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## Form 990-PF (2014) Bristol Rotary Scholarship Fund Inc

22-3151333

Page 2

Part II	Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)</small>	Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash - non-interest-bearing . . . . .	218.	218.	218.
	2 Savings and temporary cash investments . . . . .			
	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 sch) ►			
	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) L-10b. Stmt . .	2,121,544.	2,177,982.	2,726,260.
	c Investments - corporate bonds (attach schedule) L-10c. Stmt . .	1,614,233.	1,822,698.	1,935,026.
	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 1) . . . . .	3,735,995.	4,000,898.	4,661,504.
LIABILITIES	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, & other disqualified persons . . . . .			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ►) . . . . .			
	23 Total liabilities (add lines 17 through 22) . . . . .			
	Foundations that follow SFAS 117, check here 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 and complete lines 27 through 31. ►			
	27 Capital stock, trust principal, or current funds . . . . .			
	28 Paid-in or capital surplus, or land, bldg and equipment fund . . . . .			
	29 Retained earnings, accumulated income, endowment, or other funds . . . . .	3,735,995.	4,000,898.	
	30 Total net assets or fund balances (see instructions) . . . . .	3,735,995.	4,000,898.	
	31 Total liabilities and net assets/fund balances (see instructions) . . . . .	3,735,995.	4,000,898.	

## 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	3,735,995.
2 Enter amount from Part I, line 27a . . . . .	2	264,903.
3 Other increases not included in line 2 (itemize) . . . . .	3	
4 Add lines 1, 2, and 3 . . . . .	4	4,000,898.
5 Decreases not included in line 2 (itemize) . . . . .	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II column (b), line 30 . . . . .	6	4,000,898.

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Form 990-PF (2014)

**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 shares MLC Company)

(b) How acquired  
P — Purchase  
D — Donation(c) Date acquired  
(month day, year)(d) Date sold  
(month day, year)

<b>a</b> Morgan Stanley ST covered securities		P	01/01/14	12/31/14
<b>b</b> Morgan Stanley ST not covered securities		P	01/01/14	12/31/14
<b>c</b> Morgan Stanley LT covered securities		P	01/01/13	12/31/14
<b>d</b> Morgan Stanley LT not covered securities		P	01/01/13	12/31/14
<b>e</b> Morgan Stanley capital gain distributions		P	01/01/13	12/31/14
<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)	
<b>a</b> 95,885.		120,593.	-24,708.	
<b>b</b> 145,784.		110,726.	35,058.	
<b>c</b> 54,407.		35,018.	19,383.	
<b>d</b> 744,196.		541,614.	202,382.	
<b>e</b> 1,568		0.	1,568.	

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

<b>(i)</b> Fair Market Value as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of column (i) over column (j), if any	<b>(l)</b> Gains (Column (h)) gain minus column (k), but not less than -0- or Losses (from column (h))
<b>a</b>			-24,708.
<b>b</b>			35,058.
<b>c</b>			19,383.
<b>d</b>			202,382.
<b>e</b>			1,568.
<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> 233,689.
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			<b>3</b> 10,350.
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .	[If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .]		

**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 the instructions before making any entries

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (column (b) divided by column (c))
2013			
2012			
2011			
2010			
2009			
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b>
<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>
<b>4</b> Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .			<b>4</b>
<b>5</b> Multiply line 4 by line 3 . . . . .			<b>5</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			<b>6</b>
<b>7</b> Add lines 5 and 6. . . . .			<b>7</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . .			<b>8</b>

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

Form 990-PF (2014) Bristol Rotary Scholarship Fund Inc

22-3151333

Page 4

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1 a 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 instrs)	1      \$,231
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	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (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      8,231
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      8,231
6 Credits/Payments	
a 2014 estimated tax paid and 2013 overpayment credited to 2014	6 a
b Exempt foreign organizations – tax withheld at source	6 b
c Tax paid with application for extension of time to file (Form 8862)	6 c
d Backup withholding erroneously withheld	6 d
7 Total credits and payments. Add lines 6a through 6d	7
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8      189
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9      2,420
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10      0
11 Enter the amount of line 10 to be Credited to 2015 estimated tax	11      Refunded

**Part VII-A Statements Regarding Activities**

1 a 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	<input checked="" type="checkbox"/> 1 b
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	
c Did the foundation file Form 1120-POL for this year?	<input checked="" type="checkbox"/> 1 c
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
(1) On the foundation      \$ _____ (2) On foundation managers      \$ _____	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers	
f Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities	<input checked="" type="checkbox"/> 2
g Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	<input checked="" type="checkbox"/> 3
h Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input checked="" type="checkbox"/> 4 a
i If 'Yes,' has it filed a tax return on Form 990-T for this year?	<input checked="" type="checkbox"/> 4 b
j Was there a liquidation, termination, dissolution or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T.	<input checked="" type="checkbox"/> 5
k Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
l By language in the governing instrument, or	
m 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?	<input checked="" type="checkbox"/> 6
l Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	<input checked="" type="checkbox"/> 7
m Enter the states to which the foundation reports or with which it is registered (see instructions)	
n CT – Connecticut	
o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	<input checked="" type="checkbox"/> 8 b
p Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	<input checked="" type="checkbox"/> 9
q Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<input checked="" type="checkbox"/> 10

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Form 990-PF (2014)

Form 990-PF (2014) Bristol Rotary Scholarship Fund Inc

22-3151333

Page 5

**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	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X
14	The books are in care of ▶ Wyland Dale Clift Telephone no. ▶ (860) 583-1316 Located at ▶ 124 Main St Bristol CT ZIP + 4 ▶ 06010		
15	Section 4947(a)(1) non-exempt 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	<input type="checkbox"/>
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? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1). If 'Yes,' enter the name of the foreign country	16	Yes X

**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.

1 a	During the year did the foundation (either directly or indirectly):	Yes	No
	(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? (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.)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	1 b	<input type="checkbox"/>
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?	1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		
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? If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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)	2 b	
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 __		
3 a	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	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)	3 b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4 b	X

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Form 990-PF (2014)

**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))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions)  Yes  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?  Yes  No

b If any answer is 'Yes' to 5a(1)-(5), did any 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)?

Organizations relying on a current notice regarding disaster assistance check here

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?  Yes  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?  Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8970.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

5 b

6 b

X

7 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
Byland Dale Clift 1175 S Main St UNIT 9 Plantsville CT 06479	President 2.00	0	0	0.
James Albert 72 Maple St APT 305 Bristol CT 06010	Treasurer 2.00	0	0	0.
Hank Cleary 1198 New Britain Ave West Hartford CT 06110	Secretary 2.00	0	0	0.
See Information about Officers, Directors, Trustees, Etc		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
none				

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

None

Form 990-PF (2014) Bristol Rotary Scholarship Fund Inc

22-3151333

Page 7

**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 . . . . .

**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.

1	The Foundation promotes college education by awarding scholarships to local residents. During 2014 the Foundation awarded 30 scholarships totalling \$140,000.	151,646
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.

1	----- -----	
2	----- -----	

All other program-related investments See instructions.

3

**Total. Add lines 1 through 3**

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**Form 990-PF (2014)**

Form 990-PF (2014) Bristol Rotary Scholarship Fund Inc

22-3151333

Page 8

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

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

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

1 Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	151,646.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	151,646.
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	151,646.

**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

BAA

Form 990-PF (2014)

**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 . . . . .				
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only . . . . .				
b Total for prior years 20 ____, 20 ____, 20 ____				
3 Excess distributions carryover, if any, to 2014				
a From 2009 . . . . .				
b From 2010 . . . . .				
c From 2011 . . . . .				
d From 2012 . . . . .				
e From 2013 . . . . .				
f Total of lines 3a through e . . . . .				
4 Qualifying distributions for 2014 from Part XII line 4 ► \$ 151,646				
a Applied to 2013, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required — see instructions) . . . . .				
c Treated as distributions out of corpus (Election required — see instructions) . . . . .				
d Applied to 2014 distributable amount . . . . .				
e Remaining amount distributed out of corpus	151,646			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .	151,646			
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) . . . . .				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	151,646			
10 Analysis of line 9:				
a Excess from 2010 . . . . .	0			
b Excess from 2011 . . . . .	0			
c Excess from 2012 . . . . .	0			
d Excess from 2013 . . . . .	0			
e Excess from 2014 . . . . .	151,646			

BAA

Form 990-PF (2014)

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

1 a 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 foundation is a private operating foundation described in section	<input checked="" type="checkbox"/> 4942(j)(3) or		<input type="checkbox"/> 4942(j)(5)		
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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)(ii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XV | Supplementary Information (Complete this part only if the foundation 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

Bristol Rotary Scholarship Foundation Inc  
123 Farmington Avenue STE 111  
Bristol CT 06010 (860) 583-1316

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

Name, address, high school data, post secondary data, essay, work exp., activities, awards & honors

c Any submission deadlines:

Annually by March 1

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

Geographically; Bristol, Burlington, Plainville, Plymouth, Southington & Terryville

Form 990-PF (2014) Bristol Rotary Schclarship Fund Inc

22-3151333

Page 11

## Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	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
<b>a Paid during the year</b>				
Skylar Wright 15 Melrose St Bristol	CT 06010 none	I	scholarship	6,000.
Jake Kochin 97 Westwood Rd Bristol	CT 06010 none	I	scholarship	2,000.
Sarah Larson 66 Harmony Rd Bristol	CT 06010 none	I	scholarship	2,000
Diane Hassanieh 117 Old Farms Rd Southington	CT 06489 none	I	scholarship	5,000
Robert Jacques 113 Treble Rd Bristol	CT 06010 none	I	scholarship	5,000.
Rachel Klem 50 Brightwood Ln Southington	CT 06489 none	I	scholarship	5,000.
Joanna Korpanty 145 Brewster Rd Bristol	CT 06010 none	I	scholarship	5,000.
Jenna Podjenski 25 Fairway View Dr Bristol	CT 06010 none	I	scholarship	5,000.
Alexandra Aldieri 120 Taine Mountain Rd Burlington	CT 06013 none	I	scholarship	5,000
See Line 3a statement				100,000.
<b>Total</b>			► 3a	140,000
<b>b Approved for future payment</b>				
<b>Total</b>			► 3b	

BAA

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Form 990-PF (2014)

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
<b>1 Program service revenue</b>					
a					
b					
c					
d					
e					
f					
<b>g Fees and contracts from government agencies . . . . .</b>					
<b>2 Membership dues and assessments . . . . .</b>					
<b>3 Interest on savings and temporary cash investments . . . . .</b>					
<b>4 Dividends and interest from securities . . . . .</b>					
<b>5 Net rental income or (loss) from real estate:</b>					
a Debt-financed property . . . . .					
b Not debt-financed property . . . . .					
<b>6 Net rental income or (loss) from personal property . . . . .</b>					
<b>7 Other investment income . . . . .</b>					
<b>8 Gain or (loss) from sales of assets other than inventory . . . . .</b>					233,689.
<b>9 Net income or (loss) from special events . . . . .</b>					
<b>10 Gross profit or (loss) from sales of inventory . . . . .</b>					
<b>11 Other revenue</b>					
a <u>NuStar LLP K1 loss</u>					-2,322.
b <u>NuStar LLP K1 1231 loss</u>					-3,959.
c <u>Kinder LLP K1 income</u>					2,076.
d <u>Kinder LLP K1 1231 loss</u>					-53.
e					
<b>12 Subtotal Add columns (b), (d), and (e) . . . . .</b>					229,431.
<b>13 Total. Add line 12, columns (b), (d), and (e) . . . . .</b>					229,431.

(See worksheet in line 13 instructions to verify calculations)

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



Bristol Rotary Scholarship Fund Inc

22-3151333

1

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other Income	Rev/Exp Bock	Net Inv Inc	Adj Net Inc
NuStar LLP K1 loss	-2,322	-2,322.	
NuStar LLP K1 1231 loss	-3,959.	-3,959.	
Kinder LLP K1 income	2,076.	2,076.	
Kinder LLP K1 1231 loss	-53.	-53.	
<b>Total</b>	<b>-4,258.</b>	<b>-4,256.</b>	

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(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
Person.. <input checked="" type="checkbox"/> Business <input type="checkbox"/>				
Elmer Madsen				
96 Oak Hill Rd				
Bristol CT 06010	Vice Pres 2.00	0.	0.	0
Person.. <input checked="" type="checkbox"/> Business <input type="checkbox"/>				
E Lee Sinawich				
22 Fox Den Rd	Director			
Bristol CT 06010	1.00	0.	0.	0.
Person . <input checked="" type="checkbox"/> Business . <input type="checkbox"/>				
Mario Giovannucci				
33 Boulder Dr	Director			
Bristol CT 06010	1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/>				
Olccctt Snow				
90 Secret Lake Rd	Director			
Avon CT 06001	1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business . <input type="checkbox"/>				
David Kusnlan				
72 Farmington Chase	Director			
Farmington CT 06032	1.00	0.	0.	0.
Person.. <input checked="" type="checkbox"/> Business . <input type="checkbox"/>				
Jackie Majerus				
33 Griswold Dr	Director			
West Hartford CT 06119	1.00	0	0.	0.

Total

0. 0 0

Bristol Rotary Scholarship Fund Inc

22-3151333

2

Form 990-PF, Page 11, Part XV, line 3a  
 Line 3a statement

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Found- ation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox
				Amount
<u>a Paid during the year</u>				
<u>Nicole Aldieri</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>120 Taire Mountain Rd</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Bethany Cucka</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>33 Patricia Dr</u>				5,000.
<u>Bristol CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Kelly Fabrizio</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>12 Mary Rd</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Siobhan O'Neill</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>1 Reacher Ln</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Kaley Beauchamp</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>4 Driftwood Rd</u>				5,000.
<u>Bristol CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Nicole Jaccues</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>123 Treble Rd</u>				5,000.
<u>Bristol CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Vannessa Keilo</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>14 Williams Way</u>				5,000.
<u>Terryville CT 06786</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Ramsha Khan</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>12 Joseph St</u>				5,000.
<u>Terryville CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Jacqueline O'Brien</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>54 Berkley Ave</u>				5,000.
<u>Southington CT 06469</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Michael Petit</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>311 River St</u>				5,000.
<u>Southington CT 06489</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Courtney Pina</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>82 Empire Way</u>				5,000.
<u>Bristol CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Alicia Vinci</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>23 Blueberry Ln</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Shanil Desai</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>6 Deerfield Tr</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Stephanie Jacques</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>123 Treble Rd</u>				5,000.
<u>Bristol CT 06010</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	
<u>Julia Carmoszko</u>				Person or <input checked="" type="checkbox"/> Business <input type="checkbox"/>
<u>5 White Fence Holicw</u>				5,000.
<u>Burlington CT 06013</u>	<u>none</u>	<u>I</u>	<u>scholarship</u>	

Bristol Rotary Scholarship Fund Inc

22-3151333

3

Form 990-PF, Page 11, Part XV, line 3a  
Line 3a statement

Continued

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	Person or Business Checkbox
				Amount
<b>a Paid during the year</b>				
Lindsay Muri				Person or Business <input checked="" type="checkbox"/> X
3 Ventres Way				5,000.
Burlington CT 06013	none	I	scholarship	
Lauren Roberge				Person or Business <input checked="" type="checkbox"/> X
30 Summerberry Cir				5,000.
Bristol CT 06010	none	I	scholarship	
Erica Stokes				Person or Business <input checked="" type="checkbox"/> X
413 Washington Rd				5,000.
Terryville CT 06786	none	I	scholarship	
Lindsey Weciarsz				Person or Business <input checked="" type="checkbox"/> X
78 Lardner Rd				5,000.
Bristol CT 06010	none	I	scholarship	
Katharine O'Neil				Person or Business <input checked="" type="checkbox"/> X
1 Heather Ln				5,000.
Burlington CT 06013	none	I	scholarship	

Total

100,000.