

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



Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

, 20

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. For calendar year 2014 or tax year beginning , 2014, and ending

DOYSEYNE FOUNDATION Towns a control of the con	Na	me of fo	pundation			A Employe	er identification number	er
300 FIRST STAMFORD PLACE 972-318-6100								
Cly or town, state or province, country, and ZIP or foreign postal code STAMFORD, Cl. 16982 G Check all that apply: Initial return Initial return of a former public charity Initial return Amended retu	Nu	mber an	d street (or P O. box number if mail is not delivered to street address)	F	Room/suite	B Telephor	ne number (see instruct	ons)
STAMFORD, CT 06902 Initial return Initial return Initial return Amended return							972-318-6100	
General that apply: Initial return Initial return of a former public charity Initial return Amended re	Cit	y or tow	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ıng, check here ▶ 🗌
Final return Amended return Address change Name change Name change Amended return 2 Foreign organization: 2 Section 501(c)(3) exempt private foundation 2 Section 4947(a)(1) nonexempt charitable into 1 Section 4947(a)(1) nonexempt charitable into 2 Section 501(c)(3) exempt private foundation 2 Section 4947(a)(1) nonexempt charitable into 2 Section 507(a)(1)(a), check here 5 Section 507(a)(1)(a), check her	ST	AMFOR	RD, CT 06902					
Address change Name change Section 507(b)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Section 507(b)(1)(A), check here Comment of view (from Part It, col. (c), low (from Part It, col. (c), low (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It, col. (c), low (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6) Section 507(b)(1)(A), check here Comment of view (from Part It) Other (specify), line (6)	G	Check	call that apply: Initial return Initial return	of a former pu	ublic charity	D 1. Foreig	n organizations, check	here ▶ 🗌
H Check type of organization:				return		2 Foreign	n organizations meeting	the 85% test
Section 4947(a)(f) nonexempt chantable trust □ Other taxable private foundation Fair market value of all assets at			Address change Name char	nge		check	here and attach compl	itation ▶ 🗌
Section 4947(a)(1) nonexempt charatable trust Other taxable private foundation	Н							
end of year (from Part II, col. (c) Cherk (specify) Under section 507(b)(1)(B), check here Cherk (solum (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (e) (each fusions) (each fusi		Section				Jeonon	or (b)(1)(1)(1)	٠
Part Analysis of Revenue and Expenses (The total or amounts in column (b), (c), and (d) may not necessary) equal the amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (a) Revenue and Expenses (The total or amounts in column (b) (see instructions) (b) Revenue and Expenses (The total or amounts in column (b) (see instructions) (b) Revenue and Expenses (The total or amounts in column (b) (see instructions) (b) Revenue and Expenses (The total or amounts in column (b) (see instructions) (c) Adjusted net income (The The total or amounts in column (b) (see instructions) (c) Adjusted net income (The The total or amounts in column (b) (see instructions) (c) Adjusted net income (The The The total or amounts in column (b) (see instructions) (c) Adjusted net income (The The The The The The The The The The	ı		_	: 🗹 Cash 🗌	Accrual	F If the fou	indation is in a 60-mont	h termination
Part Analysis of Revenue and Expenses (The total of amounts in columns (b), ch, and (d) They not necessarily equal the amounts in columns (b), ch, and (d) They not necessarily equal the amounts in columns (b), ch, and (d) They not necessarily equal the amounts in columns (b), ch, and (d) They not necessarily equal the amounts in columns (b), ch, and (d) They not necessarily equal the expenses per discovery the amounts in columns (b), ch, and (d) They not necessarily equal the expenses and they not necessarily equal the expenses and they not necessarily equal the expenses and they not necessarily equal to the property of the expenses (attach schedule) 1, 1,885,000 1,885,000						under se	ction 507(b)(1)(B), chec	k here ▶ 🗌
amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (d) (see instructions) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check If the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales iess returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salanes and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 20 Cocupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Contributions, gifts, grants paid 27 Capital gain and income (if negative, enter -0-) 28 Excess of revenue over expenses and disbursements 30 Net investment income (if negative, enter -0-) 4 Other income (if negative, enter -0-) 4 Other income (if negative, enter -0-) 5 Other professional fees (attach schedule) 6 Contributions, gifts, grants paid 7 Capital expenses and disbursements 8 Net investment income (if negative, enter -0-) 9 Other professional fees (attach schedule) 1 (attach schedule) 1 (attach schedule) 1 (attach schedule) 2 (attach schedule) 3 (attach schedule) 4 (attach schedule) 6 (attach schedule) 7 (attach schedule) 8 (attach schedule) 9				on cash basis.)				
the amounts in countins (b), (c), and (c) they not not books 1	Р	art I				t investment	(c) Adjusted not	
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross priot or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 20 Occupancy 21 Travel, conferences, and meetings 22 Pinting and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c			amounts in columns (b), (c), and (d) may not necessarily equal					purposes
2 Check fithe foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) 20 Cocupancy 21 Travel, conferences, and meetings 22 Pinting and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Contributions, grifts, grants paid 27 Contributions, grifts, grants paid 28 Excess of revenue over expenses and disbursements 3 Net investment income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-) 6 C Adjusted net income (if negative, enter -0-) 7 C Adjusted net income (if negative, enter -0-)								(cash basis only)
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents 5 Dividends and interest from securities 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 11 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 20 Occupancy 21 Travel, conferences, and meetings 22 Pinting and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (fi negative, enter -0-) c Adjusted net income (fi negative, enter -0-)		1		1,685,	,000			
4 Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) c Cither professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (fr negative, enter-0-) c Adjusted net income (fr negative, enter-0-) c Adjusted net income (fr negative, enter-0-) c		1	•					
5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain								
By Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 1,685,000 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion 20 Cocupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total expenses (attach schedule) 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) c Adjusted net income (if negative, enter -0) c		1						
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		1					<u> </u>	
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements and lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)			· /					
9 Income modifications 10a Gross sales less returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c	ĕ	1	• , ,					
9 Income modifications 10a Gross sales less returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c	/en	I _	· · · · · · · · · · · · · · · · · · ·					
9 Income modifications 10a Gross sales less returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c	ě	1					<u> </u>	
10a Gross sales less returns and allowances b Less' Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 1 1,885,000 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 16b Accounting fees (attach schedule) 17 Interest 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion 19 Depreciation (attach schedule) and depletion 19 Depreciation (attach schedule) 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid 1,685,000 1,685,000 1,685,000 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-) 0		I -		-				
b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements 29 Net investment income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-)		1 .				· · · · · · · · · · · · · · · · · · ·		
C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 17 Cother professional fees (attach schedule) 18 Taxes (attach schedule) 19 Depreciation (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 1 (1,685,000) 1,685,000 1,685,000 2 Adjusted net income (if negative, enter -0-)		1		-				
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements 29 Net investment income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-)		1						
Total. Add lines 1 through 11 1,685,000 1 1,685,000 1 1 1 1,685,000 1 1 1 1 1,685,000 1 1 1 1 1,685,000 1 1,685,000 1 1,685,000 1 1,685,000 1,685,00		1 *			+			
13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Other employee salaries and wages d Contribution (if negative, enter -0-) d Contributio				1 695	000	-		
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 1 Pepreciation (attach schedule) and depletion 17 Travel, conferences, and meetings 21 Printing and publications 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 1,685,000 1,685,000 1,685,000 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0 c Adjusted net income (if negative, enter -0-) 0				1,000	,000			
C Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) O Other expensional fees (attach schedule) Interest	es	1						
C Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) O Other expensional fees (attach schedule) Interest	Sué.	1	, ,	 				
C Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) O Other expensional fees (attach schedule) Interest	ğ	16a	· · · · · · · · · · · · · · · · · · ·					
C Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0	Ú	Ь	· · · · · · · · · · · · · · · · · · ·				-	
Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0	ΪĶ	i	- , , , , , , , , , , , , , , , , , , ,		,		1 - 2,	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	ra	17	Interest		1		T	7
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	iist	18			[]:		ニョウ	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	Ē	19	Depreciation (attach schedule) and depletion		i	1111	7	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	ģ	20					,	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	γp	1					<u> </u>	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	É	1			ارس.	~- · · ·		
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	ğ	1					~ '	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	aţi	24						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) .	ē			<u> </u>			ļ	
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) . c Adjusted net income (if negative, enter -0-) .	Q	1						
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) . c Adjusted net income (if negative, enter -0-)				1,685	,000		-	1,685,000
b Net investment income (if negative, enter -0-) . c Adjusted net income (if negative, enter -0-)		1						
c Adjusted net income (if negative, enter -0-)		1 .		<u> </u>	0		 	
		1	· =			0		
	For				at No. 11000	·V		



Рa	ırt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of	year
		Balance Sheets Attached schedules and amounts in the description column 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		_	0	
	2	Savings and temporary cash investments				
	3	Accounts receivable ►	_	-	1	_
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ►		=		
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)			_	
	7	Other notes and loans receivable (attach schedule) ▶		-		-
	_	Less: allowance for doubtful accounts ▶		<u> </u>	_	
Assets	8	Inventories for sale or use			\dashv	
SS	9	Prepaid expenses and deferred charges				
4	10a	Investments—U.S. and state government obligations (attach schedule)		_	_	
	b	Investments—corporate stock (attach schedule)			_	
	C	Investments—corporate bonds (attach schedule)			_	
	11	Investments—land, buildings, and equipment basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans			_	
	13	Investments—other (attach schedule)			_	
	14	Land, buildings, and equipment: basis ▶			-	
		Less. accumulated depreciation (attach schedule) ▶		 -	\dashv	
	15	Other assets (describe >)				
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)				
	17		0		_0	0
	18	Accounts payable and accrued expenses			_	
es	19	Deferred revenue			-	
	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
	22					
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0		ᆨ	
_		Foundations that follow SFAS 117, check here			0	
Balances		and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted				
ala	25	Temporarily restricted			\neg	
	26	Permanently restricted			\neg	
pur		Foundations that do not follow SFAS 117, check here ▶ □			_	
Ţ		and complete lines 27 through 31.				
or Func	27	Capital stock, trust principal, or current funds				
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	_			
SS	29	Retained earnings, accumulated income, endowment, or other funds				
Ä	30	Total net assets or fund balances (see instructions)	0		0	
Ve	31	Total liabilities and net assets/fund balances (see				
		instructions)	0		0	
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		Il net assets or fund balances at beginning of year-Part II, colu				-
		of-year figure reported on prior year's return)			1	0
2		er amount from Part I, line 27a		[2	0
3	Othe	er increases not included in line 2 (itemize) ▶			3	
_	Add	lines 1, 2, and 3			4	0
5	Decr	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—	Dadli al 1000		5	
<u>b</u>	rota	il flet assets or fund palances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30 (6	0

Part	IV Capital Gains and L	osses for Tax on Investmen	t Income			
		ind(s) of property sold (e g , real estate, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day, y	
1a						
<u>b</u>						
c						
<u>d</u>						
<u>е</u>				<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		(h) Gain or (loss) e) plus (f) minus (g)
<u>a</u>						
<u>b</u>						
d		· · · · · · · · · · · · · · · · · · ·		· ·		
<u>u</u>						
	Complete only for assets shown	ng gain in column (h) and owned by t	ne foundation	on 12/31/69	(I) Gai	ins (Col (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)	col (k),	but not less than -0-) or osses (from col (h))
а					=	
b						
c						
d						
<u>е</u>	<u></u>	()()			 -	
2	Capital gain net income or (r	nat canital incel (° '	o enter in Pa ter -0- in Pa		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections 12 line 8, column (c) (see instruction	ns). If (loss)), enter -0- ın (
		<u> </u>			3	<u></u>
Part		Section 4940(e) for Reduce te foundations subject to the sec	***			
Was t		his part blank. ction 4942 tax on the distributabualify under section 4940(e). Do n			pase period?	Yes No
1	Enter the appropriate amour	nt in each column for each year; s	see the instr	uctions before m	akıng any en	itries.
Cal	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ssets (c	(d) Distribution ratio col (b) divided by col (c))
	2013	2,525,00	0	1	7,648	143.0757
	2012	235,00	0	1	6,519	14.2260
	2011	2,124,80	0	3	8,949	54.5534
	2010	2,698,00	0	4	1,309	65.3126
	2009	3,042,00	0	11	3,638	26.7692
2		<u> </u>			. 2	303.9369
3		r the 5-year base period—divide tion has been in existence if less			1 1	60.7874
4	Enter the net value of nonch	arıtable-use assets for 2014 from	Part X, line	5	. 4	27,498
5	Multiply line 4 by line 3 .				. 5	1,671,532
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	1,671,532
8		s from Part XII, line 4				1,685,000
	If line 8 is equal to or greate Part VI instructions.	r than line 7, check the box in Pa	art VI, line 11	b, and complete	that part usii	ng a 1% tax rate. See the

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see it	nstru	ctio	าร)
1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
С	here > \checkmark and enter 1% of Part I, line 27b			
C	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-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			
6	Credits/Payments:			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	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			
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			
10 11	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			
Part				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		√
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	-ٽـــا		
	Instructions for the definition)?	1b		1
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ NONE (2) On foundation managers. ► \$ NONE			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers ► \$ NONE	 		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1
•	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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3		1
та b	If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b		N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		√
•	If "Yes," attach the statement required by General Instruction T.	-		-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	1	-
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	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
	DELAWARE. CONNECTICUT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			-
	complete Part XIV	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		1

Par	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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
14	Website address ► N/A The bests are in care of ► PETER LOYELL		9000	
17	The books are in care of ▶ PETER LOVELL Telephone no. ▶ 2 Located at ▶ 300 STAMFORD PLACE, STAMFORD, CT ZIP+4 ▶	0690		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the year		T.,	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authoritore a bank, securities, or other financial account in a foreign country?	î i	Yes	l .
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1).	16 If		✓
	"Yes," enter the name of the 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?		:	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	1	TEME	T 1
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			:
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	<u> </u>	✓
С	Organizations relying on a current notice regarding disaster assistance check here			
Ū	were not corrected before the first day of the tax year beginning in 2014?	1c		1
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		-	:
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)		N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	111/	-
Ŭ	► 20 , 20 , 20 , 20, 20			1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
	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			
	foundation had excess business holdings in 2014.)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
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?			
	character purpose that hat been removed from jeopardy before the first day of the tax year beginning in 2014;	4b	1	✓

	t VII-B Statements Regarding Activities	for W	hich Form	4720	May Be B	equire	d (continued)			ag
5a	During the year did the foundation pay or incur a			7/201	viay De II	equile	d (continued)	T		-
.	(1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration dreams.	o influe c election	nce legislatio	on 495	5), or to ca	arry on,	☐ Yes			
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)	dy, or c	other similar pritable, etc., o	ourpose organiz	es? ation desci	 ribed in	Yes 🗹 No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to compare the prevention of cruelty the cruelty the prevention of cruelty the c	, charita	able, scientifi	c, litera	ry, or educ	ational				
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice	regardiı	ng disaster as	ssistanc	e (see instr	uctions)	?	5b		1
С	Organizations relying on a current notice regards If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	he four	ndation claim	exem	otion from	the tax				
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?	funds,	directly or inc	directly	, to pay pre					ı
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.						∐ Yes	6b		_
	At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceeds		•				☐ Yes ☑ No	~-	N/A	ı
Par	t VIII Information About Officers, Direc	tors, T	rustees, Fo	ounda	tion Mana	agers,	Highly Paid E	mploy	ees,	•
	and Contractors									
1	List all officers, directors, trustees, foundation									
	(a) Name and address	hou	e, and average rs per week ed to position	``(Hfr	mpensation not paid, iter -0-)	emplo	Contributions to byee benefit plans erred compensation	(e) Expe	ense ace allowan	
STAT	EMENT 2									_
	·									
									-	_
2	Compensation of five highest-paid employed "NONE."	es (otn	er than thos	se inci	uded on II	ne 1 —	see instruction	s). If n	one,	E
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek ¯	(c) Compe	nsation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe	ense ac allowar	
NON	<u> </u>									
										-

Part VIII Information About Officers, Directors, Trustees, Foundation Managand Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b)	Type of service (c) Compensation
NONE	
otal 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 informat organizations and other beneficiaries served, conferences convened, research papers produced, etc	on such as the number of Expenses
1 NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	A-augt
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	
otal. Add lines i through 3	Form 990-PF (20
	rom aau-r r

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities b Average of monthly cash balances c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundation and certain foreign organizations check here ▶ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 4 Deduction from distributable amount (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 1 Amounts paid oacquire assets used (or held for use) directly in carrying out chantable, etc., purposes: a Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 3 Amounts sate aside for specific charitable projects that satisfy the: a Sultability test (prior IRS approval required). 3 Amounts set aside for specific charitable projects that satisfy the: a Sultability test (prior IRS approval required). 3 Amounts set aside for specific charitable projects that satisfy the:	ations,
a Average monthly fair market value of securities b Average of monthly cash balances c Fair market value of all other assets (see instructions) c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for chantable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. b Income tax for 2014. (This does not include the tax from Part VI.) 2 C Add lines 2a and 2b 2 C Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 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 1 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 3 b Cash distribution test (attach the required schedule)	
b Average of monthly cash balances c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for chantable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundational certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2014 from Part VI, line 5. 2a □ 1 2b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b □ 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 □ 3 4 Recoveries of amounts treated as qualifying distributions □ 4 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 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 IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 4 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 5 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 6 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., p	
b Average of monthly cash balances c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for chantable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundational certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2014 from Part VI, line 5. 2a □ 1 2b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b □ 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 □ 3 4 Recoveries of amounts treated as qualifying distributions □ 4 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 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 IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 4 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 5 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 6 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., p	
c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets. 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. 2 Tax on investment income for 2014 from Part VI, line 5. 2 Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions). 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 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. b Program-related investments—total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required). b Cash distribution test (attach the required schedule). 3 Bit Suitability test (prior IRS approval required).	27,917
d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets. 3 Subtract line 2 from line 1d. 4 Cash deemed held for chantable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2 Tax on investment income for 2014 from Part VI, line 5. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 5 Add lines 3 and 4. 6 Deduction from distributable amount (see instructions). 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 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. 4 Program-related investments—total from Part IX-B. 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. 3 Amounts set aside for specific charitable projects that satisfy the: a Sutability test (prior IRS approval required). 3 Acab distribution test (attach the required schedule). 3 Botal distribution test (attach the required schedule).	
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets. 2 3 Subtract line 2 from line 1d. 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. b Income tax for 2014. (This does not include the tax from Part VI.) 2 Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 5 Add lines 3 and 4. 6 Deduction from distributable amount (see instructions). 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 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. a Expenses, contributions, gifts, etc. — total from Part IX-B. Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. 3 Amounts set aside for specific charitable projects that satisfy the: a Suttability test (prior IRS approval required). 5 Cash distribution test (attach the required schedule). 3 Bo	27,917
1c (attach detailed explanation). 2 Acquisition indebtedness applicable to line 1 assets. 3 Subtract line 2 from line 1d. 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1. 4 Recoveries of amounts treated as qualifying distributions. 4 Add lines 3 and 4. 6 Deduction from distributable amount (see instructions). 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 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 Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26. 1a Expenses, contributions, gifts, etc. — total from Part I, column (d) in carrying out charitable, etc., purposes. 3 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. 4 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required). 5 Cash distribution test (attach the required schedule).	
2 Acquisition indebtedness applicable to line 1 assets. 3 Subtract line 2 from line 1d. 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5. b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b. 3 Distributable amount before adjustments. Subtract line 2c from line 1. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 4 Recoveries of amounts treated as qualifying distributions. 5 Add lines 3 and 4. 6 Deduction from distributable amount (see instructions). 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) 1 Amounts pard (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26. 1a Program-related investments—total from Part IX-B. 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. 3 Amounts set aside for specific charitable projects that satisfy the: a Sutability test (prior IRS approval required). 5 Cash distribution test (attach the required schedule). 3 Abounts set aside for specific charitable projects that satisfy the: a Sutability test (prior IRS approval required).	
3 Subtract line 2 from line 1d. 4 Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6. 2a Tax on investment income for 2014 from Part VI, line 5 . 2a □ lincome tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b □ 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 . 3 □ 4 Recoveries of amounts treated as qualifying distributions . 4 □ 4 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □ 5 □	
Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see instructions). Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	27,917
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5 6	
Part XI	419
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6	27,498
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations check here ▶ □ and do not complete this part.) 1 Minimum investment return from Part X, line 6	1,375
1 Minimum investment return from Part X, line 6	
Tax on investment income for 2014 from Part VI, line 5	1,375
c Add lines 2a and 2b	
3 Distributable amount before adjustments. Subtract line 2c from line 1	
4 Recoveries of amounts treated as qualifying distributions	
5 Add lines 3 and 4	1,375
Deduction from distributable amount (see instructions)	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	1,375
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	
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	-
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1,375
a Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	
a Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	
b Program-related investments—total from Part iX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 1b 1c	1,685,000
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-,,,
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	
a Suitability test (prior IRS approval required)	
b Cash distribution test (attach the required schedule)	
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4	1,685,000
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	
Enter 1% of Part I, line 27b (see instructions)	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	1,685,000
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	the foundation

Part	XIII Undistributed Income (see instruct	ions)			
1	Distributable amount for 2014 from Part XI, line 7	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
_					1,375
2	Undistributed income, if any, as of the end of 2014				
a	Enter amount for 2013 only				
Ъ	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2014:				
a	From 2009	⊣			
b	From 2010	⊣			
C	From 2011	⊣ I			
d e	From 2012				
f	Total of lines 3a through e	⊣ - ·			
4	Qualifying distributions for 2014 from Part XII,	10,613,398			
•	line 4: ► \$ 1,685,000				
а	Applied to 2013, but not more than line 2a .				
-	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				1,375
e	Remaining amount distributed out of corpus	1,683,625			
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	12,297,023			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed		<u> </u>		
	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		0		
e	Undistributed income for 2013. Subtract line				1
	4a from line 2a. Taxable amount-see				
	instructions			0	
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2015				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				'
	Excess distributions carryover from 2009 not				
8	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2015.				
J	Subtract lines 7 and 8 from line 6a]	Ī
10	Analysis of line 9:	12,297,023		 	
10	,	<u>.</u>			
a b	Excess from 2010 2,694,93 Excess from 2011 2,122,85	_			!
C	Excess from 2012				1
d	Excess from 2013 2,524,11				
e	Excess from 2014 1,683,62				
-		· · ·	1	1	I

Form 99	90-PF (2014)					Page 10
Part		tions (see instr	uctions and Part	VII-A, question 9	9)	
1a	If the foundation has received a ruling	g or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo				L	
b	Check box to indicate whether the four		e operating founda		ection 4942(j)(3) or 🔲 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4) 0040	Prior 3 years	1	(e) Total
	investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
h	each year listed		-	-	ļ	
	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:					
а	"Assets" alternative test-enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
D	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		İ			
	investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public			-		
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization			<u> </u>		
	(4) Gross investment income				<u> </u>	_ _
Part				the foundation I	nad \$5,000 or mo	ore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation			04 611 111		
d	List any managers of the foundation before the close of any tax year (but of					by the foundation
NONE		nny ii they have c	ontributed more ti	nan \$5,000). (See :	section 507 (d)(2).)	
NONE b	List any managers of the foundation	who own 10% o	or more of the sto	ok of a corporation	on (or on oqually la	ran portion of the
_	ownership of a partnership or other el	ntity) of which the	foundation has a	10% or greater in	terest	ige portion of the
NONE		,,		,		
2	Information Regarding Contribution	. Grant. Gift. Lo	an Scholarshin	etc. Programs:		
	Check here ▶ ☑ If the foundation				organizations and	does not accept
	unsolicited requests for funds. If the fother conditions, complete items 2a,	oundation makes	gifts, grants, etc.	(see instructions)	to individuals or or	ganizations under
	The name, address, and telephone nu		ddress of the pers	on to whom applie	cations should be a	ddressed:
	,	a	23,000 or allo pero	ол со многи аррис	Janone Should be a	
b	The form in which applications should	be submitted ar	id information and	materials they sho	ould include:	
С	Any submission deadlines:					
	A				· · · · · · · · · · · · · · · · · · ·	
đ	Any restrictions or limitations on av	vards, such as b	by geographical a	ireas, charitable f	ields, kinds of inst	titutions, or other

factors:

3	Grants and Contributions Paid During	the Year or Approve	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
STAT	EMENT 3	N/A		STATEMENT 3	1,685,000
			İ		
]		
	Total			<u> </u>	3a 1,685,000
b	Approved for future payment				
	Total	<u> </u>	·		2h

Pai	rt <u>X</u> \	VI-A Analysis of Income-Producing Ac	rivities .				
Ente	r gro	ess amounts unless otherwise indicated.		usiness income	Excluded by secti	on 512, 513, or 514	(e) Related or exempt
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
1	Pro	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	а	NONE	-				
	b						
	C						
	d			<u> </u>	ļ		
	e 4						
	' 	Face and contracts from accommon to the second	ļ				
2	_	Fees and contracts from government agencies mbership dues and assessments	<u> </u>	-	-		
2 3		mbership dues and assessments erest on savings and temporary cash investments			-		
4		idends and interest from securities					
5		rental income or (loss) from real estate:			-		
		Debt-financed property					
		Not debt-financed property					
6	Net	rental income or (loss) from personal property					
7		ner investment income					
8		n or (loss) from sales of assets other than inventory					
9		t income or (loss) from special events			ļ		
10		oss profit or (loss) from sales of inventory			-		
11		ner revenue: a			<u> </u>		ļ
	b c			-	1		
	d				 		
	e				-	-	
12		ototal. Add columns (b), (d), and (e)			_		
		hall Andre 10 and man (b) (d) and (a)		L.		13	·
13	Tot	tal. Add line 12, columns (b), (d), and (e)				. 13	
13 (See	wor	ksheet in line 13 instructions to verify calculation	ıs.)				
13 (See Pa	wor	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) Accomplish m	nent of Exemp	ot Purposes_		
13 (See Pa	wor	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the ctions)
13 (See Pa	wor rt X e No	VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplish m	nent of Exemp	ot Purposes_		mportantly to the otions)

Part	XVIÌ			sfers To and Transa	ctions and I	Relationshi	ps With I	Noncha	ritabl		90.0
	DJH		ganizations			_ Al			1	Van	N _a
	ın sed	ne organization of ction 501(c) of th nizations?	ne Code (other than	engage in any of the foll section 501(c)(3) organi	zations) or in s	y other organection 527, r	elating to p	scribed		Yes	NO
	_	ransfers from the reporting foundation to a noncharitable exempt organization of:									
	··· · · ·								1a(1)		/
		ther assets .		• • • • • • •					1a(1)		▼
		r transactions:		• • • • • • •				• •	10(2)		
			a noncharitable exe	mnt organization					1b(1)		- <u>-</u>
				able exempt organization					1b(2)		✓
				er assets		• • •			1b(3)		
		eimbursement a							1b(4)		
		oans or loan gua	-				• • •	• •	1b(5)		▼
		_		nip or fundraising solicita				• •	1b(6)	-	<u> </u>
				sts, other assets, or paid					1c		
				s," complete the follow						four m	arkat
				ces given by the report							
				ement, show in column							
(a) Line		(b) Amount involved		naritable exempt organization		ription of transfe					
	- +		N/A		(0, 5000			10, 2112 011		ungum	
			IVA			_					-
											
	-										
						· 					
						· _					
				_							
	-							–		-	
		-			•						
					-						
	<u> </u>										
										_	
							·				
		-		 :							
2a	ls the	e foundation dire	L	filiated with, or related	to one or mo	re tay-eyemi	ot organiza	atione			
				other than section 501(c					٦ Yes	. [7]	No
			e following schedule		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , ,		_ 103	, 🖭	140
		(a) Name of organ	<u>_</u>	(b) Type of organi	zation		(c) Descriptio	n of relatio	nship		
N/A		(-,		N/A		N/A	(0) = 000				
19/7	-			NA		IN/A					
		·	·			-					
	Unde	er penalties of periury. I	declare that I have examine	ed this return, including accompa	nying schedules and	d statements, and	to the best of	my knowle	dge and	belief. if	is true
Sign	corre	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here	2	Jan Altri	2 Contra	1 14-3- 2015 10 = C-				May the I			
1 101 C	Sign	ature of officer or trus	stee	Date	Title	111		(see instru			
	J.9.1	Print/Type preparer		Preparer's signature		Date			PTIN	-	
Paid		, , po propuler				5010	Chec	k ∐ lif			
Prepa					self-empl						
Use C	nly	Firm's name			Firm's EIN ▶						
		Firm's address ▶ Phone no							0 DE		

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2014

Employer identification number

ODYSSE	DDYSSEYRE FOUNDATION 20-8493704							
Organization type (check one):								
Filers o	f:	Section:						
Form 990 or 990-EZ		☐ 501(c)(501(c)() (enter number) organization					
		4947(a)(1) non	exempt charitable trust not treated as a private fou	undation				
		☐ 527 political o	rganization					
Form 99	90-PF	√ 501(c)(3) exen	npt private foundation					
		☐ 4947(a)(1) non	exempt charitable trust treated as a private founda	ition				
		☐ 501(c)(3) taxat	ble private foundation					
Note. Construction	ions.	'), (8), or (10) organi	zation can check boxes for both the General Rule a	and a Special Rule. See				
Genera ✓	For an organization	or property) from an	0-EZ, or 990-PF that received, during the year, con y one contributor. Complete Parts I and II. See inst					
Special	Rules							
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) and that received from	n 501(c)(3) filing Form 990 or 990-EZ that met the 3 d 170(b)(1)(A)(vi), that checked Schedule A (Form 9 any one contributor, during the year, total contributorm 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization Employer identification number ODYSSEYRE FOUNDATION 20-8493704

Part I	ontributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	ODYSSEYRE HOLDINGS CORP 300 FIRST STAMFORD PLACE STAMFORD, CT 06902	\$ <u>1,685,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		 \$	Person					

OdysseyRe Foundation FEIN: 20-8493704 Form 990-PF / Part VII-B, Line 1(a)3 and 1b For the Tax Year Ended 12/31/14

The Foundation accepted bookkeeping services from a disqualified person at no charge. This act qualifies as an exception described in Reg. Sec. 53-4941(d)-3.

OdysseyRe Foundation FEIN: 20-8493704

Form 990-PF / Part VIII, Section 1 Information About Officers and Directors

For the Tax Year Ended 12/31/14

(a)	(b) Title and Average	(c)	(d) Employee	(e) Expense	
Name & Address	Number of Hours	Compensation	Benefits	Account	
V. Prem Watsa	Director 1/2 Hour	0	0	0	
Andrew Barnard	Director 1/2 Hour	0	0	0	
Brandon Sweitzer	Chairperson 1/2 Hour	0	0	0	
Jan Christiansen	Treasurer 1/2 Hour	0	0	0	
Peter Lovell	Secretary 1/2 Hour	0	0	0	
Kirk Reische	Assistant Secretary 1/2 Hour	0	0	0	
Janine Walter	Grants Review Officer 1/2 Hour	0	0	0	

The address for all Officers and Directors is:

300 First Stamford Place Stamford, CT 06902

OdysseyRe Foundation FEIN: 20-8493704 Form 990-PF / Part XV Grants and Contributions For the Tax Year Ended 12/31/14

Recipient	Relationship	p Status	Purpose	Amount	
AmeriCares Free Clinics, Inc. 88 Hamilton Ave. Stamford, CT 06902	N/A	Public Charity	Free medical clinics for uninsured	\$	300,000.00
AmeriCares Foundation, Inv.	N/A	Public Charity	Emergency response to natural disasters	\$	100,000.00
88 Hamilton Ave. Stamford, CT 06902					
Fundacion Pro-Departamento de Pediatria Onco Hos Uni a Ortiz Inc PO Box 19600 Fernandez Juncos Station San Juan, PR 00910	N/A	Public Charity	Unrestricted Grant for Operating Costs	\$	10,000.00
Intercession Group, Inc. 1037 Mariners Dr Warsaw, IN 46582	N/A	Public Charity	Purchase of land and construction of a school and agricultural facility for underprivileged Haitian children	\$	100,000.00
Pediatric Cancer Treatment Foundation of America 511 B1 Smokey Park Hwy Ste 165 Candler, NC 28715	N/A	Public Charity	Unrestricted Grant for Operating Costs	\$	100,000.00
Stamford Health System PO Box 9317 Stamford, CT 06904	N/A	Public Charity	Emergency department and trauma center construction	\$	1,000,000.00
The Actuarial Foundation 475 North Martingale Road Suite 600 Schaumburg, IL 60173	N/A	Public Charity	Unrestricted Grant for Operating Costs	\$	25,000.00

Recipient	Relationsh	ip Status	Purpose	Amoun	t
Treatment Advocacy Center	N/A	Public Charity	Unrestricted Grant for Operating Costs	\$	50,000.00
			653.5	\$	1,685,000.00

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

► File a senarate application for each return

OMB No. 1545-1709

If you are filling for an Auttomatic 3-Month Extension, complete only Part I and check this box. □		t of the Treasury venue Service	▶ Information about Form 886		structions is at www.		ı		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension of time. You can electronically file Form 8868. If you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional not automatic) 3-month extension of time. You can electronically file Form 890 Time for the property of the form 890-Time format (each structions). For more details on the electronic filing of this form, visit www.ris.gov/effile and click on e-file for Charities & Nonprofits. Part II Automatic 3-Month Extension of Time. Only submit original (not copies needed). All other corporations (including 1120-C filers), partnerships. REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or print Type or the file formatic filers of the formatic filers, partnerships. REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions. Dividence filer's identifying number, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. Scoal security number (SiN) The filer's identifying number, see instructions. Scoal security number (SiN) Number, street, and room or suite no. If a P-O, box, see instructions. The filer's identifying number (SiN) Sc	• If you	are filing for	an Automatic 3-Month Extension, c	omplete o	nly Part I and chec	k this box		. .	▶ 🗍
Electronic filling (e-file). You can electronically file Form 8988 if you need a 3-month automatic extension of time to file 6 months for acceparation required to file form 890-7, or an additional ford automatic) 3-month sectation of time You called the forms 8888 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8970, Information Return for Transfers Associated With Certain Personal Benefic Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, viat www.ris.gov/felie and click on e-file for Charities & Nonprofits. Part II Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-7 and requesting an automatic 6-month extension—check this box and complete Part I only. A corporation required to file Form 990-7 and requesting an automatic 6-month extension—check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions. ODYSSEYRE FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions. SCORESEYRE FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions. STAMFORD, CT 06902 City, town or post office, state, and ZIP code For a foreign address, see instructions. STAMFORD, CT 06902 There the Return code for the return that this application is for (file a separate application for each return) Is Form 4720 (individual) OD 1 STAMFORD, CT 06902 There are a see instructions of the file in the fi									_
a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part I with the exception of ma870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visat www.res.gov/efile and clock on e-file or Charlies & Nonprofiss. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 8-month extension—check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 700-4 to request an extension of time to file income tax returns. Employer identification unimber (EIN) or DIVSSEYRE FOUNDATION	Do not	complete Pa	art II unless you have already been g	ranted an a	automatic 3-month e	extension on a previou	sly fil	ed Fo	rm 8868.
A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete part lonly	a corpo 8868 to Return	ration require request an for Transfer	ed to file Form 990-T), or an additional extension of time to file any of the file associated With Certain Personal	al (not auto orms listed Benefit C	matic) 3-month extended in Part II contracts, which mu	ension of time. You can with the exception of ust be sent to the IR	n ele Form S in	ctronio n 8870 pape	cally file Form 0, Information or format (see
A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete part lonly	Part I	Autom	atic 3-Month Extension of Time	Only sub	omit original (no co	ppies needed).			
Type or print File by the Audit of SEP (19) or 10 ON SEVRE FOUNDATION Number, street, and room or other filer, see instructions. ON SEVRE FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions. STAMFORD PLACE City, town or post office, state, and ZIP code For a foreign address, see instructions. STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for (file a separate application for each return) STAMFORD, CT 06902 Enter the Return code for the return that this application is for form 990-T (corporation) STAMFORD, CT 06902 The print 4720 (individual) O3 Form 4720 (other than individual) O3 Form 4720 (other than individual) O3 Form 4720 (other than individual) O4 Form 590-T (corporation) The mint of the organization does not have an office or place of business in the United States, check this box The books are in the care of ▶ ODYSSEY REINSURANCE COMPANV Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	A corporation Part I or All other	oration requinly	ired to file Form 990-T and reques	sting an a	utomatic 6-month	extension—check this			▶ 🗆
Name of exempt organization or other filer, see instructions. ODYSSEYRE FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SNN) Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SNN) Social security num	to me m	Come lax ret	urris.			Enter filer's identifying	num	ber. s	ee instructions
ONSSEYRE FOUNDATION File by the due date for due for due date for due for due date for due for date for due for date for due for date for date for date for date for date fo		. Name o	f exempt organization or other filer, see in	structions.					
Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN)		ODYSSI	EYRE FOUNDATION			20-8	49370)4	•
due date for Milling your return See Instructions. 200 FIRST STAMFORD PLACE	•	Numbe	r, street, and room or suite no. If a P.O. bo	x, see instr	ictions.	Social security number ((SSN)		
Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For Code Form 990 or Form 990-EZ Form 990-BL Discover Separate application Discover Separate application Discover Separate application Discover Separate application Discover Separate application Discover Separate application Discover Separate application Discover Separate application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Application Discover Separate Disposant Separate Discover Separate Discover Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Separate Disposant Disposant Separate Disposant Di	due date f		ST STAMFORD PLACE						
Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Is For Code Form 990 or Form 990-EZ O1 Form 990-T (corporation) O2 Form 990-T (corporation) O3 Form 4720 (individual) O3 Form 4720 (individual) O3 Form 4720 (individual) O4 Form 5227 O5 Form 6089 O5 Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6089 O6 Form 8870 O7 Form 990-T (sec. 401(a) or 408(a) trust) O6 Form 8870 O7 Form 990-T (sec. 401(a) or 408(a) trust) O8 Form 8870 O8 Form 990-T (sec. 401(a) or 908(a) trust) O8 Form 8870 O8 Form 8870 O8 Form 990-T (sec. 401(a) or 908(a) trust) O8 Form 8870 O8 Form 990-T (sec. 401(a) or 908(a) trust) O8 Form 8870 O8 Form 8870 O8 Form 990-T (sec. 401(a) trust) O8 Form 8870 O8 Form 990-T (sec. 401(a) trust) O8 Form 990-T (sec. 401(a) trust) O8 Form 8870 O8		City, to	wn or post office, state, and ZIP code For	a foreign a	ddress, see instruction	s.			
Application Is For Code Separation Sepa			ORD, CT 06902			<u>-</u>			
S For Code S For Code S For Code S For Code S For Code S For Code S For S90 or Form 990-EZ O1 Form 990-T (corporation) O7 O7 Form 990-BL O2 Form 1041-A O8 Form 4720 (individual) O9 Form 990-PF O4 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6069 11 Form 990-T (trust other than above) O6 Form 8870 12 S Form 6069 S F	Enter th	e Return cod	de for the return that this application is	s for (file a	separate application	n for each return) .			0 4
Form 990 or Form 990-EZ O1 Form 990-T (corporation) O7 Form 990-BL O2 Form 1041-A O8 Form 4720 (individual) O9 Form 990-PF O4 Form 5227 D5 Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6069 11 Form 990-T (trust other than above) O6 Form 8870 12 *The books are in the care of ▶ ODYSSEY REINSURANCE COMPANV Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 •If the organization does not have an office or place of business in the United States, check this box		ation			• •				
Form 990-BL 02 Form 1041-A 08 Form 4720 (Individual) 03 Form 4720 (Other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box		100 au Farra (200 57			4:			
Form 4720 (individual) Form 990-PF 04 Form 5227 10 Form 990-PF 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box			990-EZ						
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust) O5 Form 6069 11 Form 990-T (trust other than above) O6 Form 8870 12 • The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box			(/a.						
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) OB Form 8870 12 • The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box			ıaı)			nan individual)			
Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box ▶ □ • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ▶ □ and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☑ calendar year 20 14 or ▶ ☐ tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0 this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0 this part of the payment system). See instructions. 3c \$ 0 the cation. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment.			01(a) or 408(a) trust)						
• The books are in the care of ▶ ODYSSEY REINSURANCE COMPANY Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 • If the organization does not have an office or place of business in the United States, check this box									
Telephone No. ▶ 203-977-8025 Fax No. ▶ 203-965-7960 If the organization does not have an office or place of business in the United States, check this box	1 0/1/10		and their above,		7 0111 007 0				
a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☑ calendar year 20 14 or ▶ ☐ tax year beginning , 20 , and ending , 20 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0 b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 5 Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 6 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	Teleph If the control of this	none No. ► organization is for a Grou	203-977-8025 does not have an office or place of bo p Return, enter the organization's fou	Fi usiness in t r digit Groi	ax No. ► the United States, c up Exemption Numb	heck this box per (GEN)			this is
I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☑ calendar year 20 14 or ▶ ☐ tax year beginning , 20 , and ending , 20 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0 b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment				-	t of the group, chec	k this box	▶ [and	attach
2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 0 b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 5 Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 6 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	1 I	request an a until AUG or the organ	automatic 3-month (6 months for a co GUST 15 , 20 15 , to file the exer ization's return for:	rporation r	•	·		The e	extension is
nonrefundable credits. See instructions. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3a \$ 0 \$ 0 \$ 0 \$ 0	2 [f the tax yea Change in	r entered in line 1 is for less than 12 n accounting period	nonths, ch	eck reason: Initia		n	, ;	20 .
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment				0-T, 4720,	or 6069, enter the to	entative tax, less any			
estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3b \$ 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	_						<u>3a</u>	\$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment							3b	\$	0
Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	сĨ	Balance due	. Subtract line 3b from line 3a. Includ	e your pay	ment with this form,				
IDCTE INTO DO	Caution.	If you are go				s, see Form 8453-EO and			