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DLN: 93491134023015

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>.

Open to Public

For	cale	ndar year 2014, or tax year beginning 01-	01-2014	, aı	nd ending 1	2-31-2014	
		undation undation Inc			A Employer id	entification numb	er
					27-1938940		
		RGANIZATION I street (or P O box number if mail is not delivered to street address	s) Room/suite		B Telephone nu	mber (see instruction	ns)
	10 Mass ite 221	sachusetts Avenue			(202) 966-2932		
City	or town	n, state or province, country, and ZIP or foreign postal code			C If exemption	application is pendin	a, check here ▶ □
Was	hington,	, DC 20016			<u>r</u>		, ,
-	nack a	Il that apply Initial return Initial return of a	D.4 Faraian a	annumetrone abasir b			
G C	iecka	Final return Amended return	Torriller public charity	y	_	ganizations, check h ganizations meeting	th = 000/
		Address change Name change			test, chec	k here and attach co	mputation
		ype of organization Section 501(c)(3) exempt priva				ındatıon status was t n 507(b)(1)(A), ched	
		4947(a)(1) nonexempt charitable trust Other taxa					
		ket 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	
		\$ 3,897,920 (Part I, column (d) must	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 not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	1,908		1,908		
	4	Dividends and interest from securities	97,965		97,965		
Revenue	5a	Gross rents					
di	b	Net rental income or (loss)	25.066				
₹	6a	Net gain or (loss) from sale of assets not on line 10	35,066				
	b	Gross sales price for all assets on line 6a					
	7	Capital gain net income (from Part IV, line 2)			35,066		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	134,939		134,939		
	13	Compensation of officers, directors, trustees, etc	0				
υn.	14	Other employee salaries and wages					
JS &	15	Pension plans, employee benefits					
Expenses	16a b	Legal fees (attach schedule) Accounting fees (attach schedule)			2,300	0	2,300
	c	Other professional fees (attach schedule)	1,000		2,500		2,300
Administrative	17	Interest					
trat	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion					
를	20	Occupancy					
	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
2	23	Other expenses (attach schedule)	94		94	0	0
Operating and	24	Total operating and administrative expenses.					
Ē		Add lines 13 through 23			2,394	0	2,300
0	25	Contributions, gifts, grants paid	190,000				190,000
	26	Total expenses and disbursements. Add lines 24 and 25	194,694		2,394	0	192,300
	27	Subtract line 26 from line 12	23 ,,03 1		_,		
	а	Excess of revenue over expenses and disbursements	-59,755				
	ь	Net investment income (if negative, enter -0 -)			132,545		
	c	Adjusted net income (If negative, enter -0-)					

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		of year
		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	24,986	6,992	<u> </u>
	2	Savings and temporary cash investments	204	24,456	24,456
	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 🟲			
٢	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
Ă	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,119,265	2,053,252	3,812,582
	С	Investments—corporate bonds (attach schedule)	50,621	50,621	53,890
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🕨			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🕨			
	15	Other assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	2,195,076	2,135,321	3,897,920
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ē	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
lat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)		()
		Foundations that follow SFAS 117, check here 🕨 🔽			1
ěs.		and complete lines 24 through 26 and lines 30 and 31.			
and	24	Unrestricted	2,195,076	2,135,321	
33	25	Temporarily restricted			1
Ξ	26	Permanently restricted			1
Fund Balance		Foundations that do not follow SFAS 117, check here 🕨 🦵			1
or I		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1
	29	Retained earnings, accumulated income, endowment, or other funds			1
Net	30	Total net assets or fund balances (see instructions)	2,195,076	2,135,321	
_	31	Total liabilities and net assets/fund balances (see instructions)	2,195,076	2,135,321	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances			<u>'</u>
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	gree	
					2,195,076
2				2	-59,755
3		Other increases not included in line 2 (itemize)		3	
4		Add lines 1, 2, and 3		4	2,135,321
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)—F	Part II, column (b), lı	ne 30 . 6	2,135,321

Part .	(a) List and describe th	nd Losses for Tax on Inve ne kınd(s) of property sold (e g , re se, or common stock, 200 shs M	eal estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	CATERPILLAR INC				2011-01-03	2014-06-06
—	COCA COLA COMPAN	IY			2012-02-24	2014-06-06
	DU PNT EI DE NEMO				2010-06-08	2014-01-31
d	DU PNT EI DE NEMO				2010-06-08	2014-06-23
<u>u</u>	HALYARD HEALTH				2011-05-24	2014-11-03
		(f) Depreciation allowe	d (a) Cost	or other basis	1	or (loss)
(e	e) Gross sales price	(or allowable)	107	pense of sale) minus (g)
а	16	,066		14,24		1,820
	5	,066		4,68	0	386
С	29	,995		18,98	3	11,012
d	49	,934		28,09	4	21,840
		19		1		
	mplete only for accets she	owing gain in column (h) and owne	d by the foundation		+	
	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	ess of col (1) ol (j), if any	col (k), but not	(h) gain minus less than -0-) or om col (h))
a				377	-	1,820
b						386
						11,012
d						21,840
<u>е</u>						8
3	If gain, also enter in Pa	gain or (loss) as defined in section rt I, line 8, column (c) (see instru	ictions) If (loss), e)	3	35,066
If section Was the	cional use by domestic privion 4940(d)(2) applies, leads for the second condition liable for t	vate foundations subject to the serve this part blank section 4942 tax on the distribute qualify under section 4940(e)	ection 4940(a) tax	on net investment	income)	┌ Yes 🗸 No
		t in each column for each year, s			ries	
	(a) penod years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	itable-use assets	(d) Distribution (col (b) divided	
	2013	176,227		3,069,092		0 05742
	2012	158,318		2,851,123		0 055528
	2011	154,413		2,889,750		0 053435
	2010	23,045		1,759,597		0 013097
	2009	, 1, 1				0.17010
2 3	A verage distribution ra	(d)	vide the total on line	e 2 by 5, or by	3	0 17948
4		oncharıtable-use assets for 2014			4	3,591,684
5	Multiply line 4 by line 3				5	161,159
6		ment income (1% of Part I, line 2		├	6	1,325
7					7	162,484
8		utions from Part XII, line 4		_	8	192,300
•		reater than line 7, check the box				

	990-PF (2014) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio		age 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A"	Tuctio	115)	
1a	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		:	1,325
	here ► 🔽 and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2		:	1,325
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			1,325
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,005			
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			1,005
8	Enter any penalty 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			320
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
1a	t VII-A Statements Regarding Activities 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	105	No
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			-110
_	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
	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 \$\bigs\\$ = 0			
e	on foundation managers \blacktriangleright \$0			
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.	 		110
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			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions	ļ]	
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
ь	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 $4942(1)(3)$	35	. 63	
,	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 ► <u>N/A</u>			
14	The books are in care of ►THE ORGANIZATION Telephone no ►(202)	966-	2932	
	Located at ▶4910 MASSACHUSETTS AVENUE SUITE 22 Washington DC ZIP+4 ▶20016			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			,
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	ء ا	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	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
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(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 V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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			
L	after termination of government service, if terminating within 90 days) Yes V No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	16		
	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,	1.		Na
_	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			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
_	If the provisions of section 4942(a)(2) are being applied to any 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			
<i>-</i> u	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
_	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Da	rt VIII_B	Statements Bogs	rdi	a Activities for	. \A/L	nich Form 4720	May	Be Required (cont	inuo	ط١	r age c		
5a		year did the foundation				IICII FUI III 4720	та у	be Required (cont	mue	<i>u)</i> ∐			
Ja	_	on propaganda, or othe		•		uslation (soction 49	45(a))? \ \ \ Yes \ \	- No				
		· · · -		·	_	·			NO				
		nce the outcome of any	-	·		***			7 No				
		le a grant to an individu le a grant to an organiza							NO				
			.										
							• • •	Yes	/ No				
		le for any purpose other			-			_ <u> </u>	-				
								Yes F		'			
b	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?												
		_	. 5b										
	=	· -						▶∫					
С		wer is "Yes" to question	-	• •		•			_				
								T Yes 「	No				
		ttach the statement requ											
6a	Did the fo	undation, during the yea	ar, re	ceive any funds, dire	ectly	or indirectly, to pay	prem						
	a persona	l benefit contract?							No				
b	Did the fo	undation, during the yea	ar, pa	y premiums, directly	y or i	ndirectly, on a perso	onal b	enefit contract?		6b	No		
	If "Yes" to	6b, file Form 8870.											
7a	At any tım	ne during the tax year, w	vas tl	ne foundation a party	y to a	a prohibited tax shel	lter tra	insaction? TYes F	No				
b	If yes, dıd	the foundation receive	any	proceeds or have an	ıy ne	t income attributable	e to th	e transaction?		7b			
		Information Abou	t Of	ficers, Directors	s, T	rustees, Founda	ation	Managers, Highly	Paid	Emp	loyees,		
Pa	rt VIII	and Contractors											
_1	List all off	icers, directors, trustee	Ť						ı				
	(a) Nar	ne and address	(b)	Title, and average hours per week		c) Compensation If not paid, enter		d) Contributions to ployee benefit plans	(e)	Expens	e account,		
	(a) Nai	ne and address	d	evoted to position	l `	-0-)		deferred compensation	ot	herallo	wances		
Joan	Douglas Murra	ау	Pres	sident		0		. 0			0		
491	0 Massachi	usetts Avenue	1 0										
Was	hıngton, DC	20016											
Sara	Murray			ctor		0		0			0		
		usetts Avenue	1 0										
	hıngton, DC	20016											
David	d Murray		-	ctor		0		0			0		
		usetts Avenue	1 0										
	hington, DC					- :	<u> </u>			NONE "			
	Compensat	ion of five nignest-paid	emp	loyees (other than	tnos	e inciuaea on line 1-	-see II	nstructions). If none, energial (d) Contributions to	iter	NONE.			
(a) Name and	address of each emplo	vee.	(b) Title, and aver				employee benefit	(e)	Expens	e account,		
•		nore than \$50,000		hours per week devoted to positi		(c) Compensation	on	plans and deferred			wances		
				devoted to positi	<u> </u>			compensation					
				1									
							-+						
				1			- 1						
									\vdash				
				1			- 1						
	l number cf	other employees hald		<u> </u>				L .					
I OT 2	II HUMALAT	THE PERMITONAGE PAIN	iver	ちつし ししし。									

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
Total number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include 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 3.590.072 1h 56.308 1c 1d 3.646.380 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 3.646.380 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 54.696 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 3.591.684 5 179,584 **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.) 179.584 1 Tax on investment income for 2014 from Part VI, line 5. 1.325 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 1.325 3 3 178.259 4 4 5 5 178.259 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 178.259 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 192,300 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 O За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 192,300 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,325 190,975 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

Р	undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7				178,259
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			4,644	
b	Total for prior years 2012, 2011, 2010				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
	From 2013 0				
	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$			4.644	
	Applied to 2013, but not more than line 2a			4,644	
	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				178,259
	Applied to 2014 distributable amount	9,397			170,235
	Remaining amount distributed out of corpus	9,397			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,397			
b	Prior years' undistributed income Subtract line 4b from line 2b				
_	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				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	Instructions				
,	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				C
_	be distributed in 2015				
7	A mounts 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.	9,397			
	Subtract lines 7 and 8 from line 6a	9,397			
	Analysis of line 9				
_	Excess from 2010	1			
b	Excess from 2011 Excess from 2012	1			
c d	Excess from 2012	1			
-	Excess from 2014 9,397	4			
_		1	1		

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

Part XV Supplementary Inform	nation (continued)			Page 1
3 Grants and Contributions Paid		proved for F	uture Payment	1
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Additional Data Table				
				190,00
b Approved for future payment				
			line ou	

Form 990-	PF (2014) I-A Analysis of Income-Produci	na Activitio				Page 12
	s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
-	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
с						
е						
g Fees 2 Membe 3 Interes	and contracts from government agencies rship dues and assessments					
4 Divider	nds and interest from securities			14	99,873	
a Debt-	ntal income or (loss) from real estate financed property.					
6 Net rer	ebt-financed property					
8 Gain or	nvestment income			18	35,066	
9 Net inc	ome or (loss) from special events			10	33,000	
11 Other r	profit or (loss) from sales of inventory revenue a					
12 Subtota	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				134,939	
(See w	orksheet in line 13 instructions to verify ca	alculations)			13	134,939
Line No.	Explain below how each activity for whic the accomplishment of the foundation's instructions)	h income is re	ported ın column (e) of Part XVI-A c	ontributed importa	

Form 990-P	F(2014)										Рa	ge 13
Part XVI	Information R Noncharitable					actio	ns and I	Relationships \	With			
section	organization directly or 501(c) of the Code (oth	ındırectly e	ngage	ın any of	the following wit						Yes	No
organiza												
	rs from the reporting fou											۱
• •	sh									1a(1)		No
	nerassets		• •							1a(2)		No
	ansactions			. 	_					41.74		١
	es of assets to a noncha											No
	chases of assets from a											No
	ital of facilities, equipme									1b(3)		No No
	mbursement arrangeme ns or loan guarantees.									1b(5)		No
	ormance of services or i									1b(6)		No
	of facilities, equipment,									<u> </u>		No
d If the an	nswer to any of the above ods, other assets, or set ansaction or sharing ari	e is "Yes," ervices give rangement,	compl en by t show	ete the fol he reporti in column	llowing schedule ng foundation I	Colum f the fou the god	nn (b) sho undation r ods, other	uld always show th eceived less than	ne fair ma fair marke es receive	rket va et value ed	1	
(a) Line No	(b) Amount involved	(C) Name (or nonci	iailable ext	empt organization	(u)	Description	or transfers, transactio	nis, and sha	illig alla	ngemei	its
describe	oundation directly or ind ed in section 501(c) of t ' complete the following (a) Name of organization	he Code (o schedule		nan sectio	•	ın sectı	•	=		. TYe	es F	√ _{No}
the	der penalties of perjury e best of my knowledge formation of which prepa	and belief, rer has any	ıt ıs trı	ue, correc	2015-05-10		*****		May the return		sed on	all
	Signature of officer or t	trustee			Date		Title			tr)? 🔽 <u>\</u>	∕es	No
	Print/Type preparer's Jeffrey J Schragg	name	Prepa	ırer's Sıgn	nature	Date		Check if self- employed ▶	PTIN P(002345	543	
Paid Prepare Use						•		Firm's EIN ►				
Only	Firm's address ► 8405 GREENSBORO VA 22102	DRIVE 7T	H FLO	OR MCL	EAN,			Phone no (703)	893-060	00		

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		
a Paid during the year				
Berkeley-East Bay Humane Society 2700 Ninth Street Berkeley, CA 94710		PC	General support	10,000
Foundation for National Progress (Mother Jones) 222 Sutter Street Suite 600 San Francisco, CA 94108		PC	To support their Climate Desk	10,000
Bread for the City 1525 7th Street NW Washington, DC 20001		PC	To support hunger relief services to DC's at risk population	15,000
Chesapeake Bay Maritime Museum Navy Point PO Box 6366 St Michaels, MD 21663		PC	General support	25,000
Environmental Film Festival 12281/2 31st Street Washington, DC 20007		PC	General support	35,000
Days End Farm Horse Rescue PO Box 309 Lisbon,MD 21765		PC	General Support	10,000
Earth Policy Institute 1350 Connecticut Avenue NW Suite Washington, DC 20036		PC	General Support	10,000
Edible Schoolyard Project 1517 Shattuck Avenue Berkeley, CA 94709		PC	General Support	5,000
Fair Warning 17514 Ventura Blvd Suite 103 Encino, CA 91316		PC	General Support	5,000
FreshFarm Markets PO Box 15691 Washington, DC 20003		PC	General Support	20,000
Friends of the Highline 820 Washington Street New York, NY 10014		PC	General Support	5,000
Mırıam's Kıtchen 2401 Vırgınıa Avenue NW Washıngton, DC 20037		PC	General Support	35,000
Solar Electric Light Fund 1612 K Street NW Suite 300 Washington, DC 20006		PC	General Support	5,000
Total			▶ 3a	190,000

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OMB No 1545-0123

Sequence No 12A

Form **8949**

Internal Revenue Service

Department of the Treasury

Name(s) shown on return

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

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).

Schedule D.

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)

are not required to re	port these tre	ansactions of	(30	e madactions).			
ou must check Box A, B, or C belo orm 8949, page 1, for each applic omplete as many forms with the s	able box Ifyou	ı have more sh	ort-term transact	, ,		,	
(A) Short-term transactions re	ported on Form	n(s) 1099-B sh	nowing basis was	reported to the IR	S (see No	te above)	
(B) Short-term transactions re	ported on Form	n(s)1099-Bsh	nowing basis was	not reported to the	e IRS		
(C) Short-term transactions n	ot reported to y	ou on Form 10	99-B				
(a) Description of property (Example 100 sh XYZ Co)	I Date acquired I	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see <i>Column (e)</i>			(h) Gain or (loss) Subtract column (e) from column (d
(Exhipic 100 311 X12 00)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	and combine the resi with column (g

2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 1b	each total her (If Box A abov	e and e ıs			

checked), line 2 (If Box B above Is checked), or line 3 (If Box C above is checked)

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

Page 2

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side Farvue Foundation Inc

Social securitynumber or taxpayer identification number 27-1938940

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

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(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 Note below and see <i>Column</i> (e) in the separate instructions	If you enter a	ar fany, to gain or loss on amount in column (g), code in column (f) operate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
CATERPILLAR	01-03-2011	06-06-2014	16,066	(14,246)			1,820
COCA COLA CO	02-24-2012	06-06-2014	5,066	` ' '			386
DU PNT EI DE	06-08-2010	01-31-2014	29,995	` ' '			11,012
DU PNT EI DE	06-08-2010	06-23-2014	49,934	(28,094)			21,840
HALYARD HEAL	05-24-2011	11-03-2014	19	\ ' '			8
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 8b checked), line 9 (if Box E above is 6 Box F above is checked) Note. If you checked Box D above	each total her (If Box D abov checked), or lin	e and e is e 10 (if 	101,080	, , ,			35,066

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

TY 2014 Accounting Fees Schedule

Name: Farvue Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	4,600	2,300	0	2,300

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TY 2014 Depreciation Schedule

Name: Farvue Foundation Inc

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TY 2014 Investments Corporate Bonds Schedule

Name: Farvue Foundation Inc

Name of Bond	End of Year Book Value	End of Year Fair Market Value
25,000 EI DU PONT DE NEMOUR	24,804	26,453
25,000 MICROSOFT CORP	25,817	27,437

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TY 2014 Investments Corporate Stock Schedule

Name: Farvue Foundation Inc

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1400 APPLE INC.	77,597	154,532
2,450 AT&T INC	71,690	82,296
625 CATERPILLAR INC.	63,225	57,206
275 COCA-COLA	10,295	11,611
44,060 DU PONT E.I. DE NEMOURS	1,672,738	3,257,796
300 JOHNSON & JOHNSON	20,046	31,371
300 KIMBERLY-CLARK CORP	19,904	34,662
300 PEPSICO INCORPORATED	21,558	28,368
300 PROCTER & GAMBLE CO	20,379	27,327
1000 SEAGATE TECHNOLOGY	29,913	66,500
375 UNITED PARCEL SERVICE	30,096	41,689
375 VERIZON COMMUNICATIONS COM	14,966	17,542
37 HALYARD HEALTH INC	845	1,682

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TY 2014 Other Expenses Schedule

Name: Farvue Foundation Inc

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OFFICE AND ADMINISTRATIVE	94	94	0	0	