

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052 2014

► 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.

Open to Public Inspection

For cale	endar year 2014, or tax year beginning	, 2014	, and ending		9	
Name of fo	pundation		<u>-</u>	Α	Employer identification num	nber
KBT (	Charitable Foundation  nd street (or PO box number if mail is not delivered to street ar	ddress)	Room/suite	В	20-2025601 Telephone number (see instru	uctions)
	University Avenue	uuiess/	Roomsake	P .	(781) 461-160	
City or tow	n, state or province, country, and ZIP or foreign postal code					
Norwo	ood	MA	02062-9108	С	If exemption application is p	pending, check here.
G Che	eck all that apply Initial return	Initial return of a forme	er public charity	D	1 Foreign organizations, chec	ck here ►
	Final return	Amended return			3 3	اسا
	Address change	Name change			2 Foreign organizations meet here and attach computation	
H Che		(c)(3) exempt private fou	ındatıon	ł	nere and allaen computation	
	Section 4947(a)(1) nonexempt charitable trus	t Other taxable p	rivate foundation	E	If private foundation status	
I Fair	market value of all assets at end of year J Acc	ounting method XC	ash Accrual		under section 507(b)(1)(A),	check here
		Other (specify)		F	If the foundation is in a 60-i	
<b>►</b> \$	17 = 27 = 2	column (d) must be on c	ash basis )	<u> </u>	under section 507(b)(1)(B),	check here •
Part I		(a) Revenue and	(b) Net investmen	t	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		ıncome	for charitable purposes
	sarily equal the amounts in column (a)					(cash basis only)
	(see instructions) )	1 752 000				
	1 Contributions, gifts grants, etc, received (allach schedule)	1,753,888.				
	2 Ck ►If the foundn is not required to attach Sch B		<del>                                     </del>			
	3 Interest on savings and temporary cash investments	<u></u>				
	4 Dividends and interest from securities • • • • •	112,529.	112,52	29.		
	5a Gross rents					
	b Net rental income or (loss)					
R E	<b>6 a</b> Net gain or (loss) from sale of assets not on line 10 <b>b</b> Gross sales price for all					.,
٧	assets on line 6a · ·		1 766 50	) 4		· · ·
E N	7 Capital gain net income ("rom Part IV, line 2)		1,766,59	94.	1,766,594.	
Ü	9 Income modifications	,	······································	-	1,700,334.	
E	10 a Gross sales less returns and		· · · · · · · · · · · · · · · · · · ·			
	allowances -		<del> </del>			
	<b>b</b> Less Cost of goods sold					
	c Gross profit or (loss) (attach schedule)					
	11 Other income (attach schedule)					'
		1 000 417	1 070 10	) )	1 766 504	
	12 Total Add lines 1 through 11	1,866,417.	1,879,12	23.	1,766,594.	
	14 Other employee salaries and wages	<u> </u>			_	
	15 Pension plans, employee benefits			==	WED	
′) A	16 a Legal fees (attach schedule)		RE	<u> </u>	IVEL	
ì D	<b>b</b> Accounting fees (attach sch)				S	
Y N	c Other prof fees (attach sch). L-16c Stmt.	19,100.	2 19,10	) O A		
~P ~	17 Interest		181 301	L &		
OPERATING	18 Taxes (attach schedule)(see instrs) MA.Filing Fee.	35.		} <del>5.</del>		
· A A	19 Depreciation (attach sch) and depletion		Circ	-1/4 1		
	20 Occupancy		·			
C.N V	21 Travel, conferences, and meetings	<u> </u>			<u> </u>	
S∯ E	22 Printing and publications · · · ·					
A N P	23 Other expenses (attach schedule)					
2						
4;07 50E	24 Total operating and administrative expenses Add lines 13 through 23 · · · · ·	10 125	19,13	۲,		
- s	25 Contributions, gifts, grants paid · ·	19,135. 156,700.	19,13	· · ·		156,700.
	26 Total expenses and disbursements	-				
	Add lines 24 and 25 · · · · · · · · · ·	175,835.	19,13	35.		156,700.
	27 Subtract line 26 from line 12		_			
	a Excess of revenue over expenses and disbursements	1,690,582.				
	b Net investment income (if negative, enter -0-)	1,000,002.	1,859,98	8 -		
	C Adjusted net income (if negative, enter -0-)			<u> </u>	1,766,594.	
	······································				<del></del>	

Page 2

Parl	- 11	Balance Sheets column should be for end-of-year amounts only (See instructions)	beginning of year	Ena or	yeai
<u> </u>		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	-	Less allowance for doubtful accounts			
	4	Pledges receivable			
	•				
	_	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch) . •			
A		Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·	
Ē	9	Prepaid expenses and deferred charges		•	
T S	-	Investments – US and state government		<del>-</del>	
3	100	obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule)	2,088,628.	3,778,076.	4,216,227.
		Investments — corporate bonds (attach schedule)	2,000,020.	3,770,070.	1,210,221.
		· · · · · · · · · · · · · · · · · · ·		<del> </del>	
	17	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
		Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	2,088,628.	3,778,076.	4,216,227.
L	17	Accounts payable and accrued expenses			
ļ	18	Grants payable			
A B	19	Deferred revenue		=	
ļ	20	Loans from officers, directors, trustees, & other disqualified persons	· · · · · · · · · · · · · · · · · · ·		
ŀ	21	Mortgages and other notes payable (attach schedule)			
Ť	i				•
Ī	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			,
NF	24	Unrestricted			
E U T N	25	Temporarily restricted			
T N D		Permanently restricted		<del></del>	
	26	· '			,
A S B S A E L T A		Foundations that do not follow SFAS 117, check here . X and complete lines 27 through 31.		i	, ., a.
E L T A	27	Capital stock, trust principal, or current funds			, - ]
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
CE	29	Retained earnings, accumulated income, endowment, or other funds	2,088,628.	3,778,076.	
OE RS	30	Total net assets or fund balances (see instructions)	2,088,628.	3,778,076.	
	31	Total liabilities and net assets/fund balances (see instructions)	2,088,628.	3,778,076.	
Pari	111	Analysis of Changes in Net Assets or Fund Balance		5,7.0,070.	
1	end-c	net assets or fund balances at beginning of year — Part II, column (a of-year figure reported on prior year's return)	a), line 30 (must agree wil	th 	2,088,628.
		· · · · · · · · · · · · · · · · · · ·		1 —	
				3	1,690,582.
		` ' ===================================			28,866.
				<u> </u>	3,808,076.
		ases not included in line 2 (itemize)		5	30,000.
6	⊺otal	net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, column (b), line 30	6	3.778.076

•	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e g , real o , or common stock, 200 shares MLC (	estate,	(b) How acqu P — Purcha D — Donat	ase (month, day, year)	(d) Date sold (month, day, year)
1 a	13140 shs. CBS Corp	oration		D	Various	Various
	13350 shs. Viacom I			D	Various	Various
С	Per Schedule on Fil	e		Р	Various	Various
d						
е						<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) mi	
a	736,889.			7,543.		709,346.
b				955.	· · · · · · · · · · · · · · · · · · ·	1,003,540.
			249	9,612.	<del></del>	53,708.
d						
е						
	(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by the (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an	(I) y	(I) Gains (Co gain minus column (I than -0-) or Losses (fr	(), but not less
a	1		· · · · · ·		• • • • • • • • • • • • • • • • • • • •	709,346.
b	)					1,003,540.
c						53,708.
d	1					· · · · · · · · · · · · · · · · · · ·
е						, -
2	Capital gain net income or (net c	capital loss) If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7		2	1,766,594.
3	If gain, also enter in Part I, line 8	ess) as defined in sections 1222(5) and B, column (c) (see instructions) If (loss	), enter -0-			
		· · · · · · · · · · · · · · · · · · ·		• •		1,766,594.
		r Section 4940(e) for Reduce foundations subject to the section 494			ome	
Was If 'Ye	s,' the foundation does not qualify	s part blank on 4942 tax on the distributable amoui y under section 4940(e). Do not compl		eriod?	Yes	_
	Enter the appropriate amount in	<u> </u>	<del></del>			∐ No
		each column for each year, see the in	structions before making ar	y entries		∐ No
	(a) Base period years Calendar year (or tax year beginning in)	<u> </u>	<del></del>		(d) Distributior (column (b) divided t	n ratio
	Base period years Calendar year (or tax year	each column for each year, see the in	structions before making ar (c) Net value of noncharitable-use ass		(d) Distribution	n ratio
	Base period years Calendar year (or tax year beginning in)	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272.	structions before making ar (c) Net value of noncharitable-use ass	ets	(d) Distribution	n ratio by column (c))
	Base period years Calendar year (or tax year beginning in) 2013	each column for each year, see the in (b) Adjusted qualifying distributions 98,100.	structions before making ar  (c)  Net value of noncharitable-use ass  1,684	ets 4,062.	(d) Distribution	0.058252 0.059841
	Base peirod years Calendar year (or tax year beginning in)  2013  2012	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005.	structions before making ar  (c) Net value of noncharitable-use ass  1,684 1,29	ets 4,062.	(d) Distribution	n ratio by column (c)) 0.058252 0.059841
	Base period years Calendar year (or tax year beginning in)  2013  2012  2011	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100.	structions before making ar  (c) Net value of noncharitable-use ass  1,68  1,29  1,27  99	ets 4,062. 1,282. 3,224.	(d) Distribution	0.058252 0.059841
2	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005.	structions before making ar  (c) Net value of noncharitable-use ass  1,684  1,291  1,271  991  701	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distribution	0.058252 0.059841 0.055842 0.062134
	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d)  Average distribution ratio for the	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.	structions before making ar  (c)  Net value of noncharitable-use ass  1,68  1,29  1,27  99  70  on line 2 by 5, or by the	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distribution (column (b) divided t	0.058252 0.059841 0.055842 0.062134 0.050779
	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.	Structions before making ar  (c)  Net value of noncharitable-use ass  1,68  1,29  1,27  99  70  on line 2 by 5, or by the ears	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distributior (column (b) divided t	0.058252 0.059841 0.055842 0.062134 0.050779
2 3	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation	each column for each year, see the in  (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.	structions before making ar  (c) Net value of noncharitable-use ass  1,68 1,29 1,27 99 70  on line 2 by 5, or by the ears	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distributior (column (b) divided t	0.058252 0.059841 0.055842 0.062134 0.050779 0.286848
2 3	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the number of years the foundation  Enter the net value of noncharita  Multiply line 4 by line 3	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.	structions before making ar  (c) Net value of noncharitable-use ass  1,68 1,29 1,27 99 70  on line 2 by 5, or by the ears	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distributior (column (b) divided to	0.058252 0.059841 0.055842 0.062134 0.050779 0.286848 0.057370
2 3 4 5	Base period years Calendar year (or tax year beginning in)  2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the number of years the foundation  Enter the net value of noncharita  Multiply line 4 by line 3  Enter 1% of net investment inco	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.  5-year base period — divide the total has been in existence if less than 5 year base assets for 2014 from Part X, I	structions before making ar  (c) Net value of noncharitable-use ass  1,68 1,29 1,27 99 70  on line 2 by 5, or by the lars	ets 4,062. 1,282. 3,224. 7,921. 1,084.	(d) Distribution (column (b) divided b	0.058252 0.059841 0.055842 0.062134 0.050779 0.286848 0.057370 3,274,540.
2 3 4 5 6	Base period years Calendar year (or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation  Enter the net value of noncharita  Multiply line 4 by line 3  Enter 1% of net investment inco  Add lines 5 and 6	each column for each year, see the in (b) Adjusted qualifying distributions  98,100. 77,272. 71,100. 62,005. 35,600.  5-year base period — divide the total has been in existence if less than 5 yeals able-use assets for 2014 from Part X, I	structions before making ar  (c)  Net value of noncharitable-use ass  1,68  1,29  1,27  99  70:  on line 2 by 5, or by the lars	ets 4,062. 1,282. 3,224. 7,921. 1,084.	2 3 4 5	0.058252 0.059841 0.055842 0.062134 0.050779 0.286848 0.057370 3,274,540. 187,860.

Part		)		
	Exempt operating foundations described in section 4940(d)(2), check here · · · · • and enter 'N/A' on line 1	-		الـــا
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)			
	Domestic foundations that meet the section 4940(e) requirements in Part V,		37,2	00.
	check here > and enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			'
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
3	Add lines 1 and 2	;	37 <u>,</u> 2	00.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		37,2	00.
	Credits/Payments.			
	2014 estimated tax pmts and 2013 overpayment credited to 2014			
þ	Exempt foreign organizations — tax withheld at source			i
	Tax paid with application for extension of time to file (Form 8868) 6c 50,000.			
	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d		61,0	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		1	39.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	:	23,7	54.
	Enter the amount of line 10 to be Credited to 2015 estimated tax			
Par	t VII-A   Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		_ X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation • \$ (2) On foundation managers • \$  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		X
	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			
4.	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	-	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		
5	If 'Yes,' attach the statement required by General Instruction T	3		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
ŭ	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	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	ļ
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	ı		
	MA - Massachusetts			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		х

BAA

Form 990-PF (2014)

Form	990-PF (2014) KBT Charitable Foundation 20-2029	5601	Р	age <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		x
	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)			х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address $N/A$	13	Х	
14	The books are in care of Shari E. Redstone, Trustee Telephone no (78	31) 461	-160	0
15	Located at 846 University Ave Norwood MA ZIP+4 02062 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		·	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No 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			
Par	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
1 a	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?	10		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	1		
	(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)?	No		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	No	7:	
t	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		<u>  </u>
	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?	1 c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	40		
t	Are there any years listed in 2a for which the foundation is <b>not</b> 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)	2 b	,	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here  20, 20, 20			
<b>3</b> a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No		
t	of 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)	3 b	~	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
t	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
BAA	<del></del>	Form 99	0-PF (	

				•
Form 000 BE (2014) - WDM - Charles - David			20 202	25601 Page <b>6</b>
Form 990-PF (2014) KBT Charitable Four Part VII-B Statements Regarding Activities		A720 May Be Reg	20-202	5501 Fage 0
5a During the year did the foundation pay or incur a		14/20 May be Key	dired (continued)	
(1) Carry on propaganda, or otherwise attempt to	•	ection 4945(e))?	Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	election (see section 495 n drive?	55), or to carry	Yes X	No
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?	· · · · Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	Yes X	No
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ai	erary, or nimals?	Yes X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b
Organizations relying on a current notice regardi				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?		Yes	No
If 'Yes,' attach the statement required by Regula	tions section 53.4945-5(c	d)		
6 a Did the foundation, during the year, receive any on a personal benefit contract?				No
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870  7 a At any time during the tax year, was the foundati	on a party to a prohibited	l tay shelter transaction?	□vas □	No
b If 'Yes,' did the foundation receive any proceeds			L1	
Part VIII Information About Officers, D				
and Contractors		•		
1 List all officers, directors, trustees, foundation	n managers and their c	compensation (see inst	ructions).	· · · · · · · · · · · · · · · · · · ·
	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
			plans and deferred	other allowances
(a) Name and address  Shari E. Redstone 846 Unversity Ave		`enter`-0-) `	plans and deferred compensation	
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062	devoted to position		plans and deferred	other allowances
Shari E. Redstone 846 Unversity Ave Norwood MA 02062 Kimberlee A. Korff	devoted to position  Trustee  0.00	`enter`-0-) `	plans and deferred compensation	
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave	devoted to position  Trustee  0.00  Trustee	`enter`-0-)`	plans and deferred compensation	0.
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062	devoted to position  Trustee  0.00	`enter`-0-) `	plans and deferred compensation	
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave	devoted to position  Trustee  0.00  Trustee	`enter`-0-)`	plans and deferred compensation	0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff	devoted to position  Trustee  0.00  Trustee  0.00	*enter*-0-) **  0 .	plans and deferred compensation	0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff  846 University Ave Norwood MA 02062  Tyler J. Korff	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00	• enter • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 •	plans and deferred compensation  0.	0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff 846 University Ave Dedham MA 02062  Brandon J. Korff 846 University Ave Norwood MA 02062  Tyler J. Korff 846 University Ave	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee	*enter*-0-)*  0.  0.	plans and deferred compensation  0.	0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff  846 University Ave Norwood MA 02062  Tyler J. Korff  846 University Ave Norwood MA 02062	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00	*enter*-0-)*  0.  0.  0.	plans and deferred compensation  0.  0.	0. 0. 0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff  846 University Ave Norwood MA 02062  Tyler J. Korff  846 University Ave Norwood MA 02062  Compensation of five highest-paid employee	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  s (other than those inc	*enter*-0-)*  0.  0.  0.	plans and deferred compensation  0.  0.	0. 0. 0.
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff  846 University Ave Norwood MA 02062  Tyler J. Korff  846 University Ave Norwood MA 02062	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er	0. 0. 0. 0. nter 'NONE.'
Shari E. Redstone  846 Unversity Ave Norwood MA 02062  Kimberlee A. Korff  846 University Ave Dedham MA 02062  Brandon J. Korff  846 University Ave Norwood MA 02062  Tyler J. Korff  846 University Ave Norwood MA 02062  Compensation of five highest-paid employee  (a) Name and address of each employee	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,
Shari E. Redstone  846 Unversity Ave  Norwood MA 02062  Kimberlee A. Korff  846 University Ave  Dedham MA 02062  Brandon J. Korff  846 University Ave  Norwood MA 02062  Tyler J. Korff  846 University Ave  Norwood MA 02062  Compensation of five highest-paid employee paid more than \$50,000	devoted to position  Trustee  0.00  Trustee  0.00  Trustee  0.00  Trustee  0.00  (b) Title, and average hours per week	0. 0. 0. luded on line 1 — see i	plans and deferred compensation  0.  0.  0.  structions). If none, er  (d)Contributions to employee benefit plans and deferred	0. 0. 0. nter 'NONE.' (e) Expense account,

Form 990-PF (2014) KBT Charitable Foundation	20-202	
Part: VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		None
PartilX-A: Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st.	atistical information such as the number of	-
organizations and other beneficiaries served, conferences convened, research papers produced,	etc	Expenses
1		
	·	•
2		
3		1
<b></b>	·	
4		-
Part IX-B Summary of Program-Related Investments (see i	netructions)	
		T
Describe the two largest program-related investments made by the foundation of Not Applicable		Amount
NOT Applicable		1
		0.
2	·	
All other program-related investments. See instructions		
3		_

TEEA0307 06/17/14

BAA

None

Form 990-PF (2014)

Par .	see instructions )	giriodi	idations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes	100	
	Average monthly fair market value of securities	1 a	3,324,406.
b	Average of monthly cash balances	1 b	
С	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	3,324,406.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	<b>1088</b>	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,324,406.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	49,866.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,274,540.
6	Minimum investment return. Enter 5% of line 5	6	163,727.
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(J)(3) and (j)(5) private operating and certain foreign organizations check here ► □ and do not complete this part.)	found	ations
1	Minimum investment return from Part X, line 6	1	163,727.
2 a	Tax on investment income for 2014 from Part VI, line 5	30.75	
	Income tax for 2014 (This does not include the tax from Part VI)	118	
	Add lines 2a and 2b	2 c	37,200.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	126,527.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	126,527.
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	126,527.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
а	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26		156,700.
b	Program-related investments — total from Part IX-B		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		
а	Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	156,700.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	. 5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	156,700.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	oundatio	n
BAA			Form <b>990-PF</b> (2014)

## 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,				126,527.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			64,234.	
<b>b</b> Total for prior years 20 , 20 , 20				· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011 71,100. <b>d</b> From 2012 81,100.				
e From 2013 98,100.				
f Total of lines 3a through e	349,600.			
4 Qualifying distributions for 2014 from Part	0.570001			<del></del>
XII, line 4. ► \$ 156,700.		•		
a Applied to 2013, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2014 distributable amount				
e Remaining amount distributed out of corpus	156,700.			1
<b>5</b> Excess distributions carryover applied to 2014				
(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	506,300.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		1
c Enter the amount of prior years' undistributed		<del>_</del> _ <del>_</del>		-
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				,
amount - see instructions	<u> </u>	0.		<del></del>
e Undistributed income for 2013 Subtract line 4a from				
line 2a Taxable amount — see instructions	<del></del>		64,234.	
f Undistributed income for 2014 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2015	I			126,527.
7 Amounts treated as distributions out of				120,327.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)			1	
8 Excess distributions carryover from 2009 not				
applied on line 5 or line 7 (see instructions)	35,600.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	470,700.			· · · · · · · · · · · · · · · · · · ·
10 Analysis of line 9				
<b>a</b> Excess from 2010				
b Excess from 2011				
<b>c</b> Excess from 2012				
e Excess from 2014 . 98,100.				
e Excess from 2014   156, 700 . ]		<u> </u>		Form 990-PF (2014)

Part XIV   Private Operating Foundat		tions and Part \	/II-A guestion 9	20-2025601	
1 a If the foundation has received a ruling or dete					N/A
is effective for 2014, enter the date of the ruli	ng		. <del>.</del>	· <u> </u>	
b Check box to indicate whether the foundation	<del></del>	g foundation describ		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4 2012	Prior 3 years		(-) T-4-1
Investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
<b>b</b> 85% of line 2a		·····			
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					
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>b</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		I			
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th	e year — see ins	structions.)	Touridation had	40,000 01 111010	
1 Information Regarding Foundation Manag					
a List any managers of the foundation who have close of any tax year (but only if they have continued)	e contributed more than	han 2% of the total o \$5.000) (See section	contributions received on 507(d)(2) )	by the foundation b	efore the
None		••••••	(-)(-)		
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally larg	e portion of the own	ership of
a partnership or other entity) of which the fou None	ndation has a 10% o	r greater interest			
None					
2 Information Regarding Contribution, Gran	t, Gift, Loan, Schola	arship, etc, Program	ms:		
Check here I If the foundation only ma requests for funds If the foundation makes g complete items 2a, b, c, and d					
a The name, address, and telephone number of	or e-mail address of t	he person to whom	applications should b	e addressed	
Shari E. Redstone					
200 Elm Street					
Dedham	MA 02026	<del></del>	1) 461-1600		
b The form in which applications should be sub	mitted and information	on and materials the	y should include		
Various					
c Any submission deadlines					
None					
d Any restrictions or limitations on awards, suc	h as by geographical	areas, charitable fie	elds, kinds of institute	ons, or other factors	
None	, gg-spou		_,	.,	
·			_	_	000 DE (004 4)

Part XV Supplementary Information (continued)

10065 02445	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient  Public	Purpose of grant or contribution  Medical	Amount
10065	Substantial Contributor		Medical	
		Public	Medical	
		Public	Medical	
02445				20,000
02445				
02445				
		Public	Medical	20,000
01583		Public	Veterans	5,000
01303		EUDITC	Vecerans	3,000
11219		Public	Community	5,000.
10017		501 (c) (3)	Community	10,000.
		501 (c) (3)	Community	20,000
		301 (6) (3)	Community	20,000
19104		Public	Community	3,600.
27240		Dublia	Education	10,000
		Public	Educación	10,000
33431		Public	Medical	5,000
				58,100
		· · · · · ·	3a	156,700
	10017 19104 37240 FD 33431	19104 37240 FD 33431	10017 501(c)(3) 501(c)(3) 19104 Public 37240 FD 33431 Public	10017  501(c)(3) Community  501(c)(3) Community  Public Community  37240  Public Education  Public Medical

#### Part XVI-A Analysis of Income-Producing Activities

nțer gross amounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a			Loue		
b			<del> </del>		
C			1		
d					
e					
•					
g Fees and contracts from government agencies	<del> </del>		-		
2 Membership dues and assessments		<del> </del>	· · · · · · · · · · · · · · · · · · ·		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	112,529.	
5 Net rental income or (loss) from real estate	-		14	17. 1987 1980 1986 1986	· 大阪大学科学的特别
a Debt-financed property		<del> i. '</del>			
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			<del> </del>		
9 Net income or (loss) from special events		-	<u> </u>		
10 Gross profit or (loss) from sales of inventory	-		<del>                                     </del>		
11 Other revenue	· · · · · · · ·	7,421	1. ~	·沙····· 经公司公司 \$	Section of Research
_				. , , , , , , , , , , , , , , , , , , ,	(11 k 3k 3 m x 1 - 1 m x 1 - 1 m x 1 m x 2 m x 1
			<del> </del>		
	<u> </u>				
d					
e					
			<u> </u>	112,529.	
Subtotal Add columns (b), (d), and (e)		<u> </u>	·	13	112,529.
See worksheet in line 13 instructions to verify calculation	ns)	<del></del>			
ee worksheet in line 13 instructions to verify calculation	ns)	<del></del>			
ree worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activities to the	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No.   Explain below how each activity for which in	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ne Accomp	lishment of Exemp	pt Purp	poses	the

Form 990-PF (2014)

BAA

Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1 a (1) Х 1 a (2) Х (2) Other assets . . **b** Other transactions 1 b (1) (1) Sales of assets to a noncharitable exempt organization. . . Х (2) Purchases of assets from a noncharitable exempt organization. 1 b (2) Х 1 b (3) Х (3) Rental of facilities, equipment, or other assets . . . . . 1 b (4) Х 1 b (5) Х (6) Performance of services or membership or fundraising solicitations... 1 b (6) Х c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . . 1 c Х d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . . . . b if 'Yes,' complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and Complete Declaration of prepare (other than the payer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below Here (see instructions) Signature of officer or trustee Title Yes Print/Type preparers name Date PTIN XII Check a la Paid self-employed P01202673 Peter Isenberg Firm's EIN > 04-3484168 Firm's name Peter I **Preparer** Firm's address Use Only 846 University Avenue Norwood MA 02062 Phone no 349-4460

#### Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

#### **Schedule of Contributors**

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

2014

Employer identification number

OMB No 1545-0047

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

KBT Charitable Foundation	20-2025601
Organization type (check one)	
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
	327 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt chantable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization is covered by the Gen	eral Rule or a Special Rule
Note. Only a section 501(c)(7), (8), or (10) organ	ızatıon can check boxes for both the General Rule and a Special Rule See instructions.
General Rule	
X For an organization filing Form 990, 990-EZ,	or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or
property) from any one contributor Complete	Parts I and II See instructions for determining a contributor's total contributions
Special Rules	
For an organization described in section 501	(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations
received from any one contributor, during the	i, that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Form 990-l	ΞŹ, line 1 Complete Parts I and II
□e	(-)(7) (0) (40) Char France 000 000 F7 that are not of force and the force
during the year, total contributions of more th	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, an \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational
	hildren or animals. Complete Parts I, II, and III
	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor,
, , ,	religious, charitable, etc., purposes, but no such contributions totaled more than total contributions that were received during the year for an exclusively religious,
	y of the parts unless the <b>General Rule</b> applies to this organization because
	e, etc , contributions totaling \$5,000 or more during the year · · · · · ▶ \$
•	

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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part
Name of org	anization naritable Foundation		er Identification number
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	National Amusements. Inc.  846 University Ave  Norwood MA 02062	- _\$_ <u>_1,753,888</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-    -  -	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-  \$=	Person Payroll Oncash Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions)

L to

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

of Part II

Name of organization

BAA

KBT Charitable Foundation

Employer Identification number 20-2025601

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (c) FMV (or estimate) (see instructions) (d) Date received (a) No. (b) from Part I Description of noncash property given CBS Corporation Class B shares 13350hs. Viacom Inc Class B shaes 1,753,888. \_Various\_ (a) No. from (b) (c) FMV (or estimate) (see instructions) (d) Date received Description of noncash property given Part I (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received

Form 990-PF, Page 2, Part III, Line 5 Other Decreases Stmt	
Internal Revenue Service	30,000.
Total	30,000.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount	
a Paid during the year Chabid @ Columbia Univ				Person or Business X	
		Public	Community	3,600.	
Brooklyn Law School				Person or Business X	
Brooklyn NY		Public	Education	15,000.	
Books For Kids		1 2 2 2 2 2	24404020	Person or	
				Business X	
		Public	Community	2,000.	
21/64				Person or	
		Public		Business X	
University of Pennsylvania		PUDITE	Community	5,000. Person or	
				Business X	
Phiadelphia PA 19104		Public	Education	20,000.	
Teen Cancer Center				Person or	
				Business X	
		Public	Medical	2,500.	
Mass Eye and Ear				Person or	
Boston MA 02114		Public	Medical	Business X 10,000.	

Total

58,100.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Merrill Lynch	Investment Advise	19,100.	19,100.		

` Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Continued

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	<u> </u>		†		

Total

19,100. 19,100.

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return ► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

	e filing for an Automatic 3-Month Extension, com					<del>•</del> 🗓	
-	re filing for an Additional (Not Automatic) 3-Month						
	aplete Part II unless you have already been granted						
corporation request an e	filing (e-file). You can electronically file Form 8868 is required to file Form 990-T), or an additional (not auextension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which musing of this form, visit www irs gov/efile and click on e	itomatic) 3-m t I or Part II i it be sent to t	nonth extension of time. You can electronically with the exception of Form 8870, Informations and IRS in paper format (see instructions). F	ally file on Retu	Form 8868 rn for Trans	sfers	
Part I	Automatic 3-Month Extension of Time	e. Only sul	omit original (no copies needed).		· · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
•	on required to file Form 990-T and requesting an auto			te Part	I only		
	porations (including 1120-C filers), partnerships, RE						
income tax i		.wics, and ti	usis must use romi roo4 to request air ex	lension.	or unite to i	ne .	
<del></del>			Enter filer's identi	<del></del>	<del></del>		
_	Name of exempt organization or other filer, see instructions			Employ	er identification	n number (EIN) or	
Type or print							
Priii.	KBT Charitable Foundation			_	<u> 2025601</u>		
File by the due date for	Number street, and room or suite number. If a P O box, see insti	ructions		Social	secunty numbe	r (SSN)	
filing your	846 University Avenue			J			
return See instructions	City, town or post office, state, and ZIP code. For a foreign address	ss, see instructio	ns				
	Norwood			M	<u>1A 020</u>	062-9108	
Enter the Re	eturn code for the return that this application is for (fi	ile a separate	e application for each return)			04	
Application ls For	<b>I</b>	Return Code	Application Is For			Return Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990-B	L	02	Form 1041-A			08	
Form 4720 (	(ındıvıdual)	03	Form 4720 (other than individual)			09	
Form 990-P	F	04	Form 5227			10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T	(trust other than above)	06	Form 8870			12	
Telepho  If the org  If this is check the exter  I require until  The exter    1   1   2   3   4   4   4   4   4   4   4   4   4	ganization does not have an office or place of busines for a Group Return, enter the organization's four dignis box . If it is for part of the group, chansion is for est an automatic 3-month (6 months for a corporation) Aug 17, 20 15 _, to file the exempt organization is for the organization's return for tax year beginning, 20, 20, 20, 20, 20, 20	Fax No ess in the Ur git Group Exe eck this box. on required to nization retui	emption Number (GEN)  and attach a list with the name of file Form 990-T) extension of time or for the organization named above.	this is	for the who		
· · · · · ·	tax year entered in line 1 is for less than 12 months, hange in accounting period	check reaso	n ∐Initial return ☐Fir	nal retu	rn		
nonre	application is for Forms 990-BL, 990-PF, 990-T, 472 fundable credits. See instructions.	<u> </u>	·····	3 a	\$	61,093.	
tax pa	application is for Forms 990-PF, 990-T, 4720, or 600 syments made. Include any prior year overpayment at the control of the co	allowed as a	credit	3 b	\$	11,093.	
EFTP	S (Electronic Federal Tax Payment System) See in:	structions			\$ -	50,000.	
Caution. If y payment ins	you are going to make an electronic funds withdrawa	ai (direct deb	it) with this Form 8868, see Form 8453-EC	and F	orm 8879-E	∃O for	