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Form **990-PF**

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

OMB No 1545-0052

2014

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► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Department of the Treasury Internal Revenue Service Open to Public Inspection

For ca	lendar year 2014, or tax year beginning	, <u>2014</u>	, and ending		
THE	TILLEY CHARITABLE FOUNDATION	NT.	A	Employer Identification nu 20-3825855	mber
	MOURNING DOVE DRIVE	N	В	Telephone number (see ins	tructions)
	DERSTOWN, RI 02874			- 	
			c	If exemption application is	pending, check here
G Ch	eck all that apply. Initial return	Initial return of a form	mer public charity		
	Final return	Amended return	, June 3	1 Foreign organizations, che	ck nere
	Address change	Name change		2 Foreign organizations mee here and attach computation	
H Ch		1(c)(3) exempt private f		nere and attach computation	DII .
	Section 4947(a)(1) nonexempt charitable		private foundation E	If private foundation status under section 507(b)(1)(A)	
	market value of all assets at end of year m Part II, column (c), line 16)	counting method: XC			
► \$, column (d) must be or	r cash basis	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination), check here.
Part		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)]	purposes (cash basis only)
	(see instructions))	71 010		 	,
	1 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck if the foundn is not required to attach Sch B	71,813.	, 1)		-, -, -
	in all following to trade of the state of the				- /
	3 Interest on savings and temporary cash investments 4 Dividends and interest from securities .	2,202.	2,202.	2,202.	
	5 a Gross rents	34,091.	34,091.	34,091.	
	b Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
R	6 a Net gain or (loss) from sale of assets not on fine 10	85,315.	х .		
Ë	b Gross sales price for all assets on line 6a 534,873.		*	,	
É N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain.		85,315.	<u> </u>	· · · · · · · · · · · · · · · · · · ·
U	9 Income modifications		,: · · ·	0.	~
E	10 a Gross sales less returns and			,	
	allowances. h Less Cost of	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	,	
	goods sold C Gross profit or (loss) (attach schedule)				· · · · · · · · · · · · · · · · · · ·
	11 Other income (attach schedule)				
	See Statement 1	7,750.			,
	12 Total. Add lines 1 through 11 .	201,171.	121,608.	36,293.	
	13 Compensation of officers, directors, trustees, etc. 14. Other employee salaries and wages	0.			
	15 Rension plans, employee benefits				
[A	16'a Legal fees (attach schedule)	· · · · · · · · · · · · · · · · · · ·	·		
D	A P.b. Aecounting fees (attach sch) See St 2	1,190.		1,190.	
г , н	C Offier profilees (attach sch) . See St 3	7,513.	7,513.	7,513.	
OPERA	17 Interest 18 Taxes (attach schedule(see instrs): See Stm 4	1 050	1 050	ļI	
R R	18 Taxes (attach scheduleXsee instrs): See Stm 4	1,052.	1,052.	 	
<u> </u>	sch) and depletion .				
Ņ V G E	20 Occupancy				
	22 Printing and publications				
A E N X D P	23 Other expenses (attach schedule)				
E N	See Statement 5	50.	50.	50.	
AND EXPENSES	24 Total operating and administrative expenses. Add lines 13 through 23	9,805.	8,615.	8,753.	
,	25 Contributions, gifts, grants paid Stmt 6	70,000.			70,000.
•	26 Total expenses and disbursements.		0.615	0 750	
<i>p</i>	Add lines 24 and 25 27 Subtract line 26 from line 12.	79,805.	8,615.	8,753.	70,000.
	a Excess of revenue over expenses				
i	and disbursements	121,366.	110 000		
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		112,993.	27,540.	
	, actor (ii riogative, citter 0°)			1 41,040.1	

Par	tII	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		and of	
=	 	(See instructions)	(a) Book Value	(b) Book Value	e	(c) Fair Market Value
	1	Cash – non-interest-bearing			_ -	
	2	Savings and temporary cash investments	2,974.	46,1	64.	46,164.
	3			•	-	
	١.	Less. allowance for doubtful accounts				
	4					يدان الجدالية الجيامية بيجيد الدي
	_	Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			J	
	7	Other notes and loans receivable (attach sch)	*A 44 , 2 * A	7.5		B. 48.
A	`	Less: allowance for doubtful accounts				, , ,
S	8	Inventories for sale or use		······································		
A S E T	9	Prepaid expenses and deferred charges		··		
S	10	a Investments – U.S. and state government	-			
	ł	obligations (attach schedule)		······································		
		b Investments — corporate stock (attach schedule)	1,432,347.	1,510,5	23.	1,510,523.
	ļ •	c Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment: basis				
	}	Less, accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule) .				
	14	Land, buildings, and equipment: basis ▶			- 4	
		Less: accumulated depreciation (attach schedule)				
		Other assets (describe >)				
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item l)	1,435,321.	1,556,68	87.	1,556,687.
Ļ	17	Accounts payable and accrued expenses				
À	18	Grants payable				ge da
В	19	Deferred revenue	<u></u>			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			.`	water on the
÷	21	Mortgages and other notes payable (attach schedule)		 		
Ţ	22	Other liabilities (describe		· 		The work of the second
E S	23	Total liabilities (add lines 17 through 22)	0.		0.	· 整体点 1 1991
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
N F E U T N	24	Unrestricted .	1,435,321.	1,556,68	37.	
ŤN	25	Temporarily restricted				** A **
D	26	Permanently restricted .				(表):
A S S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			n)	Agent of the first
E L T A	27	Capital stock, trust principal, or current funds				
SNC	28	Paid-in or capital surplus, or land, bldg, and equipment fund			:	**
O E	29	Retained earnings, accumulated income, endowment, or other funds .			'	
RS	30	Total net assets or fund balances (see instructions)	1,435,321.	1,556,68	37.	•
	31	Total liabilities and net assets/fund balances (see instructions)	1,435,321.	1,556,68	37.	£1 -
Par	III J	Analysis of Changes in Net Assets or Fund Balance				· · · · · · · · · · · · · · · · · · ·
		net assets or fund balances at beginning of year — Part II, colu		aree with		
•	end-	of-year figure reported on prior year's return)			1	1,435,321.
2	Ente	r amount from Part I, line 27a			2	121,366.
3	Other	increases not included in line 2 (itemize)			3	
4		lines 1, 2, and 3		, <u>[</u>	4	1,556,687.
5		ises not included in line 2 (itemize)			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), II	ne 30.	6	1,556,687.

Part		Losses for Tax on Investme the kind(s) of property sold (e.g.,		(b) How acc	guired	(c) Date acquired	(d) Date sold
	2-story brick warehous	se, or common stock, 200 shares M	LC Company)	P — Purch D — Dona	nase	(month, day, year)	
1 a	SEE ATTACHED SHORT	TERM		P_		Various	Various
b	SEE ATTACHED LONG 1	TERM		P		Various	Various
c	SEE ATTACHED LONG 1	TERM		P		Various	Various
d	Capital gain divide	ends			_		
e		.					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa	le		(h) Gain or (e) plus (f) m	inus (g)
a	31,832.			2,577.			-745.
<u>b</u>	175,419.			4,343.			31,076.
c	323,184.		27	2,638.			50,546.
d							
e	Consolate and for another than		h. the foundation on 19/21	160			
	(i) Fair Market Value as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a) (I)		(1) Gains (Colu ain minus column (k an -0-) or Losses (fr), but not less
a			·			- 	
b							<u>31,076.</u>
c							<u>50,546.</u>
d							4,438.
e		<u></u>					
	Capital gain net income or (ne	If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		85,315.
3 [Net short-term capital gain or i	(loss) as defined in sections 1222(5	i) and (6):	ĺ			
! i	f gain, also enter in Part I, lind n Part I, line 8	e 8, column (c) (see instructions). I	f (loss), enter -0-		3		-745.
Part	V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me		
(For op	otional use by domestic private for	oundations subject to the section 4940	(a) tax on net investment inc	ome)		N/A	
If sect	ion 4940(d)(2) applies, leave t	his part blank					
						Пv	□ Na
		ction 4942 tax on the distributable a diffy under section 4940(e) Do not o		ase perioo		Yes	∐No
	`	each column for each year, see the in		entries		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	(a)	(b)	(c)	critics		(d)	
C	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	(colu	Distribution mn (b) divided l	
	2013						
	2012			 -			
	2011						
	2010						
	2009				—- т		
2 1	otal of line 1, column (d)		• •		2		
3 A	Average distribution ratio for th number of years the foundation	ne 5-year base period — divide the t n has been in existence if less than	total on line 2 by 5, or by th 5 years	ne j	3	· · · · · · · · · · · · · · · · · · ·	
4 E	Enter the net value of nonchar	stable-use assets for 2014 from Par	t X, line 5	-	4		
5 N	Multiply line 4 by line 3			.	5		
6 E	Enter 1% of net investment inc	come (1% of Part I, line 27b) .		-	6		
7 A	Add lines 5 and 6 .	•		-	7		
	Enter qualifying distributions fro	i			8		
	fline 8 is equal to or greater thai Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% t	ax ra	te See the	

		1-38258			Page 4
	Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instruc	tions)		
	dations described in section 4940(d)(2), check here				
Date of ruling or deter	' '			_	
	ions that meet the section 4940(e) requirements in Part V,	1		<u>2,</u>	260.
<u> </u>	and enter 1% of Part I, line 27b	_[, , , [,			-
c All other domestic four	ndations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2 Tax under section	511 (domestic section 4947(a)(1) trusts and taxable				
foundations only	·	2			0.
3 Add lines 1 and 2		3		<u>2,</u>	260.
	e) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
	estment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2,	260.
6 Credits/Payments	1 1	ا، ، ا			•
	ts and 2013 overpayment credited to 2014	ᅴᅵ	•		-
•	ganizations – tax withheld at source 6 b	 ' ;-' . ' '		3 3 10 100	~{\s^\frac{1}{2}}
	lication for extension of time to file (Form 8868)				٠
•	g erroneously withheld 6 d			67	
·	payments Add lines 6a through 6d	7		1,	200.
	for underpayment of estimated tax. Check here if Form 2220 is attached	8			
	lines 5 and 8 is more than line 7, enter amount owed	9		<u>l,</u>	060.
	is more than the total of lines 5 and 8, enter the amount overpaid	10			
	e 10 to be Credited to 2015 estimated tax . Refunded	> 11			
Part VII-A Statem	ents Regarding Activities			1	1
1 a During the tax year	ir, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	
participate or inter	vene in any political campaign? .		1 a	├ -	X
b Did it spend more (see Instructions f	than \$100 during the year (either directly or indirectly) for political purposes or the definition)?		16	1	X
If the answer is 'Yes	t to 1a or 1b, attach a detailed description of the activities and copies of any materials published				
	he foundation in connection with the activities				`
	file Form 1120-POL for this year?		1 c	L	X
	(If any) of tax on political expenditures (section 4955) imposed during the year:		<u>, </u>	١. ،	2.
(1) On the founda	tion . ►\$ 0. (2) On foundation managers ►\$ ment (if any) paid by the foundation during the year for political expenditure tax imposed on		<u>0.</u>		1,7
foundation manag			,	1	j è
· ·	n engaged in any activities that have not previously been reported to the IRS?		2	' '	X
	letailed description of the activities		<u> </u>		, ,
	·		1.5	100	
3 Has the foundation of incorporation, o	made any changes, not previously reported to the IRS, in its governing instrument, articles r bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	1	Ĩχ
	have unrelated business gross income of \$1,000 or more during the year?		. 4a		X
	a tax return on Form 990-T for this year? .	•	4 b	N	/A
	termination, dissolution, or substantial contraction during the year?		5	 	X
·	statement required by General Instruction T.				-4,
· ·	nts of section 508(e) (relating to sections 4941 through 4945) satisfied either.		- 1		
•	he governing instrument, or		٠,-	-	, ,
Py state legislation	n that effectively amends the governing instrument so that no mandatory directions that conflict				
with the state la	w remain in the governing instrument?		6]	X
	at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	Х	
8 a Enter the states to	which the foundation reports or with which it is registered (see instructions)				
RI					
b If the answer is 'Yes' to (or designate) of each s	line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General tate as required by General Instruction G? If 'No,' attach explanation		. 8b	x	
9 Is the foundation of	claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' completes	or 4942(j)(ete Part X	(5) 9	-	х
_				 	1
10 Did any persons bed and addresses	come substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		10		X
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Fart VII-A Statements Regarding Activities (continued)	
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)	12 X
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13 X
14 The books are in care of ► STEVEN TILLEY Telephone no ►	
Located at ► 116 MOURNING DOVE DRIVE SAUNDERSTOWN RI ZIP + 4 ► 02874	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/Ā → F
and enter the amount of tax-exempt interest received or accrued during the year	N/A
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?	Yes No
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	
Part VIIB 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):	114 114 114 114 114 114 114 114 114 114
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	一位數學學 物子
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . \square Yes \square No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No	4 1 - 2
(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). Yes X No	in the state of th
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b N/A
Organizations relying on a current notice regarding disaster assistance check here	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	· · · · · · · · · · · · · · · · · · ·
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? Yes X No	The state of
If 'Yes,' list the years ► 20 , 20 , 20	(athorn 14 / 2)
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2b N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	TORREST TANGETT OF
► 20 , 20 , 20 .	
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	
b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	зь п/а
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b X
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Form 990-PF (2014) THE TILLEY CHARIT				382585	5 Page 6
Part VII-B Statements Regarding Activit		n 4720 May Be Rec	uired (continued	1)	
5 a During the year did the foundation pay or inci(1) Carry on propaganda, or otherwise attem	•	on (section 1915(a))?	☐Yes	X No	
(2) Influence the outcome of any specific put	olic election (see section				
on, directly or indirectly, any voter registr (3) Provide a grant to an individual for travel		purposes?		X No X No	
(4) Provide a grant to an organization other to in section 4945(d)(4)(A)? (see instruction	han a charitable, etc, o s)	rganization described	Yes	X No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientifion of cruelty to children	c, literary, or or animals?.	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or if (see instructions)?	the transactions fail to a current notice regar	qualify under the excer ding disaster assistance	otions e 		5 b N/A
Organizations relying on a current notice rega	arding disaster assistan	ce check here	•		41 May
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Req			…N/A Yes	∏ No	
6 a Did the foundation, during the year, receive a on a personal benefit contract?		• •	s Yes	XNo	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	_ ·	6 b X
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed	• • •			X No	7 b
Part VIII Information About Officers, D and Contractors				,	
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	tructions)		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	pense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefi plans and deferre compensation	t ot	her allowances
See Statement 7					
		0.	(). <u> </u>	0.
2 Compensation of five highest-paid employees (of			ns). If none, enter 'NO		
(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 deferre- compensation	otl	pense account, her allowances
None				<u> </u>	·
			· · · · · · · · · · · · · · · · · · ·	+	
Total number of other amelance and are \$50,000				P	
Total number of other employees paid over \$50,000	TEEA0306L 06				0 n 990-PF (2014)
D. T.	TEE.A0306L 06	11/114		rom	1 330-FF (2014)

Form 990-PF (2014) THE TILLEY CHARITABLE FOUNDATION Part VIII Information About Officers, Directors, Trustees, Foundation	20-382	
and Contractors (continued)	addir managers, riiginy r aid L	.mpioyees,
3 Five highest-paid independent contractors for professional services (see in		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
	i	
Total number of others receiving over \$50,000 for professional services	, ,	
Part IX-A Summary of Direct Charitable Activities		
Egartix-A Summary of Direct Charlable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruc	tions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
1		
N/A		
	·· <u> </u>	
2		
~		
All other program-related investments. See instructions		
3		
·		
Total. Add lines 1 through 3	>	0.
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Part X' Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
7 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	1 a	1,471,435.
b Average of monthly cash balances	1 b	24,569.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	1,496,004.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,496,004.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	22,440.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4.	5	1,473,564.
6 Minimum investment return. Enter 5% of line 5	6	73,678.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera	ting f	oundations
and certain foreign organizations check here ▶ and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	73,678.
2a Tax on investment income for 2014 from Part VI, line 5 . 2a 2, 260.		
b Income tax for 2014 (This does not include the tax from Part VI) . 2b		
c Add lines 2a and 2b	2 c	2,260.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	71,418.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4 .	5	71,418.
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	71,418.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1.0	70 000
b Program-related investments — total from Part IX-B	1 a	70,000.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule).	3 Ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	70,000.
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	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	70,000.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years	ndation	

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,				71,418.
1 Ine 7 2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only		,	64,469.	
b Total for prior years 20 , 20 , 20		0.		,
3 Excess distributions carryover, if any, to 2014				•
a From 2009				1
b From 2010	,			· ·
c From 2011	A.			•
d From 2012				
e From 2013				•
f Total of lines 3a through e.	0.		÷	
4 Qualifying distributions for 2014 from Part				• 4
XII, line 4: ► \$ 70,000.				
a Applied to 2013, but not more than line 2a			64,469.	- 1-
b Applied to undistributed income of prior years (Election required — see instructions)		0.		*
c Treated as distributions out of corpus				
(Election required – see instructions)	<u> </u>			5,531.
d Applied to 2014 distributable amount				3,331.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the	0.		`	
same amount must be shown in column (a).)	,			,
				• •
6 Enter the net total of each column as				3
indicated below:				, , , , , , , , , , , , , , , , , , , ,
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0.			
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) I				₹
tax has been previously assessed.	*	0.		
d Subtract line 6c from line 6b Taxable		0.		,
amount - see instructions.		<u> </u>		
e Undistributed income for 2013. Subtract line 4a from			0.	
line 2a. Taxable amount — see instructions.			0.	
f Undistributed income for 2014. Subtract lines				
4d and 5 from line 1. This amount must be				65,887.
distributed in 2015		 		
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				,
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions).				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.			, , , , , , , , , , , , , , , , , , ,
10 Analysis of line 9:				
a Excess from 2010			, .	-
b Excess from 2011 .				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014		<u> </u>	1	Form 990-PF (2014)

Form 990-PF (2014) THE TILLEY CHARI				20-382585	
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or determined is effective for 2014, enter the date of the	ruling	,		· •	1 10104345
b Check box to indicate whether the foundar		erating foundation of		4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#1.0012	Prior 3 years	4 1) 0011	(-) T-4-1
investment return from Part X for each year listed .	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
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					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:		j	_	J	
(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)	 	<u> </u>			
(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 Information assets at any time during the	(Complete this e year – see in:	part only if the structions.)	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Manag					
a List any managers of the foundation who have close of any tax year (but only if they have	contributed more th	an 2% of the total co	entributions received b	y the foundation befo	ore the
None	contributed more	(liaii \$5,000) (See	section 507 (d)(2)		
b List any managers of the foundation who own	10% or more of the	stock of a corporation	n (or an equally large	portion of the owners	ship of
a partnership or other entity) of which the None	foundation has a 10)% or greater intere	est		
2 Information Regarding Contribution, Gran	t Gift Loon Sales	archin etc Drogen	mc'		······································
Check here X if the foundation only mal requests for funds. If the foundation makes	kes contributions to p	preselected charitable	e organizations and d		
complete items 2a, b, c, and d. a The name, address, and telephone number or	a mail address of the	a person to whom as	onlications should be	addressed	
a The Hame, address, and telephone humber of	e-mail address of th	e persori to whom ap	ophications should be a	adulessed	
					
b The form in which applications should be s	ubmitted and inforr	nation and material	is they should includ	e·	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charitab	ole fields, kinds of in	stitutions, or other t	factors:
BAA \	TEE	A0310L 06/17/14		Fo	rm 990-PF (2014)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
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)	substantial contributor	recipient		<u> </u>			
a Paid during the year							
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Approved for future payment							
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Total		L	► 3b				

P	arl	: X,	71 -	Α	Analysis o	of Income-	Producing	Activities
---	-----	------	-------------	---	------------	------------	-----------	------------

er gross amounts unless otherwise indicated.	Unrelated t	ousiness income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
ab	 				
C	 		+		
d	 		+		
e	╁		+		· · · · · · · · · · · · · · · · · · ·
f	 		+		
g Fees and contracts from government agencies	 -		+		
Membership dues and assessments			 		
Interest on savings and temporary cash investments			1		2,202
Dividends and interest from securities			1		34,091
Net rental income or (loss) from real estate:	 		 		
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property				·	
Other investment income		· ··	1		
Gain or (loss) from sales of assets other than inventory					85,315
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
Other revenue					
UNREALIZED HOLDING GAIN					7,750
)					
Subtotal Add columns (b), (d), and (e)			<u> </u>		129,358
Total. Add line 12, columns (b), (d), and (e)				13 _	129,358
worksheet in line 13 instructions to verify calculate	ons)				
rt XVI-B Relationship of Activities to the	Accomplish	ment of Exemp	ot Purpose	es	
·	<u> </u>	······································			
e No. Explain below how each activity for which in accomplishment of the foundation's exempt	come is reporte purposes (other	d in column (e) of l than by providing	Part XVI-A confunds for such	ontributed importantly ch purposes). (See in	to the structions)
I/A					
7/ N					
 					

BAA Form **990-PF** (2014) TEEA0502L 06/17/14

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										
des	the organization dire cribed in section 501 iting to political organ	(c) of the Code (engage in any of t other than section	he following wi 501(c)(3) orga	ith any other or nizations) or in	ganization section 527,			Yes	No
	nsfers from the repor		o a noncharitable e	exempt organiz	ation of			İ	i	
(1)	Cash .							1 a (1)		Х
(2)	Other assets							1 a (2)		X
b Oth	er transactions									
(1)	Sales of assets to a	noncharitable ex	empt organization					1 b (1)	}	Х
(2)	Purchases of assets	from a noncharil	lable exempt organ	nizatıon.			•	1 b (2)		Х
(3)	Rental of facilities, e	quipment, or oth	er assets					1 b (3)		Х
	Reimbursement arrai	•						1 b (4)		Х
(5)	Loans or loan guarar	ntees .	•					1 b (5)		X
	Performance of servi		hip or fundraising s	solicitations				1 b (6)		Х
c Sha	ring of facilities, equi	pment, mailing li	ists, other assets,	or paid employ	ees		. =	1 c		X
the o	e answer to any of th goods, other assets, or transaction or sharin	services given by	the réportina found	ation If the four	ndation received	less than fair	market value in		ue of	
(a) Line no		- , 	of noncharitable exemp				transactions, and s		gement	s
N/A		(5)			1					
							-, -,			
			-							
	1									
						· · · · · · · · · · · · · · · · · · ·				
	 	-								
									-	
	· · · · · · · · · · · · · · · · · · ·									
							·			
desc	e foundation directly or cribed in section 501(es.' complete the follo	c) of the Code (d				zations		Yes	X	Vo
	(a) Name of organiz		(b) Type	of organization		(c) Des	cription of rela	tionship		
N/A	(a) Name of organiz		(b) Type (or organization		(0) 503	emption of rela	ittoriorip		
14/ A	··-		 							
			 							
			 							
										
Un	der penalties of perjury, I de	Mare Dat I have exam	nined this return, includin	g accompanying sc	hedules and stateme	nts, and to the be	st of my knowledge	and belief, it	ıs true,	
cor	rrect, and complete Declara	on of preparer (other	than taxpayer) is based	on all information of	if which preparer has	any knowledge				
Sign		9		/ / -	_ 🕨			May the If this return	with the	• 1
Here	X /			4/13/15	Presi	dent		preparer s (see ipstru	shown be uctions):2	low
	Sygnature of officer or trustee	· · · · · · · · · · · · · · · · · · ·	D	ate/	Title		·	X	Yes	No
7	Print/Type preparer's	name	Preparers sig	nature	Date	c	heck If	PTIN		
Paid /	MIKE BISSO	NNETTE	X			19/15 s	elf-employed	P00391	012	
Prepare	Firm's name	MELUCCI B	ISSONNETTE &	co, LTD			EIN - 05-04	94826		
Use Onl		7 IVAN ST			-					
	1	NORTH PROV		02904-480	8	Phone	eno 401-3	305-390	0	
ВАА			· · · · · · · · · · · · · · · · · · ·					Form 990		(014)
	,								•	•

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► 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.

OMB No 1545-0047

2014

Name of the organization		Employer identification number
THE TILLEY CHARITABLE FOUNDAT	ION	20-3825855
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, contributions total te Parts I and II. See instructions for determining a contribu	aling \$5,000 or more (in money or tor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi) t	I (c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, le year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II	16a, or 16b, and that
For an organization described in section 501 during the year, total contributions of more to purposes, or for the prevention of cruelty to	l(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lichildren or animals. Complete Parts I, II, and III	rom any one contributor, terary, or educational
during the year, contributions exclusively for \$1,000 If this box is checked, enter here the charitable, etc., purpose Do not complete a	1 (c)(7), (8), or (10) filing Form 990 or 990-EZ that received to religious, charitable, etc., purposes, but no such contribution e total contributions that were received during the year for any of the parts unless the General Rule applies to this organie, etc., contributions totaling \$5,000 or more during the year	ons totaled more than an <i>exclusively</i> religious, inization bec <u>a</u> use
Part I, line 2, to certify that it does not meet the	the General Rule and/or the Special Rules does not file Sclee 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 900-EZ, or	90-PF).
BAA For Paperwork Reduction Act Notice, see or 990-PF.	the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

THE T	ILLEY CHARITABLE FOUNDATION	20-3	825855
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	s is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVEN_TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874	\$7 <u>1,</u> 813.	Person X 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 Complete Part II for noncash contributions Part II for
(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 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)
BAA	TFFA07021 07/17/14	Schedule B (Form 990	990-EZ or 990-PE) (2014)

Page 1 of 1
Employer identification number

1 of Part 1

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

Page

1 to

1 of Part II

Name of organization

THE TILLEY CHARITABLE FOUNDATION

20-3825855

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	144 SHARES HANESBRAND INC (FMV \$15,936) 84 SH THERMO FISHER SCIENTIFIC INC (FMV \$10,393) 102 UNITS ISHARES CORE S&P 500 ETF (FMV \$20,484)	\$ 46,813.	12/16/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
	<u> </u>	\$ 	

of Part III

Name of organization
THE TILLEY CHARITABLE FOUNDATION

Employer identification number 20-3825855

Part III	Exclusively religious, charitable, et	tc., contributions to orga	nizations	described in section 501(c)(7), (8)
	or (10) that total more than \$1,000 for the following line entry. For organizations of	he year from any one contri ompleting Part III, enter the tot	butor. Completal of exclusive	ete columns (a) through (e) and vely religious, charitable, etc,
	contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	(Enter this information once. Space is needed	See instruction	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee

2014	Federal Statements	Page 1
Client TIL5855	THE TILLEY CHARITABLE FOUNDATION	20-3825855
2/19/15		11 02AM
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
	(a) (b) Net Revenue Investment per Books Income	(c) Adjusted Net Income
UNREALIZED HOLDING GAIN	Total $\frac{\$}{\$}$ 7,750. $\frac{\$}{\$}$ 0.	<u>0.</u>
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
ACCOUNTING FEES .	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 1,190. \$ 1,190. Total \$ 1,190. \$ 1,190.	
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
PROFESSIONAL FEES	(a) (b) Net (c) Expenses Investment Adjusted Net Income \$ 7,513. \$ 7,513. \$ 7,513. Total \$ 7,513. \$ 7,513. \$ 7,513.	
Statement 4 Form 990-PF, Part I, Line 18 Taxes		
TAXES.	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 1,052. \$ 1,052. Total \$ 1,052. \$ 1,052. \$ 0.	(d) Charitable Purposes \$ 0.

2014	Fe	deral Statements	Page 2
Client TIL5855	THE TILLE	Y CHARITABLE FOUNDATION	20-3825855
2/19/15			11 02AN
Statement 5 Form 990-PF, Part I, Line 23 Other Expenses			
LICENSES AND PERMITS	Total	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 50. \$ 50. \$ 50. \$ 50. \$ 50. \$ 50.	
Statement 6 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Gra	nts		
Cash Grants and Allocat	ions	_	
Class of Activity: Donee's Name: Donee's Address:		JOHNNYCAKE CENTER OF PEACEDALE 1231 KINGSTOWN ROAD PEACEDALE, RI 02883	
Relationship of Donee: Organizational Status o Amount Given:	f Donee:	NONE 501 C (3)	\$ 2,500.
Class of Activity: Donee's Name: Donee's Address:		CORNERSTONE ADULT SERVICES 140 WARWICK NECK AVENUE WARWICK, RI 02889	
Relationship of Donee: Organizational Status o Amount Given:	f Donee:	NONE 501 C (3)	10,000.
Class of Activity: Donee's Name: Donee's Address:		BOYS & GIRLS CLUB OF WARWICK 42 FREDERICK STREET WARWICK, RI 02888	
Relationship of Donee: Organizational Status o Amount Given:	f Donee:	NONE 501 C (3)	24,500.
Class of Activity: Donee's Name: Donee's Address:		A WISH COME TRUE 1010 WARWICK AVENUE WARWICK, RI 02888	
Relationship of Donee: Organizational Status o Amount Given:	f Donee:	NONE 501 C (3)	2,500.
Class of Activity: Donee's Name: Donee's Address:		RI SPECIAL OLYMPICS 33 COLLEGE HILL ROAD BLD 31 WARWICK, RI 02886	
Relationship of Donee: Organizational Status o Amount Given:	f Donee:	NONE 501 C (3)	5,000.
		j	

SAINT ELIZABETH COMMUNITY ONE ST ELIZABETH WAY

Class of Activity: Donee's Name: Donee's Address:

2014	Federal Statements	Page 3
Client TIL5855 T	HE TILLEY CHARITABLE FOUNDATION	20-382585
2/19/15		11 02AN
Statement 6 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Relationship of Donee: Organizational Status of Do Amount Given:	EAST GREENWICH, RI 02818 NONE nee: 501 C (3)	10,000.
Class of Activity: Donee's Name: Donee's Address:	OPERATION STAND DOWN RI 1010 HARTFORD AVENUE JOHNSTON, RI 02919	
Relationship of Donee: Organizational Status of Do Amount Given:	NONE nee: 501 C (3)	3,000.
Class of Activity: Donee's Name: Donee's Address:	BIG BROTERS BIG SISTERS OF OCEANT STATE 1540 PONTIAC AVENUE CRANSTON, RI 02920	
Relationship of Donee: Organizational Status of Do Amount Given:	NONE	2,500.
Class of Activity: Donee's Name: Donee's Address:	NORTH KINGSTOWN FOOD PANTRY INC 450 POST ROAD NORTH KINGTOWN, RI 02852	
Relationship of Donee: Organizational Status of Don Amount Given:	NONE	5,000.
Class of Activity: Donee's Name: Donee's Address:	THE KENT CENTER FOR HUMAN & ORG DEV. 2756 POST ROAD #100 WARWICK, RI 02886	
Relationship of Donee: Organizational Status of Don Amount Given:	NONE	5,000.
	Total <u>\$</u>	70,000.
Statement 7 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees	s, and Key Employees	
Name and Address	Title and Contri- Average Hours Compen- bution to Per Week Devoted sation EBP & DC	Expense Account/ Other

\$

President 2.00

0. \$

0.\$

0.

STEVEN TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874 2014

Federal Statements

Page 4

Client TIL5855

THE TILLEY CHARITABLE FOUNDATION

20-3825855

2/19/15

11 02AM

Statement 7 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
PATRICIA TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874	Vice President 0.50	\$ 0.	\$ 0.	\$ 0.
STEVEN TILLEY II 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874	Secretary 0.25	0.	0.	0.
PATRICIA TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874	Treasurer 0.50	0.	0.	0.
MICHAEL TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02874	Director 0.25	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.

Account Number: 1011294
Recipient's Tax ID Number: XX-XXX5855
Payer's Federal ID Number: 20-2635739
Payer's State ID Number: RI
State: RI
Corrected 2nd TIN notice

10 TRIPPS LANE RTL 115 RIVERSIDE, RI 02915-7995

Payer's Name and Address: CITIZENS BANK, N.A.

Recipient's Name and Address: TILLEY CHARITABLE FOUNDATION C/O STEVEN W TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02852

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

-Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

Covered look	Covered (box 5 is not checked)								
Description of Cusipir	Description of property (Box 1a) Cusip: Date:Sold Date: Sold Acquired Checkbox	Form's	949 OX	Cost or Other Basis	Code	oliustments.	Net Gain or Loss	Federal Income	State
والمتكارية ومراسطها والأ	coincourse and the second second (Box 1b)	Modern Control	kompletele og skalender i kan de s (Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)	والمعاورية سياسي منوده والمسمولة المتقدم والم	(Box 4)	(Box 16)
Short Term Sal 20.0	Short Term Sales Reported on 1099-B 20.0 HARMAN INT'L INDUSTRIES INC								
413086109	04/07/2014 09/16/2013	٨	2,026.67	1,345.75	4	0.00	680.92	00.0	0.00
175.0	MORGAN STANLEY DEAN WITTER	~							
617446448	05/02/2014 11/05/2013	۷	5,373.01	5,107.41		0.00	265.60	0.00	0.00
150.0	NETAPP INC COM					=			
64110D104	05/08/2014 09/26/2013 A	۷	5,080.51	6,473.99		0.00	-1,393.48	0.0.0	0.00
25.0	THERMO ELECTRON								
883556102	05/27/2014 09/26/2013	٨	2,873.44	2,320.00		0.00	553.44	0.00	00.0
0.125	TIME INC NEW								
887228104	06/26/2014 09/05/2013	٨	3.03	2.46		0.00	0.57	00.00	00.0
41.0	HANESBRANDS INC								
410345102	07/10/2014 09/26/2013	٨	3,942.76	2,583.82		0.00	1,358.94	00.0	0.00
125.0	SOUTHWESTERN ENERGY CO					-			
845467109	10/30/2014 05/02/2014 A	4	3,916.05	5,882.39		00.0	-1,966.34	0.00	0.00
214.661	METROPOLITAN WEST HIGH YD BD I #514	3D I #514							
592905848	11/10/2014 12/13/2013 A	⋖	2,174.52	2,204.57		0.00	-30.05	00.00	00.0

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.



Page 8 of 33

Payer's Name and Address: CITIZENS BANK, N.A. 10 TRIPPS LANE RTL 115 RIVERSIDE, RI 02915-7995

Account Number: 1011294
Recipient's Tax ID Number: XX-XXX5855
Payer's Federal ID Number: 20-2635739
Payer's State ID Number: RI

2014 Tax Information Statement

Recipient's Name and Address: TILLEY CHARITABLE FOUNDATION C/O STEVEN W TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02852

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

2nd TIN notice

Corrected

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

Tax 0.00 000 0.00 0.00 0.00 000 State 0.00 0.00 Federal Federa 0.00 0.00 0.00 0.00 0.00 00.0 Code Net Gain Tax 0.12 0.12 14.27 1,424.08 -234.40 2,590.51 5.14 0.00 0.00 0.00 0.0 0.00 0.00 0.00 0.00 Description of property (BoxJa)

Cusip

Cusip

Number

Other Basis (Box 1f) 184.22 3,419.48 6,375.10 6.95 5,590.26 23.03 32,577.15 (Box 1e) 852.30 4,843.56 8,965.61 98'322'8 23.15 189.36 31,832.00 866.57 7.07 ∢ TEMPLETON GLOBAL BOND ADVISOR #616 11/18/2014 05/08/2014 A TEMPLETON INSTL EMERGING MKT #456 Α. 11/10/2014 12/11/2013 A ۵ ⋖. \Box PIMCO FDS TOTAL RETURN INST #35 Report on Form 8949, Part I, with Box A checked HALYARD HEALTH INC USD1.25 11/17/2014 05/08/2014 HALYARD HEALTH INC USD1.25 11/10/2014 12/16/2013 01/10/2014 06/28/2012 01/10/2014 06/28/2012 11/10/2014 Various (Box 1b) **Fotal Short Term Sales Reported on 1099-B** MONSANTO CO NEW Long Term Sales Reported on 1099-B ACTUANT CORP (Box 1c) -00508X203 61166W101 40650V100 002068869 880210208 40650V100 880208400 776.212 79.284 0.535 0.625 135.0 5.0

negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, taxpayer is ultimately responsible for the accuracy of their own tax return.

Page 9 of 33

Payer's Name and Address: RIVERSIDE, RI 02915-7995 10 TRIPPS LANE RTL 115 CITIZENS BANK, N.A.

2nd TIN notice XX-XXX5855 20-2635739 1011294 Ξ Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected State:

TILLEY CHARITABLE FOUNDATION 116 MOURNING DOVE DRIVE Recipient's Name and Address: SAUNDERSTOWN, RI 02852 C/O STEVEN W TILLEY

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

Description of property (Box 1a)	というないない。	の情報が開発している。	こうないというに		ではないというで	とちないないというから	すいかん あいていらい いかいたか	いというないないない	
d. Date		Cusip			Code		WerGain	Federaly Filicome	State
(Rox 1c) (Box 1b) CITIGROUP (Box 1b)	3d = 180 (9)	Checkbox	9dS 747 127 177 179 179 179 179 179 179 179 179 17	Other Basis ু শুলু (Box 1e)	frany frank (Box 1f)	üstments មានសម្រាស់ (Box 1g)	Section of the sectio	Withheld	<u> </u>
02/04/2014 06/28/2012	/2012	٥	3,073.83	1,682.84		0.00	1,390.99	0.00	0.00
CITIGROUP INC									
02/11/2014 06/28/2012	/2012	О	2,453.65	1,294.49		0.00	1,159.16	0.00	0.00
COCA-COLA CO.									
02/19/2014 06/28/2012	/2012.	۵	3,350.44	3,419,10		0.00	-68.66	0.00	0.00
CITIGROUP INC									
03/13/2014 06/28/2012	/2012	٥	5,018.34	2,718.44		0.00	2,299.90	0.00	0.00
ISHARES NASDAQ BIOTECHNOLOGY ETF	CHNOLOG	IY ETF							
04/07/2014 01/28/2013	/2013	D	5,746.64	3,642.79		0.00	2,103.85	0.00	00.00
PRICELINE GROUP INC									1
04/07/2014 03/11/2013	/2013	D	4,662.97	2,896.88		0.00	1,766.09	0.00	0.00
ALLERGAN, INC						_			
04/23/2014 03/26/2013	/2013	D	5,746.21	3,904.55		0.00	1,841.66	00.0	00:0
THE CHUBB CORP									
06/10/2014 06/28/2012 D	/2012		8,448.26	6,380.10		0.00	2.068.16	0.00	0.00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

Payer's Name and Address: CITIZENS BANK, N.A. 10 TRIPPS LANE RTL 115 RIVERSIDE, RI 02915-7995

Account Number: 1011294
Recipient's Tax ID Number: XX-XXX5855
Payer's Federal ID Number: 20-2635739
Payer's State ID Number: RI

Recipient's Name and Address: TILLEY CHARITABLE FOUNDATION C/O STEVEN W TILLEY 116 MOURNING DOVE DRIVE SAUNDERSTOWN, RI 02852

Page 10 of 33

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

2nd TIN notice

Corrected

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

	מבוכת לפני כו כי כיום מיום ביים									
Description o	Description of property (Box 1a) Cusip Number Or Disposed *Acquired Checkbox	Pa	Form,8949	Spe	Costor	Code if any	djustments	Ne Gain	Federal Income	State State Withheld
85.0	(Box 1c) (Box 1b) LOWE'S COMPANIES INC	(q)		. 1d)	i i	i E	(Box 1g)	الماريديات (12 ما يوسل	7 7 2	(Box 16)
548661107	06/20/2014 06/28/2012	1/2012	D	3,884.82	2,300.10		0.00	1,584.72	0.00	0.00
144.0	HANESBRANDS INC									
410345102	07/10/2014 12/24/2012 D	1/2012	D 13,84	13,847.75	5,191.52		0.00	8,656.23	0.00	0.00
15.0	ALLERGAN, INC									;
018490102	07/29/2014 03/26/2013	1/2013	۵	2,559.16	1,673.38		000	885.78	0.00	0.00
400.0	GENWORTH FINL INCCL A	⋖								:
37247D106	08/12/2014 02/14/2013	1/2013	۵	5,155.36	3,701.36		0.00	1,454.00	0.00	0.00
45.0	PROCTER & GAMBLE CO	_								
742718109	09/09/2014 06/28/2012	3/2012	۵	3,728.76	2,696.32		00.0	1,032.44	00.0	0.00
55.0	AMETEK INC NEW									
031100100	10/30/2014 06/28/2012 D	3/2012	D	2,797.85	1,747.88		0.00	1,049.97	0.00	0.00
7807.647	METROPOLITAN WEST HIGH YD BD I #514	IIGH YD BI	01#514							
592905848	11/10/2014 Various		D	79,091.47	79,647.19		00.0	-555.72	0.00	0.00
275.538	PIMCO FDS TOTAL RETURN INST #35	IRN INST#	35							
693390700	11/10/2014 12/12/2012 D	72012		3,011.63	3,130,11	:	0.00	-118.48	0.00	0.00
										:

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RIVERSIDE, RI 02915-7995 10 TRIPPS LANE RTL 115 Payer's Name and Address: CITIZENS BANK, N.A.

1011294 XX-XXX5855 20-2635739 霳 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: State:

TILLEY CHARITABLE FOUNDATION C/O STEVEN W TILLEY 116 MOURNING DOVE DRIVE Recipient's Name and Address: SAUNDERSTOWN, RI 02852

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

2nd TIN notice

Corrected

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

State Tax	(Box 16)	0.00	1	00.0		0.00		0.00	0.00
Federal Income Tax Withheld	(Box 4)	00 0		0.00		0.00		00.0	0.00
Net.Gain or Loss		0.57		-1,469.04		1,941.07		38.91	31,076.19
Adjustments	(Box 1g)	00:00		00.0		0.00		00 0	0.00
or Code	1e) (Box 1f)	.74		.52		.53		.87	3.29
Cost or Other Basis	(Box 1e)	379.74		4,536,52		3,241.53		363.87	144,343.29
Proceeds	(Box 1d)	380.31		3,067.48		5,182.60		402.78	175,419.48
Form.8949	SOR #616		KT #456	Q		D		D .	
(a) Date	(Box 1c) (Box 1b) TEMPLETON GLOBAL BOND ADVISOR #616	11/10/2014 12/17/2012 D	TEMPLETON INSTL EMERGING MKT #456	11/10/2014 Various D	W	1 06/28/2012		Various	on 1099-B
Description of property (Box 1a) Cusip Number Or Disposed Acquired Checkbox	(Box 1c) (Box 1b) TEMPLETON GLOBAL BONE	11/10/2014	TEMPLETON INS	11/10/2014	AMETEK INC NEW	031100100 11/18/2014 06/28/2012 D	TIME INC NEW	11/18/2014 Various	Total Long Term Sales Reported on 1099-B
Description of Cusip Number	28.768	880208400	444.562	880210208	102.0	031100100	18.0	887228104	Total Long Terr

Report on Form 8949, Part II, with Box D checked

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

Page 12 of 33

RIVERSIDE, RI 02915-7995 10 TRIPPS LANE RTL 115 Payer's Name and Address: CITIZENS BANK, N.A.

XX-XXX5855 20-2635739 1011294 ፳ Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: State: 2nd TIN notice

Corrected

TILLEY CHARITABLE FOUNDATION 116 MOURNING DOVE DRIVE Recipient's Name and Address: SAUNDERSTOWN, RI 02852 C/O STEVEN W TILLEY

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of CUSIP	Description of property (Box 1a) CUSIP Date Sold Date Number or Disposed Acquired	a) Date	of property (Box 1a) Date Sold Date Form 8949 or Disposed Acquired	spee	Costor Other Basis	Code	Adlustments	Net. Gain	Federal Income	State Tax Withheld
7	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)		(Box 1g)		(Box 4)	(Box 16)
Long Term Sale 120.0	Long Term Sales Reported on 1099-B 120.0 GENERAL ELECTRIC CO.	19-8 RIC CO.								
369604103	02/04/2014 11/25/2009	11/25/2009	ш :	2,937.22	1,948.79	ì	0.00	988 43	0.00	0.00
20.0	BOEING CO.									
097023105	02/11/2014 11/25/2009	11/25/2009	ш' :	2,561.86	1,053.20	:	0.00	1,508.66	0.00	00.00
45.0	CIGNA									
125509109	02/19/2014	02/19/2014 12/17/2010	ш.	3,473.26	1,647.00	: : : : : : : : : : : : : : : : : : : :	0.00	1,826.26	0.00	00.0
75.0	COCA-COLA CO.									
191216100	02/19/2014 Various	Various	ш	2,792.03	2,251.97	:	00 0	540.06	0.00	0.00
50.0	CIGNA									
125509109	03/06/2014	03/06/2014 12/17/2010	ш	3,973.20	1,829.99	: : : :	000	2,143.21	0.00	00.00
75.0	WAL-MART STORES	RES								
931142103	03/06/2014 Various	Various	Ш	5,589.45	4,119.47	: :	0.00	1,469.98	000 0	0.00
25.0	BOEING CO.									
097023105		03/13/2014 Various	ш	3,108.46	1,437.00	:	00.0	1,671.46	0.00	00 0

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Account Number: 1011294
Recipient's Tax ID Number: XX-XXX5855
Payer's Federal ID Number: 20-2635739
Payer's State ID Number: RI

2nd TIN notice

Corrected

10 TRIPPS LANE RTL 115 RIVERSIDE, RI 02915-7995

Payer's Name and Address: CITIZENS BANK, N.A.

Recipient's Name and Address:
TILLEY CHARITABLE FOUNDATION
C/O STEVEN W TILLEY
1,16 MOURNING DOVE DRIVE
SAUNDERSTOWN, RI 02852

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

State Tax	(BOX 16)	0.00		0.00		0.00		00.0		00.0		00.0		0.00		0.00		0.00
Federal	(BOX 4)	0.00		00.0		0.00		0.00		0 00 0		00.0		0.00		0.00		0 0 0
Net Gain5		2,569.67		1,031.57		1,513.96		3,369.84		857.10		2,443.63		1,182.04		798.59		33,348.24
	19)	0.00		0.00		0.00		00.0		0.00		0.00	-	0.00	-	0.00		0.00
Vali	1t) (BOX 1g,	0		0		0		0		J		J				;		
	(BOX 1t)	:																
Cost or Other Basis	(Box 1e)	2,967.30		1,606.10		1,913.83		2,160.00		2,125.90		2,609.75		2,029.99		1,296.97		40,187.40
Proceeds	(Box 1d)	2,536.97		2,637.67		3,427.79		5,529.84		2,983.00		5,053.38		3,212.03		2,095.56		73,535.64
Form 8949		Е		ш		ш		ш		ш		ш		ш		ш		ш
painb	x 1b) RS GROUP INC		ن	;	INC		RP.	/25/2009	00	rious			8	/25/2009		/25/2009	SMALL-CAP ETF	1/30/2006
	(Box 1c) (Box 1b) AFFILIATED MANAGERS GROUP INC	03/26/2014 12/17/2010	APPLE COMPUTER INC.	04/07/2014 12/17/2010	LOWE'S COMPANIES INC	06/20/2014 12/17/2010	HERSHEY FOODS CORP.	07/17/2014 11/25/2009	PROCTER & GAMBLE CO	09/09/2014 Various	CONOCOPHILLIPS	09/24/2014 11/25/2009	GENERAL ELECTRIC CO.	369604103 11/04/2014 11/25/2009	PFIZER INC	11/04/2014 11/25/2009	ISHARES CORE S&P SMALL-CAP ETF	11/10/2014 08/30/2006
Description of programme of the control of the cont	30.0 AI	008252108	5.0 AI	037833100	75.0 LC	548661107	60.0 H	427866108	36.0 PI	742718109	65.0 C	20825C104	G	369604103	70.0 Pl	717081103	0.099	464287804

noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return. This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For

XX-XXX5855 20-2635739 1011294 ፳ Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: State: 2nd TIN notice

Corrected

10 TRIPPS LANE RTL 115 RIVERSIDE, RI 02915-7995

Payer's Name and Address: CITIZENS BANK, N.A.

TILLEY CHARITABLE FOUNDATION 116 MOURNING DOVE DRIVE Recipient's Name and Address: SAUNDERSTOWN, RI 02852 C/O STEVEN W TILLEY

Reported to the IRS is proceeds less commissions and option premiums.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.

Federal State Income Withheld	(Box 4) (Box 16)	00.00 00.00		0.00		0.00		00.00 00.00		0.00		0.00	0.00 0.00
Net Gain Tax Withheld	(8)	4,303.09		2,959.95		-10,433.81		4,243.22		-7,789.29		0.00	50,545.86
Adjustments	(Box 1g)	0.00		00.00		0.00	-	0.00	-	0.00	_	389.85	389.85
Code ii	(Box 1f)	: : : : : : : : : : : : : : : : : : : :		7		0				9		3. W	က
Cost or Other Basis	(Box 1e)	123,119.18		26,295.07		20,446.90		6,837.33		23,947.96		1,196.63	1 273,027.73
149 XX	(Box 1d)	127,422.27		29,255.02		10,013,09		11,080.55		16,158.67		806.78	323,183.74
Form 89	INST #35	ш	ADVISOR #616	ш	NG MKT #456	ш	11.	011E	TIES SER	ш;	TIES SER	307 E	
CUSIP CUSIP Number Con Disposed Acquired	(Box 1c) (Box 1b) PIMCO FDS TOTAL RETURN INST #35	11/10/2014 Various E	TEMPLETON GLOBAL BOND ADVISOR #616	11/10/2014 Various E	TEMPLETON INSTL EMERGING MKT #456	11/10/2014 Various	ISHARES CORE S&P 500 ETF	12/11/2014 11/08/2011 E	TEMPLETON FOREIGN EQUITIES SER	12/11/2014 Various E	TEMPLETON FOREIGN EQUITIES SER	880210505 12/11/2014 10/09/2007	Total Long Term Sales Reported on 1099-B
Description of CUSIP Number	11658.031	693390700	2212.937	880208400	1451.173	880210208	54.0	464287200	764.0032	880210505	38.1458	880210505	Total Long Tern

Report on Form 8949, Part II, with Box E checked

noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For responsible for the accuracy of their own tax return.