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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

# **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2014, or tax year beginning 01-	01-2014	, a	nd ending 1	2-31-2014	
		ındatıon			A Employer id	entification numb	er
I F	E CROS	SSWOLS FOUNDATION			27-0186921		
		N TRUST COMPANY LLC I street (or P O box number if mail is not delivered to street addres:	s) Room/suite		<b>B</b> Telephone nu	mber (see instruction	ns)
		AIN STREET-3RD FLOOR	, , , , , , , , , , , , , , , , , , , ,		(646) 443-7770	)	
Cıtı	or town	, state or province, country, and ZIP or foreign postal code			C If evenntion	annlication is nendin	ng, check here 🕨 🦵
		CT 06902			C ir exemption	аррисацоп із репаш	ig, check here 📮 j
<u> </u>		II that apply Initial return Initial return of a	former public charit				_
GC	теск а	Final return  Amended return	Tormer public charic	У	_	ganizations, check h	• •
		Address change Name change				rganizations meeting k here and attach co	
		pe of organization Section 501(c)(3) exempt priva				undation status was t n 507(b)(1)(A), chec	
		4947(a)(1) nonexempt charitable trust Other taxa					
		ret value of all assets at end from Part II, col. (c),	I Cash I Acci	rual		ation is in a 60-mont n 507(b)(1)(B), chec	
		\$ 1,088,966 (Part I, column (d) mus.	t be on cash basis.)			( ) ( ) ( )	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) N	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	0				
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	15,254		15,254		
	5a	Gross rents	,		,		
	Ь	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	286,017				
	ь	Gross sales price for all assets on line 6a					
ž	7	Capital gain net income (from Part IV, line 2)			286,017		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and					
	Ь	Less Cost of goods sold					
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	301,580		301,271		
	13	Compensation of officers, directors, trustees, etc	0				
	14	Other employee salaries and wages					
Š.	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
Ä		Accounting fees (attach schedule)	_		403	0	402
	1	Other professional fees (attach schedule)	7,585		7,585		
ati	17	Interest	<b>%</b> 2,007		7		
Administrative	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	2,007		,		
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
and	22	Printing and publications					
ල පැ	23	Other expenses (attach schedule)	<b>%</b> 25				25
Operating	24	Total operating and administrative expenses.					
Ā		Add lines 13 through 23	10,422		7,995	0	427
ರ	25	Contributions, gifts, grants paid	63,150				63,150
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	73,572		7,995	0	63,577
	27	Subtract line 26 from line 12			·		·
	a	Excess of revenue over expenses and disbursements	228,008				
	ь	Net investment income (If negative, enter -0-)			293,276		
	c	Adjusted net income (If negative, 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	27,799	` ,	
	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			
	Ü	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			
ASS	9	Investments—U S and state government obligations (attach schedule)	20,915	<b>95.</b> 20,915	19,478
4	10a	Investments—corporate stock (attach schedule)	676,805		
			43,631	_	
		Investments—corporate bonds (attach schedule)	43,031	32,223	31,361
	11	Investments—land, buildings, and equipment basis			
	4.0	Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	258		
		Investments—other (attach schedule)	236		
	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	760 400	005 550	1 000 000
		Instructions Also, see page 1, item I)	769,408	995,558	1,088,966
	17	Accounts payable and accrued expenses			
y.	18	Grants payable			
abilities	19	Loans from officers, directors, trustees, and other disqualified persons			
ā	20	Mortgages and other notes payable (attach schedule)			
	21				
	22 23	Other liabilities (describe  )  Total liabilities (add lines 17 through 22)		0	
	23	Foundations that follow SFAS 117, check here		0	
S d)		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			
ala	2 <del>4</del> 25	Temporarily restricted			
E .	26	Permanently restricted			
Fund	20	Foundations that do not follow SFAS 117, check here			
ľΕ		and complete lines 27 through 31.			
s or	27	Capital stock, trust principal, or current funds	769,408	995,558	
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	703,100	333,330	
455	29	Retained earnings, accumulated income, endowment, or other funds			
Net ,		Total net assets or fund balances (see instructions)	769,408	995,558	
Z	30 31	Total liabilities and net assets/fund balances (see instructions)	769,408		
Do	rt III		703,400	373,330	
		Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a	1) line 20 /must =	gree	
1			i), line 30 (must a		769,408
2		Enter amount from Part I, line 27a		<del>                                     </del>	228,008
3		Other increases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	-1,858
<i>3</i> 4		Add lines 1, 2, and 3			995,558
5		Decreases not included in line 2 (itemize)			
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pai			995,558
		The state of the s	,	····	

	0-PF (2014)	nd Losses for Tax on Inve	stment Income	<b>.</b>		Page <b>3</b>
<u>rait 1</u>	(a) List and describe th	ne kınd(s) of property sold (e g , re ise, or common stock, 200 shs M	al estate,	( <b>b</b> ) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Ta	ble		D Donation		
b						
С						
<u>ч</u> е						
		(f) Depreciation allowe	d (a) Cost	or other basis	(b) Gain	or (loss)
(e)	) Gross sales price	(or allowable)	1-7	pense of sale		) minus (g)
а	See Additional Data Ta	ble				
b						
С						
d						
e						
10 0	mplete only for assets sho	owing gain in column (h) and owne	ed by the foundation	on 12/31/69	(I) Gains (Col	(h) gaın mınus
(i)	FM V as of 12/31/69	(j) Adjusted basis		cess of col (I)		less than -0-) <b>or</b> om col (h))
a	See Additional Data Ta	as of 12/31/69	overd	ol (j), if any	Losses (III	oni coi (ii))
 b	Dec / radicional Data Ta					
d						
<u>и</u> е						
		ſ	If gaın, also enter i	ın Part I. line 7 İ	<del> </del>	
2	Capital gain net income	e or (net capital loss)	If (loss), enter -0-		2	286,017
3	Net short-term capital	gain or (loss) as defined in sectio	ns 1222(5) and (6)	)		200,01,
-		rt I, line 8, column (c) (see instru				
	in Part I, line 8	· · · · · · · · · · · · · · · · · · ·	• • • •		3	
Part \	V Qualification Un	ider Section 4940(e) for R	educed Tax on	Net Investme		
		vate foundations subject to the se				
	·	-	section 13 To(a) tax	on nec mvestmene	medine /	
fsectio	on 4940(d)(2) applies, lea	ave this part blank				
	foundation liable for the s ' the foundation does not	section 4942 tay on the distribut				
,		qualify under section 4940(e) D			eriod?	┌ Yes ┌ No
	er the appropriate amoun		o not complete this	part		┌ Yes ┌ No
<b>1</b> Ent	(a)	qualify under section 4940(e) Do	o not complete this ee instructions befo	part pre making any ent	ries (d)	,
<b>1</b> Ent	··· ·	qualify under section 4940(e) De	o not complete this	part ore making any ent	ries	n ratio
<b>1</b> Ent	(a) period years Calendar	qualify under section 4940(e) Double tin each column for each year, so (b)	o not complete this ee instructions befo	part ore making any ent	ries (d) Distributior	n ratio
<b>1</b> Ent	(a) period years Calendar or tax year beginning in)	qualify under section 4940(e) Double in each column for each year, so (b)  Adjusted qualifying distributions	o not complete this ee instructions befo	part  pre making any ent  utable-use assets	ries (d) Distributior	n ratio by col (c))
<b>1</b> Ent	(a) period years Calendar or tax year beginning in) 2013	qualify under section 4940(e) Do at in each column for each year, so (b) Adjusted qualifying distributions 55,733	o not complete this ee instructions befo	part ore making any ent ortable-use assets 969,173	ries (d) Distributior	n ratio by col (c)) 0 057506
<b>1</b> Ent	(a) period years Calendar or tax year beginning in) 2013 2012 2011 2010	qualify under section 4940(e) Do it in each column for each year, so (b) Adjusted qualifying distributions  55,733  35,657  31,656  31,655	o not complete this ee instructions befo	part  pre making any ent  pritable-use assets  969,173  832,774  833,513  760,177	ries (d) Distributior	0 057506 0 042817 0 037979 0 041642
<b>1</b> Ent	(a) penod years Calendar or tax year beginning in) 2013 2012 2011 2010 2009	qualify under section 4940(e) Do at in each column for each year, so (b) Adjusted qualifying distributions  55,733  35,657  31,656  31,655  20,647	o not complete this ee instructions befo  (c)  Net value of nonchar	part  ore making any ent  ortable-use assets  969,173  832,774  833,513	ries (d) Distribution (col (b) divided	n ratio by col (c)) 0 057506 0 042817 0 037979
<b>1</b> Ent	(a) period years Calendar or tax year beginning in) 2013 2012 2011 2010 2009  Total of line 1, column (	qualify under section 4940(e) Do not in each column for each year, so (b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchar	part  ore making any ent  ortable-use assets  969,173  832,774  833,513  760,177  81,731	ries (d) Distributior	0 057506 0 042817 0 037979 0 041642 0 252621
<b>1</b> Ent Base year (o	(a) penod years Calendar or tax year beginning in) 2013 2012 2011 2010 2009  Total of line 1, column ( A verage distribution rai	qualify under section 4940(e) Do not in each column for each year, so (b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchare	part  ore making any ent  ortable-use assets  969,173  832,774  833,513  760,177  81,731	ries (d) Distribution (col (b) divided	n ratio by col (c)) 0 057506 0 042817 0 037979 0 041642 0 252621 0 432565
Base year (o	(a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column ( Average distribution rat the number of years the	(b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchare  vide the total on line e if less than 5 year	part  ore making any ent  ore making any ent  ore making any ent  ore making any ent  969,173  832,774  833,513  760,177  81,731   e 2 by 5, or by	(d) Distribution (col (b) divided	n ratio by col (c)) 0 057506 0 042817 0 037979 0 041642 0 252621 0 432565
Base year (o	(a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column ( Average distribution rat the number of years the Enter the net value of n	(b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchare vide the total on line e if less than 5 year from Part X, line 5	part  pre making any ent  969,173  832,774  833,513  760,177  81,731	(d) Distribution (col (b) divided	0 0 0 57506 0 0 42817 0 0 37979 0 0 41642 0 252621 0 432565 0 0 86513 1,061,854
Base year (o	(a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column ( A verage distribution rathe number of years the Enter the net value of n Multiply line 4 by line 3	(b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchar  vide the total on line e if less than 5 year from Part X, line 5	part  ore making any ent  ore making any ent  ore making any ent  ore making any ent  969,173  832,774  833,513  760,177  81,731   e 2 by 5, or by  ore making any ent  ore making any ent  e 2 by 5, or by	(d) Distribution (col (b) divided	n ratio by col (c)) 0 057506 0 042817 0 037979 0 041642 0 252621 0 432565 0 086513 1,061,854
1 Ent  Base year (of 1)  2 3 4 5 6	(a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column ( Average distribution rat the number of years the Enter the net value of n Multiply line 4 by line 3 Enter 1% of net investr	(b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchare vide the total on line e if less than 5 year from Part X, line 5	part  ore making any ent  ore making any ent  ore making any ent  ore making any ent  969,173  832,774  833,513  760,177  81,731   e 2 by 5, or by  ore making any ent  ore making any ent  e 2 by 5, or by	(d) Distribution (col (b) divided	0 0 0 5 7 5 0 6 0 0 0 4 2 8 1 7 0 0 3 7 9 7 9 0 0 4 1 6 4 2 0 2 5 2 6 2 1 0 4 3 2 5 6 5 0 0 8 6 5 1 3 1,06 1,8 5 4 9 1,8 6 4 2,9 3 3
Base year (o	(a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column ( Average distribution rat the number of years the Enter the net value of n Multiply line 4 by line 3 Enter 1% of net investr Add lines 5 and 6.	(b) Adjusted qualifying distributions  55,733 35,657 31,656 31,655 20,647 (d)	o not complete this ee instructions before (c) Net value of nonchare vide the total on line e if less than 5 year from Part X, line 5	part  pre making any ent  969,173  832,774  833,513  760,177  81,731   e 2 by 5, or by  fs	(d) Distribution (col (b) divided	0 057506 0 042817 0 037979 0 041642

Form	990-PF (2014)		Р	age <b>4</b>
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A"			
	on line 1			
	Date of ruling or determination letter(attach copy of letter if necessary-see			
h	instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check  1			. 066
b	,			5,866
	here F and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
	enter -0-) <b>2</b>			
3	Add lines 1 and 2		!	5,866
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			
_	enter -0-)  The board on investment income Cubtract line 4 from line 2. If none on less onten 0.			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		,	5,866
6	C redits/P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,325			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) 6c 11,000			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		1	2,325
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached 🚨 🔒			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>b</b>			5,459
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 6,459 Refunded 11			
	t VII-A Statements Regarding Activities			
1a	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
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
U	for definition)?	1b		No
		10		110
	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.			NI-
	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$ (2) On foundation managers  \$			
е	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? <i>If "Yes," attach a conformed copy of the changes</i>	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> 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			
	By language in the governing instrument, or	1	<u>'</u>	
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	l
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),	ا ا		
•	and Part XV.	. 7	Yes	
٥-		<b>—</b>		
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)	1		
1.	If the answer is "Yee" to line 7, has the foundation furnished a converted form 000. BE to the Attorney			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	٠.		
_	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 ►CHILTON TRUST COMPANY LLC Telephone no ►(203)	352-	4000	
	Located at ► 1290 E MAIN ST-3RD FLOOR STAMFORD CT ZIP+4 ► 06902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			► □
	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	103	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		<u> </u>	1
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t 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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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"			
	ıf the foundatıon 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		
	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?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	a.		
_	to <b>all</b> years listed, answer "No" and attach statement—see instructions)	2b		
С	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			
2-	► 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
h	any time during the year?			
J	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			1.5
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

	990-PF (2014)									Page <b>6</b>
Par	t VII-B Statements Rega		_		ich Form 4720	May	Be Required (cont	inue	d)	
5a	During the year did the foundation	n pay	or incurany amount	t to						
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e	)) <sup>?</sup>	No		
	(2) Influence the outcome of any	spec	ıfıc publıc electıon (	sees	section 4955), or to	carr	Y			
	on, directly or indirectly, any	vote	registration drive?.							
	(3) Provide a grant to an individu	ıal for	travel, study, or oth	ersi	ımılar purposes?		┌ Yes ┌	No		
	(4) Provide a grant to an organiz				· -					
	ın section 4945(d)(4)(A)? (s	ee in	structions)				\ Yes \	No		
	(5) Provide for any purpose othe	r thar	religious, charitable	e, sc	ientific, literary, or					
	educational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		T Yes 🗟	No		
b	If any answer is "Yes" to 5a(1)-	(5), d	ıd <b>any</b> of the transac	tions	s fail to qualify unde	r the	exceptions described in			
	Regulations section 53 4945 or	ın a c	urrent notice regard	ıng d	lisaster assistance (	(see	ınstructıons)?		5b	
	Organizations relying on a currer	nt not	ice regarding disaste	eras	sistance check here	e		_		
С	If the answer is "Yes" to questio	n 5a(	4), does the foundati	ion c	laım exemption from	n the				
	tax because it maintained expen	diture	responsibility for th	ie gra	ant?		<b>T</b> Yes <b>T</b>	- No		
	If "Yes," attach the statement requ	ııred L	y Regulations section	n 53.	4945-5(d).					
6a	Did the foundation, during the ye					pren	niums on			
	a personal benefit contract?							No		
ь	Did the foundation, during the ye	ar, pa	y premiums, directly	orı/	ndirectly, on a perso	onal b	penefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.	, ,	, , ,		,, .					
7a	At any time during the tax year,	was tl	ne foundation a party	/ to a	nrohibited tax shel	ter tr	ansaction? <b>Tyes</b> R	- No		
	If yes, did the foundation receive						, ,		7b	
							Managers, Highly			0496
Par	and Contractors	. 0.	neers, birectors	·, ··	ustees, i ounda		i Managers, inginy	raid	Linb	oyces,
1	List all officers, directors, trustee	s, fo	ındation managers a	nd t	heir compensation (	see ii	nstructions).			
		(b)	Title, and average		c) Compensation	1	(d) Contributions to	(e) F	xpens	e account,
	(a) Name and address	4	hours per week evoted to position	(1	If not paid, enter -0-)	1	nployee benefit plans deferred compensation			wances
FLEAN	OR CROSBY	+	AIRMAN	<u> </u>	0	<del>                                     </del>	0			0
	E MAIN STREET-3RD FLOOR	2 0	AIRMAN	ĺ	O		U			U
STAI	MFORD,CT 06902									
	TD HAMAR JD CPA	TRE		-		<u> </u>				
	E MAIN STREET-3RD FLOOR	74 ^	ASURER		0		0			0
	MFORD,CT 06902	1 0	ASURER		0		0			0
				hose			instructions). If none, e	nter "N	NONE."	0
2	MFORD, CT 06902  Compensation of five highest-paid	d emp	oloyees (other than t				instructions). If none, en			
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age		-see	instructions). If none, en (d) Contributions to employee benefit	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid	d emp	oloyees (other than t	age	e included on line 1–	-see	instructions). If none, en	(e) E	xpens	
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
2	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	d emp	loyees (other than t (b) Title, and avera hours per week	age	e included on line 1–	-see	instructions). If none, en (d) Contributions to employee benefit plans and deferred	(e) E	xpens	e account,
(a)	MFORD, CT 06902  Compensation of five highest-paid  Name and address of each emplo	yee	(b) Title, and avera hours per week devoted to position	age	(c) Compensatio	-see i	instructions). If none, el (d) Contributions to employee benefit plans and deferred compensation	(e) E	xpens	e account,

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 963.249 1h 114.775 1c 1d 1.078.024 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 1.078.024 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 16.170 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 1.061.854 5 53.093 **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.) 53.093 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 5.866 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 2c 5.866 3 3 47.227 4 4 5 5 47,227 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 47.227 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 63.577 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 63,577 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 63,577 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 fricollie (see liisti	uctions)			
		<b>(a)</b> Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
4	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2013	2013	47,227
	•				17,227
	Undistributed income, if any, as of the end of 2014  Enter amount for 2013 only			0	
	Total for prior years 2012, 2011, 2010				
	· · · · · · · · · · · · · · · · · · ·				
	Excess distributions carryover, if any, to 2014 From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013 8,337				
	Total of lines 3a through e	8,337			
	Qualifying distributions for 2014 from Part				
•	XII, line 4 🕨 \$ 63,577				
а	Applied to 2013, but not more than line 2a			0	
	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				47,227
е	Remaining amount distributed out of corpus	16,350			
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	24,687			
	Prior years' undistributed income Subtract	2.1,007			
U	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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
۵	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				ſ
7	be distributed in 2015				•
,	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.	24,687			
10	Subtract lines 7 and 8 from line 6a				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013 8,337				
	Excess from 2014 16,350				

Check here F 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 email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Name and address (home or business) any foundation manager or substantial contributor  a Paid during the year See Additional Data Table  show any relationship to any foundation manager or substantial contributor  see Additional Data Table  show any relationship to any foundation status of recipient status	3 Grants and Contributions Paid		proved for F	uture Payment	
Name and address (home or business)  a Paid during the year See Additional Data Table  Total	Recipient	If recipient is an individual, show any relationship to		Purpose of grant or	A mount
See Additional Data Table    Total		or substantial contributor		contribution	
	a Paid during the year See Additional Data Table	or substantial contributor	recipient		
b Approved for future payment				▶ 3a	63,150

Form 990-F						Page <b>12</b>
	-A Analysis of Income-Produci			T		
Enter gross	s amounts unless otherwise indicated	Unrelated b	usiness income (b)	Excluded by section (c)	(d)	(e) Related or exempt function income
_	n service revenue	Business code	A mount	Exclusion code	A mount	(See instructions )
·						
	and contracts from government agencies					
<b>3</b> Interes	rship dues and assessments st on savings and temporary cash ments					
	nds and interest from securities			14	15,254	
	ital income or (loss) from real estate					
	financed property ebt-financed property					
<b>6</b> Net ren	ntal income or (loss) from personal					
	ty			14	309	
	· (loss) from sales of assets other than			17	309	
	ory			18	286,017	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue <b>a</b>					
ь						
12 Subtota	al Add columns (b), (d), and (e)				301,580	
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify c			1	.3	301,580
	-B Relationship of Activities to	the Accom				
Line No.	Explain below how each activity for which the accomplishment of the foundation's instructions )					

Part	•XVII	Information Re Noncharitable					nsactio	ns and	Relationships	With			
		rganization directly or i 01(c) of the Code (othe	ndirectly	engage ır	n any of t	he following v						Yes	No
org	janızat	ions?											
<b>a</b> Tra	nsfers	from the reporting four	idation to	a noncha	arıtable e	xempt organ	ızatıon o	f					
(1)	) Cash	1									1a(1)		No
(2)	Othe	erassets									1a(2)		No
<b>b</b> Otl	her tra	nsactions											
(1)	) Sale:	s of assets to a noncha	rıtable ex	empt org	anızatıon						1b(1)		No
(2)	Purc	hases of assets from a	noncharit	able exe	mpt orga	nızatıon					1b(2)		No
(3)	Rent	al of facilities, equipme	nt, or othe	erassets							1b(3)		No
(4)	Reim	nbursement arrangemer	its								1b(4)		No
(5)	Loan	s or loan guarantees.									1b(5)		No
(6)	Perfo	rmance of services or n	nembersh	ıp or fund	Iraising s	olicitations.					1b(6)		No
<b>c</b> Sha	arıng o	f facilities, equipment,	mailing lis	sts, other	assets,	or paid emplo	yees.				<b>1</b> c		No
of t	the goo any tra	wer to any of the above ods, other assets, or se insaction or sharing arr (b) Amount involved	rvices giv angement	en by the c, show in	e reportir column	ng foundation	If the foot of the go	oundation of the	received less tha	n fair marko ces receivo	et value ed	<b>:</b>	nte
(a) Line	110	(b) Amount involved	(c) Name	. Of Horiena	mable exc	mpt organization	, (4	) Description	Tor transfers, transac	tions, and she	annig and	rigerrier	11.5
							-						
	-						-						
							_						
des	scribed	indation directly or indi d in section 501(c) of th complete the following (a) Name of organization	ne Code (d schedule		n section		or in sect			ption of relati		es <b>F</b>	No
Sign	the info	der penalties of perjury, best of my knowledge a rmation of which prepar	nd belief,	ıt ıs true	, correct					an taxpaye		sed on	all
Here		******  Signature of officer or t	rustee			2015-11-1 Date	<del></del>	******  Title	•	return - with the below	prepare	rshown	
										(see ins	tr )? 🔽 <u>`</u>	Yes	10
		Print/Type preparer's PAUL F NAPOLEON		Prepare	er's Sıgna	ature	Date		Check if self- employed ►	PTIN P	00369:	128	
Use	arer	Firm's name ► CHILTON TRUST CO	MPANY L	LC.			-		Firm's EIN ►	•			
Only		1290 EAST MAIN ST	REET S	TAMFOR	D,CT 0	6902			Phone no (20)	3)352-412	24		

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

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
PUBLICLY-TRADED SECURITIES	Р		
272 UNITS LAZARD LTD-A	Р	2014-10-06	2014-12-19
PUBLICLY-TRADED SECURITIES	Р		
GAIN THROUGH INTEREST IN BRANDYTRUST SPJ, LLC	Р		
CAPITAL GAIN DIVIDENDS	Р		

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

(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
22,192		11,450	10,742
37,899		39,571	-1,672
148,582		144,387	4,195
277,649		193,892	83,757
13,603		13,940	-337
563,589		378,031	185,558
649			649
			3,125

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))
			10,742
			-1,672
			4,195
			83,757
			-337
			185,558
			649

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		
a Paid during the year				
THE WILDCAT SANCTUARY PO BOX 314 SANDSTONE,MN 55072	NONE	PC	ANIMAL PROTECTION	2,000
TWIN CITIES PUBLIC TELEVISION 172 EAST FOURTH STREET ST PAUL, MN 55101	NONE	PC	PUBLIC BROADCASTING	30,000
TU DANCE PO BOX 40405 SAINT PAUL, MN 55104	NONE	PC	PERFORMING ARTS	2,000
FRIENDS OF THE MISSISSIPPI RIVER 360 NORTH ROBERT STREET SUITE 400 SAINT PAUL, MN 55101	NONE	PC	ENVIRONMENTAL PROTECTION	8,000
UNIVERSITY OF MINNESOTA 200 OAK STREET SOUTHEAST SUITE 500 MINNEAPOLIS,MN 554552010	NONE	PC	BELL MUSEUM ANNUAL FUND	250
AFTON HISTORICAL SOCIETY PRESS PO BOX 100 AFTON, MN 55001	NONE	PC	PUBLICATION OF REGIONAL BOOKS CELEBRATING MINNESOTA CULTURE AND HISTORY	150
AGNES IRWIN SCHOOL PO BOX 407 ROSEMONT,PA 19010	NONE	PC	FOSTER INTELLECTUAL AND PERSONAL GROWTH OF GIRLS AND YOUNG WOMEN	500
THE LIVESTOCK CONSERVANCY PO BOX 477 PITTSBORO,NC 273120477	NONE	PC	GENETIC CONSERVATION AND PROMOTION OF ENDANGERED BREEDS OF LIVESTOCK	150
ANIMAL HUMANE SOCIETY 845 MEADOW LANE NORTH GOLDEN VALLEY,MN 55422	NONE	PC	ANIMAL PROTECTION AND IMPROVEMENT OF THEIR QUALITY OF LIFE	150
ANNE KTAYLOR FUND 2724 ARVIN ROAD BILINGS,MT 59102	NONE	PC	CONSERVATION, PROTECTION AND RESTORATION OF BIODIVERSITY THROUGH SOUND ECONOMIC ACTIVITIES	250
ARTS PARTNERSHIP 345 WASHINGTON STREET SAINT PAUL, MN 55102	NONE	PC	FUNDRAISING FOR PERFORMING ARTS FACILITIES AND COLLECTIVE SERVICE TO THE COMMUNITY	10,000
AUGSBURG COLLEGE STEPUP PROGRAM 2211 RIVERSIDE AVENUE MINNEAPOLIS,MN 55454	NONE	PC	PRIVATE LUTHERAN FOUR- YEAR COLLEGE	250
WYOMING COMMUNITY FDN- BOBBY MODEL CHARITABLE FUND POBOX 427 CODY,WY 82414	NONE	PC	PROMOTE RESEARCH, CONSERVATION AND EXPLORATION-RELATED PROJECTS	150
CHILDREN'S THEATRE COMPANY & SCHOOL 2400 3RD AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE	PC	CREATE THEATRE EXPERIENCES THAT EDUCATE, CHALLENGE AND INSPIRE YOUNG PEOPLE	250
CONSERVATION MINNESOTA 1101 WEST RIVER PARKWAY SUITE 250 MINNEAPOLIS,MN 55415	NONE	PC	SOLVING CONSERVATION PROBLEMS OF MINNESOTANS	150
Total			▶ 3a	63,150

Recipient	l - c		I I	
•	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		
<b>a</b> Paid during the year				
CROSBY FUND FOR HAITIAN EDUCATION 19 BINNEY ROAD OLD LYME,CT 06371	NONE	PC	PROVIDING SCHOLARSHIPS FOR GIFTED HAITIAN STUDENTS	150
EARTH ISLAND INSTITUTE - THE BORNEO PROJECT 2150 ALLSTON WAY SUITE 460 BERKELEY,CA 94704	NONE	PC	CONSERVATION, PRESERVATION AND RESTORATION OF THE EARTH	150
FISHER'S ISLAND LIBRARY ASSOCIATION PO BOX 366 FISHERS ISLAND,NY 06390	NONE	PC	LITERARY, INFORMATIONAL AND CULTURAL ENRICHMENT PROGRAMS AND RESOURCES SERVING THE FISHERS ISLAND COMMUNITY	250
FOXCROFT SCHOOL PO BOX 5555 MIDDLEBURG, VA 20118	NONE	PC	SUPPORT OF ANNUAL FUND INSURING EDUCATION FOR YOUNG WOMEN	500
FRIENDS OF THE BOUNDARY WATERS WILDERNESS 401 NORTH THIRD STREET SUITE 290 MINNEAPOLIS,MN 55401	NONE	PC	PROTECTION AND PRESERVATION OF THE BOUNDARY WATERS CANOE AREA WILDERNESS AND QUETICO-SUPERIOR ECOSYSTEM	150
GILDER LEHRMAN INSTITUTE OF AMERICAN HISTORY 49 WEST 45TH STREET - 6TH FLOOR NEW YORK,NY 10036	NONE	PC	SUPPORTING PROGRAMS AND RESOURCES TO STUDENTS AND TEACHERS OF AMERICAN HISTORY	250
GRAYWOLF PRESS 250 THIRD AVENUE NORTH SUITE 600 MINNEAPOLIS,MN 55401	NONE	PC	SUPPORT FOR THE CREATION OF CONTEMPORARY LITERATURE	250
HISTORY THEATRE 30 E TENTH STREET SAINT PAUL, MN 55101	NONE	PC	SUPPORT FOR CREATION OF NEW WORKS THAT EXPLORE MINNESOTA'S PAST AND DIVERSE AMERICAN EXPERIENCE	150
INTERNATIONAL WOLF CENTER 3410 WINNETKA AVENUE NORTH MINNEAPOLIS,MN 55427	NONE	PC	PROMOTE AND EDUCATE THE PUBLIC ABOUT THE IMPORTANCE OF WOLVES	150
MIDDLETON PLACE FOUNDATION 4300 ASHLEY RIVER ROAD CHARLESTON,SC 294147206	NONE	PC	PRESERVATION OF HISTORIC LANDMARK	500
MIDWAY CONTEMPORARY ART 527 2ND AVENUE SE MINNEAPOLIS,MN 55414	NONE	PC	SUPPORT FOR THE CREATION OF VISUAL ARTS AND CULTURE	150
MILKWEED EDITIONS 1011 WASHINGTON AVENUES SOUTH SUITE 300 MINNEAPOLIS,MN 55415	NONE	PC	NURTURE AND PUBLISH TRANSFORMATIVE LITERATURE	150
MINNEAPOLIS SOCIETY OF FINE ARTS 2400 THIRD AVENUE SOUTH MINNEAPOLIS,MN 55404	NONE	PC	COMMUNITY ENRICHMENT THROUGH PRESERVATION AND ACCESS TO WORKS OF ART	2,500
MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY 26 EAST EXCHANGE STREET SUITE 206 SAINT PAUL, MN 55101	NONE	PC	RESEARCH AND PROTECTION OF MINNESOTA'S ENVIRONMENT AND NATURAL RESOURCES	150
MINNESOTA INTERNATIONAL CENTER 1901 UNIVERSITY AVENUE SE MINNEAPOLIS,MN 55414	NONE	PC	PROMOTING INTERNATIONAL UNDERSTANDING AND ENGAGEMENT	250
Total				63,150

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
· ·	or substantial contributor			
a Paid during the year				
MINNESOTA SHUBERT CENTER FOR DANCE & MUSIC - 528 HENNEPIN AVENUE MINNEAPOLIS, MN 55403	NONE	PC	SUPPORT FOR LOCAL DANCE PROGRAMS	150
MINNETONKA CENTER FOR THE ARTS 2240 NORTH SHORE DRIVE WAYZATA,MN 553919347	NONE	PC	PROMOTION AND SUPPORT FOR PERFORMING ARTS PROGRAMS	250
OPPORTUNITY INTERNATIONAL 2122 YORK ROAD SUITE 150 OAK BROOK,IL 60523	NONE	PC	SUPPORT FOR PEOPLE IN DEVELOPING NATIONS TO RISE FROM POVERTY	150
ORDWAY CENTER FOR THE PERFORMING ARTS 345 WASHINGTON STREET SAINT PAUL, MN 55102	NONE	PC	SUPPORT FOR PERFORMING ARTS AND CULTURAL PROGRAMS	250
PARKS & TRAILS COUNCIL OF MINNESOTA 275 EAST FOURTH STREET SAINT PAUL, MN 55101	NONE	PC	PROTECT AND ENHANCE CRITICAL LANDS	250
PROJECT FOR PRIDE IN LIVING 1035 EAST FRANKLIN AVENUE S MINNEAPOLIS, MN 55404	NONE	PC	SUPPORT AND PROMOTE PROGRAMS TO PROVIDE AFFORDABLE HOUSING, JOB TRAINING AND EDUCATION TO THOSE IN NEED	250
PROJECT SUCCESS ONE GROVELAND TERRACE SUITE 300 MINNEAPOLIS, MN 55403	NONE	PC	PROGRAMS TO INSPIRE AND MOTIVATE YOUNG PEOPLE	150
QUETICO SUPERIOR FOUNDATION 50 SOUTH 6TH STREET SUITE 1500 MINNEAPOLIS,MN 55402	NONE	PC	SUPPORT AND PROTECTION OF THE WILDERNESS, CULTURAL AND HISTORICAL RESOURCES OF THE QUETICO-SUPERIOR CANOE COUNTRY AND REGION	150
CHURCH OF THE ASCENSION 1723 BRYANT AVENUE N MINNEAPOLIS, MN 55411	NONE	PC	PROMOTE AND SUPPORT OF RELIGIOUS MINISTRIES AND PROGRAMS	150
SOUTH AFRICA PARTNERS INC 89 SOUTH STREET SUITE 701 BOSTON, MA 02111	NONE	PC	FOSTERING PARTNERSHIPS BETWEEN US AND SOUTH AFRICA TO TEACH YOUNG CHILDREN	250
TELLURIDE MEDICAL CENTER FOUNDATION 500 WEST PACIFIC AVENUE PO BOX 1229 TELLURIDE, CO 81435	NONE	PC	SUPPORT OF TECHNICAL EXCELLENCE AND RESOURCES AT THE MEDICAL CENTER	250
THE FAMILY PARTNERSHIP 414 SOUTH EIGHT STREET MINNEAPOLIS, MN 55404	NONE	PC	SUPPORT FOR PROGRAMS PROMOTING COUNSELING, EDUCATION AND ADVOCACY	150
TUBMAN 3111 FIRST AVENUE S MINNEAPOLIS, MN 55408	NONE	PC	PROMOTE AND SUPPORT SAFETY AND HEALTH FOR FAMILIES AND COMMUNITIES THROUGH EDUCATION, INTERVENTION AND PROTECTION	250
WAYZATA HISTORICAL SOCIETY 402 EAST LAKE STREET WAYZATA,MN 55391	NONE	PC	DISCOVERY, PRESERVATION AND DISSEMINATION OF HISTORICAL INFORMATION	150
WILDLIFE REHABILITATION CENTER OF MINNESOTA 2530 DALE STREET N ROSEVILLE, MN 55113	NONE	PC	PROVIDE SUPPORT FOR MEDICAL CARE AND REHABILITATION FOR WILDLIFE	150
Total	<u> </u>			63,150

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WILL STEGER FOUNDATION 2801 21ST AVENUE SOUTH SUITE 110 MINNEAPOLIS,MN 55407	NONE	PC	PROMOTE EDUCATIONAL PROGRAMS TO ENGAGE IN CLIMATE CHANGE	250
Total				63,150

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## **TY 2014 Accounting Fees Schedule**

Name: THE CROSSWOLS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	805	403		402

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

## **TY 2014 Depreciation Schedule**

Name: THE CROSSWOLS FOUNDATION



# **TY 2014 General Explanation Attachment**

Name: THE CROSSWOLS FOUNDATION

ldentifier	Return Reference	Explanation
Election to Amortize Bond Premium		Taxpayer hereby elects under Section 171(c) of the Internal Revenue Code to amortize bond premiums pursuant to Treasury Regularion 1 171-4(a)



# **TY 2014 Investments Corporate Bonds Schedule**

Name: THE CROSSWOLS FOUNDATION

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	32,223	31,581

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# **TY 2014 Investments Corporate Stock Schedule**

Name: THE CROSSWOLS FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCK & MUTUAL FUNDS	682,302	777,789

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# TY 2014 Investments Government Obligations Schedule

Name: THE CROSSWOLS FOUNDATION

**EIN:** 27-0186921

**US Government Securities - End of** 

Year Book Value: 20,915

**US Government Securities - End of** 

**Year Fair Market Value:** 19,478

**State & Local Government Securities - End of Year Book** 

Value:

State & Local Government Securities - End of Year Fair Market Value:



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

Name: THE CROSSWOLS FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BRANDYTRUST SPJ, LLC	AT COST		

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# **TY 2014 Other Expenses Schedule**

Name: THE CROSSWOLS FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VA LLC FILING FEE	25			25

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### **TY 2014 Other Income Schedule**

Name: THE CROSSWOLS FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
NONDIVIDEND DISTRIBUTIONS	309		



### **TY 2014 Other Increases Schedule**

Name: THE CROSSWOLS FOUNDATION

Description	Amount
BOOK ADJUSTMENTS	-1,858

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

Name: THE CROSSWOLS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT EXPENSES	7,410	7,410		
CUSTODY FEES	155	155		
INVESTMENT EXP - BRANDYTRUST	20	20		