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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

2014

Department of the Treasury Internal Revenue Service

▶ 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 et www.ins.gov/form990pf.

		car year 2014 or tax year beg	nning	, 20	4, and	ending		, 20
		undation				A Employe	r identification numbe	M
AH	EPA RO	OCHESTER FOUNDATION				1	16-1448695	
Nu	urper en	d street (or P.O. box number if mail is no	ot delivered to street address)	Room	n/sulte	B Telephon	e number (see Instructi	ions)
100	AHEP	A CIRCLE		ļ			585-383-8097	•
Ctt	y or town	n, state or province, country, and ZIP or	foreign postal code			C if exempt	ion application is pend	ing. check here ▶ □
WE	BSTER	L NY 14580						
G	Check	all that apply: Initial return	m Initial return	of a former publi	c charity	D 1. Foreion	n organizations, check	here▶∏
		☐ Final-retur			•	}	n organizations meeting	_
		☐ Address c	hange 🔲 Name char	nge		check	here and attach compi	dation ▶□
H	Check	type of organization:	ction 501(c)(3) exempt p	rivate foundation			foundation status was	
	Section	n 4947(a)(1) nonexempt charite				SECUONS	07(b)(1)(A), check here	▶⊔
			J Accounting method	: 🗸 Cash 🔲 🗸	\ccrual	F lithe four	ndation is in a 60-mont	h terrebonion
		f year (from Part II, col. (c),	Other (specify)				tion 507(b)(1)(B), chec	
	line 16) ▶ \$ 205,844	(Part I, column (d) must be	on cash basis.)				
P	art I	Analysis of Revenue and Exp	penses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) in		expenses per		t investment ncome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instru	ctions).)	books	l T			(cash basis only)
_	1	Contributions, gifts, grants, etc., re	eceived (attach schedule)	8,88	7	-		
	2	Check ► if the foundation is no						
	3	Interest on savings and tempo	rary cash investments	12:	9	129	129	
	4	Dividends and interest from se	ecurities	83	3	833	833	
	5a	Gross rents						
	ь	Net rental income or (loss)						[
9	6a	Net gain or (loss) from sale of	assets not on line 10					
Ĕ	b	Gross sales price for all assets on t	ine 6a					
Revenue	7	Capital gain net income (from	Part IV, line 2)					
Ĕ	8	Net short-term capital gain .						
	9	Income modifications			-			
	10a	Gross sales less returns and allow	rances		1		, -	
	ь	Less: Cost of goods sold .					-	
	C	Gross profit or (loss) (attach s	chedule)					
	11	Other Income (attach schedul	e)					
	12	Total. Add lines 1 through 11		9,84	9	962	962	
Ø	13	Compensation of officers, dire						
9	14	Other employee salaries and						
ē	15	Pension plans, employee ben	efits					
묫	16a	Legal fees (attach schedule)						
B	Ь	Accounting fees (attach sched						
trative Expenses	C	Other professional fees (attack	h schedule)	68	5			685
	17	Interest						
SE	18	Taxes (attach schedule) (see inst	ructions)		1			
Ē	19	Depreciation (attach schedule			<u> </u>			
Ī	20	Occupancy			<u> </u>			
Operating and Adminis	21	Travel, conferences, and mee	# \partial 2 2015 · \qu					<u> </u>
a	22	Printing and publications			1			
D	23	Other expenses (attach sched	tute)	12,26	2			12.262
돭	24	Total operating and admi]	[
2		Add lines 13 through 23		12,94	7			12,947
ဝိ	25	Contributions, gifts, grants pa			 			
_	26	Total expenses and disburseme	ents. Add lines 24 and 25	12,94	7			12,947
	27	Subtract line 26 from line 12:		}]]
	a	Excess of revenue over expens		-3.09	В			<u> </u>
	b	Net investment income (if ne	-	ļ	 	962		<u> </u>
	<u> </u>	Adjusted net income (if nega	tive, enter -O-)	<u> </u>			962	<u> </u>

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

		Attached schedules and amounts in the description column	Beginning of year	End of	year
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	40,771	36,742	38,742
	2	Savings and temporary cash investments	37,918	38,046	38,046
	3	Accounts receivable ▶			<u> </u>
		Less: allowance for doubtful accounts ▶	į		•
	4	Pledges receivable ▶	4	·	
		Less: allowance for doubtful accounts ▶	ì		
	5	Grants receivable			····
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and toans receivable (attach schedule)	-		
		Less: allowance for doubtful accounts ▶	1		
B	8	Inventories for sale or use			
Asseta	9	Prepaid expenses and deferred charges			
As	10a	Investments-U.S. and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	19,745	20,548	16,521
	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)			
	14	Land, buildings, and equipment: basis ► 114.535	-		
	''	Less: accumulated depreciation (attach schedule) > -0-	114,535	114.535	114,535
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers—see the			
] -	instructions. Also, see page 1, item I)	212,969	209,871	205,844
	17	Accounts payable and accrued expenses	212,000	203,07 1	200,07
	18	Grants payable			
98	19	Deferred revenue			•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
豆	21	Mortgages and other notes payable (attach schedule)			
Ĩ	22				
	23	Other liabilities (describe >) Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here >			
88		and complete lines 24 through 26 and lines 30 and 31.			
ğ	24	Unrestricted	1		
ā	25	Temporarily restricted			
ä	26	· ·			
Fund Balances	20	Permanently restricted			
٦		Foundations that do not follow SFAS 117, check here ► ☑			
_	22	and complete lines 27 through 31.		### A	
Net Assets or	27	Capital stock, trust principal, or current funds	212,969	209,871	
že	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ą	29	Retained earnings, accumulated income, endowment, or other funds			
¥	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see			-
ž	31				
			212,969	209,871	
	rt III	Analysis of Changes in Net Assets or Fund Balances			
7	100	I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (must	agree with	
_		of-year figure reported on prior year's return)			212,969
_		er amount from Part I, line 27a			-3.098
3					
4		lines 1, 2, and 3		4	209.871
5	Deci	reases not included in line 2 (itemize)		5	
	1013	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	e30 6	209.871

Part	Capital Gains and	<u>i Losses for Tax on Investr</u>	nent income			·
		ie kindijų of property sold (n.g., real estat ise; or common stock, 200 ahs. MLC Co.		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
<u> </u>						
<u>c</u>				<u> </u>		<u> </u>
			4.4	L		<u> </u>
	(a) Gross sales price	(f) Depreciation allowed (or allowable)	. —	other basis nee of axie		h or (loss) (1) minus (8)
a						
ь						
<u> </u>	·····					
<u>d</u>						
- 0	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	on 12/91/89		
	(A) F.M.V. as of 12/31/69	(i) Activated basis as of 12/31/69	(N) Exces	s of col. (1) . (1), if any	col. (kt), but no	l. (h) gain minus 1 less than -0-) or from col. (h))
8						
ь						
C						
			L			
2	Capital gain net income o		also enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) (see instru	ctions). If (loss)			
		 		• • • • • • • • • • • • • • • • • • • •	3	NONE
Part		ler Section 4940(e) for Redivate foundations subject to the				
Was t		e this part blank, section 4942 tax on the distribu qualify under section 4940(e). [pase period?	☐ Yes ☑ No
1	Enter the appropriate amo	ount in each column for each ye	ar; see the instr	uctions before ma	aking any entries.	
Cath	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	a Net velue o	(c) i noncheziteble-use er	Dis cool, (b)	(d) tribution ratio divided by col. (d)
	2013					
	2012					
	2011					
	2010					
	2009					
_						
2 3	Total of line 1, column (d)	for the 5-year base period—div			. 2	
3		dation has been in existence if k			. 3	···
4	Enter the net value of non	charitable-use assets for 2014 t	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27):)		. 6	
7	Actd lines 5 and 6				. 7	
8	If line 8 is equal to or gree	ons from Part XII, line 4 ater than line 7, check the box in			. 8 hat part using a 1	N/A 1% tax rate. See the
	Part VI instructions.			•	-	

4	۵.	_	_	4
- 1	T U	ч	v	-

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	<u> inst</u>	ructio	ons)_			
1a	Exempt operating foundations described in section 4940(d)(2), check here ► □ and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			9			
ь							
•	here I and enter 1% of Part I, line 27b						
C	Part I, line 12, col. (b).			1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		-(
3	Add lines 1 and 2			9			
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	9			
6	Credits/Payments:			_			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			1			
b	Exempt foreign organizations—tax withheld at source 6b			1			
c	Tax pald with application for extension of time to file (Form 8868) . 6c		-	1			
đ	Backup withholding erroneously withheld 6d	_	-	-			
7	Total credits and payments. Add lines 6a through 6d		-4	<u> </u>			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	8			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			<u> </u>			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded 11						
Ta 1a	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Ye	- I No			
10	participate or intervene in any political campaign?	_					
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se	10	' 	 			
	Instructions for the definition)?	16	.]	1			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material		+-	+			
	published or distributed by the foundation in connection with the activities.	` [1:	1			
c	Did the foundation file Form 1120-POL for this year?	10	.	1			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1	_			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$		1 -				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	- I		1			
	on foundation managers. ► \$		1 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1			
•	If "Yes," attach a detailed description of the activities.	.	1				
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		1 .				
40	•	3		1			
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		+-			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	4-	+-			
_	If "Yes," attach the statement required by General Instruction T.	-	+	† <u> </u>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		-]	-			
	By language in the governing instrument, or	1	1	1 -			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	t (-	1			
	conflict with the state law remain in the governing instrument?	6		1			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	-					
	NY	_	1	1.			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1	1			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	85	1	 			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942()(3) of 4942()(3) for colondar year 2014 or the temple year had belong to 2014 (see instructions for Det 2010).	<u>.</u> [1	1			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes, complete Part XIV"	1	1	1			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	, 9	╁	+-			
	names and addresses	10	.]	1			
				France			

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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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	7	
	Website address ► N/A			
14	The books are in care of ▶ DIMITRI STEFANOU Telephone no. ▶ 58	5-383-	8097	
	Located at ► 100 AHEPA CIRCLE, WEBSTER, NY ZIP+4 ►	1458	0	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	• •	.	-
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
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?		-	-
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes		111	-
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		,	-
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	-	
c	Organizations relying on a current notice regarding disaster assistance check here	1c	ν,	-
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()(3) or 4942()(5)):	, -	-4	
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?	-	-	
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. 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	-		251
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.)	eg L		•
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		7
b		4b		,
	Fic	m 99	0-PF	(2014)

	90-PF (2014)									Page 6
	VII-B Statements Regarding Activi	ities for V	hich Form	4720	May Be R	equire	d (continued)			
5a	During the year did the foundation pay or inc							- 1		
	(1) Carry on propaganda, or otherwise attern	npt to influe	nce legislatio	on (sect	ion 4945(e))? .	☐ Yes ☑ No	·]	
	(2) Influence the outcome of any specific participation(2) Influence the outcome of any specific participation(3) Influence the outcome of any specific participation(4) Influence the outcome of any specific participation(5) Influence the outcome of any specific participation(6) Influence the outcome of any specific participation(7) Influence the outcome of any specific participation(8) Influence the outcome of any specific participation(9) Influence the outcome of any specific participation(10) Influence the outcome of any specific participation(11) Influence the outcome of any specific participation(12) Influence the outcome of any specific participation(21) Influence the outcome of any specific participation(22) Influence the outcome of any specific participation(23) Influence the outcome of any specific participation(24) Influence the outcome of any specific participation(24) Influence the outcome of any specific participation(25) Influence the outcome of any specific participation(26) Influence the outcome of any specific participation(27) Influence the outcome of any specific participation(27) Influence the outcome of any specific participation(28) Influence the outcome of an	ublic election	on (see secti	ion 495	5); or to ca	my on,		1		
						• •	☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel,	, study, or c	other similar	purpose	es?		☐Yes ☑No	']	1 1	-
	(4) Provide a grant to an organization other section 4945(d)(4)(A)? (see instructions).		ntable, etc.,					- {	1	
	(5) Provide for any purpose other than religi						Yes ☑ No	'		
	purposes, or for the prevention of cruelty			•			□Yea ☑No	. 1		
ь	If any answer is "Yes" to 5a(1)-(5), did any or		_						1 1	-
_	Regulations section 53.4945 or in a current no							5b	i i	
	Organizations relying on a current notice reg	_	•		•		▶□	. —	\vdash	
C	If the answer is "Yes" to question 5a(4), do					the tax		' [•
	because it maintained expenditure responsit							. [
	If "Yes," attach the statement required by Re	gulations s	ection 53.49	45-5(d).					1	
6a	Did the foundation, during the year, receive	any funds,	directly or in	directly,	, to pay pre	miums	;			
	on a personal benefit contract?						Yes No	.	l i	
b	Did the foundation, during the year, pay pren	niums, dire	ctly or indire	ctly, on	a personal	benefi	contract? .	6b		1
	If "Yes" to 6b, file Form 8870.	·	•	•-	•		contract? .	6b		1
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat	tion a party f	to a prohibited	d tax sh	elter transac	tion?	☐Yes ☑No			√
7a b	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundal If "Yes," did the foundation receive any process.	tion a party t eeds or hav	to a prohibited ve any net ind	d tax shi	elter transac Itributable t	tion? o the t	☐ Yes ☑ No ransaction? .	76		1
7a b	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any procest VIII Information About Officers, Did to the foundation of the foundation About Officers, Did to the foundation About Officers, Di	tion a party t eeds or hav	to a prohibited ve any net ind	d tax shi	elter transac Itributable t	tion? o the t	☐ Yes ☑ No ransaction? .	76	ees,	-
7a b Par	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any procest VIII Information About Officers, Diand Contractors	tion a party t eeds or hav irectors, 1	to a prohibited ve any net ind frustees, Fo	d tax she come at ounda	elter transactivibutable t	tion? o the tr	Yes Ven vansaction? . Highly Paid E	76	rees,	-
7a b	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any procest VIII Information About Officers, Did to the foundation of the foundation About Officers, Did to the foundation About Officers, Di	tion a party t eeds or hav irectors, T ation mana	to a prohibited ve any net ind frustees, Fo agers and th	d tax sho come at oundar eir con	elter transactionable to Mana	tion? o the tr igers,	Yes We No ransaction? . Highly Paid E	7b mploy		
7a b Par	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any procest VIII Information About Officers, Diand Contractors	tion a party to eeds or have irectors, 1 ation mans (a) Tith hou	to a prohibited re any net ind rustees, For agers and the a, and average	d tax she come al oundar eir con (c) Con	elter transaction Mana tion Mana npensation	tion? o the tr gers, (see in	Yes No No ransaction? Highly Paid Enstructions). Contributions to the property of the property	7b mploy	rees,	count
7a b Par	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, Diand Contractors List all officers, directors, trustees, foundation and address	tion a party to seeds or have irectors, To ation mana	to a prohibited to any net ind rustees, For agers and the a, and average sper weak and to position	d tax she come al oundar eir con (c) Con	elter transaction Mana tion Mana appensation appensation appensation at paid, ater -0-)	tion? o the tr gers, (see in	Yes Who ransaction? . Highly Paid E nstructions). Contributions to	7b mploy	inse ac	count
7a b Par 1	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Unformation About Officers, Diand Contractors List all officers, directors, trustees, foundation.	tion a party to eeds or have irectors, 1 ation mans (a) Tith hou	to a prohibited we any net ind rustees, For agers and the a, and average so per weale and to position DENT	d tax she come al oundar eir con (c) Con	elter transaction Mana tion Mana npensation	tion? o the tr gers, (see in	Yes No No ransaction? Highly Paid Enstructions). Contributions to the property of the property	7b mploy	inse ac	count
7a b Par 1	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, Diand Contractors List all officers, directors, trustees, foundated in the second sec	tion a party to seeds or have irectors, I ation mana devote PRESI 6 HRS	to a prohibited we any net ind rustees, For agers and the a, and average so per weale and to position DENT	d tax she come al oundar eir con (c) Con	elter transaction Mana npensation mpensation ust paid, tter -0-)	tion? o the tr gers, (see in	Yes No ransaction? . Highly Paid Enstructions). Contributions to the system of the sys	7b mploy	inse ac	count, ices
7a b Par 1	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, Diand Contractors List all officers, directors, trustees, foundated with the second s	tion a party to seeds or have irectors, I ation mana devote PRESI 6 HRS	to a prohibited ve any net ind rustees, For agers and the agers and the agers and the agers and the position DENT	d tax she come al oundar eir con (c) Con	elter transaction Mana tion Mana appensation appensation appensation at paid, ater -0-)	tion? o the tr gers, (see in	Yes No ransaction? Highly Paid Enstructions). Contributions to the system of the syste	7b mploy	inse ac	count,
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7a b Par 1 100 AI NICHO 100 AI	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, District all officers, directors, trustees, foundation and officers, directors, trustees, foundation with the second secon	tion a party to seeds or have irectors, I ation mana devote the pression of th	to a prohibited ve any net ind rustees, For any net ind rustees, For agers and the agers and the agers and the agers and the position DENT PRESIDENT ETARY SURER (b) Title, and a	d tax she come at come at come at com (a) Com (fr on se inclus average	elter transaction Mana repensation repensation repensation repensation repensation repensation -0000- uded on the	tion? o the tri igers, (see in empk and def	Yes No ransaction? Highly Paid E Instructions). Contributions to be presented compensation -000000000	7b mploy	ame aciallowan	-O
7a b Par 1 100 AI NICHO 100 AI	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, Disand Contractors List all officers, directors, trustees, foundated and address ALL PAPAPANU HEPA CIRCLE, WEBSTER, NY 14580 DLAS EVEVSKY HEPA CIRCLE, WEBSTER, NY 14580 VACANT RI STEFANOU HEPA CIRCLE, WEBSTER, NY 14580 Compensation of five highest-paid employees.	tion a party to seeds or have irectors, I ation mana devote the pression of th	to a prohibited ve any net ind rustees, For any net ind rustees, For agers and the as and average respectively. The properties of the position DENT PRESIDENT ETARY SURER	d tax she come at oundar eir con (e) Con (fr en	elter transaction Mana npensation mpensation ust paid, tter -0-) -0-	tion? o the tri igers, (see in empk and def	Yes No ransaction? Highly Paid E Instructions). Contributions biassered compensation -0- -0- see instruction (d) Contributions to employee benefit plans and deferred plans and d	(e) Exp cither	ame aciallowan	-000- count,
7a b Par 1 100 AI NICHO 100 AI	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundat if "Yes," did the foundation receive any process. Information About Officers, District all officers, directors, trustees, foundation and officers, directors, trustees, foundation with the second secon	tion a party to seeds or have irectors, I ation mana devote the pression of th	to a prohibited ve any net independent in the control of the contr	d tax she come at oundar eir con (e) Con (fr en	elter transaction Mana repensation repensation repensation repensation repensation repensation -0000- uded on the	tion? o the tri igers, (see in empk and def	Yes No ransaction? Highly Paid E Instructions). Contributions to be presented compensation -000000000	(e) Exp cither	silowan	-000- count,

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense account, other allowances.

	Information About Officers, Directors, Trustees, For and Contractors (continued)	ındation Managers, Highly Paid Err	aployees,
3	Five highest-paid independent contractors for professional service	s (see instructional, If none, enter "NON	E.
<u> </u>	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(a) Compensation
	NONE		
			ļ
			1
otal	number of others receiving over \$50,000 for professional services	 	-0-
	IX-A Summary of Direct Charitable Activities		
d l	Summary of Direct Character Activities		
	t the foundation's four largest direct charitable activities during the tax year. Include rela anizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1			
	N/A		
2		**************************************	
3			
4		-	<u> </u>
•			
Par	IX-B Summary of Program-Related Investments (see in:	structions)	<u> </u>
De	scribe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2.	Amount
1	ALIA]
	N/A	***************************************	1
2			
_			Į
_	other program-related investments. See instructions.		
3			

otel	Add lines 1 through 3		

Form 990-PF (2014)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fol	indations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1 1	
а	Average monthly fair market value of securities	1a	-0-
ь	Average of monthly cash balances	16	φ.
C	Fair market value of all other assets (see instructions)	1c	-0-
d	Total (add lines 1a, b, and c)	1d	-0-
e	Reduction claimed for blockage or other factors reported on lines 1a and		_
	1c (attach detailed explanation)	li	
2	Acquisition indebtedness applicable to line 1 assets	2	-0-
3	Subtract line 2 from line 1d	3	-0-
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	-0-
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	-0-
6	Minimum investment return. Enter 5% of line 5	6	-0-
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)	ounda	tions
1	Minimum investment return from Part X, line 6	1	-0-
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	19
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	-0-
4	Recoveries of amounts treated as qualifying distributions	4	-0-
5	Add lines 3 and 4	5	-0-
6	Deduction from distributable amount (see instructions)	6	-0-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII.	-	
	line 1	7	-0
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	12,947
b	Program-related investments—total from Part IX-B	1b	-0-
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	-0-
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	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	12,947
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part 1, line 27b (see instructions)	5	-0-
6	Adjusted qualifying distributions. Subtract line 5 from line 4	8	12,947
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.		her the foundation

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2014 from Part XI, line 7	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
_					
2	Undistributed income, if any, as of the end of 2014:				
8	Enter amount for 2013 only				
Ъ	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2014:				
a	From 2009				
b	From 2010				
C	From 2011				
đ	From 2012				
e	From 2013	58.400			
f	Total of lines 3a through e	58,198			
4	Qualifying distributions for 2014 from Part XII, line 4: ► \$ 12.947				
	Applied to 2013, but not more than line 2a .			-0-	
0	Applied to undistributed income of prior years (Election required—see instructions)				
_	•		-0-		
C	Treated as distributions out of corpus (Election required—see instructions)		-		
		-0-			
	Applied to 2014 distributable amount		<u> </u>		-0-
e	Remaining amount distributed out of corpus	12,947			
5	Excess distributions carryover applied to 2014	-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:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	71,145			
ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b		- 0-		
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)		Ì		
	tax has been previously assessed		.		
d	Subtract line 6c from line 6b: Taxable				
	amount-see instructions		-0-		
e	Undistributed income for 2013. Subtract line	-			
	4a from line 2a. Taxable amount-see			ĺ	
	'instructions			-0-	•
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2015				-0-
7	Amounts treated as distributions out of corpus				_
	to satisfy requirements imposed by section				-
	170(b)(1)(F) or 4942(g)(3) (⊟ection may be				
	required—see instructions)	-0-			
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions).	11,298	ı		
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	59.847			
10	Analysis of line 9:				
а	Excess from 2010 5,780			-	
b	Excess from 2011 16.185				
c	Excess from 2012 14.175			i	
đ	Excess from 2013 10.760	-		1	
0	Excess from 2014 12,947				_

Part :	AlV Priesto Opposition Formulati	lana (aaa lanta	reflere and Dad	MI A grandles C		Page 1(
	Private Operating Foundati If the foundation has received a ruling	nual sael anu	latter that it is a	VII-A, question a)	
14	foundation, and the ruling is effective for	2014 enter the d	ste of the ruling	busare obetamid		N/A
h	Check box to indicate whether the found					(3) or 1 49420(5
_	Enter the lesser of the adjusted net	Tex year) specially related	Prior 3 years		MON OR THE ASSESSMENT
	income from Part I or the minimum	(c) 2014	(%) 2013	(c) 2012	60 2011	(c) Total
	Investment return from Part X for Leach year listed					
b	85% of line 2a					1
C	Qualifying distributions from Part XII,					1
	line 4 for each year listed					<u> </u>
đ	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
0	Qualifying distributions made directly					
	for active conduct of exempt activities.		İ			İ
_	Subtract line 2d from line 2c			ļ	· ·	
3	Comptete Sa, b, or c for the alternative test relied upon:		1	1		1
_						į
a	"Assets" alternative test—enter: (1) Value of all assets					j
	(2) Value of assets qualifying under		 			
	section 4942(063)(63(0)					
Ь	"Endowment" alternative test-enter %		 	 		
	of minimum investment return shown in Part X, line 6 for each year listed					1
C	"Support" alternative test—enter:	····				
_	(1) Total support other than gross]		
	investment income (interest					
	dividends, rents, payments on securities loans (section			1		1
	512(a)(5)), or royalties)		<u> </u>			
	(2) Support from general public					
	and 5 or more exempt organizations as provided in		1	1		
	section 4942(I)(3)(B)(iii)	 				<u> </u>
	(3) Largest amount of support from			İ		1
	an exempt organization		ļ	ļ		}
D - 4	(4) Gross investment income	- (OI H	hilo mand angka 200		-4 es coo	
Part	Supplementary Information any time during the year—			nia ionimanon u	an action of u	inta ili asseis s
4	Information Regarding Foundation A		113-1			
a	List any managers of the foundation w		uted more than 2	% of the total contr	ibutions received	i by the foundation
_	before the close of any tax year (but or					
	NONE					
Ь	List any managers of the foundation	who own 10% o	r more of the sto	ck of a corporation	(or an equally i	arge portion of th
	ownership of a partnership or other en	tity) of which the	foundation has a	10% or greater into	prest.	
	NONE					
2	Information Regarding Contribution,					
	Check here ► if the foundation of					
	unsolicited requests for funds. If the fo		gifts, grants, etc.	(see instructions) t	o individuals or c	organizations unde
	other conditions, complete items 2a, b					
2	The name, address, and telephone nur	mber or e-mail a	ddress of the pers	ion to whom applic	ations should be	addressed:

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

c Any submission deadlines:

Daw W. Complementary Information to				
Part XV Supplementary Information (cc 3 Grants and Contributions Paid Durin	munued)	ad for D-	hum Dournout	
	If recipient is an individual,		ште гаушенк	
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
		[[[
NONE	}	ļ		į
HONE		ł	}	1
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b Approved for future payment				
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Total				

Pai	rt XVI	 Analysis of Income-Producing Ac 	MAINES				
nte	r gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See Instructions.)
1	_	ram service revenue:					(000 1,000000,00)
	a _		 				
	b _				ļI		
	<u> </u>						
	ď _		 _				
	e _	•	 	ļ		<u> </u>	
	T						
_	_	ees and contracts from government agencies	 				
_		bership dues and assessments			14	129	
3		st on savings and temporary cash investments			14	833	
4		ends and interest from securities	}		14	033	<u> </u>
5		ental income or (loss) from real estate:					
	a Debt-financed property				[
c		ot debt-financed property	ļ				
7		r investment income			 		
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events	ļ.—— -				
10		s profit or (loss) from sales of inventory	 		 -		<u> </u>
11		•		 	 		
••	b		<u> </u>				
	- c		 				
	_		 		 		
				I .	I		
	d _						
12	e _		-			962	
	eSubtr	otal. Add columns (b), (d), and (e)	L			962	\
13	e Subtr	otal. Add columns (b), (d), and (e)					982
13 See	e Subtratal Works	otal. Add columns (b), (d), and (e)	s.)				\
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Form 990)-PF (2014)						Pt	13 ago
Part	XVII			sters To and Transa	ctions and	Relationships With Nonch	eritab	le	
1	Di-1		ganizations	naces in any of the full		ny other organization describe	-	Ves	No
•						section 527, relating to political			
		inizations?					~		
а	Tran	sfers from the rer	porting foundation to	a noncharitable exemp	t organization	n of:	- (1	Į .
		Cash					1a(1)	.	1
	(2)	Other assets .					1a(2)		1
b	Oth	er transactions:						ľ	_
			a noncharitable exe	•			16(1)	_	1
				ible exempt organization	1		16(2)	_	1
	• •		, equipment, or othe				16(3)	_	1
			mangements				1b(4)		1
	• -	Loans or loan gua		f=ddd-1			1b(5)	+	1
_				lip or fundraising solicite			1b(6)	 	1
		•		sts, other assets, or paid		Column (b) should always sh	10	<u></u>	
đ		•		- •	•	 If the foundation received le			
						of the goods, other assets, or			
(a) Line		(b) Amount involved		veritable exempt organization	<u> </u>	cription of transfers, transactions, and :			
									
	\neg		N/A						
									
						·			
				··-·					
			 						
			ļ						
			 					—	
			 						
2a	ls th	ne foundation din	ectiv or indirectly af	fillated with, or related t	o one or mo	ore tax-exempt organizations			
						tion 527?	☐ Yes	a III	No
b			e following schedule	• •					•••
		(a) Name of organ	vization	(b) Type of organiz	ation	(c) Description of reis	donship		
	174	4	Calculation should be seen that	A 11		1			
Sia		uer penames of perjury, litect, and pomplete. Dec	i declare that I have examine faration of preparer (other th	ed this return, including accompa an texpeyer) is based on <u>ell</u> inform	nyang schedules ar nation of which no	nd statements, and to the best of my know	edge and	Delief, i	i is true,
Sign	Tr)				May th	e IRS disc		
Here				10/30/15	Tressu		o preparer tructions)?		
	34	prefure of officer or tru		Date	THE			=	=
Paid		Print/Type prepare		Preparer's adgrature	1 DPA	1 Date / 30/15 Check If		n 400 -	42
Prep			JPA	1 / a/ h		1-1017 10 00000	1 190	04824	43
Use (Only	Firm's name >				/ Firm's EIN ▶			
		Lunin a drinners >				Phone no.	~~~	VA DE	

Schedule B

(Form 990, 990-EZ, or 980-PF)

Department of the Treasury Internal Rawanue Service

Name of the organization

Schedule of Contributors

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

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

2014

Employer identification number

OMB No. 1545-0047

AHEPA ROCHESTER FOUNDATION 16-14486			16-14486 9 5				
Organi	cation type (check	one):					
Filers of:		Section:	Section:				
Form 990 or 990-EZ		□ 501(c)(501(c)() (enter number) organization				
		4947(a)(1) no	nexempt charitable trust not treated as a private fo	undation			
		☐ 527 political	organization				
Form 990-PF		☑ 501(c)(3) exe	■ 501(c)(3) exempt private foundation				
		4947(a)(1) no	nexempt charitable trust treated as a private found	ation			
		501(c)(3) tax	able private foundation				
	inly a section 501(c	•	eneral Rule or a Special Rule. nization can check boxes for both the General Rule	and a Special Rule. See			
Genera	i Rute						
9		y or property) from a	90-EZ, or 990-PF that received, during the year, cor ny one contributor. Complete Parts I and II. See ins				
Special	Rules						
	regulations under 13, 16a, or 16b, a	r sections 509(a)(1) a and that received fro	on 501(c)(3) filing Form 990 or 990-EZ that met the and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 m any one contributor, during the year, total contributor one 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	190 or 990-EZ), Part II, line utions of the greater of (1)			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.			s, charitable, scientific,			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year			ses, but no such outions that were received y of the parts unless the paritable, etc., contributions			
990-EZ	, or 990-PF), but it	must answer "No" o	y the General Rule and/or the Special Rules does no on Part IV, line 2, of its Form 990; or check the box o es not meet the filing requirements of Schedule B (F	on line H of its Form 990-EZ or on its			

Name of organization
AHEPA ROCHESTER FOUNDATION

Employer identification number 16-1448695

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	DEAN ZUTES TRUST-C/O JP MORGAN CHASE BANK N/A ONE CHASE SOLIARE ROCHESTER, NY 14643	\$ 8,255	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
:		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person [] Payroti [] Noncash [] (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part il for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person [] Payroli [] Noncash [] (Complete Part II for noncash contributions.)			
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