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Form 990-PF

Return of Private Foundation

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

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation: CONSERVATION FOOD AND HEALTH FOUNDATION INC C/O GMA FOUNDATIONS. A Employer identification number: 22-2625024. B Telephone number: (617) 426-7080. G Check all that apply: Initial return, Final return, Address change. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$16,485,407. J Accounting method: Cash.

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26). Total revenue: 2,400,694. Total expenses: 2,149,750. Net investment income: 1,331,153.

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

<b>Part II Balance Sheets</b>		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	204,781	152,242	152,242		
	<b>2</b>	Savings and temporary cash investments . . . . .	3,201,709	1,111,427	1,111,427		
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>5</b>	Grants receivable . . . . .					
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>8</b>	Inventories for sale or use . . . . .					
	<b>9</b>	Prepaid expenses and deferred charges . . . . .	8,819				
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)					
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .					
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	<b>12</b>	Investments—mortgage loans . . . . .					
	<b>13</b>	Investments—other (attach schedule) . . . . .	1,544,845	4,351,738	4,351,738		
	<b>14</b>	Land, buildings, and equipment basis ▶ <u>3,839,958</u> Less accumulated depreciation (attach schedule) ▶ <u>2,912,522</u>	1,056,592	927,436	10,870,000		
<b>15</b>	Other assets (describe ▶ _____)						
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	6,016,746	6,542,843	16,485,407			
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .					
	<b>18</b>	Grants payable . . . . .					
	<b>19</b>	Deferred revenue . . . . .					
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b>	Other liabilities (describe ▶ _____)					
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	<b>24</b>	Unrestricted . . . . .					
	<b>25</b>	Temporarily restricted . . . . .					
	<b>26</b>	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>						
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .	3,264,098	3,264,098			
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	2,752,648	3,278,745				
<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	6,016,746	6,542,843				
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	6,016,746	6,542,843				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	6,016,746
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	250,944
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	275,153
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	6,542,843
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	6,542,843

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	493,128
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	921,009	15,674,203	0.058760
2012	1,004,468	15,686,880	0.064032
2011	1,029,409	15,732,221	0.065433
2010	928,003	15,662,045	0.059252
2009	813,603	15,371,858	0.052928

<b>2</b> Total of line 1, column (d).	<b>2</b>	0.300405
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.060081
<b>4</b> Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	<b>4</b>	15,915,415
<b>5</b> Multiply line 4 by line 3.	<b>5</b>	956,214
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b).	<b>6</b>	13,312
<b>7</b> Add lines 5 and 6.	<b>7</b>	969,526
<b>8</b> Enter qualifying distributions from Part XII, line 4.	<b>8</b>	1,067,685

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	13,312
<b>c</b>	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	13,312
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	<b>5</b>	13,312
<b>6</b>	Credits/Payments		
<b>a</b>	2014 estimated tax payments and 2013 overpayment credited to 2014	<b>6a</b>	31,453
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	10,750
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments Add lines 6a through 6d. . . . .	<b>7</b>	42,203
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	28,891
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> 28,891 <b>Refunded</b> <input checked="" type="checkbox"/>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ <u>0</u> <b>(2)</b> On foundation managers <input type="checkbox"/> \$ <u>0</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <u>0</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> 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? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MA _____		
<b>b</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? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> 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)? <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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).	<b>11</b>		<b>No</b>		
<b>12</b>	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)	<b>12</b>		<b>No</b>		
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> <u>HTTP //CFHFOUNDATION GRANTSMANAGEMENT08 COM</u>	<b>13</b>	<b>Yes</b>			
<b>14</b>	The books are in care of <b>▶</b> <u>GMA FOUNDATION INC</u> Telephone no <b>▶</b> <u>(617) 426-7080</u> Located at <b>▶</b> <u>77 SUMMER STREET BOSTON MA</u> ZIP+4 <b>▶</b> <u>02110</u>					
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <b>▶</b> <table border="1" style="display: inline-table;"><tr><td><b>15</b></td><td></td></tr></table>	<b>15</b>				
<b>15</b>						
<b>16</b>	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>		

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>1b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <b>▶</b> <input type="checkbox"/>	<b>1b</b>		
<b>1c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	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))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20___, 20___, 20___, 20___			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20___, 20___, 20___, 20___			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i> ) <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

<p><b>5a</b> During the year did the foundation pay or incur any amount to</p> <p><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p><b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p><b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes" to 6b, file Form 8870.</p> <p><b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<b>5b</b>		
	<b>6b</b>		<b>No</b>
	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PHILIP M FEARNSTIDE C/O GMA FOUND 77 SUMMER ST BOSTON, MA 02110	PRESIDENT/DIRECTOR 2 00	0	0	0
WENDY A FEARNSTIDE C/O GMA FOUND 77 SUMMER ST BOSTON, MA 02110	TREASURER/DIRECTOR 3 50	0	0	0
TRACY FEARNSTIDE C/O GMA FOUND 77 SUMMER ST BOSTON, MA 02110	SECRETARY 2 00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KEVIN WRIGHT 127 BROADWAY ARLINGTON, MA 02474	MAINT DIRECTOR 40 00	59,819	14,700	0

**Total** number of other employees paid over \$50,000.  0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and 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
WILLIAM REALTY AND MANAGEMENT LLC 466B TRAPELO ROAD BELMONT, MA 02478	PROPERTY MAMAGEMENT	97,852
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . .		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
<b>1</b>		
<b>2</b>		
All other program-related investments See instructions		
<b>3</b>		
<b>Total.</b> Add lines 1 through 3 . . . . .		0



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	2,948,292
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	2,335,080
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	10,874,410
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	16,157,782
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	16,157,782
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	242,367
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	15,915,415
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	795,771

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	795,771
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5. . . . .	<b>2a</b>	13,312
<b>b</b>	Income tax for 2014 (This does not include the tax from Part VI). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	13,312
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	782,459
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	25,000
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	807,459
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	807,459

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	1,067,685
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,067,685
<b>5</b>	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). . . . .	<b>5</b>	13,312
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	1,054,373

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7				807,459
<b>2</b> Undistributed income, if any, as of the end of 2014				
<b>a</b> Enter amount for 2013 only. . . . .			0	
<b>b</b> Total for prior years 20__ , 20__ , 20__		0		
<b>3</b> Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009. . . . .	813,603			
<b>b</b> From 2010. . . . .	938,664			
<b>c</b> From 2011. . . . .	1,038,470			
<b>d</b> From 2012. . . . .	1,014,616			
<b>e</b> From 2013. . . . .	164,333			
<b>f</b> Total of lines 3a through e. . . . .	3,969,686			
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <u>1,067,685</u>				
<b>a</b> Applied to 2013, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2014 distributable amount. . . . .				807,459
<b>e</b> Remaining amount distributed out of corpus	260,226			
<b>5</b> Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,229,912			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				0
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . . .	813,603			
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a. . . . .	3,416,309			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2010. . . . .	938,664			
<b>b</b> Excess from 2011. . . . .	1,038,470			
<b>c</b> Excess from 2012. . . . .	1,014,616			
<b>d</b> Excess from 2013. . . . .	164,333			
<b>e</b> Excess from 2014. . . . .	260,226			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2014</b>	<b>(b) 2013</b>	<b>(c) 2012</b>	<b>(d) 2011</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

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**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

GRANTS MANAGEMENT ASSOC ATTN PRENTI  
 77 SUMMER STREET  
 BOSTON, MA 02110  
 (617) 426-7080  
 PZINN@GMAFOUNDATIONS.COM

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**b** The form in which applications should be submitted and information and materials they should include

WRITTEN FORM THE CONSERVATION FOOD AND HEALTH FOUNDATION SUPPORTS SPECIAL PROJECTS AND PROGRAMS OF NON GOVERNMENT ORGANIZATIONS IN THREE PRIMARY FIELDS OF INTEREST CONSERVATION, FOOD AND HEALTH GRANTEES ARE EXPECTED TO MEET THE FOUNDATION'S REPORTING REQUIREMENTS WITHIN ONE YEAR OF THE PERVIOUS PROPOSAL APPLICATION RETURNING APPLICANTS SHOULD SUBMIT AN INTERIM REPORT WITH ALL COPIES OF THE PROPOSALS

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**c** Any submission deadlines

MARCH 1 AND SEPTEMBER 1 OF EACH YEAR

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

ORGANIZATIONS MUST BE CHARITABLE CORPORATIONS OR TRUSTS WHO ARE TAX-EXEMPT UNDER SECTION 501(C)(3) OF THE IRS CODE AND ARE PUBLICLY SUPPORTED UNDER SECTIONS (A)(1) OR 509 (A) (2) DIRECTORS WILL NOT ACCEPT MORE THAN ONE APPLICATION FROM AN ORGANIZATION IN THE SAME CALENDAR YEAR AND WILL NOT CONSIDER A PROPOSAL FROM AN ORGANIZATION PREVIOUSLY FUNDED UNTIL A FULL REPORT OF THE EXPENDITURES OF THE PREVIOUS GRANT HAS BEEN SUBMITTED

**Part XV** **Supplementary Information** (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3a</b> 997,967
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>▶ 3b</b> 0





**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
K-1 PASSTHROUGH ATLANTIC-DRACUT REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-HOLLISTON REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-MANSFIELD REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-PEABODY REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-QUINCY REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-SOUTHBOROUGH REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-STETSON REALTY LTD PTR	P		
K-1 PASSTHROUGH ATLANTIC-WALTHAM REALTY LTD PTR	P		
K-1 PASSTHROUGH SIGULER GUFF BRIC OPPORTUNITIES II ASW FUND, LLC			
K-1 PASSTHROUGH PAMLICO CAPITAL II ASP FUND, LLC			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
			-9,228
			-1,496
			-22,739
			-4,011
			569,761
			-14,143
			-4,789
			-3,579
			4,629
			-1,689

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-9,228
			-1,496
			-22,739
			-4,011
			569,761
			-14,143
			-4,789
			-3,579
			4,629
			-1,689

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

<b>(a)</b> List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
SALE OF PUBLICLY TRADED SECURITIES			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
105,774		125,362	-19,588

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) <b>or</b> Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			-19,588



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMAZON WATCH 2201 BROADWAY SUITE 508 OAKLAND,CA 96412	N/A	PC	PROGRAM SUPPORT	25,000
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA,PA 19102	N/A	PC	PROGRAM SUPPORT	25,000
CONCERN AMERICA 2015 N BROADWAY SANTA ANA,CA 92702	N/A	PC	PROGRAM SUPPORT	15,000
EARTHRIGHTS INTERNATIONAL 1612 K ST NW SUITE 401 WASHINGTON,DC 20006	N/A	PC	PROGRAM SUPPORT	20,000
ECOLOGY ACTION OF THE MIDPENINSULA FBO ECOPOL 5798 RIDGEWOOD ROAD WILLITS,CA 95490	N/A	PC	PROGRAM SUPPORT	25,000
ESPERANCA 1911 WEST EARLL DRIVE PHOENIX,AZ 85015	N/A	PC	PROGRAM SUPPORT	20,000
FELIDAE CONSERVATION FUND 110 TIBURAN BLVD SUITE 2 MILL VALLEY,CA 94941	N/A	PC	PROGRAM SUPPORT	24,000
FISCALIA DEL MEDIO AMBIENTE (FIMA) CONCEPCION 141 OF 901 SANTIAGO,METROPOLITANA 7500010 CI	N/A	PC	PROGRAM SUPPORT	27,825
GARDENS FOR HEALTH 9 AVON STREET CAMBRIDGE,MA 02138	N/A	PC	PROGRAM SUPPORT	26,080
GRAIN GIRONA 25 PRINCIPAL BARCELONA,BARCELONA 08010 SP	N/A	PC	PROGRAM SUPPORT	21,200
GUNUNG PALUNG ORANGUTAN CONSERVATION PROGRAM PO BOX 15680 BOSTON,MA 02421	N/A	PC	PROGRAM SUPPORT	30,000
HOPE THROUGH HEALTH INC PO BOX 605 MEDWAY,MA 02053	N/A	PC	PROGRAM SUPPORT	24,986
INTERNATIONAL RIVERS NETWORK 2054 UNIVERSITY AVENUE STE 300 BERKELEY,CA 94704	N/A	PC	PROGRAM SUPPORT	25,000
LINCOLN PARK ZOOLOGICAL SOCIETY 2001 NORTH CLARK STREET CHICAGO,IL 60614	N/A	PC	PROGRAM SUPPORT	19,941
MALI HEALTH ORGANIZING PROJECT PO BOX 426081 CAMBRIDGE,MA 02142	N/A	PC	PROGRAM SUPPORT	26,555
<b>Total . . . . .</b>				997,967

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MSI-US PO BOX 35528 WASHINGTON,DC 20033	N/A	SO I	PROGRAM SUPPORT	20,000
OCCUPATIONAL KNOWLEDGE INTERNATIONAL 4444 GEARY BLVD SUITE 300 SAN FRANCISCO,CA 94118	N/A	PC	PROGRAM SUPPORT	23,260
PACIFIC ENVIRONMENT 251 KEARNY STREET SUITE 201 SAN FRANCISCO,CA 94108	N/A	PC	PROGRAM SUPPORT	25,000
PASO PACIFICO PO BOX 1244 VENTURA,CA 93002	N/A	PC	PROGRAM SUPPORT	22,000
SAN MIGUEL CASA INC 2418 HARRIS BLVD AUSTIN,TX 78703	N/A	PC	PROGRAM SUPPORT	25,000
SAVE AMERICAS FOREST FUND 4 LIBRARY COURT SE WASHINGTON,DC 20003	N/A	PC	PROGRAM SUPPORT	25,000
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS (FOR ENVIRONMENTAL PAPER NETWORK) 23532 CALABASAS ROAD SUITE A CALABASAS,CA 91302	N/A	PC	PROGRAM SUPPORT	25,000
WINGS 1043 GRAND AVENUE 299 SAINT PAUL,MINNESOTA 55105 AC	N/A	PC	PROGRAM SUPPORT	15,000
ZOOLOGICAL SOCIETY OF SAN DIEGO PO BOX 120551 SAN DIEGO,CA 92112	N/A	PC	PROGRAM SUPPORT	19,960
ACATE AMAZON CONSERVATION PO BOX 15895 SAN FRANCISCO,CA 94115	N/A	PC	PROGRAM SUPPORT	9,000
AMIGOS HOSPITALITO ATITAN PO BOX 256 JONESPORT,ME 04649	N/A	PC	PROGRAM SUPPORT	17,500
HESPERIAN HEALTH GUIDES 1919 ADDISON SUITE 304 BERKELEY,CA 94704	N/A	PC	PROGRAM SUPPORT	15,000
HOHENHEIM UNIVERSITY GARBENSTR 13 STUTTGART,BADEN-WURTTENBERG 70599 GM	N/A	PC	PROGRAM SUPPORT	20,236
LAMBI FUND OF HATI 1050 CONNECTICUT AVE 10TH FLOOR WASHINGTON,DC 20036	N/A	PC	PROGRAM SUPPORT	17,500
LOUISIANA STATE UNIVERSITY 204 THOMAS BOYD HALL BATON ROUGE,LA 70803	N/A	PC	PROGRAM SUPPORT	15,000
<b>Total . . . . .</b>			<b>3a</b>	997,967

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LWALA COMMUNITY ALLIANCE PO BOX 60688 NASHVILLE,TN 37206	N/A	PC	PROGRAM SUPPORT	20,997
ONE ACRE FUND 1742 TATUM STREET FALCON HEIGHTS,MN 55113	N/A	PC	PROGRAM SUPPORT	25,000
PROXIMITY DESIGNS 1107 FAIR OAKES AVENUE 802 SOUTH PASADENA,CA 91030	N/A	PC	PROGRAM SUPPORT	24,940
RESTLESS DEVELOPMENT USA INC 99 PARK AVENUE STE 2200 NEW YORK,NY 10016	N/A	PC	PROGRAM SUPPORT	23,000
SEMILLA NUEVA 3909 CAMAS BOISE,ID 83705	N/A	PC	PROGRAM SUPPORT	19,100
SEND A COW 115 BLOOMINGDALE AVENUE WAYNE,PA 19087	N/A	PC	PROGRAM SUPPORT	17,940
THE SAINT LOUIS ZOO FOUNDATION ONE GOVERNMENT DRIVE SAINT LOUIS,MO 63110	N/A	PC	PROGRAM SUPPORT	25,755
TULANE UNIVERSITY 1555 POYDRAS STREET 10TH FL NEW ORLEANS,LA 70112	N/A	PC	PROGRAM SUPPORT	25,000
UNDER THE BAOBOB TREE INC 1380 MONROE STREET NW BOX 309 WASHINGTON,DC 20010	N/A	PC	PROGRAM SUPPORT	30,000
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE 661 SPEAR STREET BURLINGTON,VT 05405	N/A	PC	PROGRAM SUPPORT	28,492
UNIVERSITY OF FLORIDA 155 RESEARCH ROAD QUINCY,FL 32351	N/A	PC	PROGRAM SUPPORT	24,800
UNIVERSITY OF MARYLAND 2112 PLANT SCIENCES BLDG COLLEGE PARK,MD 20742	N/A	PC	PROGRAM SUPPORT	19,900
UNIVERSITY OF THE WEST INDIES UNIVERSITY DRIVE SAINT AUGUSTINE TD	N/A	PC	PROGRAM SUPPORT	15,000
VIRGINIA TECH WEST CAMPUS DRIVE BLACKSBURG,VA 24061	N/A	PC	PROGRAM SUPPORT	28,000
ZAMBIAN CARNIVORE PROGRAMME PO BOX 80 MFUWE,EASTERN PROVINCE ZA	N/A	PC	PROGRAM SUPPORT	20,000
<b>Total . . . . .</b>				997,967

**Form 990PF Part XVI-A Line 11 - Other revenue:**

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		<b>(e)</b> Related or exempt function income (See the instructions )
	<b>(a)</b> Business code	<b>(b)</b> Amount	<b>(c)</b> Exclusion code	<b>(d)</b> Amount	
<b>11</b> Other revenue					
<b>a</b> K-1 PASSTHROUGH FROM ATLANTIC-DRACUT REALTY LTD PTRS			14	3,897	
<b>b</b> K-1 PASSTHROUGH FROM ATLANTIC-GLADSTONE REALTY, LLC			14	7,162	
<b>c</b> K-1 PASSTHROUGH FROM ATLANTIC-HOLLISTON REALTY LLC			14	2,335	
<b>d</b> K-1 PASSTHROUGH FROM ATLANTIC MANSFIELD/SOMERVILLE LLC			14	52,422	
<b>e</b> K-1 PASSTHROUGH FROM ATLANTIC-PEABODY/WOBURN REALTY LLC			14	2,897	
<b>f</b> K-1 PASSTHROUGH FROM ATLANTIC - QUINCY REALTY LLC			14	9,105	
<b>g</b> K-1 PASSTHROUGH FROM ATLANTIC - STETSON REALTY LLC			14	122	
<b>h</b> K-1 PASSTHROUGH FROM TRI-NET REALTY			14	10,133	
<b>i</b> K-1 PASSTHROUGH FROM ATLANTIC - WALTHAM REALTY LLC			14	46,853	
<b>j</b> K-1 PASSTHROUGH FROM ATLANTIC - SOUTHBOROUGH REALTY LLC			14	67,105	
<b>k</b> K-1 PASSTHROUGH FROM PAMLICO CAPITAL II ASP FUND, LLC			14	-1,653	
<b>l</b> K-1 PASSTHROUGH FROM SIGULER GUFF OPPORTUNITIES II ASW FUND, LLC			14	-1,843	
<b>m</b> LAUNDRY INCOME			17	13,452	
<b>n</b> K-1 PASSTHROUGH FROM PAMLICO CAPITAL II ASP FUND, LLC			14	-24	

## TY 2014 Accounting Fees Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STEINBERG BUSINESS SERVICES	12,952	0		12,952

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2014 Depreciation Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
AUTO/TRANSPORTATION EQUIPMENT	2005-01-01	12,050	12,050	SL	5 000000000000	0	0		
BUILDINGS	1993-01-01	3,481,711	2,765,776	SL	27 500000000000	126,608	126,608		
MACHINERY AND EQUIPMENT	2011-09-01	12,738	5,540	SL	5 000000000000	2,548	2,548		
LAND	1993-01-01	333,459		L		0	0		

**TY 2014 Investments - Other Schedule**

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION  
 INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
WELLS FARGO SECURITIES	FMV	206,179	206,179
VARIOUS PARTNERSHIPS	FMV	1,210,632	1,210,632
VANGUARD MUTUAL FUNDS	FMV	2,934,927	2,934,927

**TY 2014 Land, Etc. Schedule**

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION  
 INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
AUTO/TRANSPORTATION EQUIPMENT	12,050	12,050	0	
BUILDINGS	3,481,711	2,892,384	589,327	10,870,000
MACHINERY AND EQUIPMENT	12,738	8,088	4,650	
LAND	333,459	0	333,459	



## TY 2014 Legal Fees Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	12,801	0		12,801
LEGAL FEES	1,372	1,372		0

# TY 2014 Other Expenses Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	1,000	0		1,000
DIRECTORS & OFFICERS' LIABILITY INSURANCE	1,394	0		1,394
WELLS FARGO FEES AND INVESTMENT EXPENSES	1,851	1,851		0
WIRE FEES	192	0		192
ADVERTISING	60	60		0
APPLIANCE REPLACEMENTS	21,382	21,382		0
AUTO & TRUCK EXPENSES	1,016	1,016		0
BANK FEES	547	547		0
CABINETS REPLACEMENTS	33,015	33,015		0
CREDIT REPORTS	442	442		0
UNIFORMS	1,084	1,084		0
INSURANCE	39,239	39,239		0
MAINTENANCE AND REPAIRS	152,647	152,647		0
MANAGEMENT FEES	97,852	97,852		0
OFFICE SUPPLIES	1,995	1,995		0
PAYROLL PROCESSING CHARGES	2,597	2,597		0
POSTAGE	647	647		0
OTHER SUPPLIES	1,808	1,808		0
TELEPHONE	4,798	4,798		0
TEMPORARY LABOR	120	120		0
UTILITIES	107,715	107,715		0

## TY 2014 Other Income Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION  
INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 PASSTHROUGH FROM ATLANTIC-DRACUT REALTY LTD PTRS	3,897	3,897	3,897
K-1 PASSTHROUGH FROM ATLANTIC-GLADSTONE REALTY, LLC	7,162	7,162	7,162
K-1 PASSTHROUGH FROM ATLANTIC-HOLLISTON REALTY LLC	2,335	2,335	2,335
K-1 PASSTHROUGH FROM ATLANTIC MANSFIELD/SOMERVILLE LLC	52,422	52,422	52,422
K-1 PASSTHROUGH FROM ATLANTIC-PEABODY/WOBURN REALTY LLC	2,897	2,897	2,897
K-1 PASSTHROUGH FROM ATLANTIC - QUINCY REALTY LLC	9,105	9,105	9,105
K-1 PASSTHROUGH FROM ATLANTIC - STETSON REALTY LLC	122	122	122
K-1 PASSTHROUGH FROM TRI-NET REALTY	10,133	10,133	10,133
K-1 PASSTHROUGH FROM ATLANTIC - WALTHAM REALTY LLC	46,853	46,853	46,853
K-1 PASSTHROUGH FROM ATLANTIC - SOUTHBOROUGH REALTY LLC	67,105	67,105	67,105
K-1 PASSTHROUGH FROM PAMLICO CAPITAL II ASP FUND, LLC	-1,653	-1,653	-1,653
K-1 PASSTHROUGH FROM SIGULER GUFF OPPORTUNITIES II ASW FUND, LLC	-1,843	-1,843	-1,843
LAUNDRY INCOME	13,452	13,452	13,452
K-1 PASSTHROUGH FROM PAMLICO CAPITAL II ASP FUND, LLC	-24		-24

**TY 2014 Other Increases Schedule****Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

<b>Description</b>	<b>Amount</b>
UNREALIZED GAIN ON INVESTMENTS	250,153
RECOVERY OF GRANT FUNDS FROM OPERATION ASHA	25,000

## TY 2014 Other Professional Fees Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION

INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRANTS ADMINISTRATION	41,379	0		41,379
PROFESSIONAL FEES - OTHER	1,193	1,193		0

# TY 2014 Taxes Schedule

**Name:** CONSERVATION FOOD AND HEALTH FOUNDATION  
 INC C/O GMA FOUNDATIONS

**EIN:** 22-2625024

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	32,500	0		0
FOREIGN TAX PAID	1,325	1,325		0
PAYROLL TAXES	11,583	11,583		0
VEHICLE EXCISE TAX	43	43		0
REAL ESTATE TAXES AND WATER TAX	256,505	256,505		0

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

**Schedule of Contributors**

OMB No 1545-0047

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

**2014**

Department of the Treasury  
Internal Revenue Service

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

**Name of the organization**

CONSERVATION FOOD AND HEALTH FOUNDATION  
INC C/O GMA FOUNDATIONS

**Employer identification number**

22-2625024

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

<b>Name of organization</b> CONSERVATION FOOD AND HEALTH FOUNDATION INC C/O GMA FOUNDATIONS	<b>Employer identification number</b> 22-2625024
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**Part I Contributors** (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	TRACY FEARNside JOSEPH MARGEVICIUS 1112 GREENWOOD AVE  PALO ALTO, CA 94301	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
2	PHILIP M FEARNside TRUST C/O GMA FOUNDATIONS 77 SUMMER ST  BOSTON, MA 02110	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
—	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )



**Name of organization**  
 CONSERVATION FOOD AND HEALTH FOUNDATION  
 INC C/O GMA FOUNDATIONS

**Employer identification number**  
 22-2625024

**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization  
CONSERVATION FOOD AND HEALTH FOUNDATION  
INC C/O GMA FOUNDATIONS

Employer identification number  
22-2625024

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____