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Form 990-PF Department of the Treasury

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

Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www irs.gov/form990pf. For calendar year 2014 or tax year beginning 2014, and ending THE WARREN FOUNDATION INC. Name of foundation A Employer identification number C/O RHODES & O'NEILL 06-1467469 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (860) 798-2890 15 WHEDON LANE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending check here . . MADISON, CT 06443 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations check here. Final return Amended return 2 Foreign organizations meeting the 85% test check here and attach Address change Name change computation X | Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method | X Cash | Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . 89,569. 16) **►** \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in (b) Net investment (c) Adjusted net for charitable expenses per income income purposes books column (a) (see instructions)) (cash basis only) 5,879 Contributions gifts, grants, etc., received (attach schedule) , if the foundation is not required to Check 🕨 2 attach Sch B 3 Interest on savings and temporary cash investments. 30 30 ATCH 1 Dividends and interest from securities . . . 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain. Income modifications JOHN STREET د تر د له د Gross sales less returns and allowances . . . 12 m re 5 2 2 3 1 5 b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 5,909 30 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 2,250. 2,250 Accounting fees (attach schedule) AVM GANNEDS WAY Other professional fees (attach schedule) 17 Taxes (attach schedule) (see instructions).

Depreciation (attach is chedule) and depletion.

Occupancy (3). 18 19 20 21 Travel, conferences D 21 Printing and publication 1,545. 1,545 23 24 Other expenses (attach schedule) ATCH . 2 . Total operating and administrative expenses. 1,545 3,795 2,250. Add lines 13 through 23. be 外型第5世级的 高江 15. F. 24. T 39,850. 39,850. ō 25 Contributions, gifts, grants paid 43,645. 1,545. 42,100 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -37,736 Excess of revenue over expenses and disbursements . b Net investment income (if negative, enter -0-) 化学物品 c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions.

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-	art li	Rajanco Shoote	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
	artu	Dalance Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
	2		cash investments	75,824.		32,209
	3			, , , , , ,	2.00mm/2.5mm	-
]	Less allowance for doul	btful accounts	•] . ,
	4				是"是"是"是"的"大"。	v '2
		Less allowance for doub	otful accounts ▶	, `	, ,	
	5					
	6		officers, directors, trustees, and other			
	-		ach schedule) (see instructions)			
	7		eceivable (attach schedule)			
			otful accounts ►		-	
S	8		e		· · · · · · · · · · · · · · · · · · ·	
Assets	9		eferred charges		······································	
As	_		government obligations (attach schedule)			
			stock (attach schedule) ATCH 3		5.879.	57,360
	11 C	Investments - land, buildings	bonds (attach schedule)	1 5 1 C 10 MARK		546 (149) Walley
					्रिशे प्रविद्यति । ज्यो स्थितिकरीक्षेत्रके (१८ हे 	Partie is being the second
		(attach schedule)	tion >			
ı	12	Investments - mortgage I	oans			
-	13 14	Investments - otner (atta- Land, buildings, and equipment basis	cn schedule)	Marin Control of Recognition of the Wall	1 2 - 1 m 3 " m	
		equipment basis	uon >	The Property	े हैं के लिए हैं है कि	• ,
		(attach schedule)				
-)			
			completed by all filers - see the		20 000	00 500
4			age 1, item I)	75,024.	38,088.	89,569.
İ			ccrued expenses			
-					·- 	
Liabilities						
鬟			s, trustees, and other disqualified persons			
뼥			es payable (attach schedule)			
-	22	Other liabilities (describe)			- , * · · .
						•
4			s 17 through 22)	0	<u></u>	
1			ow SFAS 117, check here . ▶			
es		and complete lines 2	4 through 26 and lines 30 and 31.			
일		Unrestricted				
훘						
힏						
틧		Foundations that do i	not follow SFAS 117, ▶ 🔀			
딝		-	olete lines 27 through 31.			
2	27	Capital stock, trust princ	ipal, or current funds			
Se	28	Paid-in or capital surplus, or l	land, bldg , and equipment fund			
\s	29	Retained earnings, accumul	ated income, endowment, or other funds	75,824.	38,088.	
Net Assets or Fund Balanc			balances (see instructions)	75,824.	38,088.	
	31	Total liabilities and	net assets/fund balances (see			
			<u></u> 1	75,824.	38,088.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
			ges in Net Assets or Fund Balar			
1			alances at beginning of year - Part I			
	end-	of-year figure reported	d on prior year's return)		1	75,824.
		r amount from Part I, I			2	-37,736.
3	Othe	r increases not include	3			
		lines 1, 2, and 3			1 1	38,088.
5	Decr	eases not included in	line 2 (itemize) ▶		5	
6	_Tota	I net assets or fund ba	lances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 30 6	38,088.
						Form 990-PF (2014)

Page	

Part IV Capital Gain	s and Losses for Tax on Inv	estment Income			
	and describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold
	brick warehouse, or common stock, 200		P - Purchase D - Donation	acquired (mo , day, yr)	(mo , day, yr)
1a					
b					
C					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
а			ļ		
b			ļ		
С	 		 		
<u>d</u>			 	· · · · · · · · · · · · · · · · · · ·	
Complete only for asset) s showing gain in column (h) and owne	ed by the foundation on 12/31/69			
Complete only for asset	- 	 		Gains (Col (h) ga (k), but not less ti	
(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	001	Losses (from col	
3	 				
_a 			 		
c					
d					
е					
	(If	gain, also enter in Part I, line 7			
2 Capital gain net income	or (net capital loss)	(loss), enter -0- in Part I, line 7	2		
3 Net short-term capital g	ain or (loss) as defined in sections	1222(5) and (6) [.]			· <u>-</u>
If gain, also enter in F	Part I, line 8, column (c) (see inst	tructions). If (loss), enter -0- in $\}$			
Part I, line 8	<u> </u>	<u>.</u>	3	·	
Part V Qualification	Under Section 4940(e) for Red	duced Tax on Net Investment In	ncome	···	
	r the section 4942 tax on the distrib	- ·	ase period	٥	Yes X No
	not qualify under section 4940(e).		a ony ontr	<u> </u>	
1 Enter the appropriate at (a)	mount in each column for each yea		g any entr	es (d)	
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	,	Distribution raticol (b) divided by	
2013	85,150.	91,428.			0.931334
2012	28,175.	81,531.			0.345574
2011	17,751.	103,110.			0.172156
2010	42,754.	118,026.			0.362242
2009	36,288.	27,697.			1.310178
2 Total of line 1, column (d)		2	:	3.121484
	o for the 5-year base period - divid				
<u> </u>	indation has been in existence if les	The state of the s	3		0.624297
, , , , , , , , , , , , , , , , , , ,		·			
4 Enter the net value of no	oncharitable-use assets for 2014 fro	om Part X, line 5	4		73,778.
		}			
5 Multiply line 4 by line 3			5		46,059.
, , , , , ,					
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
	•	1			_
7 Add lines 5 and 6			7		46,059.
					40 700
8 Enter qualifying distribut	tions from Part XII, line 4		8		42,100.
	greater than line 7, check the box	in Part VI, line 1b, and complete t	hat part u	sing a 1% tax	rate See the
Part VI instructions					

Dа	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructions)
_	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	motraotions,
Ia	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check	0
-	here and enter 1% of Part I, line 27b	
_	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	
٠	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	0
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	0
6	Credits/Payments	-
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	
b	Exempt foreign organizations - tax withheld at source	
С	Tax paid with application for extension of time to file (Form 8868) 6c	
d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d	0
8	Enter any penalty for underpayment of estimated tax Check here If Form 2220 is attached 8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11	
Pai	t VII-A Statements Regarding Activities	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	- Yes No
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1
	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	1 4 -10:
	published or distributed by the foundation in connection with the activities.	1: 4 1:2
c	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	
	foundation managers 🕨 \$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities.	
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 X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b X
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	多相通过,海通内部
	conflict with the state law remain in the governing instrument?	6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	
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 X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1 3 35 FA
	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
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
	names and addresses	10 X

orm	990-PF(2014) THE WARREN FOUNDATION INC. 06	-146746	9	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
	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)		-	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disquare			
	person had advisory privileges? If "Yes," attach statement (see instructions)	i	1	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica		X	T
	Website address N/A			
14	CUDICHODURD MILLICAN	-798-28	90	
	Located at ▶15 WHEDON LANE MADISON, CT ZIP+4 ▶ 064	43		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	T
	and enter the amount of tax-exempt interest received or accrued during the year	1	•	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other au		Yes	No
	over a bank, securities, or other financial account in a foreign country?	- 1		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22		·	
	"Yes," enter the name of the foreign country) <i>'</i>
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	7, 7'	Yes	No
1 a	During the year did the foundation (either directly or indirectly)	12	, Sur	:
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X	No Se		-
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		No Pro	- N 2,	. 6
	1 1 150	No	7	· · ·
		No ,		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	,,		
	the benefit or use of a disqualified person)?		'	
	(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			r_
	termination of government service, if terminating within 90 days.)	No		-
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulat	l , .		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	12 m		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	that		ا الله المعلم
	were not corrected before the first day of the tax year beginning in 2014?	<u>1c</u>	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a pri	vate	3.50	27 - 34 , ^ - 3
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	المنافق المنافقة المن	1 5 5 5	,
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	7.36	36	5.5
	6e, Part XIII) for tax year(s) beginning before 2014? Yes X	No 🚉	(
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a	i)(2)		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	to a	4 -	٠ <u>١</u>
	all years listed, answer "No" and attach statement - see instructions.)	<u>2b</u>	HS CHECKING	m
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	25.23	的をイン	
	>	18.00 m	14.40	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1971 ° 347.
	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	j.		3
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by	1.)`´ = `	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	I		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if			•
	foundation had excess business holdings in 2014)		$\vdash \dashv$	-,-
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos	, ,	 	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	F		(), ₍₁₎
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20		<u></u> _	<u> </u>
		Form 99	U-PF	(2014)

Form	990-PF (2014) THE WARREN FO				-1467469 Page 6
Pa	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Re	quired (continued))
5 a	During the year did the foundation pay or incur any am (1) Carry on propaganda, or otherwise attempt to influ (2) Influence the outcome of any specific public el	uence legislation (secti	* **		No
	directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or			T. V.	
	(4) Provide a grant to an organization other than a	a charitable, etc., or	ganization described	" []. [v].	
	section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelly to children	charitable, scientific,	literary, or education	nal .	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e transactions fail to	qualify under the	exceptions described	in Service Control
	Regulations section 53 4945 or in a current notice rega	irding disaster assista	nce (see instructions)?	• • • • • • • • • •	. 5b
С	Organizations relying on a current notice regarding disa If the answer is "Yes" to question 5a(4), does the				
·	because it maintained expenditure responsibility for the		•		10
	If "Yes," attach the statement required by Regulations se	-			
6a	Did the foundation, during the year, receive any fu	•		ms Yes X	40
b	on a personal benefit contract?				6b X
	If "Yes" to 6b, file Form 8870.	,	•		1
7a	At any time during the tax year, was the foundation a p	party to a prohibited ta	x shelter transaction?.	. Yes X	lo
b	If "Yes," did the foundation receive any proceeds or ha				
Pa	t VIII Information About Officers, Directors	ors, Trustees, Fol	indation Manager	s, Highly Paid Em	ipioyees,
1	List all officers, directors, trustees, foundation i				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATC	H 4		(o
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see instruct	tions). If none, 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) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
- - -	NONE				
. -					
otal	number of other employees paid over \$50,000			· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2014)

Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 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 statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments See instructions 3 NONE

Form 990-PF (2014)

Total. Add lines 1 through 3

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COLL	990-PF (2014)		Page 0
Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	ign foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	9,560.
b	Average of monthly cash balances		65,342.
c	Fair market value of all other assets (see instructions)		<u></u>
4	Total (add lines 1a, b, and c)	1d	74,902.
e	Reduction claimed for blockage or other factors reported on lines 1a and	3 ² / = 1	
·	1c (attach detailed explanation)	Prof.	
2	Acquisition indebtedness applicable to line 1 assets	2	
2			74,902.
3	Subtract line 2 from line 1d		- 17,3021
4		.	1,124.
_	instructions)	4	73,778.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,689.
6	Minimum investment return. Enter 5% of line 5		3,009.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ ☐ and do not complete this part.)	ndations	
1	Minimum investment return from Part X, line 6	1	3,689.
2 a	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). 2b		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	1 1	3,689.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		3,689.
6	Deduction from distributable amount (see instructions).		
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	3,689.
5			
Part	XII 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	42,100.
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	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IPS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	42,100.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
•	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	42,100.
U	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	alouiding whether	inc roundation

Form 990-PF (2014)

Page 9

Ľ	art XIII Undistributed Income (see instr	uctions)			Ţ
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				3,689
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
b	Total for prior years 20 12 ,20 11 ,20 10		ļ		
3	Excess distributions carryover, if any, to 2014.	l`		-	
а	From 2009		.,	- , , , ,	
b	From 2010		<i>, :</i>	(** · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
С	From 2011 17,751.	Regulation of			
d					
e	1101112010	197,154			
. 1	Total of lines 3a through e	12 45 1 11 11 11 11 11 11 11 11 11 11			THE STATE OF THE S
4	Qualifying distributions for 2014 from Part XII, line 4 > \$ 42,100.				
_		是一个		사는 그 차를 달	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	Applied to 2013, but not more than line 2a	A STAN AND AND AND AND AND AND AND AND AND A			
b	Applied to undistributed income of prior years (Election required - see instructions)			[] [[] [] [] [] [] [] [] [] [
		i	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
С	Treated as distributions out of corpus (Election required - see instructions)	ĺ			在那些人的
А	Applied to 2014 distributable amount				3,689
	Remaining amount distributed out of corpus	38,411.		1-5- 1-5-	A-1-24-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same			-	, <u> </u>
6	amount must be shown in column (a).) Enter the net total of each column as indicated below:				-
9	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	235,565.			
	•			-	
D	Prior years' undistributed income. Subtract line 4b from line 2b	- () - ()		to the tenter	
С	Enter the amount of prior years' undistributed	The state of the s			
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed			[] 表现建筑的	
d	Subtract line 6c from line 6b Taxable			(1) 医水流流	
	amount - see instructions	AND THE SECOND OF SECOND			
е	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instructions	関す ぎょうこが イケ 難 ケーイ			
		Children States Mills		ु र ुदेश्री व	·
f	Undistributed income for 2014. Subtract lines	in the state of th			
	4d and 5 from line 1. This amount must be distributed in 2015			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
7	Amounts treated as distributions out of corpus	<u> </u>	1000 man 200		Arg in a little
•	to satisfy requirements imposed by section	i İ			MERCHANICAL STATES
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)		5. 公司的基础		经验证
8	Excess distributions carryover from 2009 not		TO THE REAL PROPERTY.	The state of the s	
	applied on line 5 or line 7 (see instructions)	36,203.		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover to 2015.	199,362.			,
	Subtract lines 7 and 8 from line 6a				<u> </u>
10	Analysis of line 9 Excess from 2010 38, 523.			j	
a	17 751		j		
٥	Excess from 2011		_	j	
d	Excess from 2012	- ,	11 171 = 1 7 gn	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	يانياء - بالنظر بدائرة أن يها أنها المهار مع التي دريع بالمريسة - أراث إن مع
	Excess from 2013	-	, .		ng namatan namatan namatan namatan namatan namatan namatan namatan namatan namatan namatan namatan namatan na Namatan namatan
<u> </u>					Form 990-PF(2014

Page **11**

Part XV Supplementary Information (c	continued)					
3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual show any relationship to	Foundation status of		Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7 11102111		
	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	39,850.		
Total			▶ 3a	39,850.		
Total			▶ 3b			

Page **12**

	me-Producing Activ	vities ated business income	Excluded by	section 512, 513, or 514	(e)
Enter gross amounts unless otherwise i	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
Program service revenue		,,	Example 1		(See instructions)
a b			 		
b	1		1	 	
d					
e					
f					
g Fees and contracts from governmen					
2 Membership dues and assessments					
3 Interest on savings and temporary cash in	nvestments		<u> </u>		
4 Dividends and interest from securities	es		14	30.	
5 Net rental income or (loss) from real	estate <u>共产工造</u>	THE THE PARTY OF THE PROPERTY OF	を認めてきつき	"不是我们的	14 3 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Debt-financed property					
b Not debt-financed property	, ,	 	 		
6 Net rental income or (loss) from personal			 	 	
7 Other investment income			 		
8 Gain or (loss) from sales of assets other to	han inventory				
9 Net income or (loss) from special eve	ents		 		
10 Gross profit or (loss) from sales of in	. , ,		 		
11 Other revenue a		 	 		
ь	1 1		 		
c	1				
d			 		
e 12 Subtotal Add columns (b), (d), and (THE PROPERTY OF			30.	
13 Total. Add line 12, columns (b), (d),	e) <u>[25-25:23///2972]</u>				30.
· · · · · · · · · · · · · · · · · · ·		income is reported in purposes (other than b			
					· · · · · · · · · · · · · · · · · · ·

THE WARREN FOUNDATION INC. Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

		Exempl Orga	IIIZaliUIIS								
1				engage in any of the section 501(c)(3) org						Yes	No
		zations?	ode (other than	section so i(c)(s) org	ariizations) (or in acction	527, TCIBIII	ig to political]		
а	-		ng foundation to	a noncharitable exen	npt organiza	tion of					
(1) Cash										_X	
	(2) Otl	her assets							1a(2)		_X
b		transactions								}	
				mpt organization							_ X _
				able exempt organization							_X
				assets							_X_
										}	<u>X</u>
		_									$\frac{\lambda}{X}$
_				nip or fundraising solici							- X -
				sts, other assets, or pa es," complete the folio						air m	
u				ices given by the rep							
				gement, show in colu							
(a) L	ne no	(b) Amount involved		noncharitable exempt organiz				nsactions, and shan			
		N/A			1	N/A					
		<u> </u>		<u> </u>							
			ļ								
											
			}								
							···				
							······································				
											
	- -										
						······					
2a	is the	foundation directly	or indirectly af	filiated with, or relate	d to, one or	r more tax-e	xempt orga	nizations			
				ther than section 501(Ye	s X	No
b	If "Yes	" complete the follow	wing schedule			···					
		(a) Name of organization	n	(b) Type of orga	nızatıon		(c) Desc	emption of relationsh	ιφ		
											
	Linder	negative of natury I decis	ine that I have examin	ned this return, including acco	mpanying schedul	les and statements	and to the be	est of my knowledge	and be	lef it is	s true
	correc	t, and complete Declaration of	preparer (other than to	axpayer) is based on all informati	on of which prepa	rer has any knowled	ige				
Sign		175		1 5/8/20	15	Spars	o tem	May the IRS			
Here		pature of pricer or trustee	7)	Date	Title	e accis	1	with the prep (see instructions)		Yes	No
							•	,	_==		
		Print/Type preparer's nai	me	Preparer signature	/	Date	7,	Check If P	ПN		
Paid	!	JAMES R. BECH		(L. R. Deche	COST	57	16/5		0010	7927	7
Prep	oarer	Firm's name BE	CHER, DELL	A TORRE, GITTO	AND CO.		Firm's	EIN ► 22-26	2594	4	
Jse	Only		NORTH WAL	NUT STREET							
		RI	DGEWOOD,	NJ		07450	Phone				
								Form	990	-PF (2	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.irs.gov/form990.

Name of the organization		Employer identification number					
THE WARREN FOUNDATION	INC.						
C/O RHODES & O'NEILL		06-1467469					
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion					
	501(c)(3) taxable private foundation						
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contribut property) from any one contributor. Complete Parts I and II. See instructions.	_					
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							
contributor, during the contributions totaled m during the year for an e	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
990-EZ, or 990-PF), but it must a	not covered by the General Rule and/or the Special Rules does not file Sc inswer "No" on Part IV, line 2, of its Form 990, or check the box on line H ertify that it does not meet the filing requirements of Schedule B (Form 990	of its Form 990-EZ or on its					

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 THE WARREN FOUNDATION INC.

Employer identification number

	C/O RHODES & O'NEILL		06-1467469
Part I	Contributors (see instructions) Use duplicate copies	s of Part I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	RUSSELL F. WARREN 15 PEAR LANE GREENWICH, CT 06830	\$5,879.	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

Name of organization THE WARREN FOUNDATION INC.

C/O RHODES & O'NEILL

Employer identification number 06-1467469

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	12000 SHS WRIGHT MEDICAL GROUP INC.		
		\$51,840.	11/19/2014
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization THE WARREN FOUNDATION INC.

C/O RHODES & O'NEILL

Employer identification number

06-1467469

	that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional total statements.	is completing Part III ne year (Enter this in	, enter the total of information once S	exclusively religious, charitable, etc.,
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	fer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No.		T	<u> </u>	
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	<u> </u>
	Transferee's name, address, a	md 710 ± 4	Polotio	nship of transferor to transferee
	i ransieree's name, address, a	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			
	Transletee's name, audiess, al	IU ZIF + 4	Kelatio	namp 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			
				nship of transferor to transferee
	~			
	~			
	<u> </u>			· · · · · · · · · · · · · · · · · · ·

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

The Warren Foundation, Inc. 2014 Grants

<u>Date</u>	Recipient	Amount	Purpose
01/24/14	The John Jay Awards Dinner 12th Annual Awards Dinner PO Box 892	1,250.00	11th Annual Awards Dinner cost of goods/Srvc
	New York, NY 10021-0002		\$125 per ticket
03/10/14	Columbia Athletics 622 West 113th Street New York, NY 10025	2,000.00	Annual Golf Outing Foursome
03/27/14	The Old Blue Rugby Foundation PO Box 892 New York, NY 10021-0002	1,000 00	Donation
06/03/14	Columbia Athletics 622 West 113th Street New York, NY 10025	10,000.00	Football \$5,000 Baseball \$5,000 Donation
06/26/14	Hospital for Special Surgery Fund 145 West 45th Street - Suite 300 New York, NY 10036	3,000 00	Donation
08/07/14	Columbia Athletics 622 West 113th Street New York NY 10025	2,500.00	Athletic Hall of Fame Dinner
08/07/14	West Pawlet Volunteer Fire Department	2,500.00	Donation
08/07/14	The Old Blue Rugby Foundation PO Box 892 New York, NY 10021-0002	250 00	Donation
09/11/14	Pathways Inc. 175 Milbank Ave Greenwich CT 06830	700.00	September 27th Annual Fundreiser
09/15/14	Columbia Athletics 622 West 113th Street New York, NY 10025	10,000.00	Football \$5,000 Baseball \$5,000 Donation
10/09/14	Hospital for Special Surgery Fund Autumn Benefit Dinenr 145 West 45th Street - Suite 300 New York, NY 10036	1,500.00	Autumn Benefit Dinner
11/3/2014	Columbia Athletics 622 West 113th Street New York NY 10025	2,500.00	Alexander Hamilton Awards Dinner
12/10/14	Jay Heritage Center 210 Boston Post Road Rye NY 10580	150.00	Donation
12/11/2014	Greenwich Basketball Association clo Farid Kerendlan 30 Brookside Drive, Apt 2F Greenwich, CT 06830	2,500.00	Donation

Total 2014 Grants: 39,850.00

ATTACHMENT 1 PAGE 20

ATTACHMENT 1

FROM SECURITIES
O INTEREST
DIVIDENDS AND
PART I - D
FORM 990PE,

NET INVESTMENT INCOME	30.	30.
REVENUE AND EXPENSES PER BOOKS		30
		TOTAL
DESCRIPTION	GOLDMAN SACHS	

- OTHER EXPENSES FORM 990PF, PART I

FEES FEEVENCE AND EXPENSES PER BOOKS 1, 50
FEES

NET	INVESTMENT	INCOME	1,500.	45.
AND	EXPENSES	PER BOOKS	1,500.	45.

1,545.

1,545.

TOTALS

ATTACHMENT 2 PAGE 21

ATTACHMENT 3 PAGE 22

ATTACHMENT 3

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

ENDING BOOK VALUE

ENDING

WRIGHT MEDICAL GROUP, INC

5,879. 5,879.

57,360. 57,360.

TOTALS

RUSSELL F. WARREN, M.D.

NAME AND ADDRESS

GREENWICH, CT 06830

15 PEAR LANE

RUSSELL F. WARREN JR. 11 FIELD POINT DRIVE

GREENWICH, CT 06831

0

0

0

SECRETARY

CHRISTOPHER R. MILLIGAN

MADISON, CT 06443

15 WHEDON LANE

RIVERSIDE, CT 06878

2 SEAGATE ROAD

LISA WARREN KRUGER

ATTACHMENT 5

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

CHRIS MILLIGAN, C/O RHODES & O'NEILL 15 WHEDON LANE MADISON, CT 06443

ATTACHMENT 6

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

MEDICAL EDUCATION, HEALTH CARE, HOSPITALS, MEDICAL RESEARCH, ARTHRITIS, COMMUNITY SUPPORT AND CULTURAL PROGRAMS.