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Department of the Treasury

Internal Revenue Service

DLN: 93491119013735

OMB No 1545-0052

Open to Public Inspection

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. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	endar year 2014, or tax	nd ending 12-31-2014						
		undation ONE JONES FOUNDATION				A Employer identification number			
					L	13-2988287			
		ON TRUST COMPANY LLC d street (or P O box number if mail is	not delivered to street address	s) Room/suite		B Telephone no	umber (see instructio	ns)	
		TON TRUST COMPANY LLC AIN STREET - 3RD FLOOR Sui				(434) 244-336	6		
		n, state or province, country, and ZIP of CT 06902	C If exemption	application is pendin	g, check here 🕨 🦵				
G CI	neck a	Ill that apply \(\bar{\sum} \] Initial return	Initial return of a	former public charit	у	D 1. Foreign o	rganizations, check h	ere 🕨 🗀	
		Final return	A mended return				organizations meeting		
			nge Name change			•	ck here and attach co undation status was i	•	
		ype of organization 🔽 Section n 4947(a)(1) nonexempt charita			. n		on 507(b)(1)(A), chec		
		ket value of all assets at end	J Accounting method			F If the found	ation is in a 60-mont	h termination	
of	year (from Part II, col. (c),	Other (specify)				on 507(b)(1)(B), chec		
_		*\$ 8,288	(Part I, column (d) mus	t be on cash basıs.)				_	
Part I Analysis of Revenue and Expenses total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		c), and (d) may not column (a) (see	(a) Revenue and expenses per books		et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, et	c , received (attach						
	_	schedule)		232,389					
Reveilue	2	Check ► ☐ If the foundation II	s not required to attach						
	3	Interest on savings and tempo	orary cash investments						
	4	Dividends and interest from se	ecurities						
	5a	Gross rents							
	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of	assets not on line 10	4,776					
	b	Gross sales price for all asset 192,164	s on line 6 a						
ž	7	Capital gain net income (from	Part IV, line 2)			167,468			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and							
	b	allowances Less Cost of goods sold .							
	_ c	Gross profit or (loss) (attach s							
	11	Other income (attach schedul	e)						
	12	Total. Add lines 1 through 11		237,165		167,468			
	13	Compensation of officers, dire	ctors, trustees, etc						
_	14	Other employee salaries and	wages						
Ses	15	Pension plans, employee bene	efits						
Ψ	16a	Legal fees (attach schedule).							
Expense	b	Accounting fees (attach sche		057		750			
		Other professional fees (attac	•	1,500		750		750	
Administrative	17	Interest		% 6,500					
E S	18 19	Taxes (attach schedule) (see Depreciation (attach schedule	·	3,300					
Ē	20	Occupancy							
Ad	21	Travel, conferences, and meet							
and	22	Printing and publications							
ල ලූ	23	Other expenses (attach sched	dule)	534		4		530	
Operating	24	Total operating and administr	ative expenses.						
ĕ		Add lines 13 through 23		8,534		754		1,280	
ŏ	25	Contributions, gifts, grants pa	ıd	245,087				245,087	
	26	Total expenses and disbursem 25	ents. Add lines 24 and	253,621		754		246,367	
	27	Subtract line 26 from line 12						,237	
	a	Excess of revenue over expens	ses and disbursements	-16,456					
	ь	Net investment income (If neg	ative, enter -0-)			166,714			
	c	Adjusted net income (if negation	ive, enter -0-)						

Pa	rt II	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
	1	Cash—non-interest-bearing	(a) book value 24,744	(b) book value	(C) Fall Market value
	2	Savings and temporary cash investments	,		
	3	Accounts receivable			
	•	Less allowance for doubtful accounts -			
	4	Pledges receivable -			
	"	Less allowance for doubtful accounts			
	_	Grants receivable			
	5	Receivables due from officers, directors, trustees, and other			
	6				
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts -			
sets	8	Inventories for sale or use			
υĄ.	9	Prepaid expenses and deferred charges			
∢		Investments—U S and state government obligations (attach schedule)		95 0 40.74 <i>c</i>	0.200
		Investments—corporate stock (attach schedule)		40,716	8,288
		Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
		Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	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)	24,744	40,716	8,288
	17	Accounts payable and accrued expenses			
ņ	18	Grants payable		32,428	
abilities	19	Deferred revenue			
ā	20	Loans from officers, directors, trustees, and other disqualified persons			
L	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	32,428	
ķ		Foundations that follow SFAS 117, check here			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.			
ılar	24	Unrestricted			
ä	25	Temporarily restricted			
пd	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ō		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	24,744	8,288	
Net	30	Total net assets or fund balances (see instructions)	24,744	8,288	
	31	Total liabilities and net assets/fund balances (see instructions)	24,744	40,716	
Pa	rt II	, ,		1 1	
1		Total net assets or fund balances at beginning of year—Part II, column (· · · · · · · · ·		
		, , , , , , , , , , , , , , , , , , , ,			24,744
2		Enter amount from Part I, line 27a			-16,456
3		Other increases not included in line 2 (itemize)			
4		Add lines 1, 2, and 3			8,288
5		Decreases not included in line 2 (itemize)		_ 5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lıı	ne 30 . 6	8,288

		the kınd(s) of property sold (e g , re ouse, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a	See Additional Data ⁻	Table						
b								
С								
d								
e								
(e) Gross sales price	(f) Depreciation allowe (or allowable)	1 10	or other basis pense of sale		or (loss)) mınus (g)		
а	See Additional Data 1	Table Table						
b								
С								
d								
e								
Со	mplete only for assets s	showing gain in column (h) and owne	d by the foundation	on 12/31/69	(I) Gains (Col	(h) gaın mınus		
(i)	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı)	col (k), but not	col (k), but not less than -0-) o Losses (from col (h))		
а	See Additional Data	Table Table						
b								
С								
d								
e								
3	Net short-term capita	me or (net capital loss))	2	167,46		
3	Net short-term capita If gain, also enter in F in Part I, line 8	l gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru	ns 1222(5) and (6) ctions) If (loss), e	nter -0 - }	3	167,46		
3 Part or opt sections the	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Use by domestic point 4940(d)(2) applies, I foundation liable for the	In gain or (loss) as defined in section Part I, line 8, column (c) (see instruction). Inder Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section	ns 1222(5) and (6) ctions) If (loss), ed. educed Tax on ection 4940(a) tax able amount of any	nter -0 - Net Investment on net investment	3 ent Income			
Part or opt sections the "Yes,"	Net short-term capital If gain, also enter in Fin Part I, line 8 . V Qualification Lonal use by domestic point 4940(d)(2) applies, I foundation liable for the the foundation does not be seen as a second second seen as a second second seen as a second	al gain or (loss) as defined in section of the section of the section and the section are the	ns 1222(5) and (6) ctions) If (loss), elections of the ction 4940(a) tax able amount of any o not complete this	nter -0 -	3 ent Income Income)			
3 Part propt sections the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic point 4940 (d)(2) applies, I foundation liable for the the foundation does not the appropriate amore the appropriate amore (a) period years Calendar	In gain or (loss) as defined in section Part I, line 8, column (c) (see instruction). Inder Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section in the section 4942 tax on the distributed in the section	ns 1222(5) and (6) ctions) If (loss), elections of the ction 4940(a) tax able amount of any o not complete this	nter -0 -	ant Income Income) eriod? cries (d) Distribution	Γ Yes Γ No		
3 Part propt sections the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Using the part of the foundation liable for the the foundation does not get the appropriate among the capital (a)	In gain or (loss) as defined in section Part I, line 8, column (c) (see instruction) and the section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distribute of qualify under section 4940(e) Definition in each column for each year, section 4940(e)	ee instructions before	nter -0 -	ant Income Income) eriod? eriod?	T Yes ▼ No n ratio by col (c))		
3 Part or opt section as the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic point 4940 (d)(2) applies, I foundation liable for the the foundation does not the term of the appropriate amore tax year beginning in)	In gain or (loss) as defined in section Part I, line 8, column (c) (see instruction). Inder Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributed to the section 4940 (e) Document in each column for each year, section 4940 (e) Adjusted qualifying distributions	ee instructions before	nter -0 -	ant Income Income) eriod? cries (d) Distribution	Yes V No		
3 Part or opt section as the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic point 4940 (d)(2) applies, I foundation liable for the the foundation does not the term the appropriate amount (a) period years Calendar or tax year beginning in) 2013	In gain or (loss) as defined in section Part I, line 8, column (c) (see instruction). Inder Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distribute of qualify under section 4940(e). Definition in each column for each year, section 4940(e). Adjusted qualifying distributions.	ee instructions before	nter -0	ant Income Income) eriod? cries (d) Distribution	Tratio by col (c)) 12 053409 15 454953		
3 Part propt sections the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic point 4940(d)(2) applies, I foundation liable for the the foundation does not the term of the appropriate amount (a) penod years Calendar or tax year beginning in) 2013 2012	In gain or (loss) as defined in section of part I, line 8, column (c) (see instruction). Inder Section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distribute of qualify under section 4940(e). Do unt in each column for each year, section 4940(e). Adjusted qualifying distributions 436,695 379,620	ee instructions before	nter -0	ant Income Income) eriod? cries (d) Distribution	Yes V No n ratio by col (c)) 12 053409 15 454953 37 77462		
3 Part or opt section as the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic property of the foundation liable for the the foundation does not the term of t	Jal gain or (loss) as defined in section Part I, line 8, column (c) (see instruction) (see instruction	ns 1222(5) and (6) ctions) If (loss), elections) If (loss), election 4940(a) tax able amount of any onot complete this elections before the complete the complete this elections before the complete the complete this elections.	nter -0 -	ant Income Income) eriod? cries (d) Distribution	Yes V No Pratio by col (c)) 12 053409 15 454953 37 77462 14 687717		
3 Part or opt section as the "Yes," 1 Ent	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic properties of 4940(d)(2) applies, I foundation liable for the the foundation does not the foundation does not the appropriate amore tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column	Jal gain or (loss) as defined in section Part I, line 8, column (c) (see instruction) (see instruction	educed Tax on the control of the con	nter -0 -	ant Income Income) eriod? cries (d) Distribution	Tratio (c)) 12 053409 15 454953 37 77462 14 687717		
3 Part or opt section as the "Yes," 1 Ent Base year (c) 2 3	Net short-term capita If gain, also enter in Fin Part I, line 8 V Qualification Usional use by domestic part and a second seco	Jal gain or (loss) as defined in section Part I, line 8, column (c) (see instruction) (see instruction	educed Tax on ection 4940(a) tax able amount of any o not complete this ee instructions before Net value of nonchar	nter -0	ant Income Income Income) eriod? cries (d) Distribution (col (b) divided	Yes V No Pratio by col (c)) 12 053409 15 454953 37 77462 14 687717 11 155765 91 12646		
3 Part or opt section as the "Yes," 1 Ent Base year (c) 2 3	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Lation Lational use by domestic plants and the foundation liable for the distribution does not the appropriate amount of tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column A verage distribution the number of years to Enter the net value of	Jal gain or (loss) as defined in section of art I, line 8, column (c) (see instruction) (see instructi	educed Tax on ection 4940(a) tax able amount of any o not complete this ee instructions before Net value of nonchard endet the total on line of the from Part X, line 5 from Part X, line 5	nter -0	aries (d) Distribution (col (b) divided	Tratio by col (c)) 12 053409 15 454953 37 77462 14 687717 11 155769 91 12646 18 22529 6,63		
2 3 Part or opt section as the "Yes," 1 Ent Base year (d) 2 3 4 5	Net short-term capita If gain, also enter in Fin Part I, line 8 V Qualification Usional use by domestic properties of 4940 (d)(2) applies, I foundation liable for the the foundation does not the foundation does not the term of the appropriate amount (a) penod years Calendar or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column A verage distribution the number of years the Enter the net value of Multiply line 4 by line	Jal gain or (loss) as defined in section of art I, line 8, column (c) (see instruction) and art I, line 8, column (c) (see instruction) and are section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributed at qualify under section 4940(e). Do not unt in each column for each year, section 4940(e). (b) Adjusted qualifying distributions 436,695 379,620 434,597 453,542 220,873 In (d)	educed Tax on the complete this the complete thi	nter -0	ant Income Income Income) eriod? cries (d) Distribution (col (b) divided)	Tratio by col (c)) 12 053409 15 454953 37 77462 14 687717 11 155765 91 12646 18 22529 6,63 120,85		
as the "Yes," 1 Ent Base year (c)	Net short-term capita If gain, also enter in Fin Part I, line 8 V Qualification L Ional use by domestic points and the foundation liable for the foundation does not the fou	Jal gain or (loss) as defined in section Part I, line 8, column (c) (see instruction) (see instruction	educed Tax on the complete this earnstructions before the total on line of the complete that the complete that the complete that the complete the complete that the complete the complete the complete that the co	nter -0	ant Income Income) eriod? cries (d) Distribution (col (b) divided)	Tratio by col (c)) 12 053409 15 454953 37 77462 14 687717 11 155765 91 12646 18 22529 6,63 120,85		
Part or opt section as the "Yes," 1 Ent Base year (c) 2 3 4 5	Net short-term capital If gain, also enter in Fin Part I, line 8. V Qualification Usional use by domestic property of the foundation liable for the the foundation does not t	Jal gain or (loss) as defined in section of art I, line 8, column (c) (see instruction) and art I, line 8, column (c) (see instruction) and are section 4940(e) for Reprivate foundations subject to the section 4942 tax on the distributed at qualify under section 4940(e). Do not unt in each column for each year, section 4940(e). (b) Adjusted qualifying distributions 436,695 379,620 434,597 453,542 220,873 In (d)	educed Tax on ection 4940(a) tax able amount of any onot complete this ee instructions before the value of nonchard from Part X, line 5 from Part	nter -0	ant Income Income Income) eriod? cries (d) Distribution (col (b) divided)			

	990-PF (2014)			age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Fand enter "N/A"			
	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		1	1,667
	here 🟲 🔽 and enter 1% of Part I, line 27b			
С	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		1	1,667
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			1,667
6	C redits/P ay ments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 4,312			
ь	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		,	4,312
-				7,312
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			2,645
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 2,645 Refunded 11			
	t 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		res	No
	It participate or intervene in any political campaign?	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions	ا ا		
	for definition)?	1b		No
	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.	.		N
	Did the foundation file Form 1120-POL for this year?	1c		No
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 \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	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		No
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
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		No
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ■ By language in the governing instrument, or		 	
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NY			
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	Yes	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	. 10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►CHILTON TRUST COMPANY LLC Telephone no ►(203)	352-	4000	
	Located at ► 1290 E MAIN ST-3RD FLOOR STAMFORD CT ZIP+4 ► 06902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year	•		• '
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16	103	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		<u> </u>	1
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		No
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))			
а	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			
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)	a.		
_	to all years listed, answer "No" and attach statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2-	► 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
h	any time during the year?			
J	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		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1.5
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

5a	During the year did the foundatio	n pay	or incurany amoun	t to								
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?											
	(2) Influence the outcome of any specific public election (see section 4955), or to carry											
	on, directly or indirectly, any	vote	registration drive?.				┌ Yes ┌	No				
	(3) Provide a grant to an individu	al fo	travel, study, or oth	ers	ımılar purposes?		Γ Yes Γ	No				
	(4) Provide a grant to an organize in section 4945(d)(4)(A)? (s							- No				
(5) Provide for any purpose other than religious, charitable, scientific, literary, or												
	educational purposes, or for t		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)?												
	Organizations relying on a currer	nt not	ice regarding disast	eras	ssistance check here	e	▶↑	-				
c	If the answer is "Yes" to question	n 5a(4), does the foundat	ion c	laım exemption from	the	!					
	tax because it maintained expend	diture	responsibility for th	ie gr	ant?		Г Yes Г	No				
	If "Yes," attach the statement requ	ıred i	y Regulations section	n 53.	4945-5(d).							
6a	Did the foundation, during the yea	ar, re	ceive any funds, dire	ctly	or indirectly, to pay	prei	miums on					
	a personal benefit contract?							No				
b	Did the foundation, during the year	ar, pa	y premiums, directly	orı	ndirectly, on a perso	nal	benefit contract?		6b		No	
	If "Yes" to 6b, file Form 8870.											
7a	At any time during the tax year, w	was t	ne foundation a party	/ to a	a prohibited tax shel	tert	ransaction? TYes V	No				
b	If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	e to t	the transaction?		7b			
Dai		t Of	ficers, Directors	, Tı	rustees, Founda	tio	n Managers, Highly	Paid	Emp	loye	es,	
	and Contractors											
1	List all officers, directors, trustee											
(a) Name and address hours			Title, and average hours per week evoted to position		c) Compensation If not paid, enter -0-)	е	(d) Contributions to employee benefit plans d deferred compensation		(e) Expense accoun			
BENJA	AMIN BREWSTER	-	SIDENT &		0							
c/O CHILLON TROOT COM ANT		DIR 3 0	ECTOR									
LLC	MFORD,CT 06902	٦										
	T B YORK	SEC	RETARY &	0								
	CHILTON TRUST COMPANY	_	ECTOR									
LC		2 0										
	MFORD,CT 06902											
	NEY B ARMSTRONG		E PRESIDENT &	0								
C/O LLC	CHILTON TRUST COMPANY	1 0	ECTOR									
	MFORD,CT 06902											
OTNA	INETTE BREWSTER	TRE	ASURER		0							
2/0	CHILTON TRUST COMPANY	1 0										
LLC	MEORD OF OCCUPA											
	MFORD,CT 06902				- induded on line 1		instructions) If your		IONE !	,		
	Compensation of five highest-paid	ı emp			e included on line 1–	-see		iter i	NOINE.			
(a)	Name and address of each emplo paid more than \$50,000	yee	(b) Title, and avera hours per week devoted to position	(c) Compensation employee benefit				(e) Expense account, other allowances				
	Laurel and Caller		150,000									

Information About Officers, Directors, Truste	es, Foundation Managers, Hi	ghly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	 VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 rele		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	A mount
<u>-</u>		
2		
All other program-related investments See instructions 3		
<u> </u>		
Total. Add lines 1 through 3		▶

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign fo	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	179
b	A verage of monthly cash balances	1b	6,55
C	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	6,73
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	(
3	Subtract line 2 from line 1d	3	6,73
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	10:
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,63
6	Minimum investment return. Enter 5% of line 5	6	337
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	atıng fo	undations and
	certain foreign organizations check here 🕨 📗 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	332
2a	Tax on investment income for 2014 from Part VI, line 5 2a 1,667	<u>'</u>	
b	Income tax for 2014 (This does not include the tax from Part VI) 2b	4	
C	Add lines 2a and 2b	2c	1,667
3	Distributable amount before adjustments Subtract line 2c from line 1	3	(
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	(
Par	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	246,367
b	Program-related investments—total from Part IX-B	1b	(
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	(
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	(
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	246,36
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	1,667
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	244,700
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet the section 4940(e) reduction of tax in those years	her the fo	oundation qualifies for

For	n 990-PF (2014)					Page 9
Р	art XIII Undistributed Income (se	e instruction	s)			<u></u>
			(a)	(b)	(c)	(d)
			Corpus	Years prior to 2013	2013	2014
1	Distributable amount for 2014 from Part XI,	ine 7				0
2	Undistributed income, if any, as of the end of	2014				
а	Enter amount for 2013 only				0	
b	Total for prior years 2012, 2011, 20	10				
3	Excess distributions carryover, if any, to 201	. 4				
а	From 2009	220,967				
b	From 2010	454,644				
C	From 2011	434,466				
d	From 2012	379,620				
	From 2013	436,695	1 026 202			
	Total of lines 3a through e		1,926,392			
4	Qualifying distributions for 2014 from Part					
	XII, line 4 • \$ 246,367					
	Applied to 2013, but not more than line 2a				U	
b	Applied to undistributed income of prior years (Election required—see instructions)					
_	Treated as distributions out of corpus (Elective					
·	required—see instructions)					
d	Applied to 2014 distributable amount					0
	Remaining amount distributed out of corpus		246,367			
	Excess distributions carryover applied to 20	14	0			0
_	(If an amount appears in column (d), the					
	same amount must be shown in column (a).)					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract line	e 5	2,172,759			
b	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistributed					
	income for which a notice of deficiency has been issued, or on which the section 4942(a)					
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable amoun					
	—see instructions					
е	Undistributed income for 2013 Subtract line					
	4a from line 2a Taxable amount—see				0	
£	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					
	be required - see instructions)					
8	Excess distributions carryover from 2009 no applied on line 5 or line 7 (see instructions).		220,967			
9	Excess distributions carryover to 2015.					
_	Subtract lines 7 and 8 from line 6a		1,951,792			
10	Analysis of line 9					
а	Excess from 2010	454,644				
b	Excess from 2011	434,466				
C	Excess from 2012	379,620				
d	Excess from 2013	436,695				
е	Excess from 2014	246,367				

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

c Any submission deadlines

factors

Part XV Supplementary Inform	mation (continued)			
3 Grants and Contributions Paid		oroved for F	uture Payment	<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
a Paid during the year See Additional Data Table	of Substantial Contributor			
Tabal				245.05
Total	<u> </u>	<u></u>	► 3a	245,08
, , , , , , , , , , , , , , , , , , , ,				
T-1-1			line on the	1

Form 990-PF		4 -1' '1'-	_			Page 12
	A Analysis of Income-Produci		s usiness income	Excluded by sectio	n 512, 513, or 514	(e)
1 Program s	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
b						
e f						
2 Members3 Interest	nd contracts from government agencies ship dues and assessmentson savings and temporary cash ents					
5 Net renta	s and interest from securities al income or (loss) from real estate nanced property					
b Not deb 6 Net renta	ot-financed property					
8 Gain or (vestment income loss) from sales of assets other than y			18	4,776	
10 Gross pr	me or (loss) from special events ofit or (loss) from sales of inventory venue a					
с						
12 Subtotal 13 Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)			:	4,776 13	
	Relationship of Activities to Explain below how each activity for which the accomplishment of the foundation's instructions.)	the Accomp	ported ın column (e) of Part XVI-A c	ontributed importa	
	,					

Form 990-P	F (2014)										Рa	ge 13
Part XVI	II Information R Noncharitable					actio	ns and I	Relationships	With			
section	organization directly or i 501(c) of the Code (oth	indirectly 6	engage	ın any of	the following wit						Yes	No
organıza						_						
	s from the reporting fou											١
	:h									1a(1)		No
	erassets									1a(2)		No
	ansactions									41.74		l
	es of assets to a noncha											No
	chases of assets from a											No
	tal of facilities, equipme									1b(3)		No No
	mbursement arrangeme ns or loan guarantees.									1b(5)		No
	ormance of services or r									1b(6)		No
	of facilities, equipment,									─		No
d If the an of the go	swer to any of the above ods, other assets, or seans action or sharing arr	e is "Yes," ervices giv rangement	compl en by t , show	ete the fo the reporti in column	llowing schedule ing foundation I	Colun f the fou the go	nn (b) sho undation r ods, other	ould always show the celeved less than are assets, or services	the fair ma fair mark es receive	rket va et value ed	1	
(a) the No	(B) Amount involved	(c) Name	OI HOTIC	паптаріе ех	empt organization	(a)	Description	of transfers, transact	ons, and sna	illig alla	ngemer	its
												,
-												
describe	undation directly or indied in section 501(c) of t complete the following (a) Name of organizatio	he Code (c schedule		nan sectio	•	ın sectı	-		tion of relati	. □Ye	es F	, No
the	der penalties of perjury, be best of my knowledge a ormation of which prepa	and belief, rer has any	ıt ıs tr	ue, correc	t, and complete		*****		n taxpaye May the return		sed on	all
	Signature of officer or t	., u > t e e			Date	1	Title			tr)? 🔽 <u>\</u>	∕es	No
	Print/Type preparer's PAUL F NAPOLEO		Prepa	arer's Sıgr	nature	Date		Check if self- employed ▶	PTIN P	003691	128	
Paid Prepare Use		MPANY L	LC			•		Firm's EIN ▶	•			
Only	Firm's address F	DEET CT	- A M - A	יפט כד י	16002			Phone pp. /434	1244 224			
	1290 EAST MAIN ST	NLEI 51	AMITU	, KD, CT (JU			Phone no (434	, 244-336	, 0		

orm 990PF Part IV - Capit	al Gains and Losses for Ta	x on Invest	ment Income -	Columns a - d	
= =	kınd(s) of property sold (e g , real e , or common stock, 200 shs MLC	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
206 SHS BERKSHIRE H	HATHAWAY INC CLB		D	1990-04-24	2014-04-28
155 SHS STRYKER CORP COM			D	2011-01-27	2014-12-29
120 SHS HALLIBURTO	120 SHS HALLIBURTON CO COM			2009-03-06	2014-12-29
260 SHS MARSH MCLE	260 SHS MARSH MCLENNAN CO COM				2014-12-29
1,440 SHS MASTERCA	1ASTERCARD INC			2006-05-25	2014-12-17
58 SHS SMUCKER JM (CO COM NEW		D	2009-03-06	2014-12-29
rm 990PF Part IV - Capit	al Gains and Losses for Ta	x on Invest	ment Income -	Columns e - h	I
(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)	
26,330		915		25,41	
14,735		9,030 5,7			5,705
4,832		1,799 3,0			3,033

	(or allowable)	plus expense of sale	(e) plus (f) mınus (g)
26,330		915	25,415
14,735		9,030	5,705
4,832		1,799	3,033
15,165		5,127	10,038
125,119		5,814	119,305
5,983		2,011	3,972

· · · · · · · · · · · · · · · · · · ·		,	
,	•	•	•

125,119		5,614	119,305
5,983		2,011	3,972
Form 990PF Part IV - Capit	al Gains and Losses for Ta	x on Investment Income -	Columns i - I
Complete only for assets show	ring gain in column (h) and owned b	by the foundation on 12/31/69	(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	(j) A djusted basis as of 12/31/69	(k) Excess of col (ı) over col (յ), ıf any	col (k), but not less than -0-) or Losses (from col (h))
			25,415
			5,705
			3,033
			10,038
			119,305

3,972

		I		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FOCUSED ULTRASOUND SURGERY FOUNDATION 1230 CEDARS COURT SUITE F CHARLOTTESVILLE,VA 22903	NONE	PC	MEDICAL AND SCIENTIFIC RESEARCH	1,000
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA PO BOX 707 CHARLOTTESVILLE,VA 22902	NONE	PC	YOUTH PROGRAMS	40,500
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE ANNAPOLIS,MD 21403	NONE	PC	ENVIRONMENTAL PROTECTION & PRESERVATION	1,000
WORLD WILDLIFE FUND 1250 24TH STREET NW WASHINGTON, DC 20037	NONE	PC	WILDLIFE PRESERVATION AND PROTECTION	15,000
MAINE COAST HERITAGE TRUST 1 BOWDOIN MILL ISLAND SUITE 201 TOPSHAM,ME 04086	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	4,000
FRIENDS OF ACADIA 43 COTTAGE STREET PO BOX 45 BAR HARBOR, ME 046090045	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	6,100
WVTF PUBLIC RADIO-RADIO IQ 3520 KINGSBURY LANE ROANOKE,VA 24014	NONE	PC	PUBLIC BROADCASTING	500
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 04609	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	4,500
THE WILDERNESS SOCIETY 1615 M STREET NW WASHINGTON, DC 200363209	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	750
FOUNTAIN HOUSE INC 425 WEST 47TH STREET NEW YORK,NY 100362304	NONE	PC	COMMUNITY MENTAL HEALTH SERVICES	750
SOUTH KENT SCHOOL CORPORATION 40 BULLS BRIDGE ROAD SOUTH KENT,CT 06785	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	10,000
TRUDEAU INSTITUTE INC 154 ALGONQUIN AVENUE SARANAC LAKE,NY 12983	NONE	PC	MEDICAL AND SCIENTIFIC RESEARCH	11,892
LOCAL FOOD HUB PO BOX 4647 CHARLOTTESVILLE, VA 22905	NONE	PC	HORTICULTURAL PROGRAMS	2,000
LIGHT HOUSE STUDIO INC 121 EAST WATER STREET CHARLOTTESVILLE,VA 22902	NONE	PC	YOUTH FILM FESTIVAL	750
BEATRIX FARRAND SOCIETY PO BOX 111 MOUNT DESERT,ME 04660	NONE	PC	HORTICULTURAL PROGRAMS	750
Total				245,087

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		_
a Paid during the year				
PLANNED PARENTHOOD HEALTH SYSTEMS INC 2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 22901	NONE	PC	REPRODUCTIVE HEALTH CARE AND FAMILY PLANNING	5,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDES PLACE MEMPHIS,TN 381051942	NONE	PC	MEDICAL AND SCIENTIFIC RESEARCH	1,000
TUESDAY EVENING CONCERT SERIES INC 108 FIFTH STREET SE SUITE 208 CHARLOTTESVILLE,VA 22902	NONE	PC	SUPPORT OF PERFORMING ART PROGRAMS	500
THE ANIMAL MEDICAL CENTER- CARDIOLOGY DEPT 510 EAST 62ND STREET NEW YORK,NY 10065	NONE	PC	VETERINARY PROGRAMS AND RESEARCH	25,000
NATIONAL AUDUBON SOCIETY INC 225 VARICK STREET 7TH FLOOR NEW YORK,NY 10014	NONE	PC	WILDLIFE PRESERVATION AND PROTECTION	1,000
WATERKEEPER ALLIANCE INC 17 BATTERY PLACE SUITE 1329 NEW YORK,NY 10004	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	750
RIVANNA CONSERVATION SOCIETY INC PO BOX 1501 CHARLOTTESVILLE,VA 22902	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	1,000
CHARLOTTESVILLE TOMORROW PO BOX 1591 CHARLOTTESVILLE,VA 22902	NONE	PC	PUBLIC EDUCATIONAL PROGRAMS	1,000
MONTPELIER FOUNDATION INC PO BOX 67 MONTPELIER STATION, VA 22957	NONE	PC	HISTORIC PRESERVATION	5,000
THE CHAPIN SCHOOL LTD 100 EAST END AVENUE NEW YORK, NY 10028	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	250
THE PARISH OF ST MARY AND ST JUDE PO BOX 105 NORTHEAST HARBOR,ME 04662	NONE	PC	SUPPORT OF RELIGIOUS INTITUTION	1,000
WMRA PUBLIC RADIO 983 RESERVOIR STREET HARRISONBURG,VA 22801	NONE	PC	PUBLIC BROADCASTING	800
BLUE RIDGE AREA FOOD BANK INC PO BOX 937 96 LAUREL HILL ROAD VERONA,VA 24482	NONE	PC	FREE FOOD DISTRIBUTION PROGRAMS	5,000
HOOVED ANIMAL HUMANE SOCIETY 10804 MCCONNELL ROAD WOODSTOCK,IL 60098	NONE	PC	PROTECTION AGAINST ANIMAL CRUELTY	200
THE FRIENDS OF GREEN CHIMNEYS 400 DOANSBURG ROAD BOX 719 BREWSTER, NY 105090719	NONE	PC	THERAPEUTIC PROGRAMS FOR CHILDREN	500
Total				245,087

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF VIRGINIA - WTJU FM RADIO 400 RAY C HUNT DRIVE PO BOX 400807 CHARLOTTESVILLE, VA 229044807	NONE	PC	COMMUNITY RADIO PROGRAM	800
MIDDLE EAST CHILDREN'S INSTITUTE 119 WEST 72ND STREET BOX 279 NEW YORK, NY 10023	NONE	PC	CHILD-CENTERED COMMUNITY DEVELOPMENT PROGRAMS	1,000
THE AMERICAN KENNEL CLUB MUSEUM OF THE DOG 1721 SOUTH MASON ROAD ST LOUIS, MO 63131	NONE	PC	MUSEUM SUPPORT	500
THE UNIVERSITY OF THE SOUTH- SEWANEE 735 UNIVERSITY AVENUE SEWANEE,TN 373831000	NONE	PC	SEWANEE CREW TEAM FUND/ATHLETICS	500
THE PIEDMONT ENVIRONMENTAL COUNCIL INC PO BOX 460 WARRENTON, VA 20188	NONE	PC	ENVIRONMENTAL PROTECTION AND PRESERVATION	5,000
TRUSTEES OF PHILLIPS ACADEMY ANDOVER 180 MAIN STREET ANDOVER,MA 018104161	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	250
PET PARTNERS 875 124TH AVENUE NE 101 BELLEVUE, WA 98005	NONE	PC	THERAPEUTIC HEALING THROUGH ANIMAL CONTACT	500
NEW CANAAN COUNTRY SCHOOL INC 545 PONUS RIDGE NEW CANAAN, CT 06840	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	1,000
YALE UNIVERSITY PO BOX 2038 NEW HAVEN, CT 065212038	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS / UNRESTRICTED	1,000
UNITED STATES EQUESTRIAN TEAM FOUNDATION INC 1040 POTTERSVILLE ROAD PO BOX 355 GLADSTONE, NJ 079340355	NONE	PC	EQUESTRIAN ATHLETIC PROGRAMS	100
ASH LAWN OPERA FESTIVAL FOUNDATION PO BOX 2498 CHARLOTTESVILLE, VA 22902	NONE	PC	PERFORMING ARTS PROGRAMS	3,000
MOUNT DESERT FESTIVAL OF CHAMBER MUSIC PO BOX 87 MOUNT DESERT,ME 04660	NONE	PC	PERFORMING ARTS PROGRAMS	500
OXFORD ACADEMY INC 1393 BOSTON POST ROAD WESTBROOK,CT 06498	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	1,000
ST HUBERT'S GIRALDA DBA ST HUBERTS ANIMAL WELFARE 575 WOODLAND AVENUE PO BOX 159 MADISON,NJ 079400159	NONE	PC	PROGRAMS AGAINST ANIMAL CRUELTY	1,000
SCOTTSVILLE VOLUNTEER RESCUE SQUAD PO BOX 550	NONE	PC	VOLUNTEER FIRE AND RESCUE PROGRAMS	1,000

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CENTER FOR NONPROFIT EXCELLENCE PO BOX 5652 CHARLOTTESVILLE,VA 22905	NONE	PC	MANAGEMENT TRAINING AND CAREER DEVELOPMENT PROGRAMS	750
AMERICAN KENNEL CLUB CANINE HEALTH FOUNDATION INC 8051 ARCO CORPORATE DRIVE SUITE 300 RALEIGH,NC 276173901	NONE	PC	CANINE VETERINARY RESEARCH AND PROGRAMS	1,000
THE PARAMOUNT THEATER INC 215 E MAIN STREET CHARLOTTESVILLE,VA 22902	NONE	PC	PRESERVATION OF HISTORIC LANDMARK	750
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK,NY 100280198	NONE	PC	COLLECTION AND PRESERVATION OF ARTWORK	500
ST LUKE'S EPISCOPAL CHURCH 8009 FORT HUNT ROAD ALEXANDRIA, VA 22308	NONE	PC	SUPPORT OF RELIGIOUS INSTITUTION	6,000
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK,NY 10024	NONE	PC	COLLECTION AND PRESERVATION OF ARTWORK	4,145
GARRISON FOREST SCHOOL INC 300 GARRISON FOREST SCHOOL OWINGS MILLS,MD 21117	NONE	PC	EDUCATIONAL AND ACADEMIC PROGRAMS	250
WHTJ - COMMONWEALTH PUBLIC BROADCASTING 23 SESAME STREET RICHMOND,VA 23235	NONE	PC	PUBLIC BROADCASTING PROGRAMS	1,000
THOMAS JEFFERSON FOUNDATION INC PO BOX 316 CHARLOTTESVILLE, VA 22902	NONE	PC	LANDMARK PRESERVATION	5,000
INTERCONNECTIONS 21 PO BOX 960 WILSON, WY 83014	NONE	PC	COMMUNITY ORGANIZATION AND EDUCATION	300
THE MILLER CENTER FOUNDATION PO BOX 400406 CHARLOTTESVILLE, VA 229044406	NONE	PC	RESEARCH AND EDUCATION RELATED TO AMERICAN HISTORY AND CONTEMPORARY POLICY	750
MOUNT SINAI DEPT OF EMERGENCY MEDICINE ONE GUSTAVE LEVY PLACE NEW YORK,NY 10029	NONE	PC	MEDICAL TREATMENT AND SCIENTIFIC RESEARCH	1,000
SOUTHERN ENVIRONMENTAL LAW CENTER 201 WEST MAIN STREET ROOM-SUITE 14 CHARLOTTESVILLE,VA 229025065	NONE	PC	ENVIRONMENTAL PROTECTION	10,000
WOMEN'S PRISON ASSOCIATION & HOME INC 110 SECOND AVENUE NEW YORK,NY 10003	NONE	PC	REHABILITATION SERVICES FOR OFFENDERS	1,000
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB,UT 84741	NONE	PC	ANIMAL RESCUE AND SUPPORT AGAINST ANIMAL CRUELTY CRUELTY	1,000
Total				245,087

Show any relationship to any foundation manager or substantial contributor a Paid during the year WOMEN'S INITIATIVE 1101 EAST HIGH STREET CHARLOTTESVILLE, VA 22902 SCHOODIC EDUCATION AND RESEARCH CENTER INSTITUTE PO BOX 277 WILDLIFE CENTER OF VIRGINIA PO BOX 1557 DELTA WATERSVILLE, VA 22902 DUCKS UNLIMITED INC ONE WATERFOWL WAY MEMPHIS, TN 38120 PEREGRINE FUND INC 5668 W FLYING HAWK LANE BOISE, ID 83709 PEREGRINE FUND INC 5668 W FLYING HAWK LANE BOISE, ID 83709 DELTA WATERFOWL FOUNDATION NONE PC WETLANI AND MAD MAD MAD MAD MAD MAD MAD MAD MAD MA		
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WENDELL GILLEY MUSEUM OF RIRD NONE PC SUPPOR	S ATHLETIC TEAM	500
CARVING 4 HERRICK ROAD PO BOX 254 SOUTHEAST HARBOR, ME 04679	T OF THE ARTS	1,000
THE UNIVERSITY OF VIRGINIA HEALTH FDN TRANSPLANT CENTER PO BOX 400807 CHARLOTTESVILLE, VA 229044807	L RESEARCH AND DURES	5,000

	into una continuations	<i>-</i>	ne rear or reproved for r	<u> </u>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WOMEN UNITED IN PHILANTHROPY UNITED WAY-THOMAS JEFFERSON AREA 806 EAST HIGH STREET CHARLOTTESVILLE,VA 22902	NONE	PC	ADVOCACY OF PHILANTHROPIC EFFORTS	500
COMMUNITY INVESTMENT COLLABORATIVE PO BOX 2976 CHARLOTTESVILLE,VA 22902	NONE	PC	SUPPORT OF UNDER- RESOURCED ENTREPRENEURS UNDER- RESOURCED ENTREPRENEURS	1,000
NATURE CONSERVANCY INC 4245 N FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	NONE	PC	ENVIRONMENTAL PROTECTION	25,000
Total				245,087

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As Filed Data -

DLN: 93491119013735

OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2014

Name of the organizat JANET STONE JONES		Employer identification number	
	13-2988287		
Organization type (ch	heck one)		
Filers of:	Section:		
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
	tion is covered by the General Rule or a Special Rule. 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instruc	ctions	
General Rule			
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more () from any one contributor Complete Parts I and II See instructions for determining a contributor's total contrib		
Special Rules			
=	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ ß% support test of the regulation 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,		

for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf 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*

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor,

received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (1) Form 990,

during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

Name of organization

Employer identification number

JANET STONE JONES FOUNDATION 13-2988287 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person 굣 BENJAMIN BREWSTER Payroll Г C/O CHILTON TRUST CO 1290 E MAIN S Noncash 191,519 STAMFORD, CT 06902 (Complete Part II for noncash contributions) (b) (d) (c) (a) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person JANET BYORK Payroll C/O CHILTON TRUST CO 1290 E MAIN S Noncash 40,870 STAMFORD, CT06902 (Complete Part II for noncash contributions) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash

contributions)

Name of organization
JANET STONE JONES FOUNDATION

Employ

Employer identification number

		13-2	2988287
art 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
	See Additional Data Table	\$	
a) No. From Partl	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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		\$	
a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Form 990, 990-EZ, or 990-PF) (2014)			Page
anization			Employer identification number
NE JONES FOUNDATION			13-2988287
hat total more than \$1,000 for the year entry For organizations completing Part III, ene year (Enter this information once See in	from any on enter the total on enstructions)	e contributor . Complete of exclusively religious, c	e columns (a) through (e) and the following line
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Transferee's name, address, an	•	,	nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	•		nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an			nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, an	•		nship of transferor to transferee
	Anization NE JONES FOUNDATION Exclusively religious, charitable, etc., chat total more than \$1,000 for the year ntry For organizations completing Part III, eneyear (Enter this information once. See it is duplicate copies of Part III if additional seed uplicate copies of gift Transferee's name, address, and (b) Purpose of gift	Anization NE JONES FOUNDATION Exclusively religious, charitable, etc., contributions hat total more than \$1,000 for the year from any on ontry. For organizations completing Part III, enter the total one year (Enter this information once. See instructions.) In see duplicate copies of Part III if additional space is needed. (b) Purpose of gift (b) Purpose of gift (c) Transferee's name, address, and ZIP 4 (b) Purpose of gift (c) Transferee's name, address, and ZIP 4 (b) Purpose of gift (c) Transferee's name, address, and ZIP 4 (b) Purpose of gift (c) Transferee's name, address, and ZIP 4	Anization NE JONES FOUNDATION RECOUNTY PORTS FO

Software ID: Software Version:

EIN: 13-2988287

Name: JANET STONE JONES FOUNDATION

Form 990 Schedule B, 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	206 SHS BERKSHIRE HATHAWAY STOCK	\$ 26,085	2014-04-17
1	1,440 SHS MASTERCARD INCORPORATED STOCK	\$ <u>120,434</u>	2014-12-17
2	120 SHS HALLIBURTON CO STOCK	\$\$ 4,756	2014-12-23
2	50 SHS MARSH & MCLENNAN CO STOCK	\$\$ 2,923	2014-12-23
2	210 SHS MARSH & MCLENNAN CO STOCK	\$ <u>12,277</u>	2014-12-23
2	58 SHS SMUCKER JM CO STOCK	\$6,010	2014-12-23
2	155 SHS STRYKER CORP STOCK	\$ <u>14,904</u>	2014-12-23

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As Filed Data -

DLN: 93491119013735

OMB No 1545-0123

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Form **8949**

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No 12A Social security number or taxpayer identification number

Before you check Box A, B, or C below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	If you enter a	if any, to gain or loss an amount in column (g), code in column (f) eparate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
-							
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 1b checked), line 2 (if Box B above is C above is checked)	each total her (If Box A abov checked), or lir	e and e is le 3 (if Box . ►	RS was incorrect	()	(e) the bas	sıs as reported t	o the IRS, and

enter an adjustment in column (g) to correct the basis See Column (g) in the separate instructions for how to figure the amount of the

Page 2

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side JANET STONE JONES FOUNDATION

Social securitynumber or taxpayer identification number 13-2988287

Before you check Box D, E, or F below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> In the separate Instructions	If you enter a enter a See the se (f) Code(s) from	if any, to gain or loss an amount in column (g), code in column (f) eparate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
				(2.4=)	instructions	aujustinent	
206 SHS BERK	04-24-1990	04-28-2014	26,330	(915)			25,415
155 SHS STRY	01-27-2011	12-29-2014	14,735				5,705
120 SHS HALL	03-06-2009	12-29-2014	4,832	(1,799)			3,033
260 SHS MARS	05.25.2006	12-29-2014	15,165				10,038
1,440 SHS MA	05-25-2006 03-06-2009	12-17-2014	125,119				119,305
58 SHS SMUCK	03-06-2009	12-29-2014	5,983	(2,011)			3,972
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 8b checked), line 9 (if Box E above is compared to the subsection of the	each total her (If Box D abov hecked), or lin	e and e ıs e 10 (ıf > -	192,164				167,468

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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TY 2014 Depreciation Schedule

Name: JANET STONE JONES FOUNDATION



TY 2014 Investments Corporate Stock Schedule

Name: JANET STONE JONES FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
STOCK SALE PROCEEDS	40,716	8,288

TY 2014 Other Expenses Schedule

Name: JANET STONE JONES FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEE	4	4		
NYS DEPT OF LAW - FILING FEES	25			25
ADMINISTRATION EXPENSES	505			505



TY 2014 Other Income Schedule

Name: JANET STONE JONES FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
2012 GRANT RETURNED			

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TY 2014 Other Professional Fees Schedule

Name: JANET STONE JONES FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	1,500	750		750

TY 2014 Taxes Schedule

Name: JANET STONE JONES FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2013 EXTENSION PAYMENT - IRS	6,000			
2014 - 4Q ESTIMATED TAX	500			