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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052 2014

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

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

Open to Public Inspection ▶ 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 Name of foundation A Employer identification number **Biokinetix Foundation** 06 1483507 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B. Telephone number (see instructions) 146 Beechwood Hill Tr 401-295-8952 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Exeter RI 02822 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, Address change ☐ Name change check here and attach computation -E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶ ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) line 16) ▶ \$ 358465 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income income DUIDOSES the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments SCANNED MAY 19 4 Dividends and interest from securities 16232 16232 Gross rents h Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . 15 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) Total. Add lines 1 through 11 . 12 16232 16247 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits S 16a Legal fees (attach schedule) .; £ Accounting fees (attach schedule) h ** Other professional fees (attach schedule) . . . C 17 18 Taxes (attach schedule) (see instructions) 213 A 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 123 25 Contributions, gifts, grants paid 21000 21000 26 Total expenses and disbursements. Add lines 24 and 25 21000 21123 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -4891 Net investment income (if negative, enter -0-) . 16247 Adjusted net income (if negative, enter -0-)

Cat. No 11289X

Form 990-PF (2014)

D۵	rt II	Palance Shoots Attached schedules and amounts in the description column	Beginning of year	End of	year
г <i>с</i>		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	ĩ	Cash non-interest-bearing			
	2	Savings and temporary cash investments	134654	128756	128756
4	3	Accounts receivable >		·	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	1		
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶		ļ	
野	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		i	
As	10a	Investments-U.S. and state government obligations (attach schedule)			
-	ь	Investments - corporate stock (attach schedule)	249890	229709	229709
	С	Investments - corporate bonds (attach schedule)			
	11	Investments-land, buildings, and equipment: basis ▶			· · · · · · · · · · · · · · · · · · ·
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments mortgage loans			
	13	Investments—other (attach schedule)	"		
	14	Land, buildings, and equipment: basis ▶			· · · · · · · · · · · · · · · · · · ·
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other coasts (describe			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item i)	384544	358465	358465
	17	Accounts payable and accrued expenses	304344	330403	330403
	18	Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
	22	, , ,			
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0		
		Foundations that follow SFAS 117, check here ▶ □	0		
98		and complete lines 24 through 26 and lines 30 and 31.			
Ž	24	Unrestricted	i i		
<u>s</u>	25	Temporarily restricted			
B	26	Permanently restricted	· · · · · · · · · · · · · · · · · · ·		
und Balances	20	Foundations that do not follow SFAS 117, check here ▶ □			
亞		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds	j		
2	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	204544	250465	
AB	30	Total net assets or fund balances (see instructions)	384544	358465	
et	31	Total liabilities and net assets/fund balances (see	384544	358465	
Z	•	instructions)	204544	250465	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	384544	358465	
		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (must	agree with	
,		of-year figure reported on prior year's return)		_	384544
2		r amount from Part I, line 27a			
3				H1	-4891
4		, , , , , , , , , , , , , , , , , , , ,			
5		reases not included in line 2 (itemize) unrealized capital losses of		5	21100
		I net assets or fund balances at end of year (line 4 minus line 5)—			-21188
		- Joan (mile i mile di	, Joidin (b), III (358465

Part I	(a) List and describe the le	Losses for Tax on Investment und(s) of property sold (e.g., real estate, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation		ate acquired L, day, yr.)	(d) Date sold (mo., day, yr.)
d c	0.833 shares NewCastle Inves						
d		tment		Р		11/6/08	10/23/14
d							
e							
	 			1			l
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			n or (loss) (f) minus (g)
а	16.50			1.40			15.10
ь							
_ с							
d							
_ е							
<u></u>	Complete only for assets show	ing gain in column (h) and owned by the	foundatio	n on 12/31/69			l. (h) gain mınus
	(I) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol. (j), if arny			t less than -0-) or from col. (h))
а							
b							
С							
<u>d</u>							
е					ļ,		
2	Capital gain net income or (net capital loss) { If gain, also find the loss is the			2		15
3	Net short-term capital gain	or (loss) as defined in sections 1222	2(5) and (6	6):			
	If gain, also enter in Part I,	line 8, column (c) (see instructions	i). If (los:		3		
Part		r Section 4940(e) for Reduced		Mot Invoctment			
_		ite foundations subject to the section					
Was th	," the foundation does not q	ection 4942 tax on the distributable ualify under section 4940(e). Do not	complet	e this part.	•		☐ Yes ☑ No
1		nt in each column for each year; se	e the inst	ructions before m	aking	any entries.	
Cale	(a) Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use a	ssets		(d) tribution ratio divided by col. (c))
	2013	15837		3(62673		4.37
	2012	27418		3.	14316		8.72
	2011	10600			17742		3.05
	2010	8100		2:	98938		2.71
	2009	4880		21	86866		1.70
2,			e total on		the	3	20.55
4	·	naritable-use assets for 2014 from F	_			4	367767
5	Multiply line 4 by line 3 .		• • •			5	15115
	Enter 1% of net investment	income (1% of Part I, line 27b) .			•	6	162
6							
6 7	Add lines 5 and 6				.	7	15277

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on tine 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		162	
•	here ▶ ✓ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		162	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		162	
6	Credits/Payments:			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations—tax withheld at source 6b		- 1	
C	Tax paid with application for extension of time to file (Form 8868) . 6c			
d	Backup withholding erroneously withheld			
7 8	Total credits and payments. Add lines 6a through 6d		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0 162	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		102	
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11			
Part	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		√
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		✓
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	-		
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓_
_	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		1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
_	conflict with the state law remain in the governing instrument?	6	1	
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	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	RI 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	8ь	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ť	
_	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		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		1

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		/
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address >			
14	The books are in care of ► Asa Davis Telephone no. ► 40	1-295-	8952	
	Located at ▶ 146 Beechwood Hill Tr Exeter RI ZIP+4 ▶	0282	2	<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		•	▶ □
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		/
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country			
		L		<u> </u>
Pan	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	L	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes \(\text{V} \) No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	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		
	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?	1c		,
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			}
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
c	all years listed, answer "No" and attach statement—see instructions.)	2b		1
	▶ 20 ,20 ,20 ,20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
Ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		1

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Part VII-B Statements Regarding Activities	s for Which Form	4720 May Be R	lequired (continue	ed)	
5a During the year did the foundation pay or incur a	ny amount to:				1 1
(1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public				No	
directly or indirectly, any voter registration dri				No	
(3) Provide a grant to an individual for travel, stu-] No	
(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)		_		No	
(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to o				No	
b If any answer is "Yes" to 5a(1)-(5), did any of the					
Regulations section 53.4945 or in a current notice		•	uctions)?	· 5b	
Organizations relying on a current notice regarding				▶□	
c If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	for the grant? .] No	
If "Yes," attach the statement required by Regula					
6a Did the foundation, during the year, receive any on a personal benefit contract?	Tunas, airectly or in			No	
b Did the foundation, during the year, pay premium				. 6b	
If "Yes" to 6b, file Form 8870.	,,,,,,	,, ,		·	
7a At any time during the tax year, was the foundation a				No	
b If "Yes," did the foundation receive any proceeds					
Part VIII Information About Officers, Direct and Contractors	tors, Trustees, F	oundation Man	agers, Highly Pai	d Employ	rees,
List all officers, directors, trustees, foundation	n managers and th	eir compensation	n (see instructions)	<u> </u>	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eve	ense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plar and deferred compensa	TS Othor	allowances
Asa Davis	Discours 4		1		•
146 Beechwood Hill Tr Exeter RI Lauren Davis	Director 1	-0-		-0-	
146 Beechwood Hill Tr Exeter RI	Director 0	-0-		-0-	-0-
					<u></u> _
				1	
2 Compensation of five highest-paid employee	es (other than the	se included on li	no 1—see instruct	tions) If n	one enter
"NONE."	es touter aign dio	se included on i		donsj. Ir ii	ione, enter
(a) Name and address of each employee paid more than \$50,00	(b) Title, and hours per devoted to p	week (c) Compe	(d) Contribution employee ben plans and defe compensation	rred (e) Expe	ense account, allowances
None				_	· -
		1			
					
				İ	
				<u> </u>	
Total number of other employees paid over \$50,000 .		<u> </u>		<u> </u>	M-DF (2014)

Pai	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
<u>3</u>	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
Non		
		!
	I number of others medicing over \$50,000 for professional genices	
101	Il number of others receiving over \$50,000 for professional services	,
Pa	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Lighthouse Community	
	Puyaliup, WA	
	Charity/Medical Charity/Medical	1200
2	Friends of Animals in Need	
	N Kingstown RI	
_	Charity/Animal Shelter/Care	9000
3		
4		
•		
Pa	t IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
Α	other program-related investments. See instructions.	
3		
Tota	II. Add lines 1 through 3	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign found	ations,
	see instructions.)	·	
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	245204
b	Average of monthly cash balances	1b	128164
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	373368
e	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	0
3	Subtract line 2 from line 1d	3	373368
4	Cash deemed held for charitable activities, Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	5601
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	367767
6	Minimum investment return. Enter 5% of line 5	6	18388
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundation	ns
1	Minimum investment return from Part X, line 6	1	18388
2a	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	1	
C	Add lines 2a and 2b	2c	162
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	18226
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	18226
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	18226
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	21000
b	Program-related investments—total from Part IX-B	1b	21000
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	·•	
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	- + -	
а	Suitability test (prior IRS approval required)	3a	0
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	21000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	21000
_	Enter 1% of Part I, line 27b (see instructions)	5	162
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20838
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	<u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years.		000 PE

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Part	XIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2014 from Part XI, line 7	(a) Corpus	(b) Years pnor to 2013	(c) 2013	(d) 2014
2	Undistributed income, if any, as of the end of 2014:				18226
a	Enter amount for 2013 only			٥	
b	Total for prior years: 20 ,20 ,20		0	<u>_</u>	
3	Excess distributions carryover, if any, to 2014:				
а	From 2009 0				
b	From 2010				
C	From 2011				
d	From 2012				
е	From 2013			İ	
f	Total of lines 3a through e	7024			_
4	Qualifying distributions for 2014 from Part XII, line 4: ► \$				
a	Applied to 2013, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required see instructions)		0		
С	Treated as distributions out of corpus (Election required – see instructions)	0			
d	Applied to 2014 distributable amount				11202
e	Remaining amount distributed out of corpus	9798			
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	7024			7024
6	Enter the net total of each column as indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b	9798	O		
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount—see instructions			a	
f	Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	o			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	9798		<u> </u>	
10	Analysis of line 9:				
a	Excess from 2010 0	j			
b	Excess from 2011				
C	Excess from 2012			Ì	
d e	Excess from 2013				

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for		_		Not App	licable
b	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ction	3) or 4942(j)(5)
2a		Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) 10ta
	each year listed					
_	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed				1	
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter:					
	(1) Value of all assets	_				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on secunties loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(I)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	is part only if th	he foundation ha	ad \$5,000 or mo	re in assets at
	any time during the year-	see instruction	s.)			
1	Information Regarding Foundation					
a	List any managers of the foundation of before the close of any tax year (but of	who have contribu only if they have co	ted more than 2% intributed more th	6 of the total contri an \$5,000). (See se	ibutions received t ection 507(d)(2).)	by the foundation
Asa Da		•		, , ,		
b		who own 10% or	more of the stoo	k of a corporation	(or an equally lar	ge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a 1	10% or greater inte	rest.	
None						
2	Information Regarding Contribution Check here ▶ ☑ if the foundation unsolicited requests for funds. If the foundations, complete items 2a, to	only makes controundation makes	ibutions to presel	lected charitable of		
а	The name, address, and telephone nu	mber or e-mail ad	dress of the perso	on to whom applica	itions should be ac	ddressed:
b	The form in which applications should	be submitted and	l information and i	materials they shou	ıld include:	
c	Any submission deadlines:					
d	Any restrictions or limitations on aw	rarde euch as h	, geographical c-	pas sharitable fo	Ido kindo of insti	itutions or other
-	factors:	raido, Sucii as D)	yooyiapiiicai ar	о до, спапцарів Пе	ius, Milus Of Insti	itutions, or other

Part	XV Supplementary Information (cont	nued)			
3	Grants and Contributions Paid During t	he Year or Approv		ture Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
-	Name and address (home or business)	any foundation manager or substantial contributor	recupient	contribution	
a	Paid during the year	-			
See A	ttached	None	501c3	Medical/Charitable	21000
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	Total		<u> </u>	▶ 3	3 34000
\overline{b}	Approved for future payment				21000
			}	1	}
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				}	
			1		1
			1		1
	Total		<u> </u>		
	IVIII				A I .

nter	gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ол 512, 513, or 514	(e)
4 (Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption function income (See instructions.)
	a		·· · · · ·	<u> </u>		
Ì	b					-
-	c					
	d					
	e				·	
	g Fees and contracts from government agencies				·	
	g Fees and contracts from government agencies Membership dues and assessments					
	Interest on savings and temporary cash investments					
	Dividends and interest from securities	· · · · · · · · · · · · · · · · · · ·		 		, , , , , ,
	Net rental income or (loss) from real estate:					
		-		<u> </u>		
					· · · · · · · · -	
	b Not debt-financed property				1	
	Other investment income			 		
					 	
	Gain or (loss) from sales of assets other than inventory			ļ		
	Net income or (loss) from special events				_	· · · · · · · -
	Gross profit or (loss) from sales of inventory			<u> </u>		
	Other revenue: a	-				
	b					
	<u> </u>		. =			
	d					
	e					
13					13	
13 See v Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
i3 See v Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A No. Explain below how each activity for which	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to thations.)
i3 ee v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to th
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to th
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to th
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to th
i3 ee v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
i3 ee v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
i3 ee v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Pari Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
13 See v Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the

Part	XVII		Regarding Tran	sfers To and Tra	nsactions and	Relationshi	ps With I	Vonchari	table	
			ganizations					T	124	
1			lirectly or indirectly or code (other than						Ye	s No
	organi	zations?						1		
а	Transf	ers from the rep	orting foundation to	a noncharitable ex	empt organization	n of:				İ
•	(1) Ca	sh						}	ta(1)	1
	(2) Ot	her assets .	,		, . ,	, .	,	[1a(2)	1
b	Other	transactions:								
	(1) Sa	les of assets to	a noncharitable exe	mpt organization				1	1b(1)	
	(2) Pu	rchases of asse	ets from a noncharita	able exempt organiz	ation			[1b(2)	1
	(3) Re	ntal of facilities,	, equipment, or othe	rassets				[1b(3)	1
	(4) Re	imbursement ar	rrangements					[1b(4)	1
	(5) Lo	ans or loan gua	rantees					[1b(5)	1
	(6) Pe	rformance of se	ervices or membersh	ip or fundraising so	licitations			[1b(6)	1
C	Shann	g of facilities, e	quipment, mailing lis	sts, other assets, or	paid employees			[1c	1
d			of the above is "Ye							
			ther assets, or servi							
	value	in any transaction	on or sharing arrang	ement, show in colu	mn (d) the value	of the goods,	other asse	ets, or serv	rices rec	eived.
(a) Line	eno (b) Amount involved	(c) Name of noncl	nantable exempt organiza	tion (d) Desc	cription of transfe	rs, transactio	ns, and share	ng arrange	ments
				, <u> </u>						
			<u> </u>							
										
				_						
										
				MIS-11 A4 11				-45		
2a			ectly or indirectly af							1
			501(c) of the Code (d		r (c)(s)) or in sect	1011 327 ? .		· · ⊔	Yes [<u>√</u>	j No
ь	II Yes	· •	following schedule			 	(a) Danamata	n of rolations	hin	
		(a) Name of organ	zation	(b) Type of o	yanzaron	ļ	(c) Description	n or relations		
						 				
										
						 				
		·				 				
	Under	penalties of penury 1	declare that I have examine	ed this return, including acco	mnanving schedules a	d statements, and	to the best of	my knowleda	e and belie	. it is true
Sign			aration of preparer (other th							-
Here		1. 1 1	Lu 79	14/10	Director			May the IRS with the pro		
HEIC		iture of officer or trus	stee	Date	Director Title			(see instruct	ions)? []Y	es ∐ No
	1 2 3 1	Print/Type preparer		Preparer's signature		Date		. П. РТ	īN	
Paid		,, - FF	•				Chec sett-c	k ∐ ıf ¦ employed		
Prep		Firm's name								
Use (Uniy	Firm's name ► Firm's address ►		•			Firm's EIN I			
		i iiiii a audiess 🚩					Phone no.			

2014 BioKinetix Foundation

Tax Schedules

Taxes Paid

 IRS
 \$213

 State of RI
 \$50

 Total
 \$263

Donations

Recipient	Amount	Date	Purpose
Lighthouse Community	\$6,000	3/18/2014	Charity
Friends of Animals	\$9,000	5/7/2014	Charity
Lighthouse Community	\$6,000	5/27/2014	Charity

Net Worth - As of 12/31/2014 (Includes unrealized gains) (in U S. Dollars)

Account	12/31/2013 Balance	6/30/2014 Balance	12/31/2014 Balance
ASSETS			
Investments			
Biokinetix USAA			
CERADYNE INC COM	0	0	0
CHINA FD INC COM	24,972	25,404	21,876
Money Market Fund	0	0	468
NEW MEDIA INVT GROUP INC COM	8,718	11,715	19,619
NEW RESIDENTIAL INVT CORP COM	76,820	72,450	73,428
New Senior	0	0	31,518
NEWCASTLE INVESTMENT CORP	66,010	55,085	8,603
OCLARO INC	24,053	21,252	17,195
SOUTHERN COPPER CORP	58,034	61,390	57,003
-Cash-	134,655	121,080	128,756
TOTAL Biokinetix USAA	393,262	368,376	358,465
TOTAL Investments	383,262	368,376	368,465
TOTAL ASSETS	393,262	368,376	368,465
LIABILITIES	0	0	0
OVERALL TOTAL	393,262	368,376	358,465