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EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation

LHA For Paperwork Reduction Act Notice, see instructions.

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

Form 990-PF
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 at www.irs.gov/form990pf.

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number BOYLSTON FAMILY FOUNDATION 20-1366281 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 1888 (208)726-9079 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 83340 KETCHUM, ID G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 472,880. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (a) Revenue and expenses per books (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and in necessarily equal the amounts in column (a)) nd (d) may not Income ıncome (cash basis only) N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch B í₹; interest on savings and temporary cash investments 3. 3. STATEMENT 4,373. 4,373. STATEMENT Dividends and interest from securities 5a Gross rents

b Net rental income or (loss) 58,470. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 174,020. Reven 58,470. Capital gain net income (from Part IV, line 2) g €8 Net short-term capital gain S Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 186. 186. STATEMENT 11 Other income 3 032. 63,032. 12 Total. Add lines 1 through 11 0. 13 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1,925. 0. STMT 4 0. **b** Accounting fees c Other professional fees 17 Interest 552. 282. 18 Taxes STMT 5 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 2,503. STMT 6 2,503. 0. 23 Other expenses 24 Total operating and administrative 4,980. 2,785. expenses. Add lines 13 through 23 42,500. 42,500. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 47,480 2,785. 42,500. Add lines 24 and 25 27 Subtract line 26 from line 12: 15,552. 8 Excess of revenue over expenses and disbursements 60,247. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	288,739.
2	Enter amount from Part I, line 27a	2	15,552.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	304,291.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	304,291.

18

19

20

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							=====		0-136		Page 3
				Income					PATEM		
(a) List and descr 2-story brick wa	ibe the kind(rehouse: or o	s) of property sold (e.g., common stock, 200 shs.	real estate, MLC Co.)		100	- Purc	hase	(c) Date a (mo., da		(d) Dat (mo., da	
	(a) Lest and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired (b) How acquired (co.) Brown and the common stock, 200 shs. MLC Co.) (c) Portion of the common stock, 200 shs. MLC Co.) (d) Popreciation allowed (or allowable) (d) Cost or other basis plus expense of sale (e) Losses of cost. (f) Depreciation allowed (or allowable) (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) How acquired (or allowable) (g) Cost or other basis plus expense of sale (h) How acquired (or allowable) (h) Adjusted basis (k) Excess of col. (f) over col. (g), if any				1(101)		-3,,,,		-3, 3,		
<u> </u>	<u> </u>										
c						-			_		
d											
e			_		Ī						
(e) Gross sales price						(h) Gain or (loss) (e) plus (f) minus (g)					
a	-						_				
b											
c											
d							_				
					0.					<u>58</u>	470.
Complete only for assets showin			e foundation	on 12/31/69					ol. (h) gain		
(i) F.M.V. as of 12/31/69							COI.		ot less than (from col. (
<u>a</u>							_				
b							_				
<u>c</u>											
<u>d</u>				<u> </u>							470
<u>e</u>					┈┤		Γ				<u>,470.</u>
2 Capital gain net income or (net ca	pital loss)	If gain, also enter of the lift (loss), enter -0-	in Part I, line in Part I, line	7 7		2				58	<u>,470.</u>
		in sections 1222(5) and	(6):		٦						
	column (c).				- 1				N/A		
	nder Sec	tion 4940(e) for l	Reduced	Tax on Net	Inve	stm	ent Inco	me	N/A		
	-										
(For optional use by domestic private	ioninations	Subject to the Section 43	HU(a) lax UII	HEL HIVESTILICHE HI	CUITIE.	.,					
If section 4940(d)(2) applies, leave th	ııs part blank	•									
Was the foundation liable for the sect	ion 4942 tax	on the distributable amo	unt of any ve	ar in the base oer	ind?					Yes	X No
If "Yes," the foundation does not qual-	fy under sec	tion 4940(e). Do not con	plete this pai	t							
1 Enter the appropriate amount in e	ach column	for each year; see the ins	tructions bef	ore makıng any ei	ntries.	,					
(a)										(d) oution ratio	-
Calendar year (or tax year beginnir	ng in)			Net value of no	nchar			_	(col. (b) div	rided by col.	
2013											<u>84559</u>
2012											72784
											90109
											52417
2009			700.			34	5,420	- 		. 0	<u>48347</u>
2 Total of line 1, column (d)								2		.3	48216
<u> </u>			ı lıne 2 by 5,	or by the number	of yea	ars				_	
the foundation has been in exister	ice if less tha	n 5 years						3		.0	69643
4 Enter the net value of noncharitab	le-use assets	for 2014 from Part X, III	ne 5					4		484	,364.
5 Multiply line 4 by line 3								5		33	<u>,733.</u>
6 Enter 1% of net investment incom	e (1% of Par	t I, line 27b)						6			602.
7 Add lines 5 and 6								7		34	<u>,335.</u>
8 Enter qualifying distributions from	n Part XII. lind	e 4						8	1	42	,500.
If line 8 is equal to or greater than			1b. and comp	lete that nart usin	ng a 1º	% tay r	ate.				
See the Part VI instructions.			., sep								
423521 11-24-14									ı	orm 990 -	PF (2014)

423521 11-24-14

	1990-PF (2014) BOYLSTON FAMILY FOUNDATION		1366			Page 4
_	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	/48 -	see in:	struc	tions	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1				İ
_	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	L	ļ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	-		6	02.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	L_			_	لـــا
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2 Subtitle A (income) tay (idemestic section 4047(a)(1) trusts and toughts foundations only. Others section 4047(a)(1) trusts	3	 			02.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	-		6	02.
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments:	5	 	-	0,	<u>"-</u>
_			1			
	2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations - tax withheld at source 6b	ł				ĺ
	Tax paid with application for extension of time to file (Form 8868) 6c	ł	-			ļ
	Backup withholding erroneously withheld 6d 6d	ł	1			ŀ
	Total credits and payments. Add lines 6a through 6d	7	†			-0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	╁┈──			5.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 	-	6	07.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				• / •
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				
	irt VII-A Statements Regarding Activities	 	<u>I.</u>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published					
	distributed by the foundation in connection with the activities.					i
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	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	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 <u>a</u>		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
_	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
7	remain in the governing instrument?	_		<u>6</u>	х	X
′	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	A	\neg
٥.	Enter the states to which the foundation reports or with which it is registered (see instructions)					
Oa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U	of each state as required by General Instruction G? If "No," attach explanation			8b	X	\vdash
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar		90	4	
,	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	iiuai		9		X
10	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses			10		$\frac{1}{x}$

	990-PF (2014) BOYLSTON FAMILY FOUNDATION 20-1366 art VII-A Statements Regarding Activities (continued)	281		Page 5
_	Contanado	, 		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	,	x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		_	
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address NONE			
14	The books are in care of ▶ JOHN G. BOYLSTON Telephone no. ▶ (208) 7	26-	9079	9
	Located at ▶ P.O. BOX 1888, KETCHUM, ID ZIP+4 ▶83	340	-188	88
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	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the			
_	foreign country			
Pa	art 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
18	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?	1 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			i
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	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)?	16		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2014?	1c		<u> </u>
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? Yes X No	1 1		
	If "Yes," list the years \blacktriangleright			
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.) N/A	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.			
)	1 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
þ	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) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

4b X Form **990-PF** (2014)

Eorm 990-PF (2014) BOYLSTON FAMILY FOUNDATION	ANT		20 12662	01 -
Part VII-B Statements Regarding Activities for Which F			20-136628	31 Page 6
5a During the year did the foundation pay or incur any amount to:		equirea (continu	uea)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1015(0)\2		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	* **		.8 <u></u>	
any voter registration drive?	i to carry on, uncomy or mane		es 🗓 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			8 <u>22</u> NO	
		es X No		
4945(d)(4)(A)? (see instructions)	· · · · · · · · · · · · · · · · · · ·	S A NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or i		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations		1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	ib
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ □	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned	_	
expenditure responsibility for the grant?		I/A 🖂 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945	-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	1.7		1	
a personal benefit contract?	, p		s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_	Sb X
If "Yes" to 6b. file Form 8870.			<u> </u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				76
Part VIII Information About Officers, Directors, Truste		nagers. Highly	,=1/, ==	
Paid Employees, and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JOHN G. BOYLSTON	PRESIDENT		Jumpanian	
PO BOX 1888				
KETCHUM, ID 83340	0.25	0.	0.	0.
	VICE PRESIDEN			
PO BOX 1888				
KETCHUM, ID 83340	0.25	0.	0.	0.
	SECRETARY	+		
PO BOX 1888				
KETCHUM, ID 83340	0.25	0.	0.1	0.
	TREASURER	 		
PO BOX 1888	INDADONDA			
KETCHUM, ID 83340	0.25	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc			0.1	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	•			
Total number of other employees paid over \$50,000	<u> </u>			0
The state of the s				000 DE

Form 990-PF (2014) BOYLSTON FAMILY FOUNDATION	20-1	.366281 Page 7
Part VIII Information About Officers, Directors, Trustees Paid Employees, and Contractors (continued)	, Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If	none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1) po 51 661 1165	(c) component
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include r	elevant statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research	papers produced, etc.	Expenses
1 N/A		•
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3	▶ i	Λ.

Form **990-PF** (2014)

<u> P</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	463,130.
b	Average of monthly cash balances	1b	463,130. 28,610.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	491,740.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	491,740.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,376.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	484,364.
6_	Minimum investment return. Enter 5% of line 5	6	24,218.
<u> </u>	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	24,218.
2a	Tax on investment income for 2014 from Part VI, line 5		21/2200
ь	Income tax for 2014. (This does not include the tax from Part VI.)	†	
C	Add lines 2a and 2b	2c	602.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	23,616.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	23,616.
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	23,616.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	42,500.
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	42,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		.
_	Income. Enter 1% of Part I, line 27b	5	602.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,898.
	Note. The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation of	uslifiae for th	a cartion

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				23,616.
2 Undistributed income, if any, as of the end of 2014				23,0201
a Enter amount for 2013 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		0.		
a From 2009				
b From 2010		ļ		
c From 2011 10,216.				
d From 2012 9,991.				
e From 2013 16,374.				
f Total of lines 3a through e	36,581.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 42,500.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	10.001			23,616.
e Remaining amount distributed out of corpus	18,884.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	55,465.			
b 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) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			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				i
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	٠ .			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	55,465.			
	33,403.			
0 Analysis of line 9: a Excess from 2010				
b Excess from 2011 10, 216.				
c Excess from 2012 9,991.				
d Excess from 2013 16,374.				
e Excess from 2014 18,884.			İ	
25501	<u>-</u>			

Form 990-PF (2014) BOYLSTO	N FAMILY FO	UNDATION			66281 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · · ·			
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	942())(5)
2 a Enter the lesser of the adjusted net	Tax year	42,0040	Prior 3 years	1400044	.
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed	 				
b 85% of line 2a					ļ <u></u>
c Qualifying distributions from Part XII,			•		
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		_			ļ
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see insti	ructions.)			
Information Regarding Foundation a List any managers of the foundation whyear (but only if they have contributed r NONE	o have contributed more		tributions received by the	e foundation before the clos	se of any tax
b List any managers of the foundation wh other entity) of which the foundation ha NONE:			(or an equally large port	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ complete items 2a, b, c, and	ests for funds. If I d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom appl	ications should be addre	ssed:	
b The form in which applications should t	oe submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
4 Any restrictions of limited	a anal as hi	al assas aba4-61-6-11-	lands of sections	ather feeters:	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields	, kinas ot institutions, or	other factors:	

Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year US FRIENDS OF THE DAVID SHELDRICK NONE PUBLIC CONTRIBUTION WILDLIFE TRUST 201 NORTH ILLINOIS STREET 16TH FLOOR - SOUTH TOWER INDIANAPOLIS, IN 46204 2,500. FEARLESS IDEAS NONE PUBLIC CONTRIBUTION 8414 GREENWOOD AVENUE NORTH SEATTLE, WA 98103 7,500. BIG LIFE FOUNDATION NONE PUBLIC CONTRIBUTION 5847 NE 75TH STREET, STE. A-104 SEATTLE, WA 98115 10,000. LIFE STITCHES UGANDA NONE PUBLIC CONTRIBUTION PO BOX 5106 ALBUQUERQUE, NM 87181 2,500. NORTHWEST AFRICAN AMERICAN MUSEUM NONE PUBLIC CONTRIBUTION 2300 S. MASSACHUSETTS STREET SEATTLE, WA 98144 2,500. SEE CONTINUATION SHEET(S) ► <u>3a</u> 42,500. Total b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
c	_				
d					
e					
f			ŀ		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	3.	
4 Dividends and interest from securities			14	4,373.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			01	186.	
8 Gain or (loss) from sales of assets other					
than inventory			18	58,470.	
9 Net income or (loss) from special events			+		
10 Gross profit or (loss) from sales of inventory			+ +		
11 Other revenue:					
<u> </u>	-		+		·
b			+		
c			+ + -		
d	 		+ + -		
12 Subtotal. Add columns (b), (d), and (e)	_	0	- - -	63,032.	0.
13 Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	63,032.
(See worksheet in line 13 instructions to verify calculation	s)			10	- 03/032.
Part XVI-B Relationship of Activitie	IS TO THE ACCO	mplishment of E	kempt Pu	poses	
Line No. Explain below how each activity for which	income is reported i	n column (e) of Part XVI	A contributed	importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other				,	

Form 990-PF (2014) BOYLSTON FAMILY FOUNDATION 20-1366281 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the o	organization directly or indir	rectly engage in any o	of the followin	g with any other organization	on described in section	on 501(c) of		Yes	No
	the Code	(other than section 501(c)	(3) organizations) or	in section 52	7, relating to political organ	iizations?				
a	Transfers	s from the reporting founda	ation to a noncharitat	ole exempt org	anization of:					
	(1) Cast	h						1a(1)		_X
	(2) Othe	er assets						18(2)		<u> </u>
b	Other tra	insactions:								
	(1) Sale	s of assets to a noncharitat	ble exempt organizati	ion				1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization										X
(3) Rental of facilities, equipment, or other assets										X
	(4) Rein	mbursement arrangements						1b(4)		X
	(5) Loar	ns or loan guarantees						1b(5)		X
	(6) Perf	formance of services or mei	mbership or fundrais	sing solicitation	ns			1b(6)		X
c		of facilities, equipment, mai						1c		X
		swer to any of the above is	=		•	ways show the fair m	arket value of the goods, o	ther ass	ets,	
		es given by the reporting fo							•	
		(d) the value of the goods, (-				
a) L	ine no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring arra	ngemen	its
				N/A						
								-		
		-								
					-					
				-		<u> </u>	******			
			-							
		·								
						<u> </u>				
							· ·			

					·					
2 a	Is the for	undation directly or indirect	ly affiliated with or r	related to one	or more tax-exempt organi	zations described			-	
		n 501(c) of the Code (other				Zationo doborno	Г	Yes	X	No
h		complete the following sche		(0)) 0: 000.	1011 UZ7					
_		(a) Name of org		-	(b) Type of organization	1 (c) Description of relationsh	מור		
	•	N/A			, , , , , , , , , , , , , , , , , , ,	,	· · · · · · · · · · · · · · · · · · ·	·		
	-	,				†	. =		-	
	_					1				
_						•				
						†				
	Unde	er penalties of perjury, I declare the	hat I have examined this	return, including	accompanying schedules and st	tatements, and to the bes	t of my knowledge	1 150		
Siç	gn and b	belief, it is true, correct, and com	plete Declaration of pres	parer (other than	taxpayer) is based on all informa	tion of which preparer ha	s any knowledge retu	the IRS on with the	e prepare	er .
	re	16 Knuls			19/2/15	PRESID	RNT Sho	wn below Yes		7)? No
	Sig	nature of officer or trustee	<i>0</i> -		Date	Title		L Tes		_ NO
	. 1 5.8	Print/Type preparer's na	me	Preparer's si		Date	Check If PTIN			
		KIRK A. CLO			- / A],	self- employed			
Pa	id	CPA	CILLER,	1/11.1	of Care	8-26-15	' '	202	75 <i>6</i>	
	eparer		THIED CAV	AH & W.	ILLSEY, LLC		Firm's EIN ► 46 – 23			
	e Only	1111110110110	THIER SHIP	ലവ ox w.	רחחטפוי חחר		FILM S EIN \$0 - 23	, , , , ,	, ,	
_		Firm's address ▶ 10	OO GECOM	λτσιπτ	E, SUITE 366	<u> </u>	 			
			ATTLE, WA		E, BUITE 300	U	Dhans as /2061	QAF	_ 2 0	00
) SE	ALIDE, WA	JOTU4			Phone no. (206)	rm 99 0		
							Fr.	am 3535	J-P-	(7(1)4)

FORM 990-PF INTERES	T ON SAVINO	C AND T	PMDOD A	PV C	ACU T	MTF CTM FNTC	STATEMEN	ጥ 1
	1 ON DAVING	RE	(A) VENUE]	NET I	(B) NVESTMENT	(C) ADJUST	ED
SOURCE		PER	BOOKS			NCOME .	NET INC	OME
WILLIAM BLAIR & CO				3.		3.		
TOTAL TO PART I, LIN	TE 3			3.		3.		
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SECU	RITIES	STATEMEN	Т 2
SOURCE	GROSS AMOUNT	CAPITA GAINA DIVIDE	S	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		STED
WILLIAM BLAIR & CO	4,373.		0.		4,373	. 4,37	3.	
TO PART I, LINE 4	4,373.		0.		4,373	4,37	3.	
FORM 990-PF		OTHER	INCOM	Œ			STATEMEN	т 3
DESCRIPTION			REV	A) ENUE BOOK		(B) NET INVEST- MENT INCOME		
OTHER INCOME		-			186.	186	•	
TOTAL TO FORM 990-PF	, PART I,	LINE 11			186.	186		
TORK 000 PF		A COOLDY					CM3 MENTER	·m. 4
FORM 990-PF		ACCOUN	TING F	RES		V	STATEMEN	11 4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) INV	EST-	(C) ADJUSTED NET INCOM		-
ACCOUNTING FEES		1,92	<u> </u>		0.			0.
TO FORM 990-PF, PG 1		1,92	 5.		0.			0.

FORM.990-PF	TAXES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL INCOME TAX STATE FILING FEES FOREIGN TAX WITHHELD	255. 15. 282.	0. 0. 282.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	552.	282.			
FORM 990-PF	OTHER EXPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
BOARD FEES	2,328.			0.	
ADVISORY FEES	175.	1/5.		0.	

FORM 990-PF CORPORATE STO	ORPORATE STOCK		
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
WM BLAIR & CO INVESTMENTS	298,069.	466,658.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	298,069.	466,658.	

Part IV Capital Gains and Lo	sses for Tax on Investment Income					
	d describe the kind(s) of property sold rick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)		
	OF GPN	P	12/22/08/01/21/14			
b 100.000 SHARES	OF MDVN	P	03/28/1202/11/14			
	OF ADS		P	02/08/0802/14/14		
d 300.000 SHARES			P	09/06/1102/25/14		
e 200.000 SHARES			P	05/06/1103/06/14		
1 120.000 SHARES			P	05/27/1003/12/14		
g 30.000 SHARES			P	06/01/12/04/21/14		
h 300.000 SHARES			P	09/25/0904/21/14		
140.000 SHARES			P	12/22/08/04/29/14		
	OF EOG	***	P	08/07/0905/21/14		
k 200.000 SHARES			P	06/17/1106/24/14		
	OF PX		P	04/13/0707/09/14		
m 140.000 SHARES			P	10/04/1107/30/14		
n 30.000 SHARES 0 130.000 SHARES	OF ESRX OF AIRM		P	12/22/08/07/30/14		
0 130.000 SHARES			P	02/14/12/08/08/14		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)		
a 4,725.		2,284.		2,441.		
b 8,008.		3,693.	<u> </u>	4,315.		
c 8,226.		1,676.		6,550.		
d 5,932.		7,644.		-1,712.		
e 6,692.		3,080.		3,612.		
f 10,748.		7,404. 665.		3,344.		
C F43		5,030.	 			
$\frac{h}{l}$ 8,961.		4,569.		1,513. 4,392.		
7,116.		2,712.		4,404.		
$\frac{1}{k}$ 12,426.		6,212.	- <u></u>	6,214.		
$\frac{12,423.}{1}$	·	4,505.		4,658.		
m 9,630.		5,061.		4,569.		
n 2,064.		895.		1,169.		
0 7,566.		3,842.		3,724.		
	ng gain in column (h) and owned by t		(I) Los	sses (from col. (h))		
(i) F.M.V. as of 12/31/69	(i) Admisted basis (k) Excess of col (i)			Gains (excess of col. (h) gain over col. (k), but not less than "-0-")		
a	-			2,441.		
b			*	4,315.		
С				6,550.		
d				-1,712.		
e				3,612.		
f				3,344.		
g				-11.		
h				1,513.		
1				4,392.		
1				4,404.		
<u>k</u>				6,214.		
<u> </u>				4,658.		
<u>m</u>				4,569.		
<u>n</u>				1,169.		
0			- 	3,724.		
2 Capital gain net income or (net ca	apital loss) { If gain, also enter if (loss), enter "-0	ın Part I, line 7 -" ın Part I, line 7	2			
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and	d (6):				
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8			3			

20-1366281

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a 180.000 SHARES OF EBAY 09/10/1309/10/14 P ь 100.000 SHARES OF CNQR P 09/26/1109/24/14 c 210.000 P SHARES OF **CNVR** 08/03/1110/02/14 **CNVR** d 110.000 SHARES OF P 08/17/1110/02/14 e 300.000 P SHARES OF EOPN 03/21/1410/09/14 f 190.000 SHARES OF IPCM P 09/09/1010/23/14 q 140.000 SHARES OF **VCRA** P 10/02/1210/24/14 h 360.000 SHARES **VCRA** P 05/03/1310/24/14 OF 1 300.000 SHARES OF CAP P |04/24/13|10/29/14 200.000 SHARES OF HOG P 03/03/1111/24/14 k 0.043 SHARES OF ADS P 08/17/1112/16/14 m п 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 9,025. 9,804. -779. a 12,602. 3,715. 8,887. b 7,019. 3,516. 3,503. C 3,677. 1,684. 1,993. d 2,234. 7,413. -5,179. е 6,994. 5,014. 1,980. f 1,186. 4,217. -3,031. 3,050. 4,681. h -1,631. 6,059. 7,914. -1,855. 13,708. 8,328. 5,380. 12. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -779.а 8,887. b 3,516. C 1,993. d -5,179. е 1,980. -3,031. g -1,631. -1,855. 5,380. k m П 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 58,470. 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

Part XV Supplementary Information				
3 Grants and Contributions Paid During the		~		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Continuetion	Allount
THE VALENTINO ACHAR DENG FOUNDATION	NONE	PUBLIC	CONTRIBUTION	
49 VALENCIA STREET AN FRANCISCO, CA 94110				7,500
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
VILDLIFE ALLIANCE	NONE	PUBLIC	CONTRIBUTION	
150 107TH ST NW #403			SATKIBUTION .	
ASHINGTON, DC 20036				10,00
				1
	•			
		-		
				•
			r.	
		<u> </u>		
Total from continuation charts		1	1	17,50
Total from continuation sheets				17,30

Form 886	8 (Hgv. 1-2014)					Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month I	Extension, c	omplete only Part II and check this	box		X
Note. Òn	ly complete Part II if you have already been granted ar	n automatic 3	3-month extension on a previously file	ed Form 8	868.	
	tre filing for an Automatic 3-Month Extension, comp					
Part II	Additional (Not Automatic) 3-Month	Extension	of Time. Only file the origin	al (no co	pies need	ed).
			Enter filer's	identifyir	g number, se	ee instructions
Type or	Name of exempt organization or other filer, see inst	tructions		Employe	r identification	number (EIN) or
print						
File by the	BOYLSTON FAMILY FOUNDATION				20-1366281	
due date for	Number, street, and room or suite no. If a P O. box	, see instruct	ions	Social se	cunty numbe	r (SSN)
filing your return See	P.O. BOX 1888					•
instructions	City, town or post office, state, and ZIP code. For a	foreign addi	ress, see instructions.			
	KETCHUM, ID 83340	•				
Enter the	Return code for the return that this application is for (file a separat	e application for each return)			0 4
	теления по фринции и по фринции и по фринции и по по по по по по по по по по по по по	, u oopuu.	o upplication (c. cast. / c.a.t.)	•		بتبت
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01				10000
Form 990		02	Form 1041-A		·	08
	0 (individual)	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227			10
	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	o not complete Part II if you were not already grant		<u> </u>	ouch filo	d Earm 0060	
<u>0107.D</u>	JOHN G. BOYLS'		auc 3-monur extension on a previ	ously me	<u>a FOIIII 6606.</u>	<u>_</u>
● The be	ooks are in the care of P.O. BOX 1888		HTTM TD 83340_1888			
	$\frac{1}{1000} = \frac{1}{1000} = 1$	11010	Fax No. ▶			
•			·			
	organization does not have an office or place of business			6 ale 6 -		
	s for a Group Return, enter the organization's four dig	_	· · · · · · · · · · · · · · · · · · ·		-	•
box 🕨	If it is for part of the group, check this box		ch a list with the names and EINs of $3ER 15, 2015$.	all memb	ers the extens	ion is for.
	quest an additional 3-month extension of time until	MOARM				
	calendar year 2014, or other tax year beginning		, and ending			·
6 If th	te tax year entered in line 5 is for less than 12 months.	, check reaso	on: Initial return	Final i	return	
	☐ Change in accounting period					
	te in detail why you need the extension DITIONAL TIME IS NEEDED TO	CAMILED	THE INFORMATION N	BOBGO	3 D37	
	EPARE A COMPLETE AND ACCURA			<u> </u>	ARI TU	
<u> </u>	BPARE A COMPLETE AND ACCURP	ATE TAA	RETURN.			
					 -	
					ı	
	iis application is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069, e	enter the tentative tax, less any	ł		600
	refundable credits. See instructions.			<u>8a</u>	\$	602.
b If th	us application is for Forms 990-PF, 990-T, 4720, or 60	69, enter any	refundable credits and estimated	- 1		
tax	payments made. Include any prior year overpayment	allowed as a	credit and any amount paid	<u> </u>	İ	_
pre	eviously with Form 8868			8b_	\$	0.
	ance due. Subtract line 8b from line 8a. Include your		n this form, if required, by using			_
EF	PS (Electronic Federal Tax Payment System). See ins			8c	\$	602.
	Signature and Verific	ation mus	t be completed for Part II or	nly.		
Under pena	alties of perjury, I declare that I have examined this form, incl	luding accomp	anying schedules and statements, and to	the best of	my knowledge	and belief,
ıı is true, c	orrect, and complete, and that I am authorized to prepare this					
Signature	►	PRESII	DENT	Date	•	
					Form 8	368 (Rev. 1-2014)