 02210

2.00 TRUSTEE

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EDRM 990PF, PART XV GRANTS AND CONTRIBUITIONS PAID DURING THE YFAR	IS PAID DIRING THE YEAR		ATTACHMENT 9
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND	אסזיחום במאחים מס הואגם? מס בפסממונים	ENLIGHT
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	FUREVOSE OF GRAINI OR CONTRIBUTION	
ST CHRISTOPHER'S EPISCOPAL CHURCH	NONE	GENERAL OPERATING	1,000
1063 N HAVERHILL ROAD	PC		
HAVERHILL, FL 33417			
THE FRIENDS OF CLERMONT	NONE	GENERAL OPERATING	2,500
87 CLERMONT AVE	PC		
GERMANTOWN, NY 12526			-
MIDDLE EAST CHILDRENS INST	NONE	GENERAL OPERATING	1,000.
118 W 72ND ST NO 279	PC		-
NEW YORK, NY 10023			
соммои воор	NONE	GENERAL OPERATING	1,000
1718 M ST NW STE 187	PC		-
WASHINGTON, DC 20036			
HARVARD SCHOOL OF PUBLIC HEALTH	NONE	GENERAL OPERATING	10,000
677 HUNTINGTON AVE	PC		
BOSTON, MA 02115			
THE FIRST TEE CLUB	NONE	GENERAL OPERATING	5,000
425 SOUTH LEGACT TRAIL	PC		
ST AUGUSTINE, FL 32092			

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FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 9

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NONE

SOUTH FLORIDA SCIENCE MUSEUM

RECIPIENT NAME AND ADDRESS

2

NONE

MUSEUM OF FINE ARTS BOSTON

465 HUNTINGTON AVE

BOSTON, MA 02115

WEST PALM BEACH, FL 33405

4801 DREHER TRAIL N

5

GENERAL OPERATING

GENERAL OPERATING

ATTACHMENT 9 (CONT'D)

10,000

255,000

GENERAL OPERATING

3,500

200

GENERAL OPERATING

NONE

MIT CHARLES M VIST PRESIDENT

77 MASSACHUSETTS AVE

CAMBRIDGE, MA 02139

PC

NONE

2

18001 OLD CUTLER RD STE 625

EVERGLADES FDN

PALMETTO BAY, FL 33157

NONE

PC C

104,000

GENERAL OPERATING

2,500

GENERAL OPERATING

NONE

ARCHBOLD BOTANICAL STADIUM

SYRACUSE, NY 13244

222 WAVERLY AVE

QUEENSTOWN, MD 21658

THE ASPEN INSTITUTE

PO BOX 222

FOUNDATION
 CLERMONT

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	ATTAC	ATTACHMENT 9 (CONT.D)
	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	GENERAL OPERATING	OPERATING	2,000
	GENERAL OPERATING	OPERATING	100, 000
	GENERAL OPERATING	OPERATING	30, 000
	GENERAL OPERATING	OPERATING	2,000
	GENERAL OPERATING	OPERATING	1,000
	GENERAL OPERATING	OPERATING	200, 000

ATTACHMENT 9 (CONT'D)

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE	DURING THE YEAR		ATTACHMENT 9 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HARVARD BUSINESS SCHOOL CLUB OF NEW YORK 350 STH AVENUE, #4811 NEW YORK, NY 10118	NONE PC	GENERAL OPERATING	15,000
SOUTHAMPTON FRESH AIR HOME 36 BARKERS ISLAND ROAD SOUTHAMPTON, NY 11968	NONE PC	GENERAL OPERATING	1,500
EAST END HOSPICE 481 COUNTY ROAD 31 WESTHAMPTON BEACH, NY 11978	NONE PC	GENERAL OPERATING	3,000
FRIENDS OF LOXAHATCHEE NATIONAL WILDLIFE REFUGE 6865 W HICKORY ROAD HICKORY CORNERS, MI 49060	NONE PC	GENERAL OPERATING	2,000
BUSINESS EXECUTIVES FOR NATIONAL SECURITY 1030 15TH ST NW SUITE 200 EAST WASHINGTON, DC 20005	NONE PC	GENERAL OPERATING	50,000
MUSEUM OF SCIENCE 1 SCIENCE PARK BOSTON, MA 02114	NONE PC	GENERAL OPERATING	5,000

ATTACHMENT 9 (CONT'D)

W - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR
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PART
FORM 990PF

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GILMORE CAR MUSEUM 6865 W HICKORY ROAD HICKORY CORNERS, MI 49060	NONE PC	GENERAL OPERATING	100, 000
THE ASIA FOUNDATION 465 CALIFORNIA STREET 9TH FL SAN FRANCISCO, CA 94104	NONE PC	GENERAL OPERATING	10,000.
SCHOOL OF THE MUSEUM OF FINE ARTS 230 FENWAY BOSTON, MA 02115	NONE PC	GENERAL OPERATING	1,500
FRIENDS OF WESTHAMPTON AMBULANCE 3 HAZELWOOD AVENUE WESTHAMPTON BEACH, NY 11978	NONE PC	GENERAL OPERATING	100.
THE BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	NONE PC	GENERAL OPERATING	200,000
THE ORDER OF ST JOHN 1850 M STREET SUITE 1070 WASHINGTON, DC 20036	NONE PC	GENERAL OPERATING	1,000

CLERMONT FOUNDATION

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NONE PC NONE NONE	
	NONE NONE PC PC

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ATTACHMENT 9 (CONT'D)

FORM 990RE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
POLICE ATHLETIC LEAGUE 34 1/2 EAST 12TH STREET NEW YORK, NY 10003	NONE PC	GENERAL OPERATING	1,100
PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401	NONE PC	GENERAL OPERATING	40,000
FULLER CRAFT MUSEUM CO JONATHAN FAIRBANKS BROCKTON, MA 02301	NONE P.C	GENERAL OPERATING	5, 000
CLASS OF 1964 PRINCETON UNIVERSITY 200 ELM DRIVE PRINCETON, NJ 08544	NONE PC	GENERAL OPERATING	50
THE PILGRIMS OF THE UNITED STATES PO BOX 1289 ME185WQ MAIDSTONE UNITED KINGDOM	NONE PC	GENERAL OPERATING	3,600
THE SHINNECOCK HILLS EDUCATIONAL FUND 200 TUCKAHOE ROAD SOUTHAMPTON, NY 11968	NONE PC	GENERAL OPERATING	1,000

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CLERMONT FOUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE	DURING THE YEAR		ATTACHMENT 9 (CONT.D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
QUOGUE JUNIOR THEATER TROUPE BOX 427 QUOGUE, NY 11959	NONE PC	GENERAL OPERATING	2,500
THE PRESERVATION FOUNDATION 311 PERUVIAN AVENUE PALM BEACH, FL 33480	NONE PC	GENERAL OPERATING	2,400
PIONEER INSTITUTE 185 DEVONSHIRE ST STE 1101 BOSTON, MA 02110	NONE PC	GENERAL OPERATING	009
INNER CITY SCHOLARSHIP FUND 1011 FIRST AVE STE 1400 NEW YORK, NY 10022	NONE PC	GENERAL OPERATING	2,000
WESTHAMPTON BEACH POLICE B A 165 MILL ROAD WESTHAMPTON BEACH, NY 11978	NONE PC	GENERAL OPERATING	009
ST ANN'S EPISCOPAL CHURCH PO BOX 961 MAIN STREET AT HULL LANE BRIDGEHAMPTON, NY 11932	NONE PC	GENERAL OPERATING	3,000

ATTACHMENT 9 (CONT'D)

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PART XV	
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FORM	

		AMOUNT	10,000			2,000				500				20,000			250,000			:	40,000.		
		PURPOSE OF GRANT OR CONTRIBUTION	GENERAL OPERATING			SNITEGIO TEGINS				GENERAL OPERATING				GENERAL OPERATING			GENERAL OPERATING				GENERAL OPERATING		
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND	FOUNDATION STATUS OF RECIPIENT	NONE	PC		olivit.	ACN TO THE PROPERTY OF THE PRO	PC		NONE	Č).		NONE	PC		NONE	PC			NONE	PC	
		RECIPIENT NAME AND ADDRESS	CENTER FOR A NEW AMERICAN SECURITY	1152 15TH STREET, NW STE 950	WASHINGTON, DC 20005		ST MARKS CHURCH	3395 BURNS ROAD	PALM BEACH GARDENS, FL 33410	FRIENDS OF WESTHAMPTON FREE LIBRARY	GUNGUA SCARGOTT L	/ LIBRARY AVENUE	WESTHAMPTON BEACH, NY 11978	COUNCIL ON FOREIGN RELATIONS	58 E 68TH STREET	NEW YORK, NY 10065	HARVARD BUSINESS SCHOOL	SOLDIERS FIELD	BOSTON, MA 02163		NORTON MUSEUM OF ART	1451 S OLIVE AVE	WEST PALM BEACH, FL 33401

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YFAR

	PURPOSE OF GRANT OR CONTRIBUTION.	GENERAL OPERATING	GENERAL OPERATING
AND	FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC
	RECIPIENT NAME AND ADDRESS	FRIENDS OF THE PUBLIC GARDEN 69 BEACON STREET BOSTON, MA 02108	ROGERSON COMMUNITIES 60 JOY STREET BOSTON, MA 02114

1,000

AMOUNT

ATTACHMENT 9 (CONT'D)

2,000

2,500

NEW ENGLAND HISTORIC GENEALOGICAL SOCIETY	NONE	GENERAL OPERATING	2,500
99-101 NEWBURY STREET	PC		
BOSTON, MA 02116			
KID SANCTUARY	NONE	GENERAL OPERATING	2,000.
555 SAFE HAVEN DRIVE	PC PC		
WEST PALM BEACH, FL 33411			
POPULATION COUNCIL	NONE	GENERAL OPERATING	1,000
ONE DAG HAMMARSKJOLD PLAZA	PC		
NEW YORK, NY 10017			

2,000

GENERAL OPERATING

NONE

DORCHESTER, MA 02125

COLLEGIATE SCHOOL 215 SYDNEY STREET

FORM 990PE, PART XV GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	IRING THE YEAR	ATTACHMENT 9 (CONT'D)	(CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FOUNDATION FOR ART PRESERVATION 1725 I ST NM#300 WASHINGTON, DC 20006	NONE PC	GENERAL OPERATING	2,500
SOUTH FLORIDA SCIENCE CENTER 4801 DREHER TRAIL N WEST PALM BEACH, FL 33405	NONE PC	GENERAL OPERATING	12,000
US FRIENDS OF THE LISS 2121 K ST NW STE 801 WASHINGTON, DC 20037	NONE PC	GENERAL OPERATING	1,000
BRIGHAM & WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115	NONE PC	GENERAL OPERATING	15,000

2,193,810

TOTAL CONTRIBUTIONS PAID

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ATTACHMENT 9

FOUNDATION	
CLERMONT	

ATTACHMENT 10

FORM 990-PE, PART XVI-A - ANALYSIS OF OTHER REVENUE

RELATED OR EXEMPT	FUNCTION INCOME
	AMOUNT
EXCLUSION	CODE
	AMOUNT
BUSINESS	CODE
	DESCRIPTION

TOTALS

FEDERAL TAX REFUND

136.

136.

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