



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



Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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

▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2014**

Open to Public Inspection

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

Name of foundation IDA BALLOU LITTLEFIELD MEMORIAL TRUST		<b>A Employer identification number</b>  22-2994936	
Number and street (or P O box number if mail is not delivered to street address) 50 KENNEDY PLAZA SUITE 1500		<b>B Telephone number</b> (see instructions)  (401) 274-2000	
City or town, state or province, country, and ZIP or foreign postal code PROVIDENCE, RI 02903		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 7,241,692		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments	163	163		
	<b>4</b> Dividends and interest from securities. . . . .	159,350	159,350		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	386,270			
	<b>b</b> Gross sales price for all assets on line 6a 1,141,514				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . .		386,270		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	545,783	545,783		
Operating and Administrative Expenses	<b>13</b> Compensation of officers, directors, trustees, etc	119,501	74,687		44,814
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule) . . . . .				
	<b>b</b> Accounting fees (attach schedule) . . . . .	3,200	3,200		0
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . .				
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .	725	725		0
	<b>23</b> Other expenses (attach schedule) . . . . .	20	20		0
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	123,446	78,632		44,814
	<b>25</b> Contributions, gifts, grants paid . . . . .	397,145			397,145
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	520,591	78,632		441,959
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	25,192			
	<b>b Net investment income</b> (if negative, enter -0-)		467,151		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	137,533	64,092	64,092
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	2,785,885	2,784,579	5,006,988
	c	Investments—corporate bonds (attach schedule). . . . .	2,100,089	2,200,028	2,170,612
	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) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,023,507	5,048,699	7,241,692	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .	0	0	
	Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24		Unrestricted . . . . .			
25		Temporarily restricted . . . . .			
26		Permanently restricted . . . . .			
Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
27		Capital stock, trust principal, or current funds . . . . .	5,023,507	5,048,699	
28		Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29		Retained earnings, accumulated income, endowment, or other funds	0	0	
30		Total net assets or fund balances (see instructions) . . . . .	5,023,507	5,048,699	
31		Total liabilities and net assets/fund balances (see instructions) . . .	5,023,507	5,048,699	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	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) . . . . .	1 5,023,507
2	Enter amount from Part I, line 27a . . . . .	2 25,192
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 5,048,699
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 5,048,699

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 )
1a	See Additional Data Table			
b				
c				
d				
e				

(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)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) 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	
a See Additional Data Table			
b			
c			
d			
e			

2	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 }	2	386,270
3	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 . . . . .	}	3	

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	393,997	6,985,018	0 056406
2012	410,766	6,577,305	0 062452
2011	399,652	6,673,031	0 059891
2010	449,059	6,533,543	0 068731
2009	441,701	6,216,784	0 071050

2	Total of line 1, column (d). . . . .	2	0 318530
3	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 . . . .	3	0 063706
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .	4	7,258,540
5	Multiply line 4 by line 3. . . . .	5	462,413
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	4,672
7	Add lines 5 and 6. . . . .	7	467,085
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	441,959

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

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	9,343
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-)		2	0
3		Add lines 1 and 2. . . . .		3	9,343
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	9,343
6		Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	608		
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 . . . . .	6d			
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	608
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8	123
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	8,858
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-AStatements Regarding Activities

1a	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? . . . . .	1a		No
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>	1b		No
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0			
2	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>	2		No
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? <i>If "Yes," attach a conformed copy of the changes.</i> . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
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	Yes	
7	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> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions): <input type="checkbox"/> RI			
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> . . . .	8b	Yes	
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)? <i>If "Yes," complete Part XIV.</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	10		No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of JOACHIM A WEISSFELD Telephone no (401) 274-2000 Located at 50 KENNEDY PLAZA SUITE 1500 PROVIDENCE RI ZIP +4 02903			
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.	15		
16	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?	16	Yes	No
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				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). Yes No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? Yes No 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 ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) 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		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) 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		
	(5) 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		
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)?		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	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 type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	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		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.			
7a	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		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

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
WILLIAM A VIAL	TRUSTEE	29,875	0	0
133 PROSPECT ST PROVIDENCE,RI 02906	2 65			
JOACHIM A WEISSFELD	TRUSTEE	29,875	0	0
50 KENNEDY PLAZA SUITE 1500 PROVIDENCE,RI 02903	4 00			
CITIZENS BANK OF RI	TRUSTEE	59,751	0	0
ONE CITIZENS PLAZA PROVIDENCE,RI 02903	3 00			
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
NONE				
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
NONE		
Total 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
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

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



Part X

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

1	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. . . . .	1a	7,205,322
b	Average of monthly cash balances. . . . .	1b	163,754
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	7,369,076
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	7,369,076
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	110,536
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,258,540
6	Minimum investment return. Enter 5% of line 5. . . . .	6	362,927

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.)

1	Minimum investment return from Part X, line 6. . . . .	1	362,927
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	9,343
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	9,343
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	353,584
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	353,584
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	353,584

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	441,959
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	441,959
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	441,959
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
1 Distributable amount for 2014 from Part XI, line 7				353,584
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				134,202
b From 2010. . . . .				125,214
c From 2011. . . . .				68,125
d From 2012. . . . .				85,115
e From 2013. . . . .				51,086
f Total of lines 3a through e. . . . .	463,742			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 441,959				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				353,584
e Remaining amount distributed out of corpus	88,375			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	552,117			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2013 Subtract line 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). . . . .	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	134,202			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	417,915			
10 Analysis of line 9				
a Excess from 2010. . . .				125,214
b Excess from 2011. . . .				68,125
c Excess from 2012. . . .				85,115
d Excess from 2013. . . .				51,086
e Excess from 2014. . . .				88,375

Part XIVPrivate 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)

☐ 4942(j)(3) or ☐ 4942(j)(5)

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

Part XVSupplementary 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) )

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

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.

a

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

JOACHIM A WEISSFELD  
50 KENNEDY PLAZA SUITE 1500  
PROVIDENCE, RI 02903  
(401) 274-2000

b

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

LETTER

c

Any submission deadlines

NONE

d

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

NONE

Form 990-PF (2014)

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)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	397,145
b Approved for future payment				
Total . . . . .			3b	0

## Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

## Part XVII

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash.		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization.		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	***** _____ Signature of officer or trustee	2015-05-14 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name JOACHIM A WEISSFELD	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P01394610
	Firm's name <input checked="" type="checkbox"/> HINCKLEY ALLEN & SNYDER LLP			Firm's EIN <input checked="" type="checkbox"/> 05-0262309	
	Firm's address <input checked="" type="checkbox"/> 50 KENNEDY PLAZA SUITE 1500 PROVIDENCE, RI 02903			Phone no (401) 274-2000	

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 )
50K BNY MELLON	P		2014-01-31
250 SHS MCDONALDS CORP	P		2014-03-03
250 SHS COCA-COLA CO	P		2014-03-03
500 SHS WALMART STORES	P		2014-03-03
1000 SHS APT INVT & MGMT CORP	P		2014-03-03
500 SHS JOHNSON & JOHNSON	P		2014-03-30
500 SHS VERIZON COMMUNICATIONS	P		2014-03-03
850 SHS DOMINION RES INC	P		2014-03-03
71 SHS DUKE ENERGY CORP	P		2014-03-03
1000 SHS GAP INC	P		

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)
50,000		50,484	-484
23,940		13,727	10,213
9,448		9,375	73
37,349		24,825	12,524
29,681		31,180	-1,499
45,449		6,447	39,002
23,141		8,252	14,889
59,186		25,062	34,124
5,028		4,960	68
43,809		32,609	11,200

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	
			-484
			10,213
			73
			12,524
			-1,499
			39,002
			14,889
			34,124
			68
			11,200

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 )
1250 SHS BECTON DICKINSON & CO	P		2014-03-03
11217 468 TEMPLETON GLOBAL BOND	P		2014-05-12
250 KNOWLES CORP	P		2014-07-31
1375 CITIGROUP INC	P		2014-07-31
1750 BB&T	P		2014-07-31
50 SHS TIME INC NEW	P		2014-07-31
1000 SHS DOLLAR TREE INC	P		2014-07-31
994 SHS CDK GLOBAL INC	P		2014-10-21
1158 VANGUARD FTSE EMER MKT FUND	P		2014-11-17
2000 SHS ISHARES CORP S&P SMALL CAP	P		2014-11-17

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)
143,460		103,060	40,400
147,846		155,179	-7,333
7,300		3,097	4,203
68,254		66,534	1,720
65,632		66,202	-570
1,199		1,024	175
54,931		15,269	39,662
25		2	23
48,035		53,912	-5,877
225,375		84,044	141,331

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	
			40,400
			-7,333
			4,203
			1,720
			-570
			175
			39,662
			23
			-5,877
			141,331



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 )
CAPITAL GAINS DIVIDENDS	P		

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)
52,426			52,426


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	
			52,426


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> Paid during the year				
AMOS HOUSE 415 FRIENDSHIP STREET PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	15,000
BARRINGTON SENIOR CENTER 281 COUNTY ROAD BARRINGTON, RI 02806	NONE	PUBLIC	OUTREACH PROGRAM	2,000
BETHANY HOME 111 SO ANGELL STREET PROVIDENCE, RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	6,000
BOYS AND GIRLS CLUBS OF GREATER PROVIDENCE 550 WICKENDEN STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	12,000
BRADLEY HOSPITAL 1011 VETERANS MEMORIAL PKWY EAST PROVIDENCE, RI 02915	NONE	PUBLIC	PROGRAM SUPPORT	5,000
BUTLER HOSPITAL 345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	9,335
CAMP RUGGLES 133 STONE DAM ROAD NORTH SCITUATE, RI 02857	NONE	PUBLIC	CAMPER-SHIPS FOR LOW INCOME FAMILIES AND GROUP HOMES	3,400
CENTER FOR SE ASIANS 270 ELMWOOD AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	5,000
CHILDREN'S FRIEND AND SERVICE 153 SUMMER STREET PROVIDENCE, RI 02903	NONE	PUBLIC	HEAD START PROGRAM	5,000
CHRISTIAN POWER HOUSE MINISTRY 87 ALTHEA STREET PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	1,000
CLARKE SCHOOL FOR THE DEAF ROUND HILL ROAD NORTHAMPTON, MA 01060	NONE	PUBLIC	PROGRAM SUPPORT	10,000
COMMUNITY BOATING CENTER PO BOX 5849 PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	2,000
COMMUNITY PREPARATORY SCHOOL 126 SOMERSET STREET PROVIDENCE, RI 029071041	NONE	PUBLIC	SCHOLARSHIPS	10,000
CONNECTING FOR CHILDREN 46 HOPE STREET WOONSOCKET, RI 02895	NONE	PUBLIC	PROGRAM SUPPORT	10,000
CRANSTON PUBLIC LIBRARY 140 SOCKANOSSET CROSSROAD CRANSTON, RI 02920	NONE	PUBLIC	PROGRAM SUPPORT	1,000
<b>Total . . . . .</b>  <b>3a</b>				397,145


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>				
CROSSROADS RI 160 BROAD STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	10,000
DORCAS INTERNATIONAL INSTITUTE 220 ELMWOOD AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	15,000
FIRST WORKS 270 WESTMINSTER STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	5,000
GIRL SCOUTS OF RHODE ISLAND 125 CHARLES STREET PROVIDENCE, RI 02904	NONE	PUBLIC	PROGRAM SUPPORT	5,000
HAMILTON HOUSE 276 ANGEL STREET PROVIDENCE, RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	3,000
HASBRO CHILDRENS HOSPITAL 593 EDDY STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	15,000
HAVEN OF GRACE MINISTRIES PO BOX 224 WOONSOCKET, RI 02895	NONE	PUBLIC	PROGRAM SUPPORT	4,000
HILLSIDE SCHOOL 404 ROBIN HILL ROAD MARLBOROUGH, MA 01752	NONE	PUBLIC	PROGRAM SUPPORT	1,500
HOMEFRONT HEALTH CARE 235 BRANCH AVENUE PROVIDENCE, RI 02904	NONE	PUBLIC	PROGRAM SUPPORT	5,000
HOPE ALZHEIMERS CENTER 25 BRAYTON AVENUE CRANSTON, RI 02920	NONE	PUBLIC	PROGRAM SUPPORT	5,000
HOUSE OF HOPE 3188 POST ROAD WARWICK, RI 02886	NONE	PUBLIC	PROGRAM SUPPORT	7,500
IN-SIGHT 43 JEFFERSON BLVD SUITE 31 WARWICK, RI 028886400	NONE	PUBLIC	PROGRAM SUPPORT	5,000
KENNEDY-DONOVAN CENTER ONE COMMERCIAL STREET FOXBORO, MA 02035	NONE	PUBLIC	PROGRAM SUPPORT	2,000
MCAULEY HOUSE PO BOX 73195 PROVIDENCE, RI 02908	NONE	PUBLIC	PROGRAM SUPPORT	7,500
MEALS ON WHEELS 70 BATH STREET PROVIDENCE, RI 02908	NONE	PUBLIC	PROGRAM SUPPORT	1,000
<b>Total . . . . .</b>  <b>3a</b>				397,145

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>				
MEMORIAL HOSPITAL PO BOX H PROVIDENCE,RI 02901	NONE	PUBLIC	PROGRAM SUPPORT	17,000
MIRIAM HOSPITAL 164 SUMMIT AVENUE PROVIDENCE,RI 02906	NONE	PUBLIC	PURCHASE RECLINING RECOVERY CHAIRS	20,000
MOUNT HOPE LEARNING CENTER 140 CYPRESS STREET PROVIDENCE,RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	1,000
NARRAGANSETT COUNCIL BOY SCOUTS OF AMERICA PO BOX 14777 EAST PROVIDENCE,RI 02914	NONE	PUBLIC	EMERGENCY PAVILION PROJECT	5,000
NATIONAL SOCIETY OF THE COLONIAL DAMES 2 COGGESHALL WAY MIDDLETOWN,RI 02842			VIDEO ON RI HISTORY	410
NEWPORT ART MUSEUM 76 BELLEVUE AVENUE NEWPORT,RI 02840	NONE	PUBLIC	PROGRAM SUPPORT	5,000
PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON STREET WATERTOWN,RI 02472	NONE	PUBLIC	PROGRAM SUPPORT	40,000
PRESERVATION SOCIETY OF PAWTUCKET PO BOX 735 PAWTUCKET,RI 02862	NONE	PUBLIC	PROGRAM SUPPORT	3,000
PROVIDENCE ATHENAEUM 251 BENEFIT STREET PROVIDENCE,RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	7,500
PROVIDENCE PUBLIC LIBRARY 150 EMPIRE STREET PROVIDENCE,RI 02903	NONE	PUBLIC	EARLY LITERACY LEARNING CENTER	5,000
RE-FOCUS 1228 WESTMINSTER STREET PROVIDENCE,RI 02909	NONE	PUBLIC	PROGRAM SUPPORT	2,500
REACH OUT AND READ PO BOX 603442 PROVIDENCE,RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	3,000
RHODE ISLAND COMMUNITY FOOD BANK 200 NIAN TIC AVENUE PROVIDENCE,RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	5,000
RHODE ISLAND FREE CLINIC 655 BROAD STREET PROVIDENCE,RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	15,000
RI STATE HOUSE RESTORATION SOCIETY 150 BENEFIT STREET PROVIDENCE,RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	3,500
<b>Total . . . . .</b>  <b>3a</b>				397,145

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>				
S PROVIDENCE NEIGHBORHOOD MINISTRIES 747 BROAD STREET PROVIDENCE,RI 02907	NONE	PUBLIC	EDUCATION PROGRAM	10,000
SOJOURNER HOUSE 386 SMITH STREET PROVIDENCE,RI 02908	NONE	PUBLIC	PROGRAM SUPPORT	10,000
ST ANDREWS SCHOOL 63 FEDERAL ROAD BARRINGTON,RI 02806	NONE	PUBLIC	PROGRAM SUPPORT	10,000
ST ELIZABETH MANOR ONE ST ELIZABETH WAY EAST GREENWICH,RI 02818	NONE	PUBLIC	KITCHEN RENOVATION FOR ALZHEIMER PATIENTS	5,000
ST MARY'S HOME 420 FRUIT HILL AVENUE N PROVIDENCE,RI 02911	NONE	PUBLIC	PROGRAM SUPPORT	3,000
THUNDERMIST HEALTH CENTER 450 CLINTON STREET WOONSOCKET,RI 02895	NONE	PUBLIC	PROGRAM SUPPORT	2,000
TOCKWOTTON HOME 75 EAST STREET PROVIDENCE,RI 02906	NONE	PUBLIC	ASSISTED LIVING SUBSIDIES	7,500
TRINITY REPERTORY COMPANY 201 WASHINGTON STREET PROVIDENCE,RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	6,500
UNITED METHODIST ELDER CARE 40 IRVING AVENUE EAST PROV,RI 02914	NONE	PUBLIC	PROGRAM SUPPORT	7,500
VISITING NURSE HEALTH SERVICES OF NEWPORT AND BRISTOL COUNTIES 1184 EAST MAIN ROAD PORTSMOUTH,RI 02871	NONE	PUBLIC	PROGRAM SUPPORT	2,000
VNS HOME HEALTH SERVICES 14 WOODRUFF AVENUE NARRAGANSETT,RI 02882		PUBLIC	PROGRAM SUPPORT	5,000
WASHINGTON PARK CITIZENS' ASSOCIATION 42 JILLSON STREET PROVIDENCE,RI 02905	NONE	PUBLIC	PROGRAM SUPPORT	7,500
<b>Total . . . . .</b>  <b>3a</b>				397,145

## TY 2014 Accounting Fees Schedule

**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST

**EIN:** 22-2994936

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HINCKLEY ALLEN & SNYDER	3,200	3,200		0

# TY 2014 Investments Corporate Bonds Schedule

**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST

**EIN:** 22-2994936

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS-FIXED INCOME	2,200,028	2,170,612

**TY 2014 Investments Corporate  
Stock Schedule**

**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST  
**EIN:** 22-2994936

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK/MUTUAL FUNDS-SEE ATTACHED	2,784,579	5,006,988



TY 2014 Other Expenses Schedule

**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST

**EIN:** 22-2994936

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ABB LTD SPON ADR FEE	20	20		0