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Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

► Do not enter social security numbers on this form as it may be made public

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

_			er erm eeerr ana no eepa			
Fo	r cale	endar year 2014 or tax year beginning		, 2014, and		, 20
		of foundation			A Employer identific	
		GHT & LUCILE ALDRICH			20-64067	
		er and street (or P O box number if mail is not de	elivered to street address)	Room/sui	1	•
		BOX 766			517-787-9	
	-	town, state or province, country, and ZIP or forei	gn postal code		C If exemption application check here	n is pending,
	JAC	KSON MI 49204-0766				
G	Che	ck all that apply 🔲 Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizatio	ns, check here
		Final return	Amended return			ns meeting the 85% d attach computation
_		Address change	Name change		If private foundation statement of the second sta	
Н			I(c)(3) exempt private fou	ndation	507(b)(1)(A), check he	re . ▶
Ш	Sec	tion 4947(a)(1) nonexempt charitable trust				
I F	air m	narket value of all assets at end of	Accounting method X	Cash Accrual	F If the foundation is in a termination under secti	
		(from Part II, col (c), line 16)	Other (specify)		507(b)(1)(B), check her	re . ▶
▶ :		85,106.	(Part I, column (d) must	be on cash basis)		
Pa	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c),	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		and (d) may not necessarily equal the	expenses per	ıncome	ıncome	purposes
	,	amounts in column (a) (see instructions)) books			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
	2	Check Inf the foundation is not required to attach Schedule B			ļ	
	3	Interest on savings and temporary cash investments			<u> </u>	<u> </u>
	4	Dividends and interest from securities	3,319.		<u> </u>	<u> </u>
	5a					ļ
	þ	(Net rental income or (loss)				
ne	6a	Net gain/(loss) from sale of assets not on line 10 . Gross sales price for				
eu	b	all assets on line 6a		26.	ļ	
Revenue	7	Capital gain net income (from flast V. (ne 2)		20.	26.	
Ľ	"	Net short-term capital gain			20.	
	9 10a	Income modifications Gross Bels lessing AV 1 3 2,015 Less Castor Less Castor				- 1
	Ь	turns and allowardeds 1 + 10 10 10 10 10 10 10 10 10 10 10 10 10				
	C	goods sold	,			
	11	Other income (attach schedule)			 	
	12	Total. Add lines 1 through 11	3,319.	26.	26.	;
	13	Compensation of officers, directors,				
enses	14	trustees, etc Other employee salaries and wages				
ŝ	15	Pension plans, employee benefits				
		Legal fees (attach schedule)	2,761.	1,381.		1,380.
ũ	b	Accounting fees (attach schedule)				
<u><</u>	С	Other professional fees (attach schedule)	232.	232.		
rat	17	Interest				
istı	18	Taxes (attach schedule) (see instructions)	4.	4.		
Ĕ	19	Depreciation (attach schedule) and depletion				
пþ	20	Occupancy				
¥	21	Travel, conferences, and meetings .				
JUE	22	Printing and publications				
Ď	23	Other expenses (attach schedule)				
Ë	24	Total operating and administrative	_			
Operating and Administrative Exp		expenses Add lines 13 through 23 .	2,997.	1,617.		1,380. 1,535.
Č	25 26	Contributions, gifts, grants paid Total expenses and disbursements.	1,535.		<u> </u>	1,535.
_		Add lines 24 and 25	4,532.	1,617.	<u> </u>	2,915.
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses				1
		Excess of revenue over expenses and disbursements	(1,213.)			
		Net Investment income (if negative, enter -0-)			26	
	l c	Adjusted net income (if negative, enter -0-) .	1		26.	I

B

SCANNED HAY I S 2015

D.	art II	Balance Sheets description column should be for	Beginning of year	En En	o or year_
		end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	30,688.	2,311.	2,311.
	3	Accounts receivable ▶			
		Less allowance for doubtful accts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	f -	Investments - U S and state govt obligations (attach schedule)			
	1	Investments - corporate stock (attach schedule)	27,927.	55,087.	72,273.
	1	Investments - corporate bonds (attach schedule)	10,000.	10,000.	
		Investments - land, buildings, and equipment basis	20,000	20,000.	1
		Less accumulated depreciation			
	12	(attach schedule) Investments - mortgage loans			
	1	Investments - other (attach schedule)			
	1.	Land, buildings, and equipment basis .			
	'	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)	68,615.	67,398.	85,106.
		Accounts payable and accrued expenses .	· · · · · · · · · · · · · · · · · · ·		
		Grants payable	500.		
Ś		Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	500.		
		Foundations that follow SFAS 117, check here . ▶ 🔲			
es	i	and complete lines 24 through 26 and lines 30 and 31.			
5	24	Unrestricted			
ä	25	Temporarily restricted			_
ä		Permanently restricted			;
힏		Foundations that do not follow SFAS 117, ck. here ▶ 🏻 📗			
ヱ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	68,615.	67 <u>,</u> 398.	
Š	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Net Assets or Fund Balance	29	Retained earnings, accumulated income, endowment, or other funds			
As					i
듛		Total net assets or fund balances (see instructions)	68,615.	67 <u>,3</u> 98.	_
Z	31	Total liabilities and net assets/fund balances (see	60 115	67 000	
		instructions)	69,115.	67,398.	
		Analysis of Changes in Net Assets or Fund Balan			
		net assets or fund balances at beginning of year - Part II, column (a	a), line 30 (must agree w	ith	
		year figure reported on prior year's return)		. 1	68,615. (1,213.)
2	Enter	amount from Part I, line 27a		<mark>2</mark>	(1,213.)
3	Other	increases not included in line 2 (itemize)		3	
		nes 1, 2, and 3		4	67,402.
		ases not included in line 2 (itemize) ▶ ROUNDING		5	4.
6	Total r	net assets or fund balances at end of year (line 4 minus line 5) - Pa	irt II, column (b), line 30	6	67,398.
					Form 990-PF (2014)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

Multiply line 4 by line 3

Add lines 5 and 6

instructions

Enter 1% of net investment income (1% of Part I, line 27b)

Enter qualifying distributions from Part XII, line 4

967.

2.915.

_		20-64		2 p	age 4
_	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	Instruct	10115)		
٦а	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X	-1			
	and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter				
_	4% of Part I, line 12, col (b)	-	-	Λ	-
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .	2		0	
3	Add lines 1 and 2	3			
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	_5		0	
6	Credits/Payments				
	2014 estimated tax payments and 2013 overpayment credited to 2014				
	Exempt foreign organizations - tax withheld at source	1			
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld		-		
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11			
Р	art VII-A Statements Regarding Activities			,	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	te or	<u></u>	Yes	No
	intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for			1	
	the definition)?		1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed		:	,
	or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			7	
	(1) On the foundation ► \$ (2) On foundation managers ► \$			f	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				ŧ
	on foundation managers \$		L	. '	
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 of		ز . ا		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_5		X
	If "Yes," attach the statement required by General Instruction T		'		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		i		
	By language in the governing instrument, or			ì	
	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	Χ	l
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), an	d Part XV	7	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)▶			-	
	MI		ľ (
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or			، نــــ ،	
	designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
	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,"			E	
	complete Part XIV		9		Χ
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			-	
	names and addresses		10		Х

orm	. 990-PF(2014) DWIGHT & LUCILE ALDRICH FOUNDATION 20-6	4067	72	Pa	ige 5
	t 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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			-	
	person had advisory privileges? If "Yes," attach statement (see instructions)	1	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	•
	Website address ▶	•			
14	The books are in care of ▶ PHILIP J CURTIS Telephone no ▶	517	-78	7-9	481
	Located at ▶ PO BOX 766 JACKSON MI ZIP+4 ▶	4920	4-0	766	
15					▶ 🔲
	and enter the amount of tax-exempt interest received or accrued during the year				
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?	!	16		X
	See instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the				1
	foreign country				
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . \square Yes \square	No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .	No		}	,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	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	.	1		1
	after termination of government service, if terminating within 90 days) Yes X	No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		١. ا		,
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. !	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ļ	ı		į
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,				- -'
	that were not corrected before the first day of the tax year beginning in 2014?		1c		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))				ŀ
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d		,		,
	and 6e, Part XIII) for tax year(s) beginning before 2014?	No	1		1 [
	If "Yes," list the years ▶ 20, 20, 20	1	,		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	ŀ			
	to all years listed, answer "No" and attach statement - see the instructions)	ŀ	2b		—-T
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 , 20 , 20		, !		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business				į
	enterprise at any time during the year?	No	į į	']	
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)		3b		

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

FUIIII	990-PF (2014) DWIGHT & LUCILE	E ALDRICH FO	UNDATION		20-640	6772	Page 6
Par	t VII-B Statements Regarding Act	ivities for Which F	orm 4720 May Be F	Required (c	ontinue	d) (t	
5a	During the year did the foundation pay or incu	r any amount to		•			
	(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))?	. 🗌 🗅	∕es 🏻 N	0	
	(2) Influence the outcome of any specific pub	lic election (see section	4955), or to carry				
•	on, directly or indirectly, any voter registra	ition drive?		□ \(\bigcirc \)	∕es 🏻 N	0	
	(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	. 🗍 ነ	res 🛚 N	o	
	(4) Provide a grant to an organization other th	nan a charitable, etc., or	ganization described		_		
	in section 4945(d)(4)(A)? (see instructions			. 🗆 ነ	res 🗓 N	0	
	(5) Provide for any purpose other than religio		. literary. or	_			ľ
	educational purposes, or for the preventio			. 🗆 እ	res X N	。	
ь	If any answer is "Yes" to 5a(1)-(5), did any of			· —			
	Regulations section 53 4945 or in a current no				•	5b	
	Organizations relying on a current notice rega				▶ □	02	
_	If the answer is "Yes" to question 5a(4), does			•	🗀		'
C	•		emption from the	\Box	es N	_	
	tax because it maintained expenditure respon		 E E/A	• 🗀 '	′es ∐ N	"	
_	If "Yes," attach the statement required by Reg						
6a	Did the foundation, during the year, receive ar	ny tunas, airectly or inai	rectly, to pay	г,	🔽	_	
	premiums on a personal benefit contract?				es X N	1 1	
b	Did the foundation, during the year, pay premi	iums, directly or indirect	ly, on a personal benefit o	ontract?	•	. 6b	X
	If "Yes" to 6b, file Form 8870				. 🔽		
	At any time during the tax year, was the found				′es 🛚 N		
_	If "Yes," did the foundation receive any proces					7b	
Par	t VIII Information About Officers	, Directors, Truste	es, Foundation Ma	nagers, Hi	ghly Paid	d Emplo	yees,
	and Contractors						
1 L	ist all officers, directors, trustees, foundation		compensation (see ins			r	
						_	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contrib employee be and deferre	nefit plans		ise account, llowances
	(a) Name and address	hours per week		employee be	nefit plans		
	· · ·	hours per week devoted to position		employee be	nefit plans		
	ALBERT ALDRICH	hours per week devoted to position TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
E	ALBERT ALDRICH PO BOX 73 PHILIP J CURTIS	hours per week devoted to position TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
E	ALBERT ALDRICH PO BOX 73	hours per week devoted to position TRUSTEE 1 TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
E	ALBERT ALDRICH PO BOX 73 PHILIP J CURTIS	hours per week devoted to position TRUSTEE 1 TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
E	ALBERT ALDRICH PO BOX 73 PHILIP J CURTIS	hours per week devoted to position TRUSTEE 1 TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
E	ALBERT ALDRICH PO BOX 73 PHILIP J CURTIS	hours per week devoted to position TRUSTEE 1 TRUSTEE	(If not paid, enter -0-)	employee be	nefit plans		
F F C C C C C C C C C C C C C C C C C C	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee	hours per week devoted to position TRUSTEE 1 TRUSTEE 1	(If not paid, enter -0-)	employee be and deferre	nefit plans		
F F C C C C C C C C C C C C C C C C C C	ALBERT ALDRICH PO BOX 73 PHILIP J CURTIS PO BOX 766	TRUSTEE 1 TRUSTEE 1 se (other than those in	(If not paid, enter -0-)	employee be and deferre	nefit plans d comp		
2 C	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee frome, enter "NONE."	TRUSTEE 1 TRUSTEE 1 TRUSTEE 1 (b) Title, and average	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee	nefit plans d comp	other a	
2 C	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-)	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	llowances
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	TRUSTEE 1 TRUSTEE 1 TRUSTEE 1 (b) Title, and average	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee finone, enter "NONE."	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
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2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,
2 C (a)	ALBERT ALDRICH O BOX 73 PHILIP J CURTIS O BOX 766 Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 TRUSTEE 1 (b) Title, and average hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see in	structions). (d) Contrib employee plans and	utions to benefit deferred	(e) Exper	nse account,

Form 990-PF (2014) DWIGHT & LUCILE ALDRICH FOUNDAY		406772 Page 7
Part VIII Information About Officers, Directors, Trustees, Fo	undation Managers, Highly F	Paid Employees,
and Contractors (continued)	The state of the s	
3 Five highest-paid independent contractors for professional services (see i (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of service	(c) Compensation
		-
		
Total number of others receiving over \$50,000 for professional services	<u>.</u> ▶	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Incl	udo adouant atational info acida	
as the number of organizations and other beneficiaries served, conferences conve		Expenses
1	ned, research papers produced, etc	
' <u> </u>		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments (see inst	tructions)	
Describe the two largest program-related investments made by the foundation di		Amount
1 N/A		
2		
All other program-related investments See instructions		
3		

Total. Add lines 1 through 3

Form 990-PF (2014)

ightharpoons

Part X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	П	
a Average monthly fair market value of securities	1a	77,963.
b Average of monthly cash balances	1b	77,963. 7,772.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	85,735.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1	
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	7 2	
3 Subtract line 2 from line 1d	3	85,735.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
see instructions)	4	1,286.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 .	5	1,286. 84,449.
6 Minimum investment return. Enter 5% of line 5	6	4,222.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations (Section 4942(j)(3)) and (j)(5) private operations (Section 4	iting	foundations and
certain foreign organizations check here ▶ ☐ and do not complete this part)	1	4,222.
1 Minimum investment return from Part X, line 6		4,222.
2 a Tax on investment income for 2014 from Part VI, line 5	\perp	
b modific tax for 2014 (Time does not medical time tax for medical time tax for a fine tax for a	-	
c Add lines 2a and 2b	2c	4,222.
3 Distributable amount before adjustments. Subtract line 2c from line 1	4	4,222.
4 Recoveries of amounts treated as qualifying distributions	5	4,222.
5 Add lines 3 and 4	6	4,222.
6 Deduction from distributable amount (see instructions)	7	4,222.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	14	4,222.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	2,915.
b Program-related investments-total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2 , 915.
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	2,915.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undat	ion
gualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
_	line 7				4,222.
	Undistributed income, if any, as of the end of 2014			1	
	Enter amount for 2013 only		_		
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
4 4	Total of lines 3a through e				
•	line 4 ▶\$ 2,915.				
•	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior				
٠	years (Election required - see instructions)				
c	Treated as distributions out of corpus				
Ū	(Election required - see instructions)				
d	Applied to 2014 distributable amount				2,915.
	Remaining amount distributed out of corpus				
5	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:				
а	Corpus Add lines 3f, 4c, & 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency				
	has been issued, or on which the section				
	4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2013 Subtract				
	line 4a from line 2a Taxable amount -				
	see instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1. This amount				1 207
_	must be distributed in 2015				1,307.
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)	-			
В	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see				
	Instructions)				
۵	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a .				
0	Analysis of line 9				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014 .				

Foi	rm 990-PF (2014) DWIGHT & LUC	ILE ALDRIC	H FOUNDATI	ON	20-6406	772 Page 10
	art XIV Private Operating Found					
_	If the foundation has received a ruling or de				<u> </u>	
14	foundation, and the ruling is effective for 20			-aung		
L	-		=	orihad in castion	4942(j)(3) or 4942(j)(5)
	Check box to indicate whether the foundation		Ting foundation des			5) 01 [] 4942()(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 2042	Prior 3 years	/ - /\ 2011	(a) Total
	investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	each year listed					
	85% of line 2a					
С	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					
е	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					
2	"Assets" alternative test - enter					
a	(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					_
С	"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)		ļ			
	(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					
P	art XV Supplementary Informat			the foundation I	had \$5,000 or m	nore in
	assets at any time during	g the year - see	instructions.)			
1	Information Regarding Foundation Man	agers:				
а	List any managers of the foundation who h	ave contributed mor	e than 2% of the tot	al contributions receiv	ed by the foundation	n before the close
	of any tax year (but only if they have contri	buted more than \$5,	,000) (See section 5	507(d)(2))		
b	List any managers of the foundation who o	wn 10% or more of	the stock of a corpor	ation (or an equally la	arge portion of the ov	wnership of a
	partnership or other entity) of which the fou	indation has a 10%	or greater interest			
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sch	nolarship, etc., Pro	grams:	•	
	Check here ► X if the foundation only	y makes contribution	is to preselected cha	aritable organizations	and does not accept	t unsolicited
	requests for funds If the foundation makes					
	complete items 2a, b, c, and d					
a	The name, address, and telephone numbe	r or e-mail address of	of the person to who	m applications should	l be addressed	
			-	• •		
b	The form in which applications should be s	ubmitted and inform	ation and materials	they should include		
-	,,			-		
С.	Any submission deadlines		· · · · ·		"	

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

Page 11

Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid Du	ring the Year or Ap	pproved fo	or Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution		Amount
Name and address (home or business)	or substantial contributor				
a Paid during the year					
JACKSON INTERFAITH SHLT 414 S BLACKSTONE 49204 MI JACKSON	N/A	PUBLIC	OPERATIONS		1,035.
CONCORD YOUTH ORG					
49237 MI CONCORD	N/A	PUBLIC	OPERATIONS		500.
Total				▶ 3a	1,535.
b Approved for future payment					
SALVATION ARMY PO BOX 1383 49204 MI JACKSON	N/A	PUBLIC	OPERATIONS		1,035.
CONCORD YOUTH ORG	IV/ A	FORTIC	OFERATIONS		1,033.
49237 MI CONCORD	N/A	PUBLIC	OPERATIONS		200.
Total	<u> </u>	·		▶ 3b	1,235.

gross amounts unless otherwise indicated		d business income	Excluded by		(e)
•	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemp function income (See instructions
Program service revenue	code		code		
				<u> </u>	
	ļ		<u> </u>		<u> </u>
			 -	- 	<u> </u>
					<u></u>
			 		
Fees and contracts from government agencies					
	+		 		
Membership dues and assessments Interest on savings and temporary cash investments	-		 		
Dividends and interest from securities .			14	3,319.	
Net rental income or (loss) from real estate			 	3,313.	
Debt-financed property					<u> </u>
	+			<u> </u>	
Not debt-financed property Net rental income or (loss) from personal property					<u> </u>
Other investment income			 		
Gain or (loss) from sales of assets other than inventory		(26.)	18	26.	
Net income or (loss) from special events		(20.7	-10	20.	
Gross profit or (loss) from sales of inventory			-		
	-				
Other revenue a					<u> </u>
***************************************		<u></u>	 		
	1		ļ		
		•			
		(26.)		3 345	
Subtotal. Add columns (b), (d), and (e) .		(26.)		3,345.	2 210
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation				. 13	3,319
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	the Accom	plishment of Exe		13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to e No. Explain below how each activity for what accomplishment of the foundation's explain below to the foundation of the subtraction of the subtraction.	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	antly to the
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to e No. Explain below how each activity for whether the columns (b), (d), and (e)	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	antly to the
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to e No. Explain below how each activity for what accomplishment of the foundation's explain below to the foundation of the subtraction of the subtraction.	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	antly to the
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to e No. Explain below how each activity for what accomplishment of the foundation's explain below to the foundation of the subtraction of the subtraction.	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	antly to the
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to e No. Explain below how each activity for what accomplishment of the foundation's explain below to the foundation of the subtraction of the subtraction.	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	-
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to e No. Explain below how each activity for what accomplishment of the foundation's explain below to the foundation of the subtraction of the subtraction.	the Accomp	plishment of Exer	of Part XVI-	. 13 OSES A contributed importa	antly to the

Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section No ,501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 1,47 45 F \$ 6 a Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) Χ (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets . . . 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees . . . 1b(5) X (6) Performance of services or membership or fundraising solicitations . 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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 (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Desc of transfers, transactions, and sharing arrangements 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? . 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 preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here May the IRS discuss this return TRUSTEE with the preparer shown below Signature of ficer or trustee (see instructions)? X Yes Title Date Print/Type preparer's name PTIN Check Paid PHILIP J CURTIS 04/26/2015 P01452306 self-employed Preparer **▶**CURTIS CURT IS, Firm's EIN ▶ 38-1956016 & Firm's name **Use Only** 517-787-9481 Firm's address ▶PO BOX 766 Phone no JACKSON MI 49204-0766

2014 Consolidated Forms 1099

As of Date: 02/25/15

Account Number: 1290-3906

Page 5 of 14

ALBERT E ALDRICH & PHILIP J CURTIS TTEE

Reportable Tax Information

OMB No. 1545-0715 The information provided below is in accordance with Federal tax regulations and the IRS instructions that govern our reporting requirements. You should review this information carefully when completing your Form 8949 and Schedule D. There may be instances where our reporting requirements will not be consistent with your particular tax accounting position or elections. For these reasons, the IRS requires us to provide you with this reminder: Taxpayers are ultimately responsible for the accuracy of their tax returns.

1099-B Proceeds from Broker and Barter Exchange Transactions

Short Term Gains/Losses - Report on Form 8949, Part I with Box A checked

Box 2: Type of Gain or Loss - Short Term Box 3: Basis Reported to the IRS Box 6: Box not Checked (Covered Security)

The 1099-8 data referenced by a Box Number is reported to the IRS. The additional information not referenced by a Box Number is not reported to the IRS, but may be helpful to complete your return.

				20,000	•				
Description	Date Acquired	Date Sold or Disposed	Proceeds	Other Basis	Code Adjustments		Gain/Loss		
(Box 1a)	Quantity Sold (Box 1b)	(Box 1c)	(Bax 1d)	(Box 1e) (Amount	Additional Information	lon
BLACKROCK FDS II	8.56800 03/21/2014	03/27/2014	97.42	97.08	Ö	8	0.34		
MULTI-ASSET INCOME PORT	27 08000 03/21/2014	04/15/2014	307.63	306.82	Ö	0.00	0.81		
CUSIP: 09256H336	8 58900 03/21/2014	05/01/2014	98.69	97.32	o	8	1.37		
	4 81900 03/21/2014	07/01/2014	56 14	54.60	Ö	8	4		
Subtotals	49.05600		\$559.88	\$655.82	0\$	\$0.00	\$4.06		
EATON VANCE GLOBAL .	11.09000 03/21/2014	04/15/2014	103.36	103.32	0	800		Original Basis:	103 36
MACRO ABSOLUTE RETURN CUSIP: 277923728	3.66300 03/21/2014	05/01/2014	34.14	34.12	Ö	0.00	0 05	Original Basis.	8. 4.
Subtotals	14.75300		\$137.50	\$137.44	S	\$0.00	\$0.06		
FEDERATED EQUITY FDS •	30 23500 03/21/2014	04/15/2014	180.20	175.97	Ö	0:00	4.23		
STRATEGIC VALUE DIVID FD CUSIP: 314172560	12 27500 03/21/2014	05/01/2014	75 86	71.45	ö	0.00	4 41		
Subtotals	42.51000		\$256.06	\$247.42	\$	\$0.00	\$8.64		
FRANKLIN CUSTODIAN FDS .	109.19400 03/21/2014	04/15/2014	269 71	267.53	ö	0:00	2 18		
INCOME SER ADV CL. AD	22.69200 03/21/2014	05/01/2014	56 73	55.60	ō	8	1 13		
CUSIF' 33348084/	22.19900 03/21/2014	07/01/2014	56.83	54.39	ō	000	2 4		
Subtotals	154.08500	•	\$383.27	\$377.52	\$0	\$0.00	\$5.76		
GOLDMAN SACHS TR .	6.72000 03/21/2014	03/26/2014	6.72	6.72	ō	00.0	8		
FINL SQUARE TREAS INSTRS CUSIP: 38142B500	42.73000 03/21/2014	04/11/2014	42.73	42 73	ö	0.00	8		
Subtotals	49.45000		\$49.45	\$49.45	\$0.	\$0.00	\$0.00		

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2014 Consolidated Forms 1099

As of Date: 02/25/15

Account Number: 1290-3906

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ALBERT E ALDRICH & PHILIP J CURTIS TTEE

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Short Term Gains/Losses - Report on Form 8949, Part I with Box A checked

Box 2: Type of Gain or Loss - Short Term Box 3: Basis Reported to the IRS Box 5: Box not Checked (Covered Security)

The 1099-B data referenced by a Box Number is reported to the IRS. The additional information not referenced by a Box Number is not reported to the IRS, but may be helpful to complete your return

Description CUSIP	Date Acquired	Date Sold or Disposed	Proceeds	Cost or Other Basis	ş O	Adjustments	Gain/Loss		
(Box 1s)	Quantity Sold (Box 1b)	(Bar 1c)	(Bax 1d)	(8cz 1e)	(Box 11)	(box 1g)	Amount	Additional information	nation
GOLDMAN SACHS TR	14 72600 03/21/2014	04/15/2014	174 50	171.71		00.0	2.79		
MLP ENERGY	3.19800 03/21/2014	05/01/2014	38.69	37.29		0.00	<u>-</u>		
CUSIP. 38145C232	8.26600 03/21/2014	07/01/2014	108 37	95.61		0.00	12.76	Original Basis:	96.39
	103.43800 03/21/2014	12/10/2014	1,130.57	1,175.65		0.00	45.08	Original Basis:	1,206.07
	1.14900 05/16/2014	12/10/2014	12.56	13 78		000	- 2	Original Basis.	14.01
	1.05800 08/05/2014	12/10/2014	11 56	13 29		0.00	-1.73	Onginal Basis	13.41
	1.15400 11/05/2014	12/10/2014	12.62	14.07		0.00	-1.45	•	
Subtotals	132.98900		\$1,488.87	\$1,521.40		\$6.00	(\$32.53)		
GOLDMAN SACHS TR .	15 70300 03/21/2014	04/15/2014	165.99	166.94		0.00	98 98		Ī
STRATEGIC INCOME FD CL	0 34300 03/21/2014	04/15/2014	3.62	3.64	3	0.02	0.0		
CUSIP. 38145C646	0.11100 03/21/2014	04/15/2014	1.17	117		00:0	0.0		
	154.46900 03/21/2014	05/06/2014	1,635.82	1,642 00		000	6.18		
	0.11100 04/01/2014	05/06/2014	1.17	1.18		00:0	0.0		
	0.34300 04/06/2014	05/06/2014	364	366		0.00	-0.05	Onginal Basis:	3.64 4
Subtotals	171.08000		\$1,811.41	\$1,818.59		\$0.02	(\$7.16)		
JOHN HANCOCK FDS III •	2.76700 03/21/2014	03/27/2014	32.59	32.52		0.00	0.07		
GLOBAL SHAREHOLDER YLD	25.89900 03/21/2014	04/15/2014	307 94	304 32		80	3.62		
CUSIP: 4/803U509	10.15500 03/21/2014	05/01/2014	124 40	11933		80	5.07		
	2.58200 03/21/2014	07/01/2014	32.22	30.34		0:00	1.88		
Subtotals	41,40300		\$497.15	\$486.51	!	\$0.00	\$10.64		
JPMORGAN TR I	4.08300 03/21/2014	03/27/2014	42.50	42.35		0.00	0.15		
INCOME BLOR FD SELECT CL	51.80600 03/21/2014	04/15/2014	539.30	537 23		0:00	2.07		
CUSIF: 4612A3234	10.38600 03/21/2014	05/01/2014	109 47	107.71		9 0 0	1.76		
	6.41800 03/21/2014	07/01/2014	68 87	99.99		0.00	231		

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2014 Consolidated Forms 1099

As of Date: 02/25/15

ு Account Number: 1290-3906

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ALBERT E ALDRICH & PHILIP J CURTIS TTEE

(2) 1545-07/15 1099-B. Proceeds from Broker and Barter Exchange Transactions, continued

Short Term Gains/Losses - Report on Form 8949, Part I with Box A checked

Type of Gain or Loss - Short Term Basis Reported to the IRS Box not Checked (Covered Security)

Box 2: Box 3: Box 6:

The 1099-B data referenced by a Box Number is reported to the IRS. The additional information not referenced by a Box Number is not reported to the IRS, but may be helpful to complete your return

Description CUSIP	. O	Date Acquired	Date Soid or Disposed	Proceeds	Cost or Other Basis	Code	Adjustments	Galn/Loss	e de la constant de l
JPMORGAN TRI INCOME BLDR FD SELECT CL									
Subtotals Subtotals	72.69300			\$760.14	\$753.85		\$0.00	\$6.29	
KINETICS MUT FDS INC .	12.79300 03/21/201	3/21/2014	04/15/2014	143 16	143.80			9.64	
MULTI-DISCIPLINARY FD	0.25000 03/21/201	3/21/2014	04/15/2014	2.79	281	₹	-10 02	80	
CUSIP. 494613649	3.90300 03/21/201	3/21/2014	07/01/2014	44 73	43 87		000	0.86	
Subtotals	16.94600			\$190.68	\$190.48		\$0.02	\$0.22	
NEUBERGER BERMAN .	12.40600 03/21/201	3/21/2014	04/15/2014	155.45	154.58		0.00	0.87	
EQUITY INCOME FUNDS	4 08200 03/21/201	3/21/2014	05/01/2014	52.09	50.87		0.00	1 22	
CUSIP: 641224498	42.03900 03/21/20	3/21/2014	05/06/2014	533.47	523 81		0.0	99.6	
Subtotals	58.52700			\$741.01	\$729.26		. \$0.00	\$11.75	
NUVEEN INVT FDS INC •	8.72800 03/21/201	3/21/2014	04/15/2014	202.23	199.44		0.00	2.79	
REAL ASSET INCOME FD	1 93900 03/21/201	3/21/2014	05/01/2014	45.61	44.31		000	1 30	
CUSIP 670690155	2 63500 03/21/20/	3/21/2014	07/01/2014	64.56	60 21		8 0	4.35	
Subtotals	13.30200		•	\$312.40	\$303.96		\$0.00	\$8.44	
PRINCIPAL FDS INC .	2 44800 03/21/201	3/21/2014	03/27/2014	35 49	35.31		000	0 18	
GLOBAL DIVERSIFIED	30 36000 03/21/201	3/21/2014	04/15/2014	442 95	437.79		00 0	5 16	
CUSIP: /4254V232	4.37800 03/21/201	3/21/2014	05/01/2014	64.32	63.14		8	1 18	
	4.54300 03/21/201	3/21/2014	07/01/2014	68.28	65.51		0.00	2.77	
Subtotals	41.72900			\$611.04	\$601.75		\$0.00	\$9.29	
Totals (8949, Part I with Box A checked)	6			\$7,798.86	\$7,773.46		\$0.04	\$25.45	

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