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FORM 990-PF

Form **990-PF****Return of Private Foundation**

OMB No 1545-0052

Department of the Treasury
Internal Revenue Service

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

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf**2014**

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation

KIRK ELIZABETH - YMCA ET AL

Number and street (or P O box number if mail is not delivered to street address)

P O BOX 1802

City or town, state or province, country, and ZIP or foreign postal code

PROVIDENCE, RI 02901-1802

G Check all that apply:

☐

Initial return

☐

Final return

☐

Address change

☐

Initial return of a former public charity

☐

Amended return

☐

Name change

H Check type of organization:

☐ Section 501(c)(3) exempt private foundation☒ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at
end of year (from Part II, col. (c), line
16) ▶ \$ 1,484,469.J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) _____

(Part I, column (d) must be on cash basis)

A Employer identification number

06-6024917

B Telephone number (see instructions)

888-866-3275

C If exemption application is
pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the
85% test, check here and attach
computation ☐E If private foundation status was terminated
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination
under section 507(b)(1)(B), check here ☐**Part I Analysis of Revenue and Expenses** (The
total of amounts in columns (b), (c), and (d)
may not necessarily equal the amounts in
column (a) (see instructions).)(a) Revenue and
expenses per
books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

1 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

4 Dividends and interest from securities

27,619

26,489

STMT 1

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

164,515

b Gross sales price for all
assets on line 6a 1,354,195

7 Capital gain net income (from Part IV, line 2)

164,515

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns
and allowances

b Less Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule)

821

27

STMT 2

12 Total. Add lines 1 through 11

192,955

191,031

13 Compensation of officers, directors, trustees, etc

20,789

12,474

8,316

14 Other employee salaries and wages

NONE

NONE

15 Pension plans, employee benefits

NONE

NONE

16a Legal fees (attach schedule) STMT 3

693

NONE

NONE

693

b Accounting fees (attach schedule) STMT 4

1,250

NONE

NONE

1,250

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions) STMT 5

1,022

1,022

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

NONE

NONE

22 Printing and publications

NONE

NONE

23 Other expenses (attach schedule) STMT 6

790

735

790

24 Total operating and administrative expenses.

Add lines 13 through 23

24,544

14,231

NONE

11,049

25 Contributions, gifts, grants paid

52,822

52,822

26 Total expenses and disbursements Add lines 24 and 25

77,366

14,231

NONE

63,871

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

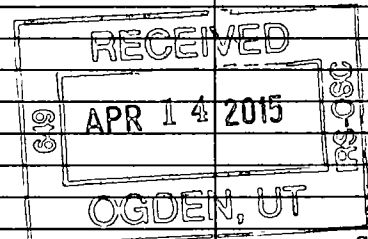
115,589

b Net investment income (if negative, enter -0-)

176,800

c Adjusted net income (if negative, enter -0-)

SCANNED APR 17 2015 Revenue



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	41,137.	58,237.	58,237.
	3	Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) . STMT 7	1,211,119.	1,431,232.	1,426,232.
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis Less: accumulated depreciation (attach schedule) ▶			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) . STMT 9	87,499.		
	14	Land, buildings, and equipment basis Less: accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶)				
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	1,339,755.	1,489,469.	1,484,469.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)		NONE		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, . . . ▶ <input checked="" type="checkbox"/> check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	1,339,755.	1,489,469.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	1,339,755.	1,489,469.	
	31	Total liabilities and net assets/fund balances (see instructions)	1,339,755.	1,489,469.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,339,755.
2	Enter amount from Part I, line 27a	2	115,589.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 10	3	53,530.
4	Add lines 1, 2, and 3	4	1,508,874.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 11	5	19,405.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,489,469.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES					
b OTHER GAINS AND LOSSES					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 1,175,523.		1,005,426.	170,097.		
b 178,672.		184,254.	-5,582.		
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
a			170,097.		
b			-5,582.		
c					
d					
e					
2 Capital gain net income or (net capital loss)			2	164,515.	
If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7					
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):			3		
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8					

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (for tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	88,924.	1,441,351.	0.061695
2012	61,701.	1,389,339.	0.044410
2011	69,307.	1,412,839.	0.049055
2010	65,777.	1,333,929.	0.049311
2009	48,291.	1,183,895.	0.040790
2 Total of line 1, column (d)			2 0.245261
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.049052
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4 1,486,451.
5 Multiply line 4 by line 3			5 72,913.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,768.
7 Add lines 5 and 6			7 74,681.
8 Enter qualifying distributions from Part XII, line 4			8 63,871.

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	3,536.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		2	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		3	3,536.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	NONE
3 Add lines 1 and 2		5	3,536.
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-			
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	184.	
b Exempt foreign organizations - tax withheld at source	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868)	6c	NONE	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	184.	
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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	9	3,352.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be Credited to 2015 estimated tax NONE Refunded	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? 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.		X
c Did the foundation file Form 1120-POL for this year?		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? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CT		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

**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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>US TRUST FIDUCIARY TAX SERVICES</u> Telephone no <u>(888) 866-3275</u> Located at <u>P.O. BOX 1802, PROVIDENCE, RI</u> ZIP+4 <u>02901-1802</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		X
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 <u></u>	16	Yes	No
				X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
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	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u></u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b** ☒ X
Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . STMT. 15 ☒ Yes ☐ No
If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** ☒ X
If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b** ☐

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 16		20,789.		

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 ☐ **NONE**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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	NONE	
2		
All other program-related investments See instructions		
3	NONE	
Total. Add lines 1 through 3		

Form 990-PF (2014)

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,461,868.
b	Average of monthly cash balances	1b	47,219.
c	Fair market value of all other assets (see instructions).	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,509,087.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	1,509,087.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	22,636.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,486,451.
6	Minimum investment return. Enter 5% of line 5	6	74,323.

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

1	Minimum investment return from Part X, line 6	1	74,323.
2a	Tax on investment income for 2014 from Part VI, line 5 2a		3,536.
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b		
c	Add lines 2a and 2b	2c	3,536.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	70,787.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	70,787.
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, line 1	7	70,787.

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	63,871.
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:		
a	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	63,871.
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	63,871.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				70,787.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			2,850.	
b Total for prior years 20____, 20____, 20____		NONE		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	NONE			
b From 2010	NONE			
c From 2011	NONE			
d From 2012	NONE			
e From 2013	NONE			
f Total of lines 3a through e	NONE			
4 Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 63,871.				
a Applied to 2013, but not more than line 2a . . .			2,850.	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2014 distributable amount				61,021.
e Remaining amount distributed out of corpus . .	NONE			
5 Excess distributions carryover applied to 2014 . (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b Prior years' undistributed income. Subtract 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		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instructions				
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				9,766.
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)	NONE			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .	NONE			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9:				
a Excess from 2010	NONE			
b Excess from 2011	NONE			
c Excess from 2012	NONE			
d Excess from 2013	NONE			
e Excess from 2014	NONE			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)**NOT APPLICABLE**

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2014	(b) 2013	(c) 2012	(d) 2011	

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
CONNECTICUT NURSES ASSOCIATION ATTN KIMBERLY A. SANDOR- EXEC DI MERIDEN CT	N/A	NC	UNRESTRICTED GENERAL SUPPORT	5,869.
WATERBURY WOMENS CLUB C/O JESSIE GWISDALA TREASURER PLYMOUTH CT 06	N/A	NC	UNRESTRICTED GENERAL SUPPORT	5,869.
HARTFORD HEALTHCARE AT HOME INC MS. ELLEN ROTHBERG - PRESIDENT WETHERSFIELD	N/A	PC	UNRESTRICTED GENERAL SUPPORT	5,869.
YOUNG MEN'S CHRISTIAN ASSOC. SUSAN TALBOTT WATERBURY CT 06702-2005	N/A	PC	UNRESTRICTED GENERAL SUPPORT	5,869.
FIRST CONG. CHURCH OF WATERBURY TREASURER-GARRET POST WATERBURY CT 06702-122	N/A	PC	UNRESTRICTED GENERAL SUPPORT	17,608.
CONNECTICUT JUNIOR REPUBLIC HEDY BARTON DIR OF DEV LITCHFIELD CT 06759-0	N/A	PC	UNRESTRICTED GENERAL SUPPORT	5,869.
CONG BOARD PILGRIM MEM FUND C/O UNITED CHURCH FOUNDATION NEW YORK NY 101	N/A	PC	UNRESTRICTED GENERAL SUPPORT	5,869.
Total			3a	52,822.
b Approved for future payment				
Total			3b	

(e)

23

KIRK ELIZABETH - YMCA ET AL

06-6024917

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

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
USGI REPORTED AS NONQUALIFIED DIVIDENDS	454.	454.
FOREIGN DIVIDENDS	5,929.	5,929.
NONDIVIDEND DISTRIBUTIONS	1,295.	
DOMESTIC DIVIDENDS	8,234.	8,234.
OTHER INTEREST	2,124.	2,124.
FOREIGN INTEREST	117.	117.
U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE	355.	355.
NON-TAXABLE FOREIGN INCOME	-165.	
NONDISTRIBUTIVE DIVIDENDS	267.	267.
NONQUALIFIED FOREIGN DIVIDENDS	1,883.	1,883.
NONQUALIFIED DOMESTIC DIVIDENDS	7,126.	7,126.
	-----	-----
TOTAL	27,619.	26,489.
	=====	=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART I - OTHER INCOME
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
EXCISE TAX REFUND PARTNERSHIP INCOME	821.	27.
TOTALS	821. =====	27. =====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART I - LEGAL FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
LEGAL FEES - CHARITABLE	693.			693.
TOTALS	693.	NONE	NONE	693.
	=====	=====	=====	=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART I - ACCOUNTING FEES
=====

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

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FOREIGN TAXES	942.	942.
FOREIGN TAXES ON QUALIFIED FOR	62.	62.
FOREIGN TAXES ON NONQUALIFIED	18.	18.
TOTALS	1,022.	1,022.
	=====	=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART I - OTHER EXPENSES
=====

REVENUE
AND
EXPENSES
PER BOOKS

NET
INVESTMENT
INCOME

CHARITABLE
PURPOSES

DESCRIPTION

OTHER CHARITABLE EXPENSES	395.		395.
OTHER CHARITABLE EXPENSES	395.		395.
PARTNERSHIP EXPENSES		735.	

TOTALS

790.
=====

735.
=====

790.
=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART II - CORPORATE STOCK
 =====

ENDING
 FMV

ENDING
 BOOK VALUE

DESCRIPTION

464287614 ISHARES RUSSELL 1000
 269858304 EAGLE SM CAP GROWTH
 277905642 EATON VANCE LARGE-CA
 197199409 COLUMBIA ACORN FUND
 19765N567 COLUMBIA SMALL CAP V
 6933390700 PIMCO TOTAL RETURN F
 722005667 PIMCO COMMODITY REAL
 008882532 INVESCO INTL GROWTH
 411511306 HARBOR INTERNATIONAL
 52106N889 LAZARD EMERGING MKTS
 197199813 COLUMBIA ACORN INTER
 72201F409 PIMCO EMERGING MKT C
 99Z466163 HIGH QUALITY CORE CO
 922908553 VANGUARD REIT ETF
 466001864 IVY ASSET STRATEGY F
 6933390841 PIMCO HIGH YIELD FD
 714199106 PERMANENT PORTFOLIO
 72200Q182 PIMCO ALL ASSET ALL
 202671913 AGGREGATE BOND CTF
 464287507 ISHARES CORE S&P MID
 464287655 ISHARES RUSSELL 2000
 73935S105 POWERSHARES DB COMMO
 921943858 VANGUARD FTSE DEVELO
 38145C646 GOLDMAN SACHS STRATE
 207543877 SMALL CAP GROWTH LEA
 29099J109 EMERGING MARKETS STO
 302993993 MID CAP VALUE CTF
 303995997 SMALL CAP VALUE CTF
 323991307 MID CAP GROWTH CTF

58,945.
 85,505.
 74,769.
 14,727.

70,197.
 99,873.
 65,213.
 14,094.

120,340.
 43,861.
 29,602.
 120,986.
 45,155.
 127,274.
 29,295.
 101,185.
 59,814.
 29,994.
 60,344.

122,588.
 47,060.
 30,503.
 85,147.
 41,213.
 123,432.
 29,324.
 102,350.
 59,997.
 29,796.
 62,062.

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART II - CORPORATE STOCK
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
45399C107 DIVIDEND INCOME COMM	142,145.	149,537.
99Z466197 INTERNATIONAL FOCUSE	142,998.	142,710.
99Z501647 STRATEGIC GROWTH COM	144,293.	151,136.
	-----	-----
TOTALS	1,431,232.	1,426,232.
	=====	=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

FORM 990PF, PART II - OTHER INVESTMENTS
=====

COST/
FMV
C OR F

DESCRIPTION

73935S105 POWERSHARES DB COMMO

C

TOTALS



KIRK ELIZABETH - YMCA ET AL

06-6024917

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

TYE INCOME ADJ	3,029.
PARTNERSHIP ADJUSTMENT	33,443.
SALES ADJUSTMENT	17,058.

TOTAL

53,530.
=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

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

=====

DESCRIPTION

AMOUNT

ROUNDING

7.

CTF ADJUSTMENT

2,048.

COST ADJUSTMENT

17,350.

TOTAL

19,405.

=====

[illegible]

KIRK ELIZABETH - YMCA ET AL

06-6024917

GAINS AND LOSSES FROM PASS-THRU ENTITIES

=====

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

COMMON TRUST FUNDS -3,341.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-3,341.00

=====

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

COMMON TRUST FUNDS 25,882.00

PARTNERSHIPS, TRUSTS, S CORPORATIONS

-33,443.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-7,561.00

=====

KIRK ELIZABETH - YMCA ET AL

06-6024917

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

=====

NAME:

SEE ATTACHED STATEMENT

Expenditure Report

Connecticut Nurses Association
377 Research Parkway, Suite 2D
Meriden, CT 06450-7160

NAME OF TRUST KIRK ELIZABETH - YMCA ET AL

ACCOUNT #. _____

To Bank of America, N.A., in its capacity as Trustee:

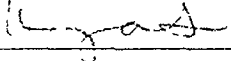
The following constitutes the expenditure report for Connecticut Nurses Association for the period of January 1, 2014-December 31, 2014 for a distribution totaling \$5,869.44 ("distributed funds") received by Connecticut Nurses Association. We certify that the funds have been used exclusively for the 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 purposes

- (i) carrying on propaganda or attempting to influence legislation.
- (ii) 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

I further certify that Connecticut Nurses **Association** has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge

By:  Kimberly Sandor

Its Executive Director

Telephone Number. 203-238-1207 x11

Date 1/24/15

EXPENDITURE RESPONSIBILITY REPORT

Date of report Feb 10, 2015

Report period January 1, 2014-December 31, 2014

Name and address of organization

Connecticut Nurses' Association
377 Research Parkway, Suite 2D
Meriden, CT 06450

Amounts and dates of distributions received during the period of 1/1/14 through 12/31/14:

Date Amount

See attached report offunds received for distribution

See attached accounting report of claims distributed for requested period

Describe the uses of the distributed funds Attach additional pages, if needed)

Funds are used to pay requests of medical claim refunds in excess of insurance payments for our members. All claims are reviewed initially by the executive director and bookkeeper and reported for approval to the Finance Committee and recorded in the monthly minutes. Claim criteria is attached

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

Date

Amount

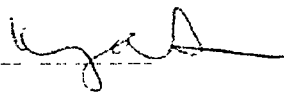
Purpose

\$

See attached accounting report of fees covering administrative time for reporting period

All such expenditures are treated as distributions "out of corpus" under Treas Reg 53.4942(a)-3(d) We understand that this means that we have, during this fiscal year, made expenditures equal to or greater than (1) the full amount of the Grant, (2) plus 5% of the value of our investment assets during our previous fiscal year Attached is a copy of our form 990PF for the previous fiscal year

By. Kimberly Sandor



Its Executive Director

Date Feb 10, 2015

3 51 PM

02/03/15

Cash Basis

E Kirk Fund
Transaction Detail By Account
January through December 2014

Type	Date	Num	Name	Memo	Original Amount	Paid Amount	Balance
BankBoston Charities							
Sales Receipt	1/30/2014	231		Bank of America	1,467 36	1,467 36	1,467 36
Sales Receipt	4/25/2014	232		Bank of America	1,467 36	1,467 36	2,934 72
Sales Receipt	7/24/2014	233		Bank of America	1,467 36	1,467 36	4,402 08
Sales Receipt	10/27/2014	234		Bank of America- Inv	1,467 36	1,467 36	5,869 44
Total BankBoston Charities					5,869 44	5,869 44	5,869 44
TOTAL					5,869 44	5,869 44	5,869 44

3 54 PM

02/03/15

Cash Basis

E Kirk Fund Transaction Detail By Account January through December 2014

Type	Date	Num	Name	Memo	Original Am	Paid Amount	Balance
Awarded Amounts							
Bill	5/2/2014	claim	Theresa Gendron	claim 14-01	347 50	347 50	347 50
Bill	5/19/2014	Claim	Catherine Dodick	Claim 14-02	1,000 00	1,000 00	1,347 50
Bill	9/4/2014	Claim	Jeannie Ranalli	Claim 14-03	1,000 00	1,000 00	2,347 50
Bill	10/3/2014	Claim	Eleanore Marchand	Claim 14-05	1,000 00	1,000 00	3,347 50
Bill	11/12/2014	14-06	Theresa Gendron	claim 14-06	344 42	344 42	3,691 92
Bill	11/12/2014	14-06	Theresa Gendron	claim 14-07-to equal 1000	308 08	308 08	4,000 00
Bill	12/9/2014	Claim	Joan Cover	Claim 14-09	1,000 00	1,000 00	5,000 00
Total Awarded Amounts						5,000 00	5,000 00
TOTAL						5,000 00	5,000 00

3 53 PM

02/03/15

Cash Basis

E Kirk Fund
Transaction Detail By Account
January through December 2014

Type	Date	Num	Name	Memo	Original Amount	Paid Amount	Balance
Administration Fee							
Bill	6/4/2014		Connecticut Nurses'	Fee for claim 14-01 and 14-02	200 00	200 00	200 00
Bill	10/3/2014	Fee f	Connecticut Nurses'	Fee for claim 14-03	100 00	100 00	300 00
Bill	10/3/2014	Fee f	Connecticut Nurses'	Fee for claim 14-05	100 00	100 00	400 00
Bill	11/12/2014	AF-14	Connecticut Nurses'	Fee for claim 14-06 adn 14-07	200 00	200 00	600 00
Bill	12/9/2014		Connecticut Nurses'	Fee for claim 14-09	100 00	100 00	700 00
Total Administration Fee					700 00	700 00	700 00
TOTAL					700 00	700 00	700 00

Elizabeth Kirk Fund

Confidential

- Enclose a copy of the invoice(s), any existing insurance claims, or other relevant information.

- Signature of applicant/appointee _____

1 Date received
2 Membership status
3 Previous grants awarded
4 Amount to be granted
5 Date approved by Finance Committee
Reviewed by CNA 3/10/98
Revised by CNA 7/10/03

h users finance ebooks

Received-PhM
FEB 20 2015

NAME OF TRUST: KIRK ELIZABETH - YMCA ET AL

To Bank of America, N.A., in its capacity as Trustee.

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 purposes

- (i) carrying on propaganda or attempting to influence legislation,
- (ii) 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.

I further certify that Waterbury Women's **Club** has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: Jessie Dunsdale
Its: Treasurer

Telephone Number. 203-756-8580

Date 2.17.15

EXPENDITURE RESPONSIBILITY REPORT

Date of report 2.17.15

Report period: January 1, 2014-December 31, 2014

Name and address of organization:

Waterbury Women's Club
365 Mount Tube Rd.
Plymouth, CT 06782

Amounts and dates of distributions received during the period of 1/1/14 through 12/31/14

<u>Date</u>	<u>Amount</u>
1/21/14	1,467.36
4/21/14	1,467.36
11/21/14	1,467.36
1/21/15	1,467.36

Describe the uses of the distributed funds. Attach additional pages, if needed).

6 - \$1,000 College Scholarships
2 to CCSU, 2 to UConn, 1 to SCU
1 to Univ of the Sciences, Philadelphia, PA

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

<u>Date</u>	<u>Amount</u>	<u>Purpose</u>
	\$	

All such expenditures are treated as distributions "out of corpus" under Treas Reg 53.4942(a)-3(d). We understand that this means that we have, during this fiscal year, made expenditures equal to or greater than (1) the full amount of the Grant, (2) plus 5% of the value of our investment assets during our previous fiscal year. Attached is a copy of our form 990PF for the previous fiscal year.

By [Signature]

Its [Signature]

Date 4/7/15

David W. Reynolds, President, The Trust
Board Chair (typed/printed)

David W. Reynolds, President, The Trust
Board Chair (signature)/Date

Executive Director (typed/printed)

Executive Director (signature)/Date



KIRK ELIZABETH - YMCA ET AL

06-6024917

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

OFFICER NAME:

BANK OF AMERICA

ADDRESS:

777 MAIN STREET

HARTFORD, CT 06115

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION 20,789.

COMPENSATION EXPLANATION:

SEE ATTACHED FOOTNOTE

TOTAL COMPENSATION:

20,789.
=====

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.