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### Form 990-PF

### **Return of Private Foundation**

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

20**14** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Foi	For calendar year 2014 or tax year beginning , and er							
Nar	ne of fou	ndation				A Employer	identification number	
		M Collier Charitable Trust						
		street (or PO box number if mail is not delivered to street address)		Room/	suite		20-7437674	
		Palm Way				B Telephone	number (see instruction	as)
	or town		ZIP co				E04 0E0 0E0	
	m Bea		3348				561-650-0531	
For	eign coui	ntry name Foreign province/state/county	Foreig	n posta	code	C If exempti	on application is pendin	g, check here 🕨 🔝
_	Chook	all that apply   Initial return   Initial return		ام مراط	ort.	D 4 Farairi	arganizations shock b	<b>.</b> .
G	CHECK		•	iblic cr	iarity		n organizations, check h	
						_	n organizations meeting	. —
	Oh a ala	X Address change ☐ Name change type of organization X Section 501(c)(3) exempt private type of organization					nere and attach comput oundation status was te	_
<b>H</b>							7(b)(1)(A), check here	<b>▶</b> □
			ble private fo	<u> </u>				
ı		arket value of all assets at J Accounting method	X Cash	∐ Ad	ccrual		dation is in a 60-month	
		year (from Part II, col (c), Other (specify)				under sec	tion 507(b)(1)(B), check	here ►
		(Part I, column (d) must be 440,815 (Part I, column (d) must be	e on cash basi	s)		- 1		(A) B - b
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily	expenses po books	er		come	income	purposes
		equal the amounts in column (a) (see instructions) )		E07	<del></del>		<del></del>	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	431	,527				
	2	Check ► if the foundation is <b>not</b> required to attach Sch B						
	3	Interest on savings and temporary cash investments  Dividends and interest from securities		,818		1,818		
	4 5a	Gross rents		,010		1,010		<u>-</u>
	b b	Net rental income or (loss)	<del></del>					
_	6a	Net gain or (loss) from sale of assets not on line 10	12	2,007				
<u>n</u>	b	Gross sales price for all assets on line 6a 92,879		-,007	•		<del></del>	
ē	7	Capital gain net income (from Part IV, line 2)				12,007		
Revenue	8	Net short-term capital gain			·			
II.	9	Income modifications						
	10a	Gross sales less returns and allowances						1
	b	Less Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)						1
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	445	5,352		13,825	0	
	13	Compensation of officers, directors, trustees, etc				-		
nses	14	Other employee salaries and wages	0	EC	EIV	ايسا		
en	15	Pension plans, employee benefits				S		<del></del>
ᆽ	16a	Legal fees (attach schedule)			81 A	2015 ∫ở		
Ш	b	Accounting fees (attach schedule) .	6	YAN	2 I		1	<u> </u>
.≧	C C	Other professional fees (attach schedule)	12		-	III	<u> </u>	
Ī	17	Interest	H	na	<del>A3C</del>		العد	
is	18	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion		<u>99</u>				
Ē	19	, , , , , , , , , , , , , , , , , , , ,				<del></del>		<del></del>
þ	20 21	Occupancy Travel, conferences, and meetings					<del>-</del>	
Operating and Administrative Expe	22	Printing and publications	·					
aŭ	23	Other expenses (attach schedule)						
Ď	24	Total operating and administrative expenses.						
Ħ		Add lines 13 through 23		0		0	0	0
era	25	Contributions, gifts, grants paid						
Ğ	26	Total expenses and disbursements. Add lines 24 and 25		0		0	0	0
<u> </u>	27	Subtract line 26 from line 12						
	 a	Excess of revenue over expenses and disbursements	44	5,352				
	b	Net investment income (if negative, enter -0-)				13,825		
	С	Adjusted net income (If negative, enter -0-)					0	

MAY 27 2015

D,	art II	Attached schedules and amounts in the description column	Beginning of year	End of	f year
		Balance Sheets should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments		· <u>80,143</u>	80,143
	3 .	Accounts receivable ▶	•		
		Less allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			<del></del>
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	-	Less allowance for doubtful accounts	-	-	
Ŋ	8	Inventories for sale or use	· · ·	·	
Assets	9	Prepaid expenses and deferred charges			
Š	10a	Investments—U.S. and state government obligations (attach schedule)			
•	b	Investments—corporate stock (attach schedule)		365,209	360,672
	t	Investments—corporate stock (attach schedule)		303,203	300,072
	C 44	· · · · · · · · · · · · · · · · · · ·		· · · ·	
	11	Investments—land, buildings, and equipment basis	-	•	-
	40	Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	<del></del>		<del></del>
	14	Land, buildings, and equipment basis	1		
		Less accumulated depreciation (attach schedule)	-		
	15	Other assets (describe  )			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	0	445,352	440,815
ွှ	17	Accounts payable and accrued expenses			
	18	Grants payable		<del></del>	
itie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe  )			
	23	Total liabilities (add lines 17 through 22)	0	0	
<b>(</b> 0		Foundations that follow SFAS 117, check here			
alances		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
	25	Temporarily restricted			
<del>Б</del>	26	Permanently restricted	<u> </u>		
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds		445,352	
şţ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
<b>SS</b> (	29	Retained earnings, accumulated income, endowment, or other funds			
Ä	30	Total net assets or fund balances (see instructions)	0	445,352	
ē	31	Total liabilities and net assets/fund balances (see			
۷.		instructions)	l o	445,352	
Pá	ırt III	Analysis of Changes in Net Assets or Fund Balances			
		net assets or fund balances at beginning of year-Part II, column (a)	, line 30 (must agree	with	
		of-year figure reported on prior year's return)	. 5	1 1	0
2		amount from Part I, line 27a		2	445,352
3		a consequence of the charles of the control of the			
4		ines 1, 2, and 3		4	445,352
5		eases not included in line 2 (itemize)		5	,-
-		net assets or fund balances at end of year (line 4 minus line 5)—Part	t II, column (b), line 3		445,352

Part	V Capital Gains and	Losses for Tax on Investr	ment Income	1 (5) (1)	<del></del>	<del></del>
		kind(s) of property sold (e.g., real estate se, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a	Capital Gains Distributions					
<u>b</u>	Pùblicly traded security					
<u>c</u>				ļ		
d						
<u>е</u>				L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g)
<u>a</u>						0
<u> </u>	80,126			80,872		-746
<u>c</u>			<del>                                     </del>			
d						· · · · · · ·
е	Complete only for assets sho	wing gain in column (h) and owned	hy the foundation	on 12/31/69		
	Complete only for assets sho	(j) Adjusted basis		is of col (i)		of (h) gain minus of less than -0-) <b>or</b>
	(i) FM ∨ as of 12/31/69	as of 12/31/69		(j), if any		from col (h))
а					<del>, .</del>	0
b						-746
С						
d						
е						
2	Capital gain net income or (	net canital inee! ( "	also enter in Par ), enter -0- in Par	<b>)</b>	2	12,007
3	Net short-term capital gain of	or (loss) as defined in sections	•	·		
	, -	ine 8, column (c) (see instructio		er -0- in 1		
	Part I, line 8			ſ	3	0
Part	V Qualification Unde	er Section 4940(e) for Red	uced Tax on N	let Investment	Income	
Was t	tion 4940(d)(2) applies, leave the foundation liable for the se s " the foundation does not or	this part blank ection 4942 tax on the distributa palify under section 4940(e) Do	ible amount of an	y year in the bases	e period?	☐ Yes ☒ No
1	<u> </u>	nt in each column for each year	<u></u>	<u> </u>	any entries	
	(a)	(b)	1	(c)		(d)
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value o	of noncharitable-use as		stribution ratio divided by col. (c))
	2013		İ .			0 000000
	2012					0 000000
	2011					0 000000
	2010					0 000000
	2009					0 000000
_						
2	Total of line 1, column (d)	- Al	- 46 4-4-1 1	0 5 5 5 5	2	0 000000
3	=	r the 5-year base period—divide tion has been in existence if les		2 by 5, or by the	3	0 000000
4	Enter the net value of nonch	naritable-use assets for 2014 fro	om Part X, line 5		4	162,058
5	Multiply line 4 by line 3				5	
		Income (10/ of Doct Lives 07/1)				400
6		income (1% of Part I, line 27b)			6	138
7	Add lines 5 and 6				7	138
8	Enter qualifying distributions If line 8 is equal to or greate	s from Part XII, line 4 er than line 7, check the box in F	Part VI, line 1b. ai	nd complete that	8 art using a 1% ta	0 x rate See the
	Part VI instructions		,	-In		· = = -··•

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			
1a b	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check		277	
•	hère ▶ ☐ and enter 1% of Part I, line 27b		211	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
3	Add lines 1 and 2		277	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		277	
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
_d	Backup withholding erroneously withheld  6d		_	
7	Total credits and payments Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here		077	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overnoument, If line 7 is more than the total of lines 5 and 8, enter the amount evernoid.		277	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2015 estimated tax    Refunded   11		0	
	VII-A Statements Regarding Activities			<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	$\Box$	Yes	No
	participate or 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 the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		_ <u>X</u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers • \$			V
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			,
40	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		X
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		$\frac{\hat{x}}{x}$
	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			1
	By language in the governing instrument, or			
	<ul> <li>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?</li> </ul>	6	Ų.	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del>                                     </del>	^	
-	FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ì	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			<del></del>
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If			
	"Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	Х	

<u>Part</u>	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ Robert Swan  Telephone no ▶ 812-455-	2109		
	Located at ► 6806 Windham Parkway Prospect KY ZIP+4 ► 40059			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year    15   N/A			<b>▶</b> □
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 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	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?			
	(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?			
	(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			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			1
	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			
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)?  Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
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		Χ_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?  Yes X No			
	If "Yes," list the years 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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	۱.		,
4-	foundation had excess business holdings in 2014 )	3b	N/A	<del>                                     </del>
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del></del>	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		V
	one made purpose that had not been removed horn jeopardy before the first day of the lax year beginning in 2014?		) DE	X

Part	VII-B Statements Regarding	Activities	for W	hich Form	4720 N	lay Be Re	quire	d (contin	ued)			
5a	During the year did the foundation pay (1) Carry on propaganda, or otherwise				section	4945(e))?		☐ Yes	⊠ No			
	(2) Influence the outcome of any spec directly or indirectly, any voter regi			see section 49	955), or	to carry on	1	Yes	<b></b> No			
	(3) Provide a grant to an individual for	travel, study	, or oth	er sımılar pur	poses?			Yes	X No			
	(4) Provide a grant to an organization section 4945(d)(4)(A)? (see instruction)		charital	ble, etc , orga	anızatıor	n described	ın	☐ Yes	<b>⊠</b> No			
	(5) Provide for any purpose other than purposes, or for the prevention of				terary, c	or education	nal	☐ Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did Regulations section 53 4945 or in a cu	-		•	-		-		d in	5b	N/A	
С	Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes No											
	If "Yes," attach the statement required											
6a	Did the foundation, during the year, re on a personal benefit contract?	ceive any fur	nds, dire	ectly or indire	ctly, to p	pay premiur	ns	☐ Yes	X No			
b	Did the foundation, during the year, part "Yes" to 6b, file Form 8870	ay premiums,	directly	or indirectly,	on a p	ersonal ben	efit con	tract?		6b		X
7a b	At any time during the tax year, was the following the foundation receive any						e trans:	Yes	X No	7b	N/A	
Part	VIII Information About Office and Contractors	ers, Directo	ors, Tr	ustees, Fo	undati	on Manaç	gers, F	lighly Pa	aid Em	ploye	es,	
1	List all officers, directors, trustees,	foundation i	manage	ers and their	compe	nsation (s	ee inst	ructions).				
	(a) Name and address		` hou	e, and average rs per week ed to position	(if r	mpensation not paid, iter -0-)	emplo	Contributions byee benefit erred compe	plans	(e) Expe	nse acc	
	l A Hanley		Truste	е					ĺ			
	toyal Palm Way Palm Beach, FL 33480		As Nee			0						
	rt Swan Windham Parkway Prospect, KY 40059	)	Trustee As Nee	=	0							
<b>-</b>			-									
2	Compensation of five highest-paid (	employees (	other tl	nan those in	cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
	(a) Name and address of each employee paid mo	ore than \$50,000		(b) Title, and a hours per w devoted to po	veek	(c) Compen	sation	(d) Contribution (d) Co	benefit deferred	(e) Expe	nse acc allowan	
NONE	<u> </u>			i								
				-			•					
					<del></del> ,							
Total	number of other employees paid over \$	50,000		L					<b>•</b>			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "No	ONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<del></del>
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	F
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A The Foundation did not engage in material charitable activities because it was funded late in the year	-
	-
2	-
	-
3	<del></del>
·	-
······································	-
4	
•	-
	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A The Foundation did not engage in material charitable activities because it was funded late in the year	-
	-
2	-
	-
All other program-related investments. See instructions	
3	
	-
Total. Add lines 1 through 3 ▶	
	Form 990-PF (2014)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n founda	ations,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	154,504
b	Average of monthly cash balances	1b	10,022
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	164,526
е	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	
3	Subtract line 2 from line 1d	3	164,526
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	2,468
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	162,058
6	Minimum investment return. Enter 5% of line 5	6	8,103
Part 2			
	foundations and certain foreign organizations check here and do not complete this part )	1 1	
1	Minimum investment return from Part X, line 6	1	8,103
2a	Tax on investment income for 2014 from Part VI, line 5	<u>'</u>	
b	Income tax for 2014 (This does not include the tax from Part VI)	4	
С	Add lines 2a and 2b	2c	277
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,826
4	Recoveries of amounts treated as qualifying distributions	4	<del></del>
5	Add lines 3 and 4	5	7,826
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,	1 _	
	line 1	7	7,826
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
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		
а	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	0
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	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet	her the fo	oundation
	qualifies for the section 4940(e) reduction of tax in those years		

Page 9

Part	XIII Undistributed Income (see instructions)	)			
4	Distributoble amount for 2014 from Bort VI	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	Tears prior to 2013	2013	7,826
2	Undistributed income, if any, as of the end of 2014				7,020
a	Enter amount for 2013 only			l ol	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2014				<del>-</del>
a	From 2009				
b	From 2010				
С	From 2011				
d	From 2012				
е	From 2013				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years	·			
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2014 distributable amount .	·			
е	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, and 4e Subtract line 5	0			
þ	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
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				<del> </del>
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see			_	
	instructions		<u> </u>	0	
f	Undistributed income for 2014 Subtract lines				
	4d and 5 from line 1. This amount must be				7.000
-	distributed in 2015				7,826
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
8	required—see instructions)  Excess distributions carryover from 2009 not				
0	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				· <u>-</u>
3	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9		<del></del>		
	Excess from 2010	•			
a b	Excess from 2011				
C	Excess from 2012				
d	Excess from 2012				
	Excess from 2014				

Form 990-PF (2014)

Part	XV Supplementary Information (continuation)	nued)			
3_	Grants and Contributions Paid During t		ed for Fut	ure Payment	<del>,</del>
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
	Total		. <u>.</u>	▶ 3a	0
b	Approved for future payment				
		1			
	Total	I	l	<u> </u> 3h	,

Par	t XV	I-A Analysis of Income-Producing Ac	ctivities				
		ss amounts unless otherwise indicated	1	isiness income	Excluded by sect	ion 512, 513, or 514	(a)
		•	( )	4.		4.0	(e) Related or exempt
			(a) Business code	(b) Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions)
1	_	gram service revenue					(See mandedons)
	a <u>l</u>	N/A					
	p _						
	d _						
	е_						i
	f _						
_		Fees and contracts from government agencies					
2		bership dues and assessments					
3		est on savings and temporary cash investments	<del></del>		44	4.040	**
4		dends and interest from securities			14	1,818	
5		rental income or (loss) from real estate					
		Debt-financed property					
•		Not debt-financed property rental income or (loss) from personal property	-				· <del></del>
6 7		er investment income					117
8					18	12,007	
9		or (loss) from sales of assets other than inventory income or (loss) from special events			10	12,007	
10		ss profit or (loss) from sales of inventory	-				
11		er revenue a					
•••	b		-			-	
	c -						
	ď			l. <u>-</u>			
	е -		**				
12	_	total Add columns (b), (d), and (e)	·	C	)	13,825	0
		il. Add line 12, columns (b), (d), and (e)		<del>_</del>		13	13,825
		sheet in line 13 instructions to verify calculations	s )			-	
Par	t XV	I-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
	e No.	Explain below how each activity for which incom	ne is reported in c	olumn (e) of Part	XVI-A contributed	importantly to the	
	<u> </u>	accomplishment of the foundation's exempt pur	poses (other than	by providing fund	s for such purpos	ses) (See instruction	ons )
	1	N/A					
						<del></del>	
							<u> </u>
					-		
		<del></del>	<del></del>				
				<del></del>		<del></del>	· <del>-</del>
					<del></del>	<del></del>	
						<del> </del>	<del></del>
			<del></del>	<del></del>			
				•			
		<del></del>		•			
			· · · · · · · · · · · · · · · · · · ·				
		<del></del>					
				·			<del></del> -
				<del></del>	_ <del></del>		
		<del>                                     </del>					

Paid

Preparer

Use Only

Print/Type preparer's name

LAURA LESLIE-SCHUEMANN

**GUNSTER** 

151 ROYAL PALM WAY, PALM BEACH, FL 33480

Part		(			ns and F	Relationships With Nonc	haritable	Page <b>13</b>
	Did			ngage in any of the following	with any o	other organization described		Yes No
•		•			-	ction 527, relating to political	1 30	Butter of James
		anizations?		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	, 3 1		1.1
а	-		orting foundation to	a noncharitable exempt orga	anization of	f	2184	100 Com
		Cash	J	, 5			1a(1)	``   `x
		Other assets					1a(2)	Х
b	Oth	er transactions					禁衛	44
	(1)	Sales of assets to	a noncharitable exe	mpt organization			1b(1)	X
	(2)	Purchases of asse	ts from a noncharita	ble exempt organization			1b(2)	X
	(3)	Rental of facilities,	equipment, or other	assets			1b(3)	X
	(4)	Reimbursement ar	rangements				1b(4)	X
	(5)	Loans or loan guar	rantees				1b(5)	
				ip or fundraising solicitations			1b(6)	
C				ts, other assets, or paid emp			1c	<u> </u>
d		•	·			should always show the fair ma		
						undation received less than fair oods, other assets, or services r		
(a) Line	e no	(b) Amount involved	(c) Name of non	charitable exempt organization	(d) De	escription of transfers, transactions, a	nd sharing arra	ngements
				,				
				<del></del>				
				<del></del>		<del></del>		
					-	·		<del></del>
					1			
						<del></del>		
		<del></del>						
				Water Control of the			· <del></del>	
2a				ated with, or related to, one of ther than section 501(c)(3))			☐ Yes	X No
b	If "Y	es," complete the	following schedule					
_		(a) Name of organ		(b) Type of organization	n	(c) Description of	relationship	·
N/A				N/A		N/A	•	
_	١					nd to the best of my knowledge and belief, it	s true,	
Sign Here	'   N	July Declarati	un un greparen jother than taxo	Gyer) is based on all information of which pri	rustee	with	the IRS discuss the preparer shoe instructions)?	own below

Check \_\_\_\_ if

Firm's EIN ▶

self-employed P05230725

59-1450702

(561)650-0776

Date

5/11/2015

### Schedule B

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

**Schedule of Contributors** 

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number
The Lois M Collier Charitable T	rust	20-7437674
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	dation
	527 political organization	
5 000 DE	[V] 504( VO) ( ) .	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4047(-)(4)	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	חו
	501(c)(3) taxable private foundation	
	50 T(C)(S) taxable private iounidation	
	•	
Check if your organization is co-	vered by the General Rule or a Special Rule.	
•	(8), or (10) organization can check boxes for both the General Rule and a	Special Pule See
instructions	(d), or (10) organization can oneck boxes for both the General Rule and a	Opecial Nulle Gee
instructions		
General Rule		
General Raic		
X For an organization filin	g Form 990, 990-EZ, or 990-PF that received, during the year, contribution	as totaling \$5,000
	operty) from any one contributor. Complete Parts I and II. See instructions	
contributor's total contri	•	Tor determining a
Special Rules		
For an organization des	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 %	support test of the
	ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or	
13, 16a, or 16b, and tha	at received from any one contributor, during the year, total contributions of	the greater of (1)
\$5,000 or (2) 2% of the	amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Com	iplete Parts I and II
	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	
	ear, total contributions of more than \$1,000 exclusively for religious, charit	
literary, or educational p	purposes, or for the prevention of cruelty to children or animals Complete	Parts I, II, and III
	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	
	rear, contributions exclusively for religious, charitable, etc., purposes, but r	
	ore than \$1,000. If this box is checked, enter here the total contributions th xclusively religious, charitable, etc., purpose. Do not complete any of the p	
	o this organization because it received nonexclusively religious, charitable,	
totaling \$5,000 or more		, etc., contributions  ▶ \$
1012		· · · · · · · · · · · · · · · · · · ·
Caution. An organization that is	not covered by the General Rule and/or the Special Rules does not file S	chedule B (Form 990.
	answer "No" on Part IV, line 2, of its Form 990, or check the box on line H	

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

Name of organizationEmployer identification numberThe Lois M Collier Charitable Trust20-7437674

THE LOIS IV	Comer originable rrust		20-1401014
Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Lois M Collier  One Sutton Place South, Apt 9C  New York  NY  10022  Foreign State or Province  Foreign Country	\$431,527	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions )

Name of organization Employer identification number
The Lois M Collier Charitable Trust 20-7437674

Part II	Noncash Property (see instructions) Use duplicate co	opies of Part II if additional space	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	First Eagle Global Class C	\$ 113,347	8/11/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Janus Balanced Fund Class C	\$ 126,466	8/11/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Ivy Balanced Fund Class C	\$ 110,826	8/11/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Ivy Asset Strategy Class C	\$ 80,872	8/11/2014
(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
		\$	

Name of or	ganization  Collier Charitable Trust		Employer identification number 20-7437674
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the ye the following line entry. For organizations of contributions of \$1,000 or less for the year.	ear from any one contributor. Completing Part III, enter the total of (Enter this information once See	cribed in section 501(c)(7), (8), or mplete columns (a) through (e) and exclusively religious, charitable, etc.
(a) No.	Use duplicate copies of Part III if additional	space is needed	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and Z	P + 4 Relation	onship of transferor to transferee
	For Prov Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and Zi	P + 4 Relation	onship of transferor to transferee
(a) No.	For Prov Country		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and Zi	P + 4 Relation	onship of transferor to transferee
	For Prov Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and Zi	P + 4 Relation	onship of transferor to transferee
	For Prov Country		

### Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

		6	0	Ī				-746
Net Gain	or Loss	12,0				Net Gam	or Loss	.7.
Net	. 00						Adjustments	
Other	xpenses	80,872	0				Depreciation	
Cost, Other	Basis and Expenses				Expense of Sale	and Cost of	Improvements	
		92,879	0		•	Valuation	Method	
Gross	Sales	•				Cost or	Other Basis	80,872
Totals		Capital Gains/Losses	Other sales			Gross Sales	Pnce	80,126
		ఔ				Date	Sold	11/12/2014
						Acquisition	Method	Q
						Date	Acquired	8/11/2014
				Check "X" rf	Purchaser	IS a	Business	
							Purchaser	
	Amount						CUSIP#	466000734
	'	Long Term CG Distributions	Short Term CG Distributions				Description	Publicly traded security
					Check "X"	to include	in Part IV	1 X

# Part II, Line 10b (990-PF) - Investments - Corporate Stock

			0	365,209	0	360,672
		Num Shares/	Book Value	Book Value	FMV	FMV
	Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year
_	First Eagle Global Class C	2,181	0	118,301	0	111,994
2	lvy Balanced Fund Class C	4,676	0	114,119	0	116,575
8	Janus Balanced Fund Class C	4,347	0	132,789	0	132,103

### Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

		-746	Gams Minus Excess	of FMV Over Adjusted	Basis or Losses	0	-746
		0	9	Excess of FMV   Of I	Ner Adj Basis	0	0
		_		Ä	දී 		
			Adjusted Basis	as of	12/31/69		
		0		FMV as of	12/31/69	0	0
		-746			Gain or Loss	0	-746
		80,872	Cost or Other	Basis Plus	Expense of Sale	0	80,872
		0			Adjustments		
		0		Depreciation	Allowed		
		80,126		Gross	Sales Pnce		80,126
				Date	Sold		
				Date	Acquired		
				Acquisition	Method		
Amount	12,753	0			CUSIP#		
	Long Term CG Distributions	Short Term CG Distributions	-		Description of Property Sold	Oistnbutions	security
	-				Descrip	1 Capital Gains Distributions	2 Publicky traded security

## Part VII-A, Line 10 (990-PF) - Substantial Contributors

	Foreign Country	
	Zıp Code	10022
	State	λ
	City	New York
	Street	One Sutton Place South, Apt 9C
Check "X"	if Business	
	Name	1 Lois M Collier

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

The Lois M Collier Chantable Trust

										>	>	و.	>
	Name	Check "X" if Business	Street	City	State	State Zip Code	Foreign Country	Title	Avg Hrs Per Week	Avg Hrs Per Week Compensation	Benefits	Expense Account	
-	Daniel A Hanley		151 Royal Palm Way	Palm Beach	FL 3	33480			As Needed	0	0		6
2	Robert Swan -		6806 Windham Parkway	Prospect	KY 4	40059		Trustee	As Needed	0	0		0