

# 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

1

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 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

		endar year 2014 or tax year beginning of foundation	<del></del>	, 2014,	and endi		Employer identific	, 20
						^		
_		RY BROOKS TRUST C er and street (or P.O. box number if mail is not delivered	dto otroot addrago)		Room/suite	B	Telephone numbe	6785966
11	umb	er and street (or r.O. box number it mail is not delivered	a to street address)		NOUIII/Sulti	ין "	relephone numbe	r (see instructions)
		DOV 1000					0.0	0 066 2075
	_	BOX 1802 town, state or province, country, and ZIP or foreign po	stal code		·	-+	00	8-866-3275
٠	ny O	town, state or province, country, and zir or loreign pos	star code			c	If exemption applicat	ion is
-	.D.O.	UIDDNAD DI ACCAI 1000					pending, check here	····· • • • • • • • • • • • • • • • • •
		VIDENCE, RI 02901-1802 ck all that apply:   Initial return	Initial return	of a farmar n	المان ماميا	***		
G	Cne	· · · · <del> </del>	Amended ret		ublic chari	ם אי	1 Foreign organization	
		Final return	<b>─</b> ─				2 Foreign organization 85% test, check he	
	Ch.	Address change ck type of organization: X Section 501(	Name change			$\dashv$	computation .	
7-	_					E	If private foundation	
_		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri				under section 507(b)	
-	-	<del></del>	ah au /au aaif i)		ruai	F		a 60-month termination
			ther (specify) column (d) must be on cas				under section 507(b)	(1)(B), check here . D
_			· · · · · · · · · · · · · · · · · · ·	SII Dasis.)			· · · · · · · · · · · · · · · · · · ·	(d) Disbursements
Lič		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) nevenue una	(b) Net inve		(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	incom	е [		income	purposes (cash basis only)
_		column (a) (see instructions).)	708,917.	<u></u> _				(casii casis ciiiy)
	1	Check If the foundation is not required to	100,311.	<del></del>	<del></del>			
		attach Sch. B	<u></u>					
	3	Interest on savings and temporary cash investments.	78,876.	7	6,262.			STMT 1
	4	Dividends and interest from securities	70,070.	<del></del>	0,202.		CEIVED	
1	5a	Gross rents			+	RE	THE PERSON NAMED IN COLUMN	
	b	Net rental income or (loss)	210,019.	<del></del>	1 +	-	0.0015	121
Ž	ьа b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1, 221, 583.	210,010.		181	TUI.	2 8 2015	181
Revenue	-	Capital gain net income (from Part IV, line 2) .		21	0,019	30.		<del>181</del>
2	7	· -			<u> </u>		DEN U	
-	8 9	Net short-term capital gain			1	<del>-0</del> (	SDEN, U	
-	_	Gross sales less returns		<del></del>		-		<del></del>
1	h	Less Cost of goods sold	<del></del>	<del></del>			····	
1		Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)			-45.			STMT 2
	12	Total. Add lines 1 through 11 · · · · · ·	997,812.	28	6,236.			
Ŧ.	13	Compensation of officers, directors, trustees, etc.	35,401.		1,241.			14,161
	14	Other employee salaries and wages			NONE		NONE	
Ž.	15	Pension plans, employee benefits			NONE		NONE	
w.		Legal fees (attach schedule)			-			
—ı	ь	Accounting fees (attach schedule) STMT 3	1,250.		NONE		NONE	1,250
Administrative	C	Other professional fees (attach schedule)						
Ę,	17	Interest						
ış.	18	Taxes (attach schedule) (see instructions), 4.	4,924.		1,324.			
[]	19	Depreciation (attach schedule) and depletion.						
뒝:	20	Occupancy		·				
	21	Travel, conferences, and meetings			NONE		NONE	
and	22	Printing and publications , , ,			NONE		NONE	
함	23	Other expenses (attach schedule) STMT. 5.	44.		320.			35
Operating	24	Total operating and administrative expenses.			1		ĺ	
ĕ		Add lines 13 through 23	41,619.	2	2,885.		NONE	15,446
<b>5</b>	25	Contributions, gifts, grants paid	120,000.					120,000
	26_	Total expenses and disbursements Add lines 24 and 25	161,619.	2	2,885.		NONE	135,446
	27	Subtract line 26 from line 12.			- 1		ĺ	
	а	Excess of revenue over expenses and disbursements	836,193.					
		Net investment income (if negative, enter -0-)		26	3,351.			
$\bot$	C	Adjusted net income (if negative, enter -0-)	l					

D	7	Dalamas Chasta	Attached schedules and amounts in the	Beginning of year	End of	year
Par	ш	Balance Sneets	description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1 (	Cash - non-interest-bearn	ng			
			eash investments		171,010.	<u>171,010</u> .
	3 /	Accounts receivable ►				
-	Ł	ess allowance for doub	tful accounts 🕨			<u> </u>
-   -	4 F	Pledges receivable 🕨				
	ι	ess: allowance for doub	tful accounts -			
	5 (	Grants receivable				
-	6 F	Receivables due from	officers, directors, trustees, and other			
			ach schedule) (see instructions)			
			ceivable (attach schedule) 🕨			
ı	l	ess allowance for doub	tful accounts ▶NONE			
23	8 1	nventories for sale or us	e			<del> </del>
Assets	9 F	Prepaid expenses and de	eferred charges			
<b>A</b> 10	0a i	nvestments - U.S. and state	government obligations (attach schedule)	····-		· · · · · · · · · · · · · · · · · · ·
Ì	b I	nvestments - corporate :	stock (attach schedule) . STMT .6	2,088,090.	2,921,824.	<u>3,528,476</u> .
	, c	nvestments - corporate	bonds (attach schedule)			· · · · · · · · · · · · · · · · · · ·
1	i	nvestments - land, building and equipment: basis Less accumulated deprecia				
1;		attach schedule)	loans			
1	3 ]	nvestments - other (atta	ch schedule) STMT 10	24,977.		
1.	4 L	and, buildings, and	<b>&gt;</b>			
	L	ess: accumulated deprecia	tion	!		
1:		attach schedule) Other assets (describe	>)			
10	6 1	Total assets (to be	completed by all filers - see the			
			ige 1, item l)	2,229,820.	3,092,834.	3,699,486.
1			ccrued expenses			
1:						
ဖွာ့ 1:						
Liabilities			s, trustees, and other disqualified persons			
e 2	1 1	Mortgages and other no	tes payable (attach schedule)			
<u>ت</u> 2			<b>&gt;</b>			
2	3 1	Fotal liabilities (add line	s 17 through 22)		NONE	
	F	oundations that foll	ow SFAS 117, check here . >			
10	á	and complete lines 2	4 through 26 and lines 30 and 31.	}		
2 2	<b>4</b> (	Jnrestricted				
Balances	5	Temporarily restricted .				
or Fund		Foundations that do	not follow SFAS 117, ▶ 🐰			
띤			olete lines 27 through 31.			
	7 (	Capital stock, trust princi	pal, or current funds	2,229,820.	3,092,834.	
Net Assets	<b>8</b> F	Paid-in or capital surplus, or	land, bldg., and equipment fund			
Y 2	<b>9</b> F	Retained earnings, accumula	ated income, endowment, or other funds			
<u>후</u> 3			balances (see instructions)	2,229,820.	3,092,834.	
3	1 1	Total liabilities and	net assets/fund balances (see			
			<u></u>	2,229,820.	3,092,834.	<del> </del>
			ges in Net Assets or Fund Bala			
			alances at beginning of year - Part			0 000 000
			l on prior year's return)			2,229,820.
2 8	Enter	amount from Part I,	line 27a		2	836,193.
3 (	Othe	r increases not includ	led in line 2 (itemize) ▶ SEE STA:	rement 11	3	31,869.
4 /	Add I	lines 1, 2, and 3	line 2 (itemize) ► SEE STA			3,097,882.
5 [	Decre	eases not included in	line 2 (itemize) ► SEE STA	PEMENT 12	5	5,048.
6	Total	net assets or fund ba	lances at end of year (line 4 minus l	ine 5) - Part II, column (b	), line 30   <b>6</b>	3,092,834. Form 990-PF (2014)

}

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
		d describe the kind(s) of property sold (		(b) How	(c) Date acquired	(d) Date sold
	<del></del>	rick warehouse; or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	(mo., day, yr.)	(mo., day, yr.)
<u>1a</u>	PUBLICLY TRADED					
_ <u>b</u>	OTHER GAINS AND	LOSSES		<del> </del>		
_ <u>c</u>				ļ		
<u>_d</u>			<del> </del>	ļ		
<u>e</u>	<del></del>	// Day	(g) Cost or other basis	<del> </del>	//-) C //-	\
	(e) Gross sales price	<ul><li>(f) Depreciation allowed (or allowable)</li></ul>	plus expense of sale	1	(h) Gain or (lo (e) plus (f) mini	
_a	1,239,703.		1,011,564.			228,139.
b	-18,120.					-18,120.
С						
d						<u> </u>
<u>e</u>				<del> </del>		
	Complete only for assets s	howing gain in column (h) and owned	<del>r`</del>		Gains (Col. (h) ga	
	(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	col.	(k), but not less t Losses (from co	
_a					··	228,139.
b		<del></del>				<u>-18,120.</u>
_ <u>c</u>	- <del></del>			<del> </del>		
<u>d</u>					<del></del>	
<u>_e</u>	<del></del>		L. D.	<del> </del>	<del></del>	
2	Capital gain net income of		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		210,019.
2	Net chart-term capital da	۱۱ ) in or (loss) as defined in sections 1		<del></del>		210,019.
·			tructions). If (loss), enter -0- in	1 1		
		• • • • • • • • • • • • • • • • • • • •	E .	3		
Pa			uced Tax on Net Investment I	ncome		
Wa			outable amount of any year in the b Do not complete this part.	ase perio	d?	Yes X No
1			; see the instructions before makin	g any enti	ries.	
	(a)	(b)	(c)		(d)	At a
Са	Base period years lendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col. (b) divided by	
	2013	121,946.	2,615,188.			0.046630
	2012	119,407.	2,461,873.	<u> </u>		0.048503
_	2011	113,257.	2,423,042.			0.046742
	2010	103,006.	2,287,684.			0.045026
	2009	119,990.	2,048,396.	<del>                                     </del>		0.058578
2	Total of line 1 column /d	1\		2		0.245479
2 3			e the total on line 2 by 5, or by the	<del></del>		0.213475
3			s than 5 years	3		0.049096
4	Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4	3,	530,565.
5	Multiply line 4 by line 3.			5		173,337.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		2,634.
7				7		175,971.
8	Enter qualifying distributi	ons from Part XII, line 4	in Post VI line 1b, and complete	8	Light a 40/ t-	135,446.
	If line 8 is equal to or g Part VI instructions.	reater than line /, check the box	in Part VI, line 1b, and complete	tnat part	using a 1% tax	rate. See the

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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," 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

X Form 990-PF (2014)

Х

8b

ţ

Form	990-PF (2014)		- 1	age o
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		ĺ	1
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X	<u> </u>
	Website address ► N/A	<b></b> .		
14	The books are in care of ► US_TRUST_FIDUCIARY_TAX_SERVICES			
	Located at ▶ P.O. BOX 1802, PROVIDENCE, RI ZIP+4 ▶ 02901-3	<u>802</u>	<b></b>	
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 authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	ļ	<u> X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1), If			
Day	"Yes," enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	- N/ -
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
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)?	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2014?	1 <u>c</u>		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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?			
L	If "Yes," list the years  Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
U	(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		
^	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	The provisions of section 4-5-2(a)/2) are being applied to any of the years noted in 2a, not the years noted.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 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			1
	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		<u>X</u>
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	O DE	(2014)
	For	m 33	ひ・ピピ	170141

<u>orm</u> 9	190-PF (2014)		04-67	85966		Page 6
Part	t VII-B Statements Regarding Activities f	or Which Form	4720 May Be Red	uired (continued)		
5a	During the year did the foundation pay or incur any amo					
	(1) Carry on propaganda, or otherwise attempt to influe		on 4945(e))?	Yes X N	0	1
	(2) Influence the outcome of any specific public ele	•				
	directly or indirectly, any voter registration drive?		*		.	ł
	(3) Provide a grant to an individual for travel, study, or o				- 1 1	ļ
	(4) Provide a grant to an organization other than a				_	Ì
	section 4945(d)(4)(A)? (see instructions)			1 37 34		-
	(5) Provide for any purpose other than religious, ch				~	
				1 1 - 1 37 -	_	
L	purposes, or for the prevention of cruelty to children If any answer is "Yes" to 5a(1)-(5), did any of the			• — • • • • • • • • • • • • • • • • • •	- 1 I	
ь					. 5b	X
	Regulations section 53.4945 or in a current notice regar	_		_	· -   30 + -	<del>- -^-</del>
	Organizations relying on a current notice regarding disas				`	
C	If the answer is "Yes" to question 5a(4), does the					1
	because it maintained expenditure responsibility for the	grant?SIMI.	14	. X Yes N	°	İ
	If "Yes," attach the statement required by Regulations sec	tion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	•			)	
	on a personal benefit contract?			Yes X N	- I . I	
þ	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contra	oct <sup>7</sup>	· 66	X_
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a pa					
Part	Information About Officers, Director and Contractors	rs, Trustees, Fol	indation Manager	s, Highly Paid Em	pioyees,	
1	List all officers, directors, trustees, foundation ma	anagers and their	compensation (see	instructions).		
		7. (				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e) Expense ac	
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to	(e) Expense ac other allows	
		hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
EE	(a) Name and address STATEMENT 15	(b) Little, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans		
EE		(b) Ititle, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
EE		(b) Ititle, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
EE		(b) Ititle, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
EE		(b) Ititle, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
EE		(b) Ititle, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans		
	STATEMENT 15	haurs per week devoted to position	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation	other allowa	nces
	STATEMENT 15  Compensation of five highest-paid employees	haurs per week devoted to position	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation	other allowa	nces
	STATEMENT 15	hours per week devoted to position	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation	other allowa	nces
2	STATEMENT 15  Compensation of five highest-paid employees	(other than those hours per week	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction (d) Contributions to employee benefit	ons). If none	o, enter
2	STATEMENT 15  Compensation of five highest-paid employees "NONE,"	hours per week devoted to position  (other than those (b) Title, and average	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction (d) Contributions to	ons). If none	o, enter
2	STATEMENT 15  Compensation of five highest-paid employees "NONE,"	(other than those hours per week	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation  1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If none	o, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(If not paid, enter -0-).  35,401.	(d) Contributions to employee benefit plans and deferred compensation  1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If none	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter
2 (a)	STATEMENT 15  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(other than those hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  e 1 - see instruction  (d) Contributions to employee benefit plans and deferred compensation	ons). If none  (e) Expense ac other allowa	e, enter

NONE Form **990-PF** (2014)

Total number of other employees paid over \$50,000 . . . . . . .

Form 990-PF (2014)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
Total number of others receiving over \$50,000 for professional services	NONE
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 NONE	
2	
3	
4	
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 <u>NONE</u>	
2	
All other program-related investments. See instructions.  3 NONE	

Form 990-PF (2014)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1	
а	Average monthly fair market value of securities	1a	3,459,206.
b	Average of monthly cash balances	1b	125,124.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	3,584,330.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	, ,	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	3,584,330.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
-	instructions)	4	53,765.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,530,565.
6	Minimum investment return. Enter 5% of line 5	6	176,528.
Part		dations	
1	Minimum investment return from Part X, line 6	1	176,528.
	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	5,267.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	171,261.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	171,261.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	┝┻┝╌	
,	· ·	7	171,261.
	line 1		1/1,201.
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	135,446.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	135,446.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	135,446.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2014)

	1990-PF (2014)	-4i - m - N	<del></del>	<del></del>	Page 9
Pa	rt XIII Undistributed Income (see instruc			<del>- ,</del>	
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d</b> ) 2014
	line 7 ,				<u> 171,261.</u>
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			116,064.	
b	Total for prior years. 20,20,20		NONE		
3	Excess distributions carryover, if any, to 2014.	Ì		1	
а	From 2009 NONE				
b	From 2010 NONE				
c	From 2011 NONE			1	
d	From 2012 NONE				
е	From 2013 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2014 from Part XII,	}			
	line 4 <sup>.</sup> ▶ \$135,446				
а	Applied to 2013, but not more than line 2a			116,064.	
h	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2014 distributable amount				19,382.
	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2014	NONE			NONE
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).) Enter the net total of each column as	İ		1	
6	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONB			
	Prior years' undistributed income. Subtract				
U	line 4b from line 2b		NONE		
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	}	NONE	}	
	· · ·				
a	Subtract line 6c from line 6b. Taxable amount - see instructions		NONE	1	
е	Undistributed income for 2013. Subtract line				
	4a from line 2a. Taxable amount - see				
	msauctions				
f	Undistributed income for 2014. Subtract lines			1	
	4d and 5 from line 1. This amount must be				151,879.
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)	NONB			
8	Excess distributions carryover from 2009 not				<del></del>
٥	applied on line 5 or line 7 (see instructions)	NONE			
	Excess distributions carryover to 2015.			· <del></del>	· · · · · · · · · · · · · · · · · · ·
9	Subtract lines 7 and 8 from line 6a	NONB			
10	Analysis of line 9:				
a	Excess from 2010 NONE				
a b	Excess from 2011 NONE				
6	Excess from 2012 NONE				
d	Excess from 2013 NONE				
	Excess from 2014 NONE				
	EXCOSS NOME ZOTA	L			Form <b>990-PF</b> (2014)

c Any submission deadlines:

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

JSA 4E1490 1.000

Form 990-PF (2014)				Page 11
Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for I	uture Payment	<del></del>
None and address (house as business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		<del> </del>
a Fala during the year				
SEE ATTACHED		1		
	NONE	SEE ATTACH	SEE ATTACHED	120,000.
			1	
		1	Ì	
		1		
		1		
		1		
		1	{	
		1		
	1			
		1		
	1			
	1			
			}	
		1		
	<u> </u>	<u> </u>	<u> </u>	<del> </del>
Total	· · · · · · · · · · · · · · · · · · ·	· · · · · ·		120,000.
<b>b</b> Approved for future payment				
		1		
			4	
	II.			
	ı.			
		1		
	1			
		-		
	1			
		Ì		
Total		<u> </u>		<del> </del>

Part XVI-	A Analysis of Income-Produ	cing Activ	vities			<u> </u>
Enter gross a	amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	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.)
_						1000 managnona.)
ь		ļ	<u> </u>			<del></del>
				-		
	and contracts from government agencies			<del> </del>		<del></del>
_	ship dues and assessments				-	
	n savings and temporary cash investments					
	s and interest from securities			14	78,876.	
	al income or (loss) from real estate:					
a Debt-	financed property					
	ebt-financed property					
	income or (loss) from personal property					
	vestment income					
	oss) from sales of assets other than inventory			18	210,019.	
	me or (loss) from special events					<del> </del>
	ofit or (loss) from sales of inventory.					
-	venue: a		<del> </del>	<del> </del>	· · · · · · · · · · · · · · · · · · ·	
		<del></del> -		<del>   </del>		
				<del></del>		<del></del>
			<del> </del>	+		<del></del>
e	Add columns (b), (d), and (e)			+	288,895.	<del></del>
			L	<u></u>		288,895.
	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu					200,093.
Part XVI-I			complishment of Fy	vemnt Purne	1686	
					<del></del>	<del></del>
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purposes	). (See instructions.)
				<del></del>		<del></del>
			<del></del>	····		<del> </del>
				<del></del>		
						<del></del>
				<del> </del>		
	<u> </u>					<del> </del>
						<del> </del>
		<u></u>				<del> </del>
			NOT APPLICABI	LE		
					·	
					···	
			<del></del>			
			· · · · · · · · · · · · · · · · · · ·			
	<del> </del>			<u>.</u>		<del> </del>
					<del> </del>	····
		<del></del>				<del></del>
<del></del> -						

Part >	(VII	Information R Exempt Organ		isters to and tran	sactions ai	nd Relation	ships With Nonc	:naritab	le
1 D	id the	<del></del>		ngage in any of the fol	lowing with a	iny other orga	nization described	Yes	s No
				ection 501(c)(3) organi					
0	rganiz	ations?							
a T	ransfe	ers from the reporting	g foundation to a	noncharitable exempt	organization o	of:			
(1	I) Cas	h						1a(1)	X
(2	2) Oth	er assets						1a(2)	X
		ransactions:							
(1	I) Sale	es of assets to a non-	charitable exemp	t organization				16(1)	X
				exempt organization.				1b(2)	X
				ssets				1b(3)	X
								1b(4)	<u> X</u>
								1b(5)	<u> </u>
				or fundraising solicitati			· ·		<u> X</u>
	-		_	, other assets, or paid e					X
		•		" complete the follow	-		•		
				es given by the reporti					
				ment, show in column					
(a) Line	no.	(b) Amount involved	(c) Name of nor	ncharitable exempt organization	on (d) De	scription of trans	fers, transactions, and shar	ing arrangen	nents
				··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··					
	<del></del>								
				<del></del>					
							<del></del>		
			<del></del>						
			<u> </u>						
						<del></del>			
		<del></del>	<del></del>						
		<del> </del>							
				<del></del> <del>.</del>		<del></del>	<del></del>		
	-					<del></del>			
					<del></del>		<del></del>		<del></del>
		· · · · · · · · · · · · · · · · · · ·		<del></del>	<del>-  </del>	··	<del></del>		
20 10		facindation dispatic	L	iated with, or related			t organizations		
		•	•	er than section 501(c)(				7 Van [	X No
		ea in section 50 i(c) "complete the follov		er than section 50 i/c/(	on in secur	)II 52/1		res _	_V 140
<b>D</b> 11	res,	(a) Name of organization		(b) Type of organiza	ation	<del></del>	(c) Description of relations	thin.	
		(a) Name of organization	<del>"</del>	(b) Type of organiza	3000		(a) Boddinphon or relations	р	
		<del> </del>							
		<del></del>							
		<del></del>							
	Under	penalties of perjury, I decla	ire that I have examine	d this return, including accompa	nying schedules an	d statements, and	to the best of my knowledg	e and belief,	it is true,
	correct	, and complete Declaration of	preparer (other than tax)	payer) is based on all information of	of which preparer has	s any knowledge	F		
Sign	Da	Kum 1 9h	in	06/11/2015	SVP	Tax	1 '	discuss thi	
Here	Sign	ature of officer or trustee		Date Date	Title		(see instruction		
	1	NK OF AMERICA	., N.A.				البيسينيا		
		Print/Type preparer's na		Preparer's signature		Date	Check of P	TIN	
Paid						}	self-employed		
Prepa	rer	Firm's name		<u> </u>			Firm's EIN		
Use C	_	Firm's address			·········	····			
	,						Phone no.		
				<del></del>				m 990-PF	(2014)

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

# Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990 Name of the organization Employer identification number

_			1
HENRY BROOKS TRUST	С		04-6785966
Organization type (check o	ne):		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated	as a private fou	ndation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a	a private foundat	ion
	501(c)(3) taxable private foundation		
nstructions. General Rule			
	n filing Form 990, 990-EZ, or 990-PF that received, during the		
contributor's total	or property) from any one contributor. Complete Parts I and I contributions.	ii. See msiruction	is for determining a
Special Rules			
regulations under 13, 16a, or 16b, a	n described in section 501(c)(3) filing Form 990 or 990-EZ the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule nd that received from any one contributor, during the year, to of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 99	e A (Form 990 o tal contributions	or 990-EZ), Part II, line of the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 og the year, total contributions of more than \$1,000 exclusively onal purposes, or the prevention of cruelty to children or anim	for religious, ch	arıtable, scientific,
contributor, during contributions total during the year fo <b>General Rule</b> app	n described in section 501(c)(7), (8), or (10) filing Form 990 og the year, contributions exclusivelyfor religious, charitable, etced more than \$1,000. If this box is checked, enter here the tor an exclusivelyreligious, charitable, etc., purpose. Do not comies to this organization because it received nonexclusivelyreliged more during the year	c., purposes, but otal contributions oplete any of the gious, charitable	t no such that were received parts unless the , etc., contributions
	at is not covered by the General Rule and/or the Special Rules		

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)

Name of organization Employer identification number HENRY BROOKS TRUST C 04-6785966

Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1-	PROVIDENCE, RI 02901-1802	\$708,917.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

HENRY BROOKS TRUST C

04-6785966

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is nee	eded.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	VARIOUS SECURITIES	\$693,153.	03/27/2014
(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
<b></b>		\$	
(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
		\$	

₹,

04-6785966

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

NET INVESTMENT INCOME	1,402.	16,154.		24,715.	71.		71.	5,032.	28,817.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	76,262.	
REVENUE AND EXPENSES PER BOOKS	1,402.	16,154.	2,626.	24,715.	71.	-12.	71.	5,032.	28,817.	1 1 1 1 1 1 1 1 1 1 1	78,876.	
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS	FOREIGN DIVIDENDS	NONDIVIDEND DISTRIBUTIONS	DOMESTIC DIVIDENDS	OTHER INTEREST	NON-TAXABLE FOREIGN INCOME	NONDISTRIBUTIVE DIVIDENDS	NONQUALIFIED FOREIGN DIVIDENDS	NONQUALIFIED DOMESTIC DIVIDENDS		TOTAL	

~

04-6785966

FORM 990PF, PART I - OTHER INCOME

DESCRIPTION

PARTNERSHIP INCOME

NET INVESTMENT INCOME REVENUE AND EXPENSES PER BOOKS

-45.

-45.

TOTALS

FK6990 L775 06/11/2015 09:29:45

٠,

ļ

STATEMENT

FEES	1111
CCOUNTING	
Ø	ļ
ι	į
	ļ
Н	ŀ
PART	
	•
_	ŧ
Į.	1
PF,	1
0PF,	1
90PF,	
990PF,	
4 990	
066 M	
4 990	

CHARITABLE PURPOSES	1,250.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	1,250.  1,250.
	BOA TOTALS
DESCRIPTION	TAX PREPARATION FEE -

04-6785966

- TAXES	
Н	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	288. 578. 458.	1,324.
REVENUE AND EXPENSES PER BOOKS	288. 100. 3,500. 578. 458.	4,924.
DESCRIPTION	FOREIGN TAXES EXCISE TAX - PRIOR YEAR EXCISE TAX ESTIMATES FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

2

FORM 990PF, PART I - OTHER EXPENSES

٠,

CHARITABLE PURPOSES	35.	35.
NET INVESTMENT INCOME	9. 311.	320.
REVENUE AND EXPENSES PER BOOKS	35. 9.	44.
		TOTALS
DESCRIPTION	OTHER CHARITABLE EXPENSES OTHER INVESTMENT FEE PARTNERSHIP EXPENSES	

9

- CORPORATE STOCK FORM 990PF, PART II

HENRY BROOKS TRUST C

DESCRIPTION	ING ALUE  1,30	ENDING BOOK VALUE	ENDING FMV  13,823.
MACI BAFE CORE S&P   ARES CORE	04,034. 25,532. 25,595.	4,69 1,72	3,65 0,95
MSCI P WILSHI	10,04 37,45	10,048. 45,953.	9,
VANGUARD FTSE EMERGI VANGUARD REIT ETF	5,94 9.78	7,57 1.72	5,08 1,44
PETE TNC CO	12,04 13,89	16,33 13,89	18,97 24 85
N PET	7,72		2
NATIONAL OILWELL VAR	, 72	, 32	1,79
OCCIDENTAL PETE CORP	6,01	7	13,704.
KOIAL DOICH SHELL FL SCHIIMBERGER ITT COM	, 50 9	, LO	5, 19
DOW CHEM CO COM	1,31	5,48	4,62
TINTO PLC SPONSO	2,30	6,74	5,66
Σ	06'0	4,74	6,65
TYCO INTL LTD NEW F	5,81		
	, 60	14,310.	23,444.
ELL INTL	5,95	0,64	2,97
	8,42		
UNITED TECHNOLOGIES	,29	5	9
AMAZON COM INC COM	90,	6,908.	7,06
≥	,31	00,	4,37
DISH NETWORK CORP CO	60′		
LOWES COS INC COM	87	6,25	5,77
P COM	2,37	16,963.	17,335.
STARWOOD HOTELS & RE	,92	2,10	5,40

. HENRY BROOKS TRUST C

04-6785966

PART II - CORPORATE STOCK FORM 990PF,

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
		# † † † † † † † † † † † † † † † † † † †	1
872540109 TJX COS INC NEW COM	, 26	, 91	3,26
V Э	,71	2,95	3,96
22160K105 COSTCO WHSL CORP NEW	88	1,84	2,68
	, 54	0,60	1,81
713448108 PEPSICO INC COM	7,36	0,63	1,20
718172109 PHILIP MORRIS INTL I	12,097.	14,707.	30,544.
	3,64	5,37	3,24
018490102 ALLERGAN INC COM	69,		
	0,41	4,29	2,41
	, 03	18,998.	29,211.
375558103 GILEAD SCIENCES INC	60,	98	0,16
478160104 JOHNSON & JOHNSON CO	, 12	,38	1,37
58155Q103 MCKESSON CORP COM	, 75	, 07	8,02
	, 59	,91	3,17
92532F100 VERTEX PHARMACEUTICA	,45		
	4,54		
172967424 CITIGROUP INC NEW CO	, 29	5,14	2,73
	4,08	19,731.	
	6,48	9,83	3,79
693475105 PNC FINL SVCS GROUP	3,68		
	,72	, 18	5,88
	, 56	6,55	3,16
G1151C101 ACCENTURE PLC CL A C	,83	90'	0,09
Y0486S104 AVAGO TECHNOLOGIES L	,38	9,784.	28,668.
037833100 APPLE INC COM	0,10	, 70	0,35
_	07		
	0,25	1,05	2,26
	8,88	12,025.	12,908.
38259P508 GOOGLE INC CL A COM	, 78	0,34	8,57

4,

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
459200101 INTERNATIONAL BUSINE		6,295.	12,033.
4918104	5,82	5,84	2,05
8389X105	3,34	90,6	5,858
	ν. 7. Σ	19,866.	26,016. 30,173.
2857W209	7,91	)	1
48356102	,31		,662
16851109	7,24	9,44	20,602
66001864 IVY ASSET STRAT	00'0	74	7,57
97199409 COLUMBIA ACORN FUNI	26'9	3,501	08,860
9765N567 COLUMBIA SMALL CAP	9,18		
9765P596 COLUMBIA SMALL C	6,57		
93390841 PIMCO	6,72	36,586.	36,151.
750027	80,00	 	(
19765N468 COLUMBIA INTERMEDIAT	α 20, α	278,879.	298,071.
97199813	22,23	36.274.	41.277.
9765Y852	5,00	1	1
02993993 MID CAP V	7,74	3,66	5,954
		74,92	437
3935S105 POWERSH		3,70	2,19
		,38	761
		8,369.	553
		α	7
		, 04	,158
07818108		,36	, 339
8259P706 GOOGLE INC COM		31	$^{\circ}$
		0,37	,210

ω

STATEMENT

HENRY BROOKS TRUST C

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	END ING FMV
			I I I
19765P232 COLUMBIA MID CAP GRO		14,451.	23,426.
		15,248.	19,687.
38145C646 GOLDMAN SACHS STRATE		280,000.	275,445.
		10,000.	11,148.
		73,954.	75,186.
29099J109 EMERGING MARKETS STO		74,495.	70,687.
303995997 SMALL CAP VALUE CTF		74,406.	74,310.
99Z466197 INTERNATIONAL FOCUSE		225,325.	217,883.
	1		
TOTALS	LS 2,088,090.	2,921,824.	3,528,476.
		H H H H H H H H H	II II II II II II II II II II II

σ

STATEMENT

09:29:45
/2015
/11
90
L775
FK6990

	BEGINNING	BOOK VALUE	24,977.	24,977.
STMENTS =======	COST/ FMV		i U	TOTALS ==
FORM 990PF, PART II - OTHER INVESTMENTS		DESCRIPTION	73935S105 POWERSHARES DB COMMO	

4,

04-6785966

HENRY BROOKS TRUST C

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

DESCRIPTION AMOUNT

INCOME ADJUSTMENT 4,217.
PARTNERSHIP TRANSACTION ADJUSTMENT 27,652.

TOTAL 31,869.

SECURITIES ADJUSTMENT

FORM 990PF, PART	'III - OTHER E	DECREASES IN NET	WORTH OR FUND	BALANCES
DESCRIPTION				AMOUNT
ROUNDING CTF ADJUSTMENT				1. 3,584.

TOTAL

5,048.

1,463.

\_\_\_\_\_

GAINS AND LOSSES FROM PASS-THRU ENTITIES \_\_\_\_\_\_\_

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-243.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-243.00 

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

9,775.00

PARTNERSHIPS, TRUSTS, S CORPORATIONS

-27,652.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-17,877.00 =========

STATEMENT 13

HENRY BROOKS TRUST C

04-6785966

FORM 990PF, PART VII-B, LN 5(c) EXPENDITURE RESPONSIBILITY STATEMENT

NAME

SEE ATTACHED STATEMENT

# Danvers A DI C. LOUGH DEFYICES 35 Elm Street Danvers, MA 01923-2835

NAME OF TRUST: HENRY BROOKS TRUST C ACCOUNT #: To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for Knights of Columbus Danvers MA for the period funds") received by Knights of Columbus Danvers MA. We certify that the funds have been used of January 1, 2014 through December 31, 2014 for a distribution totaling \$12,000 ("distributed exclusively for the charitable purposes set forth in the trust distribution agreement letter. Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following

carrying on propaganda or attempting to influence legislation,

->

influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,

 (iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or

(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal further certify that Knights of Columbus Danvers MA has not diverted any portion of the distributed foregoing statements, including the attached Expenditure Responsibility Report, and they are true, year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the correct and complete, to the best of my knowledge.

Telephone Number:

<u>I</u>ts

By:

Date:

q01.703111 vsM

5111115 Date of report: Report period: January 1, 2014 through December 31, 2014

Name and address of organization:

このないのべ

Amounts and dates of distributions received during the period of January 1, 2014 through December 31,

Amount Date \$12,000 09/09/14 Describe the uses of the distributed funds. Attach additional pages, if needed:

->

Itemize all amounts spent from the distributed funds including salaries, travel and supplies (attach additional pages, if needed):

Amount Date <u>2</u>

By:

Date:

q11.703111 VBM

organization all agreements, representations, receipts, reports and other instruments of every kind.

ACCEPTED AND AGREED TO:

KNIGHTS OF COLUMBUS DANVERS MA

Board Chair (sign

->

K of C 1505 Elm Club

qff.703fff ysM

Youth Services 2014	\$ 2014			
DATE	CHECK	RECIPIENT	AMOUNT	COMMENT
21-Jan	350	DHS Boys B Ball	1,000.00	Donation
20-Feb	351	Danvers Girls Softball	250.00	Team Sponsor
20-Feb	352	Danvers Babe Ruth	300.00	Team Sponsor
6-Mar	353	Danvers Youth Lacrose	250.00	Donation
8-Арг	354	DHS Baseball	125.00	Ad Book
9-Apr	1 355 1	DHS Proj Grad	495.00	Donation
17-Apr	357	Danvers Deca	1,000 00	Donation
29-May	356	DHS Baseball	1,000.00	Donation
6-Jun	358	Academy Theatre	100.00	Ad Book
17-Jun	329	DHS Golf Boosters	. 600.00	Tournament
16-Jun	360	Danvers Youth Football	250.00	Donation
1-Jul	. 361	Danvers Legion 180	500.00	Baseball Team
15-Jul	362	Danvers PME Golf	600.00	DHS Band
1-Aug	363	Stonehill College	1,200.00	Scholarship
28-Aug	364	U Mass Lowell	1,200.00	Scholarship
15-Sep	365	Danvers Police Dare	640,00	Golf Tourn - DARE Fund
11-Sep	366	DHS Football Boosters	100.001	Ad Book
25-Nov	367	PME ad book	150.00	DHS Band
25-Nov	368	DHS Hockey Boosters	100.00	Ad Book
18-Nov	369	Danvers Youth Hockey	300,000	Sponsor
16-Dec	370	Friends of BHS Hockey	100.00	DHS Girls Hockey Ad
	<u> </u>	2014 Donations	\$10,260,00	
		2014 Trust Fund Dost, 10/2/14	\$12,000.00	

May 11 15 07:11p K of C 1505 Elm Club

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

OFFICER NAME:

VIRGINIA A KAVANAUGH

ADDRESS:

89 PICKERING ST

DANVERS, MA 01923

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION .....

5,057.

OFFICER NAME:

BANK OF AMERICA

ADDRESS:

100 FEDERAL STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION ..... 30,344.

COMPENSATION EXPLANATION:

SEE FOOTNOTE

TOTAL COMPENSATION:

35,401.

=========

### FEDERAL FOOTNOTES

THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR TIME SPENT BY THE TRUSTEE; RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES.

# HENRY BROOKS TRUST C 04-6785966 Balance Sheet 12/31/2014



Cusip	Asset	Units	Basis	Market Value
	Cash/Cash Equivalent	171009 770	171,009 77	171,009.77
023135106	AMAZON COM INC	55.000	6,907 53	17,069.25
032511107	ANADARKO PETE CORP	230.000	16,338.26	18,975.00
037833100	APPLE INC	275.000	7,707.67	30,354.50
125509109	CIGNA CORP	315.000	14,295 47	32,416.65
13057Q107	CALIFORNIA RESOURCES CORP	68.000	283.75	374 68
172967424	CITIGROUP INC	605 000	15,141.14	32,736.55
197199409	COLUMBIA ACORN FUND	3407.210	83,501.12	108,860.36
197199813	COLUMBIA ACORN INTERNATIONAL	989 145	36,274.07	41,277.02
19765N468	COLUMBIA INTERMEDIATE BOND	32399.014	278,879.10	298,070.93
19765P232	COLUMBIA MID CAP GROWTH FUND	810.040	14,451.12	23,426.36
19765Y688	COLUMBIA SELECT LARGE CAP	1104.140	15,248.17	19,686.82
207543877	SMALL CAP GROWTH LEADERS CTF	3458.776	73,953.59	75,186 18
22160K105	COSTCO WHSL CORP NEW	160 000	11,844.44	22,680.00
254687106	DISNEY WALT CO	365.000	11,999 58	34,379.35
260543103	DOW CHEM CO	540.000	15,483 38	24,629.40
268648102	EMC CORP	1085.000	11,055.95	32,267.90
26875P101	EOG RES INC	270.000	13,899.19	24,858.90
278642103	EBAY INC	230.000	12,025.16	12,907.60
29099J109	EMERGING MARKETS STOCK	1540.490	74,495.46	70,686.77
30219G108	EXPRESS SCRIPTS HLDG CO	345.000	18,997 51	29,211.15
302993993	MID CAP VALUE CTF	3866.155	103,666.35	115,953.72
303995997	SMALL CAP VALUE CTF	3057 340	74,405.95	74,310 48
31428X106	FEDEX CORP	135 000	14,310.19	23,444.10
375558103	GILEAD SCIENCES INC	320 000	5,983 42	30,163.20
38141G104	GOLDMAN SACHS GROUP INC	155.000	19,731.17	30,043.65
38145C646	GOLDMAN SACHS STRATEGIC	26794.258	280,000.00	275,444.97
38259P508	GOOGLE INC	35.000	10,347.73	18,573.10
38259P706	GOOGLE INC	35.000	10,314.67	18,424.00
411511306	HARBOR INTERNATIONAL FUND	172.087	10,000.00	11,147 80
438516106	HONEYWELL INTL INC	330.000	20,644.72	32,973.60
459200101	INTERNATIONAL BUSINESS MACHS	75.000	6,294.96	12,033.00
464286772	ISHARES MSCI SOUTH KOREA	250 000	11,309.33	13,822.50
464287465	ISHARES MSCI EAFE ETF	1375.000	64,693.75	83,655.00

# HENRY BROOKS TRUST C 04-6785966 Balance Sheet 12/31/2014



Cusip	Asset	Units	Basis	Market Value
464287507	ISHARES CORE S&P MID CAP ETF	490 000	61,723.65	70,952.00
464287655	ISHARES RUSSELL 2000 ETF	639.000	74,928.12	76,437.18
46429B606	ISHARES MSCI POLAND CAPPED ETF	375.000	10,047.64	9,026.25
466001864	IVY ASSET STRATEGY FUND	5344.825	155,741.00	137,575.80
46625H100	J P MORGAN CHASE & CO	540.000	19,837.37	33,793.20
478160104	JOHNSON & JOHNSON	300.000	20,387.06	31,371.00
518439104	LAUDER ESTEE COS INC	155.000	10,602.87	11,811.00
548661107	LOWES COS INC	520.000	16,252.24	35,776.00
580135101	MCDONALDS CORP	185 000	16,963.16	17,334 50
58155Q103	MCKESSON CORP	135.000	5,072.84	28,023.30
594918104	MICROSOFT CORP	690.000	15,842.36	32,050.50
637071101	NATIONAL OILWELL VARCO INC	180 000	9,327.70	11,795.40
67011P100	NOW INC	45 000	1,048.88	1,157.85
674599105	OCCIDENTAL PETE CORP DEL	170.000	7,858.63	13,703.70
68389X105	ORACLE CORP	575 000	19,090.41	25,857.75
693390841	PIMCO HIGH YIELD FD	3955 282	36,586.36	36,151.28
713448108	PEPSICO INC	330.000	20,629.95	31,204.80
718172109	PHILIP MORRIS INTL INC	375.000	14,707.24	30,543.75
73935\$105	POWERSHARES DB COMMODITY	7165.000	163,708.13	132,194.25
74144T108	PRICE T ROWE GROUP INC	185.000	9,187.75	15,884.10
742718109	PROCTER & GAMBLE CO	365.000	25,378.34	33,247.85
747525103	QUALCOMM INC	350.000	19,866.02	26,015.50
748356102	QUESTAR CORP	580.000	8,645.23	14,662.40
767204100	RIO TINTO PLC	340.000	16,739 68	15,660.40
780259206	ROYAL DUTCH SHELL PLC	346.000	25,154.00	23,164.70
78463X863	SPDR DJ WILSHIRE INTL REAL	1070.000	45,952.87	44,479.90
806857108	SCHLUMBERGER LTD	295.000	18,911.68	25,195.95
816851109	SEMPRA ENERGY	185.000	9,446 38	20,601.60
85590A401	STARWOOD HOTELS & RESORTS	190.000	12,107 82	15,403.30
872540109	TJX COS INC NEW	485.000	9,919.07	33,261.30
883556102	THERMO FISHER SCIENTIFIC CORP	185.000	8,916.36	23,178.65
907818108	UNION PAC CORP	70 000	5,363.23	8,339 10
911717106	UNITED STS COMMODITY INDEX FUND	140.000	8,380.40	6,760.60
913017109	UNITED TECHNOLOGIES CORP	295.000	9,592.67	33,925.00

# HENRY BROOKS TRUST C 04-6785966 Balance Sheet 12/31/2014



Cusip	Asset	Units	Basis	Market Value
918204108	V F CORP	320.000	12,950.53	23,968.00
922042858	VANGUARD FTSE EMERGING MKTS	4125.000	157,576.36	165,082.50
922908553	VANGUARD REIT	2240 000	151,723.42	181,440.00
92343V104	VERIZON COMMUNICATIONS INC	645.000	23,957.97	30,173.10
92857W308	VODAFONE GROUP PLC NEW	211 000	10,373.26	7,209.87
949746101	WELLS FARGO & CO	605 000	16,559.36	33,166.10
97717W281	WISDOMTREE EMERGING MKTS	175 000	8,369.29	7,553.00
99Z466197	INTERNATIONAL FOCUSED EQUITY	18898.034	225,324.96	217,882.99
G1151C101	ACCENTURE PLC	225 000	12,061.98	20,094.75
G29183103	EATON CORP PLC	245.000	14,745.31	16,650.20
Y0486S104	AVAGO TECHNOLOGIES LTD	285.000	9,783.65	28,668.15
		Totals:	3,092,836.87	3,699,482 77

Posting Date   Amount   Distribution	Distribution	Relationship to substantial contributor	Purpose	Foundation Status of Recipient
8/18/2014 -2400	-2400 SALEM STATE UNIVERSITY	NONE	SCHOLARSHIP	PC
8/18/2014 -2400	-2400 SAINT MICHAEL'S COLLEGE	NONE	SCHOLARSHIP	PC
8/18/2014 -2400	-2400 SALEM STATE UNIVERSITY	NONE	SCHOLARSHIP	PC
8/18/2014 -2400	-2400 SALEM STATE UNIVERSITY	NONE	SCHOLARSHIP	PC
8/18/2014 -2400	-2400 NORTH SHORE COMMUNITY COLLEGE	NONE	SCHOLARSHIP	PC
9/9/2014 -12000	9/9/2014 -12000 AMERICAN CANCER SOCIETY INC	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
9/9/2014 -12000	9/9/2014 -12000 AMERICAN HEART ASSOCIATION	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
9/9/2014 -12000	9/9/2014 -12000 AMERICAN RED CROSS OF MASS BAY	NONE	UNRESTRICTED GENERAL SUPPORT PC	PC
9/9/2014 -12000	-12000 CARROLL CENTER	NONE	UNRESTRICTED GENERAL SUPPORT PC	PC
9/9/2014 -12000	9/9/2014 -12000 DISCALCED CARMELITE NUNS DANVERS	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
9/9/2014 -12000	9/9/2014 -12000 KNIGHTS OF COLUMBUS DANVERS MA	NONE	UNRESTRICTED GENERAL SUPPORT	EOF
9/9/2014 -12000	9/9/2014 -12000 MARYKNOLL FATHERS & BROTHERS	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
9/9/2014 -12000	9/9/2014 -12000 ST MARY OF THE ANNUNCIATION SCHO	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
9/9/2014 -12000	9/9/2014 -12000 THE SALVATION ARMY	NONE	UNRESTRICTED GENERAL SUPPORT   PC	PC
TOTAL -120000				

٠,

# Form **8868**

(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-170

Department of t		► File a ► Information about Form 88	separate ap 68 and its i	plication for each return.	aov/form8868.	OMB NO. 1545-1709
		Automatic 3-Month Extension,				
		Additional (Not Automatic) 3-Mg				
		unless you have already been gran		•		
Electronic fi	iling <i>(afil</i> a)	You can electronically file Form	8868 if vo	u need a 3-month auto	omatic extension of tir	ne to file (6 months fo
		o file Form 990-T), or an addition	•			· ·
		ension of time to file any of the				
Return for	Transfers A	ssociated With Certain Persona	l Benefit (	Contracts, which mus	t be sent to the IRS	in paper format (se
		letails on the electronic filing of th		<del> </del>		rities & Nonprofits.
Part I Au	tomatic 3-	Month Extension of Time. On	ly submit	original (no copies n	eeded).	
A corporation	n required t	o file Form 990-T and requesting	an automa	tic 6-month extension -	check this box and co	mplete
Part I only .						▶ ∟
All other cor	porations (ii	ncluding 1120-C filers), partnershi <sub>l</sub>	os, REMICs	, and trusts must use Fe	orm 7004 to request a	n extension of tıme
to file incom					Enter filer's Identify	ing number, see instruction
Tuna or	Name of ex	empt organization or other filer, see in	structions.	AUI	Employer identification i	number (EIN) or
Type or				( ) ( )		
print		BROOKS TRUST C			04-6	785966
File by the due date for	Number, str	eet, and room or suite no. If a P.O. box	c, see in	dons.	Social security number (	SSN)
filing your	filing your P O BOX 1802					
return. See instructions.	City, town o	r post office, state, and ZIP code. For	a foreign add	dress, see instructions.		
	PROVID:	ENCE, RI 02901-1802				
Enter the Re	turn code fo	or the return that this application i	s for (file a	separate application fo	r each return)	
Application Return Application Return					Return	
	Is For Code Is For					Code
Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07						
Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11						
Form 990-1 (sec. 401(a) or 408(a) trust)  Form 990-T (trust other than above)  06 Form 8870  12						
FORM 990-1	thust other	man above		1 0/111 0070		12
The book	s are in the	care of ▶ US_TRUST_FIDUCI	ARY_TAX	SERVICES		
Telephon	e No. ▶ _(ِ	388)866-3275	I	FAX No. ▶ <u>800-9</u>	<u>77-0692</u>	
<ul> <li>If the orga</li> </ul>	anization do	es not have an office or place of b	usiness in	the United States, chec	k this box	
<ul> <li>If this is fe</li> </ul>	or a Group F	eturn, enter the organization's for	ır digit Gro	up Exemption Number	(GEN)	. If this is
for the whol	e group, che	eck this box ▶ 🔙 . If	it is for pa	rt of the group, check t	his box $\dots$	and attach
		d EINs of all members the extension			a <u>.</u>	
1 I reque	st an autom	atic 3-month (6 months for a corp				
until		08/17 , 20 $15$ , to file the	exempt org	janization return for the	e organization named a	bove. The extension is
for the	organizatio	n's return for:				
$\triangleright X$	calendar ye	ar 20 <u>14</u> or				
<b>&gt;</b>	tax year be	ginning	, 20	, and ending		, 20
					<del></del>	
		red in line 1 is for less than 12 m	onths, chec	k reason: L Initial r	eturn Final retu	rn
	hange in ac	counting period				<del></del>
		is for Form 990-BL, 990-PF, 99	90-T, 4720	or 6069, enter the	tentative tax, less an	
		dits. See instructions.				3a \$ 5,267
		is for Form 990-PF, 990-T,				
		nents made. Include any prior yea				3b \$ 5,267
		ract line 3b from line 3a. Include		ent with this form, if re	quirea, by using EFTP	1 1
		Tax Payment System). See instru		(4)	Farm 045050 and 5	3c  \$
Caution. If yo	u are going to	make an electronic funds withdrawa	ı (airect deb	it) with this Form 8868, s	ee norm 8453-EO and Fol	m 8879-EU for payment

instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)