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Department of the Treasury

Internal Revenue Service

#### DLN: 93491119001165

OMB No 1545-0052

2014

Open to Public Inspection

# 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 <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

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

For	cale	endar year 2014, or tax y	ear beginning 01-	01-2014	, a	nd ending 1	2-31-2014		
		undation Ine M Lowndes Foundation Inc				A Employer id	entification numbe	er	
						26-0379209			
Num	ber and	ation Source d street (or P O box number if mail is r	not delivered to street address	S) Room/suite		<b>B</b> Telephone nu	mber (see ınstruction	ns)	
	undatıo ıte 123	on Source 501 Silverside Rd				(800) 839-1754			
		n, state or province, country, and ZIP o DE 198091377	r foreign postal code			<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵	
<b>G</b> CI	neck a	ill that apply     Initial return	Initial return of a	former public charity	y	<b>D 1.</b> Foreign or	ganizations, check he	ere 🕨	
		Final return	A mended return ge Name change	•		<b>2.</b> Foreign o	rganizations meeting k here and attach co	the 85%	
<b>H</b> C b	nack t	ype of organization Section		ete foundation		E If private for	ındatıon status was t	erminated	
		n 4947(a)(1) nonexempt charita			n	under sectio	n 507(b)(1)(A), chec	k here 🕨 📗	
		ket value of all assets at end	<b>J</b> Accounting method	Cash Acci		<b>F</b> If the founda	ation is in a 60-mont	n termination	
		from Part II, col. (c), \$ 5,639,514	Other (specify) (Part I, column (d) must	be on cash basis.)		under sectio	n 507(b)(1)(B), chec	k here 🕨	
Pa	rt I	Analysis of Revenue a total of amounts in columns (b), (c necessarily equal the amounts in columnstructions)	c), and (d) may not	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc	c , received (attach						
		schedule)		0					
	2	Check 🟲 🔽 if the foundation is	not required to attach						
		Sch B							
	3	Interest on savings and tempo	rary cash investments	89		89			
Reveilue	4	Dividends and interest from se	curities	76,553		76,553			
	5a	Gross rents							
	b	Net rental income or (loss)							
	6a	Net gain or (loss) from sale of	assets not on line 10	221,921					
	b	Gross sales price for all assets 748,824	s on line 6 a						
æ	7	Capital gain net income (from I			223,110				
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold							
	C	Gross profit or (loss) (attach s	chedule)						
	11	Other income (attach schedule	e)						
	12	<b>Total.</b> Add lines 1 through 11		298,563		299,752			
	13	Compensation of officers, direc		12,000				12,000	
ı.n	14	O ther employee salaries and w	_						
φ	15	Pension plans, employee bene							
Expenses	16a	Legal fees (attach schedule).							
Ä	b	Accounting fees (attach sched		19 666		19 666			
	17	Other professional fees (attacl		18,666		18,666			
Operating and Administrative	18	Taxes (attach schedule) (see i	nstructions)	2,679		40			
딥	19 20	Depreciation (attach schedule Occupancy							
ģ	21	Travel, conferences, and meet		3,559				3,559	
Ę	22	Printing and publications		2,222				2,222	
ਲ ਜ਼	23	Other expenses (attach sched		28,517		3		28,514	
ting	24	Total operating and administra		· -				·	
er G		Add lines 13 through 23	-	65,421		18,709		44,073	
ā	25	Contributions, gifts, grants pai	d	168,500				168,500	
_	26	Total expenses and disburseme							
		25		233,921		18,709		212,573	
	27	Subtract line 26 from line 12	_						
	a	Excess of revenue over expens		64,642					
	b	Net investment income (if nega				281,043			
	С	Adjusted net income (if negation	ve, enter -0 -)						

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(4) 22 200 20000	(2) 20011 101111	(-,
	2	Savings and temporary cash investments	204,230	90,985	90,985
	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			
sets		Prepaid expenses and deferred charges			
w.	9	Investments—U S and state government obligations (attach schedule)			
⋖	10a	· · · · · · · · · · · · · · · · · · ·	2,649,840	2,903,341	4,798,211
	b	Investments—corporate stock (attach schedule)	158,306		
	C .	Investments—corporate bonds (attach schedule)	138,300	62,092	03,917
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	500,000	<b>4-1</b> F00 000	666 401
	13	Investments—other (attach schedule)	500,000	500,000	666,401
	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	0.540.036	0.555.040	
		Instructions Also, see page 1, item I)	3,512,376	3,577,018	5,639,514
	17	Accounts payable and accrued expenses			
ø	18	Grants payable			
₽	19	Deferred revenue			
abilities	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	
'n		Foundations that follow SFAS 117, check here 🕨 🦵			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.			
<u>8</u>	24	Unrestricted			
ũ	25	Temporarily restricted			
Ξ	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ŏ		and complete lines 27 through 31.			
왍	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	3,512,376	3,577,018	
₹	30	Total net assets or fund balances (see instructions)	3,512,376	3,577,018	
	31	Total liabilities and net assets/fund balances (see instructions)	3,512,376	3,577,018	
Pa	rt II	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 ag	ree	
		with end-of-year figure reported on prior year's return)		1	3,512,376
2		Enter amount from Part I, line 27a		2	64,642
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3		4	3,577,018
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)—Pa	ırt II, column (b), lıı	ne 30 <b>. 6</b>	3,577,018

	0-PF (2014)	. d l	f T T						Page <b>3</b>
Part 1	V Capital Gains ar  (a) List and describe th  2-story brick warehou	ie kind(s)		eal esta	ate,	(b) How acquired P—Purchase D—Donation		ate acquired , day, yr )	(d) Date sold (mo , day, yr )
1 a	Publicly-traded Securit	ies				D-Donation			
	,								
d							1		
e			(6) Depresention allows	ا ہے	(m) Coot		1	(h) Coun	or (loss)
(e)	Gross sales price		(f) Depreciation allowe (or allowable)	·u		or other basıs pense of sale		(e) plus (f)	or (loss) ı mınus (g)
а	748	,824	·		·	525,71	4		223,110
b									
С									
d									
	nplete only for assets sho	000000000000000000000000000000000000000	n in column (h) and owns	ad by th	ho foundation	on 1 2 /2 1 /6 0	1 (1)	) C = /C = l	/h \
			(j) Adjusted basis			ess of col (ı)			(h) gain minus ess than -0-) <b>or</b>
(i)	FMV as of 12/31/69		as of 12/31/69		• •	ol (j), if any		Losses (fro	
а									223,110
ь									
С									
d									
e									
3	Net short-term capital of If gain, also enter in Pain Part I, line 8	gaın or (lo	oss) as defined in sectio	ns 122	22(5) and (6)	,	3		223,110
Part \	Qualification Un	der Se	ction 4940(e) for R	≀educ	ed Tax on	Net Investme	nt In	come	
For opti	onal use by domestic priv	vate foun	dations subject to the se	ection 4	4940(a) tax (	on net investment	ıncome	<b>)</b>	
								•	
fsectio	n 4940(d)(2) applies, lea	ive this p	art blank						
f"Yes,"	foundation liable for the s the foundation does not	qualify ur	nder section 4940(e) De	o not c	omplete this	part			Γ Yes <b>Γ</b> No
<b>1</b> Ent	er the appropriate amoun	t ın each	column for each year, s	ee inst	ructions befo	re makıng any ent	ries		
Base year (o	(a) period years Calendar r tax year beginning in)	Adjusted	<b>(b)</b> qualifying distributions	Net v	(c) alue of nonchari	table-use assets	(	(d) Distribution col (b) divided	n ratio by col (c))
	2013		215,657			4,721,283			0 045678
	2012		211,168			4,196,135			0 050324
	2011		198,703			4,091,472			0 048565
	2010		169,382			3,833,377			0 044186
	2009		111,586			3,155,195			0 035366
2							2		0 224119
3	the number of years the	foundati	5-year base period—divon has been in existence	e ıf less	s than 5 year	s	3		0 044824
4			ble-use assets for 2014		•	<u> </u>	4		5,316,336
5						_	5		238,299
6	Enter 1% of net investr	ment inco	me (1% of Part I, line 2	7b)			6		2,810
7	Add lines 5 and 6						7		241,109
8	Enter qualifying distribu	utions fro	m Part XII, line 4				8		212,573
	If line 8 is equal to or g the Part VI instructions		nn line 7, check the box	ın Part	VI, line 1b, a	and complete that	part us	ing a 1% tax	rate See

	990-PF (2014)  Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age <b>4</b>
1a		ructio	ns)	
14	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		į	5,621
	here ► Tand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
_	enter -0-) 2			
3	Add lines 1 and 2		į	5,621
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			5,621
6	Credits/Payments			,,,,,
a	2014 estimated tax payments and 2013 overpayment credited to 2014   6a   2,100			
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		:	2,100
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached. 🕏 8			10
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			3,531
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
<b>1</b> a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	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)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			-110
u	(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 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	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?	5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	ļ l		i
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>			
	that conflict with the state law remain in the governing instrument?	   6	Yes	
7			165	
,	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	,	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	▶DE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	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)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

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 🕨			
14	The books are in care of ▶ Foundation Source Telephone no ▶ (800)	839-	1754	
	Located at F501 Silverside Road Suite 123 Wilmington DE ZIP+4 F1980913	77		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		1	▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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 \( \bar{V} \) 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)?			
	(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 <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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	_		
	that were not corrected before the first day of the tax year beginning in 2014?	1c		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))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
U	(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 )	2b		
_	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
ь	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, <b>(2)</b> 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 <b>(3)</b>			
	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

للنف	t VIII-B Statements Rega	runing Acuvines ioi	Willell Fulli 4/20	riay be required (com	unaca	
5a	During the year did the foundation	n pay or incur any amoun	t to			
	(1) Carry on propaganda, or other	wise attempt to influence	e legislation (section 494	45(e))? <b> </b>	√ No	
	(2) Influence the outcome of any	specific public election (	(see section 4955), or to	carry		
	on, directly or indirectly, any	voter registration drive?.		T Yes 「	√ No	
	(3) Provide a grant to an individu	al for travel, study, or oth	ner sımılar purposes?	☐ Yes 「	√ No	
	(4) Provide a grant to an organiza	tion other than a charita	ble, etc , organization de	scribed		
	ın section 4945(d)(4)(A)? (se	ee instructions)		T Yes 「	√ No	
	(5) Provide for any purpose other	than religious, charitable	e, scientific, literary, or			
	educational purposes, or for t	he prevention of cruelty t	to children or animals?.	Yes 「	√ No	
b	If any answer is "Yes" to 5a(1)-(	5), dıd <b>any</b> of the transad	ctions fail to qualify unde	r the exceptions described ir	n	
	Regulations section 53 4945 or i	n a current notice regard	ling disaster assistance (	(see instructions)?	5b	
	Organizations relying on a curren	t notice regarding disast	er assistance check here	e		
С	If the answer is "Yes" to question					
	tax because it maintained expend				_ <sub>No</sub>	
	If "Yes," attach the statement requ					
6a	Did the foundation, during the yea			premiums on		
	a personal benefit contract?			·	√ No	
b	Did the foundation, during the yea					No
	If "Yes" to 6b, file Form 8870.		, ,, ,			
7a	At any time during the tax year, v	as the foundation a party	v to a prohibited tax shel	ter transaction?	- No	
	···, ····, ···· , ··· , ·		, F · · · · · · · · · · · · · · · · · ·	, · · · · · · · · · · · · · · · · ·		
	If ves, did the foundation receive	any proceeds or have an	v net income attributable	e to the transaction?	.   7b	
b	If yes, did the foundation receive					lovees.
b				e to the transaction? ation Managers, Highly		ployees,
b Par	Information About	t Officers, Directors	s, Trustees, Founda	ntion Managers, Highly		ployees,
b Par	TINFORMATION About and Contractors List all officers, directors, trustees	officers, Directors  foundation managers a  (b) Title, and average	s, Trustees, Founda and their compensation ( (c) Compensation	see instructions).  (d) Contributions to	Paid Em	ployees,
b Par	Information About and Contractors	s, foundation managers a  (b) Title, and average hours per week	nnd their compensation (so Compensation (If not paid, enter	see instructions).  (d) Contributions to employee benefit plans	(e) Expen	
Par	TINFORMATION About and Contractors List all officers, directors, trustees	s, foundation managers a  (b) Title, and average hours per week devoted to position	nd their compensation (so Compensation (If not paid, enter -0-)	see instructions).  (d) Contributions to	(e) Expen	se account,
Par 1	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes	s, foundation managers a  (b) Title, and average hours per week	nnd their compensation (so Compensation (If not paid, enter	see instructions).  (d) Contributions to employee benefit plans	(e) Expen	se account,
Par 1 Carolii	Information About and Contractors List all officers, directors, trustees  (a) Name and address	s, foundation managers a (b) Title, and average hours per week devoted to position Pres / Dir / Sec	nd their compensation (so Compensation (If not paid, enter -0-)	see instructions).  (d) Contributions to employee benefit plans	(e) Expen	se account,
Par  1 Carolii Oun Wilm	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec	(c) Compensation (If not paid, enter -0-)	see instructions).  (d) Contributions to employee benefit plans and deferred compensation	(e) Expen	se account, lowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average Pres / Dir / Sec  6 other than the control of the control	ind their compensation (s) (c) Compensation (If not paid, enter -0-) 12,000  those included on line 1—	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e	(e) Expenother al	se account, lowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e	(e) Expenother all	se account, lowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances
Par 1 Carolii Oun Wilm 2	Information About and Contractors List all officers, directors, trustees  (a) Name and address  ne M Lowndes dation Source 501 Silverside Rd ington, DE 198091377  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week devoted to position  Pres / Dir / Sec  6 (b) Title, and average hours per week	nd their compensation (so Compensation (If not paid, enter -0-)  12,000  those included on line 1—  age (c) Compensation	see instructions).  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, e  (d) Contributions to employee benefit plans and deferred	(e) Expenother all	se account, llowances

Information About Officers, Directors, Truste	es, Foundation Managers, Hi	ghly Paid Employees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services (	see instructions). If none, enter "NON	 VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Total</b> number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (		
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	A mount
<u>-</u>		
2		
All other program-related investments See instructions  3		
<u> </u>		
Total. Add lines 1 through 3		▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 4.597.339 1h 133.555 1c 666.401 1d 5.397.295 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 5.397.295 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 80.959 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 5.316.336 5 265,817 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 265.817 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 5.621 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 2c 5.621 3 3 260.196 4 4 5 5 260.196 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 260.196 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 212.573 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 Ω 3 Amounts set aside for specific charitable projects that satisfy the За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 212,573 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 212,573 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

	olidistributed Income (see mstr		(1)	(-)	(4)
		( <b>a)</b> Corpus	(b) Years prior to 2013	(c) 2013	<b>(d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2015	2013	260,196
	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only			189,682	
	Total for prior years 2012, 2011, 2010				
	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	Total of lines 3a through e				
	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 212,573				
а	Applied to 2013, but not more than line 2a			189,682	
	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				22,891
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
•	line 4b from line 2b				
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				
a	Subtract line 6c from line 6b Taxable amount —see instructions				
_	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				237,305
_	be distributed in 2015				237,300
,	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)				
9	Excess distributions carryover to 2015.		0		
10	Subtract lines 7 and 8 from line 6a		+		
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014 0				

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

c Any submission deadlines

factors

Form **990-PF** (2014)

Part XV Supplementary Infor	mation (continued)			Page <b>11</b>
3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  See Additional Data Table	or substantial contributor	recipient	Contribution	
Total				168,500
b Approved for future payment				

Form 990-						Page <b>12</b>
	I-A Analysis of Income-Produci			T =		(-)
-	s amounts unless otherwise indicated n service revenue	Unrelated b  (a)  Business  code	(b) A mount	(c) Exclusion code	(d) A mount	(e) Related or exempt function income (See instructions)
b c d e f g Fees 2 Membe 3 Interes	and contracts from government agencies ership dues and assessments			14	89	
<ul><li>5 Net rer</li><li>a Debt-</li><li>b Not d</li><li>6 Net rer</li><li>proper</li></ul>	nds and interest from securities			14	76,553	
8 Gain or invent 9 Net inc 10 Gross   11 Other r	<ul> <li>7 Other investment income</li> <li>8 Gain or (loss) from sales of assets other than inventory</li> <li>9 Net income or (loss) from special events</li> <li>10 Gross profit or (loss) from sales of inventory</li> <li>11 Other revenue a</li> <li>b</li> </ul>			18	221,921	
c d e 12 Subtota	al Add columns (b), (d), and (e)				298,563 13	•
(See w	Relationship of Activities to Explain below how each activity for whice the accomplishment of the foundation's instructions)	alculations) the Accom th income is re	<b>plishment of E</b> ported in column (	Exempt Purpos (e) of Part XVI-A c	<b>es</b> ontributed importa	ntly to

Form 990-PF	(2014)										Рa	ge <b>13</b>
Part XVII	Information Re Noncharitable					actio	ns and I	Relationships	With			
section 5	rganızatıon dırectly or ı 01(c) of the Code (oth	indirectly 6	engage	ın any of	the following wit						Yes	No
organızat 												
	from the reporting four											
` '										1a(1)		No
	rassets									1a(2)		No
<b>b</b> Other tra		b.l.l.								41.74		
	s of assets to a noncha											No
	hases of assets from a											No
	al of facilities, equipme									1b(3)		No No
	ibursement arrangemei s or loan guarantees.									1b(5)		No
	rmance of services or r									1b(6)		No
	f facilities, equipment,									<u> </u>		No
	wer to any of the above										luo	140
	ods, other assets, or se nsaction or sharing arr (b) Amount involved	angement	, show	ın column		the go	ods, other		es receive	ed		nts
-												
-												
described	indation directly or indi in section 501(c) of t complete the following (a) Name of organizatio	he Code (d schedule		nan sectio	•	ın sectı	-	_		. FY€	es F	No
							_					
Sign the info	ler penalties of perjury, best of my knowledge a rmation of which prepai	and belief,	ıt ıs tr	ue, correc						r) is bas	sed on	all
	Signature of officer or t	rustee			 Date	<b>-</b> )	Tıtle		with the below	preparer tr )? 🔽 Y		
			ı			T <sub>2</sub> .		la		.ı )·   <b>v</b> _ ı		<u>"</u>
	Print/Type preparer's Jeffrey D Haskell	name	Prepa	arer's Sıgn	nature	Date		Check if self- employed ▶	PTIN P(	013457	770	
Paid Preparer Use	Firm's name ► Foundation Source					•		Firm's EIN ►				
Only	Fırm's address ▶											
	One Hollow Ln Ste 21	.2 Lake S	ucces	s,NY 110	042			Phone no (800)	839-175	<b>_</b> _		

# 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
AMERICAN ASSOCIATES OF THE ROYAL ACADEMY TRUST INC 767 3RD AVE FL 4 MANHATTAN,NY 10017	N/A	PC	Benefactor Fund	10,000
ASSOC OF SMALL FDNS DBA EXPONENT PHILANTHROPY 1720 N ST NW WASHINGTON, DC 20036	N/A	PC	Annual Fund	1,500
CENTRAL PARK CONSERVANCY INC 14 E 60TH ST FL 8 NEW YORK, NY 10022	N/A	PC	General and Unrestricted	1,000
CENTRAL PARK CONSERVANCY INC 14 E 60TH ST FL 8 NEW YORK, NY 10022	N/A	PC	Conservators Program	10,000
FRICK COLLECTION 1 E 70TH ST NEW YORK,NY 10021	N/A	PC	Sustaining Fellow Program	10,000
FRIENDS OF GUNSTON HALL 10709 GUNSTON RD MASON NECK, VA 22079	N/A	PC	Buckland Division	500
FRIENDS OF SULGRAVE MANOR C/O P BROADBENT909 E MAIN ST NO RICHMOND,VA 23219	N/A	PC	Manor Project	500
FUND FOR PARK AVENUE NEW YORK INC 445 PARK AVE STE 1000 NEW YORK, NY 10022	N/A	PC	Tree Lighting Program	1,000
FUND FOR PARK AVENUE NEW YORK INC 445 PARK AVE STE 1000 NEW YORK, NY 10022	N/A	PC	Planting Project	1,000
INTERNATIONAL FOUNDATION FOR ART RESEARCH INC 500 5TH AVE NEWYORK,NY 10110	N/A	PC	IFAR Evenings Program	35,000
JUNIOR LEAGUE OF THE CITY OF NEW YORK INC 130 E 80TH ST NEW YORK,NY 10075	N/A	PC	Annual Fund	500
MARY BALDWIN COLLEGE 318 PROSPECT ST STAUNTON,VA 24401	N/A	PC	Baldwin Fund	5,000
NAT'L SO Ciety OF COLONIAL DAMES IN THE STATE OF NY 215 E 71ST ST NEW YORK, NY 10021	N/A	PC	Annual Fund	500
NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA PO BOX 22127 CHARLESTON,SC 29413	N/A	PC	Powder Magazine Project	500
NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA 2715 Q ST NW WASHINGTON, DC 20007	N/A	PC	Friends of Dumbarton House Annual Campaign	500
Total				168,500

### 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	recipient	
a Paid during the year				
NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK W NEW YORK,NY 10024	N/A	PC	Annual Fund	2,500
NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK W NEW YORK,NY 10024	N/A	PC	Vice Chair Program	10,000
PIERPONT MORGAN LIBRARY 225 MADISON AVE NEW YORK,NY 10016	N/A	PC	Patron Fellow Program	6,000
ROUNDABOUT THEATRE COMPANY INC 231 W 39TH ST STE 1200 NEW YORK,NY 10018	N/A	PC	Patrons Program	2,500
ST JAMES EPISCOPAL CHURCH 865 MADISON AVE NEW YORK,NY 10021	N/A	PC	2014 Stewardship Campaign	50,000
ST JAMES EPISCOPAL CHURCH 865 MADISON AVE NEW YORK,NY 10021	N/A	PC	Addition to 2014 Stewardship Campaign	5,000
THE ANIMAL MEDICAL CENTER 510 E 62ND ST 2ND FL NEW YORK,NY 10065	N/A	PC	President's Council Program	10,000
VANDERBILT UNIVERSITY VU STA B 357754 NASHVILLE,TN 37235	N/A	PC	Owen Circle Program	5,000
Total				168,500

DLN: 93491119001165

OMB No 1545-0123

Sequence No 12A

Department of the Treasury Internal Revenue Service

# Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification number

Before you check Box A, B, or C below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i> In the separate Instructions	If you enter a	and any, to gain or loss on amount in column (g), code in column (f) eparate instructions  (g)  Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
Publicly-tra			748,824	(525,714)			223,110
-							<del>                                     </del>
	each total her (If <b>Box A</b> abov checked), or <b>lin</b>	e and e is le 3 (if Box	748,824				223,110
Note. If you checked Box A above I					e) the bas	l sis as reported t	<u> </u>

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the

 $Name(s) \ shown \ on \ return \ Name \ and \ SSN \ or \ taxpayer \ identification \ no \ not \ required \ if \ shown \ on \ other \ side \ The \ Caroline \ M \ Lowndes \ Foundation \ Inc$ 

2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if

**Box F** above is checked)

Social security number or taxpayer identification number 26-0379209

Before you check Box D, E, or F below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

┌(E)	(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see <b>Note</b> above)  (E) Long-term transactions reported on Form(s) 1099-B showing basis was <b>not</b> reported to the IRS  (F) Long-term transactions not reported to you on Form 1099-B							
1	(a) (b) Description of property Date acquired	<b>(b)</b> Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i>			(h) Gain or (loss) Subtract columi (e) from column (d
(Example 100 sh XYZ Co)	(Lanue 10031 X12 00)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	and combine the res with column (g

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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# **TY 2014 Depreciation Schedule**

Name: The Caroline M Lowndes Foundation Inc

# **TY 2014 Investments Corporate Bonds Schedule**

Name: The Caroline M Lowndes Foundation Inc

Name of Bond	End of Year Book Value	End of Year Fair Market Value
GE CORP - 5.625% - 05/01/2018	47,542	44,986
WELLS FARGO - 5.625% - 12/11/2	35,150	38,931

### **TY 2014 Investments Corporate Stock Schedule**

Name: The Caroline M Lowndes Foundation Inc

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AETNA INC.	29,848	78,970
ALKERMES	6,252	11,595
ALLIANCE DATA SYSTEM CORP	17,828	89,819
ALTERA CORPORATION	7,084	13,853
AMAZON COM	55,090	55,242
AMERICAN TOWER REIT INC	5,585	14,136
AMERIPRISE FINANCIAL INC	10,213	25,260
AMERISOURCEBERGEN CORP	13,398	26,868
AMETEK INC.	7,120	23,999
AMPHENOL CORPORATION	9,571	20,017
ANADARKO PETROLEUM CORP	40,923	51,563
ANSYS INC.	6,461	13,612
APACHE CORPORATION	33,768	25,695
APPLE INC.	47,751	98,679
ASHLAND INC.	10,673	12,455
AUTOMATIC DATA PROCESSING INC.	25,291	69,614
AUTONATION INC	9,338	15,465
AUTOZONE INC	8,429	43,338
AVAGO TECHNOLOGIES LIMITED	7,518	32,692
AVALONBAY CMNTYS INC	18,679	24,509
BANK OF AMERICA CORP	51,144	62,275
BED BATH & BEYOND INC.	9,021	19,347
BERRY PLASTICS GROUP INC	8,483	15,743
BLACKROCK INC	17,128	37,901
BOEING CO	25,923	45,493
BROWN FORMAN CORP CL B	6,896	16,338
CAPITAL ONE FINANCIAL CORP	30,832	48,705
CARDTRONICS INC	14,619	18,441
CATAMARAN CORP	7,735	15,422
CELANESE CORPORATION	7,777	14,151

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CHARTER COMMUNICATIONS	4,910	10,830
CHECK POINT SOFTWARE TECHNOLOG	32,740	57,199
CHURCH & DWIGHT	6,774	17,969
CISCO SYSTEMS INC	43,510	58,144
CITIGROUP INC	37,845	46,318
CITRIX SYSTEMS INC	38,298	39,109
COGNIZANT TECHNOLOGY SOLUTIONS	11,973	39,390
COLGATE-PALMOLIVE COMPANY	32,190	34,941
COMCAST CORP CL A	46,008	87,885
CONCHO RESOURCES INC	5,734	11,771
COVIDIEN LTD	48,728	88,984
CROWN HOLDINGS INC	9,262	13,998
CVS CAREMARK CORP.	25,816	60,194
DANAHER CORP	27,110	62,997
DELPHI AUTOMOTIVE PLC	10,568	11,199
DICK'S SPORTING GDS	6,322	10,873
DIRECTV GROUP	12,504	22,109
DISCOVERY COMMUNICATIONS, INC	6,936	14,230
DOLLAR GENERAL CORP	31,138	48,783
DOLLAR TREE INC.	4,727	28,434
EMC CORP-MASS	38,817	48,179
EPAM SYSTEMS INC.	12,172	17,142
EQT CORPORATION	19,355	29,826
EQUINIX, INC.	6,675	16,325
EXPRESS SCRIPTS HOLDING CO.	50,360	95,761
F M C CP	7,522	11,406
FIDELITY NATIONAL INFORMATION	18,089	45,904
FIDUCIARY CLAYMORE MLP OPP FD	23,900	52,240
FISERV INC	24,915	91,195
FLUOR CORP	9,141	9,943

Name of Stock	End of Year Book Value	End of Year Fair Market Value
FOOT LOCKER INC N.Y. COM	9,606	17,191
FRANKLIN HIGH INCOME FUND ADVI	27,619	38,784
GAMESTOP CORP	6,913	9,836
GENERAL ELECTRIC CO	81,597	63,933
GOOGLE INC CL A	12,834	24,941
GOOGLE INC CL C	40,611	52,640
GRAINGER W W INC.	6,331	18,862
HCA INC	11,533	13,430
HEALTHSOUTH CP	9,005	17,115
HOME DEPOT INC.	56,398	77,153
HUBBELL CLASS B	6,748	6,837
HUMANA INC	5,435	18,097
IHS INC	10,604	10,819
INT'L FLAVORS & FRAGRANCES INC	12,631	14,393
INTERCONTINETAL EXCHANGE INC	6,889	16,227
IVA INTERNATIONAL FUND CLASS I	52,689	52,917
JAZZ PHARMACEUTICALS INC	10,452	11,789
JOHNSON & JOHNSON	28,963	44,442
JONES LANG LASALLE	2,700	12,444
JP MORGAN CHASE & CO	38,272	66,022
KANSAS CITY SOUTHERN	4,580	15,132
LKQ CORPORATION	12,568	13,329
MACY'S INC	35,836	40,436
MARATHON OIL CORP COM	38,042	29,846
MARRIOTT INTERNATIONAL INC. CL	11,174	25,750
MEDIVATION, INC.	15,971	23,408
MEDNAX, INC.	12,208	25,122
MEDTRONIC INC	18,758	20,938
MERCK & CO INC.	24,081	48,953
MICROCHIP TECHNOLOGY INC.	15,186	22,555

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MICROSOFT CORPORATION	35,590	65,495
MOHAWK INDS INC	6,777	15,225
MONSTER BEVERAGE CORP	4,067	28,171
MYLAN INC.	17,124	19,109
NOBLE ENERGY INC.	7,587	8,537
NXP SEMICONDUCTORS	13,364	27,198
OMNICOM GROUP	41,949	46,482
ORACLE CORP	38,105	79,372
PANERA BREAD CO. CL. A.	6,169	13,285
PENTAIR INC. COM	12,673	10,959
PEPSICO INC	29,008	39,904
PETSMART INC. COM	4,029	13,821
PIONEER NAT RES CO	10,819	15,480
POLARIS INDUSTRIES	11,927	14,368
PRAXAIR INC.	30,275	54,415
PRUDENTIAL FINCL INC	56,232	56,990
REGENERON PHARMACEUTICALS, INC	5,275	12,308
ROCKWOOD HOLDINGS INC	3,376	10,874
ROPER INDUSTRIES	10,538	24,547
ROSS STORES, INC.	14,588	22,057
SBA COMMUNICATIONS	11,250	23,260
SIMON PPTY GROUP INC	33,441	40,793
SKYWORKS SOLUTIONS, INC	6,502	20,868
STERICYCLE INC	6,972	15,730
STRYKER CORPORATION	25,630	50,467
T. ROWE PRICE ASSOCIATES	9,256	15,111
TD AMERITRADE HOLDING CORP	13,960	15,493
TE CONNECTIVITY LTD	6,995	8,096
TEAM HEALTH HOLDINGSINC COM	12,333	20,653
TERADATA CORPORATION	22,293	18,782

Name of Stock	End of Year Book Value	End of Year Fair Market Value
TIMKEN CO COM	6,230	8,109
TJX COMPANIES INC	39,869	69,883
TORTOISE ENERGY INFR	29,984	95,155
TRACTOR SUPPLY CO COM	8,888	16,395
TRIUMPH GROUP INC	8,488	13,242
UNION PACIFIC	19,785	34,548
UNITED TECHNOLOGIES CORP	33,719	50,025
UNITEDHEALTH GROUP INC.	17,703	65,709
UNIVERSAL HLTH SVC B	17,172	20,917
US BANCORP	49,451	61,582
V F CORP	12,874	41,045
VANTIV INC - CLASS A	13,646	20,623
VERIZON COMMUNICATIONS	56,825	54,499
VIRTUS EMERGING MARKETS OPPTS	101,035	95,734
VISA INC	27,530	62,141
WABTEC	9,802	10,427
WALT DISNEY HOLDINGS CO.	20,131	30,141
WELLS FARGO & CO.	30,289	61,892
WEX, INC.	10,182	14,244
WHIRLPOOL CORP	10,056	18,599
WILLIAMS COS	40,927	67,635

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### **TY 2014 Investments - Other Schedule**

Name: The Caroline M Lowndes Foundation Inc

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
LIGHTHOUSE GLOBAL LONG/SHORT F		500,000	666,401	

# **TY 2014 Other Expenses Schedule**

Name: The Caroline M Lowndes Foundation Inc

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	25,764			25,764
Bank Charges	3	3		
State or Local Filing Fees	25			25
MEMBERSHIP DUES AND EXPENSES	2,725			2,725

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### **TY 2014 Other Professional Fees Schedule**

Name: The Caroline M Lowndes Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment Management Services	18,666	18,666		

### **TY 2014 Taxes Schedule**

Name: The Caroline M Lowndes Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2014	2,100			
990-PF Extension for 2013	539			
Foreign Tax Paid	40	40		