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## 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.

OMB No 1545-0052 .

Open to Public Inspection

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Fo	r cal	lendar year 2014 or tax year beginning		, 2014, and ending		, 20
		of foundation			A Employer identif	
-		EMIS FOUNDATION LTD.			31-172887	78
1	dumb	er and street (or P O box number if mail is not delivered	to street address)	Room/suite	B Telephone numb	per (see instructions)
(	c/o	JULIA V. PARRY			(	) –
	-	MONEY POINT ROAD				
	_	town, state or province, country, and ZIP or foreign pos	stal code			
	,			•	C If exemption applic pending, check her	ation is
1	MYS'	TIC, CT 06355				
G	Che	ck all that apply Initial return	Initial return	of a former public charit	y D 1 Foreign organiza	ations, check here ►
		Final return	Amended ref	turn	2 Foreign organiz	ations meeting the
		X Address change	Name chang	е	85% test, check	here and attach
Н	Che	ck type of organization   X   Section 501(	c)(3) exempt private f	oundation	'	
٢		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr		1 '	b)(1)(A), check here .
<u>+</u>			unting method X C			s in a 60-month termination
•		I ~	ther (specify)		<u> </u>	b)(1)(B), check here
		- / \	column (d) must be on cas	 sh hasis )	-  `	
		Analysis of Revenue and Expenses (The				(d) Disbursements
عَا	art	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	books	ınçome	income	purposes (cash basis only)
_		column (a) (see instructions) )	8,158.	-		(Outri Dutito Orlly)
	1	Contributions, gifts, grants, etc., received (attach schedule) .	0,130.	t > >		17 H
	2	attach Sch B	32.	32.		ATCH 1
-	3	Interest on savings and temporary cash investments.	4,851.	4,851.		ATCH 1
	4	Dividends and interest from securities	4,651	4,001.	<del></del>	ATCII ,Z
	5a	Gross rents				1
	b	Net rental income or (loss)		* , *		, *
e		Net gain or (loss) from sale of assets not on line 10				· · · · · · · · · · · · · · · · · · ·
enn	b	Gross sales price for all assets on line 6a		RECEN	1 22 14	
6	7	Capital gain net income (from Part IV, line 2) .	·			
œ	8	Net short-term capital gain,	<u> </u>	1 1		
	9	Income modifications	<u>-</u>	AUG 1 3	2015   9	1 -
	10 a	Gross sales less returns and allowances			33	,
	b	Less Cost of goods sold .		OCDEN		
	c	Gross profit or (loss) (attach schedule)		A The Party of the	المحتوث المحتودة	, ,
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	13,041.	4,883.		*
	13	Compensation of officers, directors, trustees, etc	C			
es	1	Other employee salaries and wages		T		
Su	15	Pension plans, employee benefits				
pe	16 a	Legal fees (attach schedule)				
ш		Accounting fees (attach schedule)ATCH 3	1,141.	571.		5
Ş	,	Other professional fees (attach schedule)				
ä	17	Interest				
str	10	Taxes (attach schedule) (see instructions) [4].	32.			
Ξ	10					
Ξ	20	Depreciation (attach schedule) and depletion.		† <u>-</u>		
Ä	20	Occupancy		<del>                                     </del>		
р	21	Travel, conferences, and meetings				<del> </del>
ā	22	Printing and publications	58.	<del>                                     </del>		
Ë	123	Other expenses (attach schedule) ATCH . 5		<del> </del>		<del> </del>
rat	24	Total operating and administrative expenses.	1,231.	571.		6
oe O		Add lines 13 through 23	23,000.			23,0
Ō	25	Contributions, gifts, grants paid	24 231	1: 1-		0 23,6
_	26	Total expenses and disbursements Add lines 24 and 25	24,231.	5/1.		23,6
	27	Subtract line 26 from line 12	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	a	Excess of revenue over expenses and disbursements	-11,190.	L	<del> </del>	<del> </del>
	b	Net investment income (if negative, enter -0-)		4,312.		<del> </del>
	-	Adjusted net income (if negative, enter -0-)	1	I i		1

JSA For Paperwork Reduction Act Notice, see instructions.

4E1410 1 000 CQF02N H692 7/29/2015 7:42:03 PM

_		(2014)	Attached schedules and amounts in the	Beginning of year	Er	nd of ye	ar	
P	art II	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(	c) Fair M	arket Value
$\neg$	<u>, 1</u>	Cash - non-interest-bear	ing					
	-	= -	cash investments	324,439.	300,29	9.		300,299.
					•			
			ubtful accounts ▶					
	4	Pledges receivable		- ·   '	,		-	
			ibtful accounts ▶					
	5	Grants receivable						
	6		officers, directors, trustees, and other					
	_		ttach schedule) (see instructions)					
	7	· ·	receivable (attach schedule)			,		
			ubtful accounts ▶					
s	8		se					
Assets	9		ieferred charges	I				
As	_	•	te government obligations (attach schedule)					
			e stock (attach schedule) ATCH 6		164,00	6.		294,497
		•	e bonds (attach schedule)					
	11	Investments - land, building	JS, 🕨			-	ŧ	
		and equipment basis Less accumulated depreci	ation					
	4.	(attach schedule)	loans					
	12 13	Investments - mongage	ach schedule)					
	14	Land, buildings, and	•					,
		equipment basis Less accumulated depreci	ation					
	15	(attach schedule)	<b>&gt;</b> )					
	16	Total assets (to be	completed by all filers - see the					
	"		page 1, item i)	1 455 455 1	464,30	)5.		594,796
_	17		accrued expenses					
	18	• •			·······		~ ,	•
'n	1						1 4_	•
Liabilities	20		ors, trustees, and other disqualified persons				-	
賣	20		otes payable (attach schedule)	l i			·	
흔	21	2 2	be $\blacktriangleright$ )					
	22	Office flabilities (describ	/			$\neg$	•	
	23	Total liabilities (add lin	es 17 through 22)	o		o	•	•
_	-		llow SFAS 117, check here . ▶				•	
	1		24 through 26 and lines 30 and 31.					
Ses		•					73	
Assets or Fund Balances	24							
Bal	25					<b>─</b>   ·		
þ	26	Permanently restricted				$\neg$		
Ē		Foundations that do	o not follow SFAS 117, $\blacktriangleright X$ nplete lines 27 through 31.					
č	:		•	637,428.	645,58	36.		
4	27	•	ncipal, or current funds		<del></del>	$\neg$	-	
S.	28	•	or land, bldg , and equipment fund	-161,933.	-181,28	31.		-
Ā	29		nulated income, endowment, or other funds	475,495.	464,30			
Net	30		nd balances (see instructions)	<u> </u>				
	31				464,30	05.		
		Analysis of Ch	anges in Net Assets or Fund Bala			- 1		
L	end	Analysis of Cha	halanes at hoginaing of year. Port	Il column (a) line 20 (i	must agree with			
•			balances at beginning of year - Part			1		475,495
			ted on prior year's return)			2	<del></del>	-11,190
2	z Eni	ter amount from Part	I, line 27a			3		
			uded in line 2 (itemize) ▶			4	<del></del>	464,305
						5		
	De	creases not included	balances at end of year (line 4 minus	s line 5) Part II solume /	b) line 30	6		464,305
- 1	a Tot	al net assets or fund.	palances at end of year (line 4 minus	s iiile 5) - Part II, COlumin (I	U), III IC JU	U		,

Form 990-PF (2014)

Part IV Cap	oital Gains a	and Losses for Tax on Inve	estment Income			
`		describe the kind(s) of property sold ( ck warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo., day, yr)
1a						
b		<del></del>		<u></u> .		
С						<u> </u>
d				<del> </del>	'	-
<u>e</u>	<del></del>	(A Description of Maried	(g) Cost or other basis	<del> </del>	#1. O	<u> </u>
(e) Gross sale	es price	(f) Depreciation allowed (or allowable)	plus expense of sale	ļ	(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
_b						
<u>c</u>				<del> </del>		<del></del>
<u>d</u>						<del></del>
Complete o	nly for assets sh	nowing gain in column (h) and owne	d by the foundation on 12/31/69	<del></del>		<del></del>
Complete of	The assets si		(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(i) FMV as of	f 12/31/69	(j) Adjusted basis as of 12/31/69	over col (j), if any	001.	Losses (from co	
a				<del> </del>		
b				<del> </del>		
<u>c</u>				-		
_d				<del> </del>		<del></del>
е		- 15	non also enter in Port I line 7	<del></del>		
2 Capital gain	net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Net short-tei	rm canital dair	or (loss) as defined in sections	• •	<del>-</del>		-
			tructions) If (loss), enter -0- in $\mathbf{l}$			
-		· · · · · · · · · · · · · · · · · · ·	4	3		
				1.5		<del></del>
(For optional use	by domestic (		duced Tax on Net Investment In e section 4940(a) tax on net investi		ne)	
(For optional use If section 4940(d Was the foundati	e by domestic ( f)(2) applies, le ion liable for th	private foundations subject to the eave this part blank ne section 4942 tax on the distrib	e section 4940(a) tax on net investi outable amount of any year in the b	ment incoi		Yes X No
(For optional use If section 4940(d Was the foundati If "Yes," the foun	e by domestic ( I)(2) applies, le ion liable for thi dation does no	private foundations subject to the eave this part blank he section 4942 tax on the distrib ot qualify under section 4940(e)	e section 4940(a) tax on net investi outable amount of any year in the b Do not complete this part	ment incor	17	Yes X No
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(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap  (a)  Base penod	by domestic (i)(2) applies, less ion liable for the dation does no opropriate among years	private foundations subject to the eave this part blank he section 4942 tax on the distrib ot qualify under section 4940(e)	e section 4940(a) tax on net investi outable amount of any year in the b Do not complete this part	ase period	ries (d)	atio
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(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap (a) Base penod Calendar year (or tax y) 2013 2012 2011 2010 2009	e by domestic particles, less than the liable for t	private foundations subject to the eave this part blank  ne section 4942 tax on the distribution 4940(e)  bunt in each column for each yea  (b)  Adjusted qualifying distributions  20,954.  21,169.  18,404.  17,224.  20,774.	outable amount of any year in the b Do not complete this part  r, see the instructions before makin  (c) Net value of nonchantable-use assets  492,638.  412,510.  421,681.  388,508.	ase period	ries (d)	atto (col (c)) 0.042534 0.051318 0.043644 0.044334
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(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap  Base penod Calendar year (or tax y)  2013  2012  2011  2010  2009  2 Total of line 3 Average distinumber of year  4 Enter the ne	to by domestic particles and liable for the dation does not be propriete amount of the dation does not be propriete amount of the dation does not be propriete amount of the dation of t	private foundations subject to the part blank  the section 4942 tax on the distributed qualify under section 4940(e) punt in each column for each year (b)  Adjusted qualifying distributions  20,954.  21,169.  18,404.  17,224.  20,774.  For the 5-year base period - dividuation has been in existence if less charitable-use assets for 2014 from the section of the sect	putable amount of any year in the bout bound complete this part  r, see the instructions before making  (c)  Net value of nonchantable-use assets  492,638.  412,510.  421,681.  388,508.  351,934.  e the total on line 2 by 5, or by the set than 5 years	ase period as any ent	ries (d)	0.042534 0.051318 0.043644 0.044334 0.059028 0.240858 0.048172 581,615.
(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap  Base period Calendar year (or tax y)  2013  2012  2011  2010  2009  2 Total of line 3 Average distinumber of year  4 Enter the ne  5 Multiply line  6 Enter 1% of	to by domestic part of the dation does not be propriate amount of the dation of the	private foundations subject to the part blank  the section 4942 tax on the distributed qualify under section 4940(e) fount in each column for each year (b)  Adjusted qualifying distributions  20, 954.  21, 169.  18, 404.  17, 224.  20, 774.  For the 5-year base period - dividuation has been in existence if less charitable-use assets for 2014 from the income (1% of Part I, line 27b)	outable amount of any year in the b Do not complete this part  r, see the instructions before makin  (c)  Net value of nonchantable-use assets  492,638.  412,510.  421,681.  388,508.  351,934.  e the total on line 2 by 5, or by the is than 5 years	ase period ag any ent	ries (d)	0.042534 0.051318 0.043644 0.044334 0.059028 0.240858 0.048172 581,615. 28,018.
(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap  Base period Calendar year (or tax y)  2013  2012  2011  2010  2009  2 Total of line 3 Average distinumber of year  4 Enter the ne  5 Multiply line  6 Enter 1% of	to by domestic part of the dation does not be propriate amount of the dation of the	private foundations subject to the part blank  the section 4942 tax on the distributed qualify under section 4940(e) fount in each column for each year (b)  Adjusted qualifying distributions  20, 954.  21, 169.  18, 404.  17, 224.  20, 774.  For the 5-year base period - dividuation has been in existence if less charitable-use assets for 2014 from the income (1% of Part I, line 27b)	outable amount of any year in the b Do not complete this part r, see the instructions before makin  (c) Net value of nonchantable-use assets  492,638.  412,510.  421,681.  388,508.  351,934.  e the total on line 2 by 5, or by the is than 5 years	ase period ag any ent	ries (d)	0.042534 0.051318 0.043644 0.044334 0.059028 0.240858 0.048172 581,615. 28,018.
(For optional use  If section 4940(d  Was the foundate If "Yes," the foun  1 Enter the ap (a) Base penod Calendar year (or tax y) 2013 2012 2011 2010 2009  2 Total of line 3 Average distinumber of year 4 Enter the ne 5 Multiply line 6 Enter 1% of 7 Add lines 5 a	to by domestic part of the dation does not be propriate amount of the dation of the	private foundations subject to the eave this part blank  ne section 4942 tax on the distributed qualify under section 4940(e)  ount in each column for each year  (b)  Adjusted qualifying distributions  20,954.  21,169.  18,404.  17,224.  20,774.  For the 5-year base period - dividilation has been in existence if less charitable-use assets for 2014 from the income (1% of Part I, line 27b)	outable amount of any year in the b Do not complete this part  r, see the instructions before makin  (c)  Net value of nonchantable-use assets  492,638.  412,510.  421,681.  388,508.  351,934.  e the total on line 2 by 5, or by the is than 5 years	ase period ase period g any ent  2 3 4 5	ries (d)	0.042534 0.051318 0.043644 0.044334 0.059028 0.240858 0.048172 581,615. 28,018.

Form	990-PF (2014) ARTEMIS FOUNDATION LID. SI-1/2			age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ction	s)
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 instructions)			0.0
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			86.
	here And enter 1% of Part I, line 27b		t	-
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of $\mathcal I$ Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			86.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			86.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to the (Form 8800)			
d	Backup withholding erroneously withheld			86.
7	Total credits and payments Add lines 6a through 6d			00.
8	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Γ	Yes	No
ıa	participate or intervene in any political campaign?	1a	163	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		x
	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	'		
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ı		,
	(1) On the foundation ► \$ 0 (2) On foundation managers ► \$ 0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$0		,	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities	ļ		]
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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_5_		Х
	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	1		l
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		х	-
_	conflict with the state law remain in the governing instrument?	<del>6</del> 7	X	<del> </del>
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	<b>-</b>	<del>-</del>	1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)  CO,		_	l
<b>h</b>	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>	ļ .	<del> </del>
-	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		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х
		00	0-PF	(2044)

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13	Х	
14	The books are in care of ▶ JULIA V. PARRY  Telephone no ▶ 860-536	-515	52	
	The books are in care of DULIA V. PARRY  Located at 36 MONEY POINT ROAD, MYSTIC, CT  Section 4947(a)(1) properement charatable trusts filling Form 990-PE in lieu of Form 1041 - Check here			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	T
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
	"Yes," enter the name of the foreign country			
Par	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		'	t
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			1
	, , , , , , , , , , , , , , , , , , , ,			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)		"-	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-	-	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	į	
	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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		,	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			-
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		}	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	- ,	,	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	_2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_				
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
<b>h</b>	at any time during the year?	i		
D	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		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		X
		qq	N-PE	(2014)

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Page 7 Form 990-PF (2014) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3

orm 9	90-PF (2014)		Page 6
Part	, see instructions )	gn foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		267,518.
	Average monthly fair market value of securities	1a 1b	322,954.
Ь	Average of monthly cash balances	1c	322, 934.
C	Fair market value of all other assets (see instructions)	1d	590,472.
a	<b>Total</b> (add lines 1a, b, and c)	- <del></del>	330/1/2.
e	1c (attach detailed explanation)	-	
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	590,472.
4	Subtract line 2 from line 1d		
-	instructions)	4	8,857.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	581,615.
6	Minimum investment return. Enter 5% of line 5	6	29,081.
Pari	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	29,081.
2 а	Tax on investment income for 2014 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2014 (This does not include the tax from Part VI).	,	
c	Add lines 2a and 2b	2c	86.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	28,995.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	28,995.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	28,995.
Par	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	23,628.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	23,628.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,628.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when o	alculatir	ig whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

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Pa	rt XIII Undistributed Income (see instru	ictions)		· · · ·	
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
•	1				28,995.
2	Undistributed income, if any, as of the end of 2014	· · · · · · · · · · · · · · · · · · ·		,	·····
a	Enter amount for 2013 only	4	·	22,890.	
	Total for pnor years 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014			,	<del>-</del>
а	From 2009			·	
b	From 2010	-		,	
С	From 2011	•	·		
d	From 2012				
е	From 2013			<del>.</del>	
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part XII,				
•	line 4 ▶ \$ 23,628.  Applied to 2013, but not more than line 2a	,	4	22,890.	
	• • • • • • • • • • • • • • • • • • • •				
D	Applied to undistributed income of prior years (Election required - see instructions)			,	
С	Treated as distributions out of corpus (Election		,	_ "	,
	required - see instructions)				738.
	Remaining amount distributed out of corpus				
е 5	Excess distributions carryover applied to 2014			-	<del></del>
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).) Enter the net total of each column as		•	,	
6	indicated below:				·
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5			,	
	Prior years' undistributed income Subtract	-			
	line 4b from line 2b			-	
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has	- -			-
	been issued, or on which the section 4942(a)	t			
	tax has been previously assessed	<u>.</u>			
d	Subtract line 6c from line 6b Taxable	~			,
	amount - see instructions				-
-	4a from line 2a Taxable amount - see				•
	instructions				<del></del>
f	Undistributed income for 2014 Subtract lines	A			
	4d and 5 from line 1 This amount must be distributed in 2015		ĺ		28,257.
7	Amounts treated as distributions out of corpus				-
7	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			1	
Ū	applied on line 5 or line 7 (see instructions)		-		
9	Excess distributions carryover to 2015.			-	
	Subtract lines 7 and 8 from line 6a	<u> </u>			
10	Analysis of line 9			,	
а	Excess from 2010	-			
b	Excess from 2011	1			
С		-			
d		_			
e	Excess from 2014	l			Form 990-PF(2014

orm	990-PF (2014)	ARTEMIS	CONDATION LTD.			31-1/28	
Рa	rt XIV Private Ope	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NO	T APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	atıng		
•	foundation, and the ruling	g is effective for 2014, e	nter the date of the ruling		▶		
b	Check box to indicate v	vhether the foundation	is a private operating	foundation described in	section	4942(J)(3) or	4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year_		Prior 3 years			(e) Total
2 a	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 201	11	(e) rotal
	I or the minimum investment return from Part X for each				1		_
	year listed	<u></u>					
ь	85% of line 2a						
	Qualifying distributions from Part						
·	XII, time 4 for each year listed .						
d	Amounts included in line 2c not						
	used directly for active conduct of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of					1	
	exempt activities Subtract line 2d from line 2c					[	
3	Complete 3a, b, or c for the						
_	alternative test relied upon	1				1	
a	"As sets" alternative test - enter				1		
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying</li></ul>		· · · · · · · · · · · · · · · · · · ·				
	under section						
b	4942(j)(3)(B)(i) "Endowment" alternative test-				ļ ·		
	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
c	"Support" alternative test - enter		<u> </u>	<del></del>	<del></del>		
Ĭ	(1) Total support other than						
	gross investment income				İ	1	
	(interest, dividends, rents, payments on secunties						
	loans (section 512(a)(5)),				}	j	
	or royalties)					<del></del>	<del></del>
	public and 5 or more				]		
	exempt organizations as provided in section 4942						
	(j)(3)(B)(III)	<del></del>			<del>                                     </del>		
	port from an exempt						
	organization						
Рa		ntary Information (	Complete this part	only if the found	lation had	\$5,000 or r	nore in assets
		during the year - s				,	
1	Information Regardin	g Foundation Manage	rs:		_	-	
а	List any managers of	the foundation who	nave contributed mor	e than 2% of the tota	al contributio	ns received b	y the foundation
	before the close of any	tax year (but only if tr	ney have contributed r	nore than \$5,000) (S	ee section 50	//(a)(2) )	
		D JULIA V. PARR					
b	List any managers of					in equally larg	e portion of the
	ownership of a partner	rsnip or other entity) o	rwnich the foundation	rnas a 10% or greater	interest		
	NONE Information Regardin		Oiff Lasa Sabalanah	in oto December.	<del></del>		<del> </del>
2		_		· ·			
	Check here ► X if t	the foundation only	makes contributions	to preselected char	itable organi	zations and o	does not accept
	unsolicited requests for other conditions, comp		• • •	ants, etc (see instruc	tions) to inai	viduals or org	anizations under
	•			ha naman ta whara an	nlinations also	ulal barradalarra	
а	The name, address, a	ina telephone number	or e-mail address of t	ne person to whom ap	plications sno	uid be address	ea
	The form in which app	lications should be su	hmitted and information	on and materials they	should includ	le .	
.,	o total in whiteh app			una materiale tricy	- I Gara II Glad	-	
C	Any submission dead	ines			· <del></del>		
	Any restrictions or li	mitations on awards	such as hy deods	inhical areas charits	thle fields b	inds of inetiti	Itions or other
u	factors	madons on awards	, sach as by geogra	ipinodi dicas, citatila	ibie neius, K	mas or msult	mons, or other

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Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual.	oved for F	uture Payment	
Name and address (home or husiness)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Falo during the your				
ATCH 8				
	ľ			
	,			
		}		
Total		<u></u>	▶ 3a	23,000.
b Approved for future payment				
		1		
	1	1	Į	1

Total .

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art XVI-A Analysis of Income-Produ	Unrole	ated business income	Excluded by	section 512, 513, or 514	(e)
ter gross amounts unless otherwise indicated	(a)	(b) Amount	(c)	(d)	Related or exempt function income
Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
ab					
с					
d	-	<u> </u>			<del></del>
e					
g Fees and contracts from government agencies	<del></del>				
Membership dues and assessments					
interest on savings and temporary cash investments			14	32.	
Dividends and interest from securities			14	4,851.	
Net rental income or (loss) from real estate				· .	
Debt-financed property			+		
b Not debt-financed property					
Net rental income or (loss) from personal property  Other investment income					
Gain or (loss) from sales of assets other than inventory	i				
Net income or (loss) from special events	1				
Gross profit or (loss) from sales of inventory	1				
Other revenue a					
b					
C					
d					
d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities	culations.) s to the Ad	complishment of E	xempt Purp	oses	4,88
e Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at the columns (b).  Relationship of Activities	culations.) s to the Act	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	4,88
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Exempt Organizations	Part )	_			ansfers To and		ions a	nd Relationshin	s With None			)
in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfer's from the reporting foundation to a nonchantable exempt organization of (1) Cash			Exempt Organ	nizations					<del> </del>			
a Transfers from the reporting foundation to a nonchantable exempt organization of  (1) Cash. (2) Other assets. (3) Other assets (assets to a nonchantable exempt organization, (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) The answer to any of the above is "Yes," complete the following schedule. (8) Leans or loan guarantees. (9) Leans or loan guarantees. (10) Leans or loan guarantees. (11) The properties asset, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. (9) Leans or loan guarantees. (10) Leans or loan guarantees. (11) A mount involved. (11) A mount involved. (12) A mount involved. (13) A mount involved. (14) Name of nonchambilitie exempt organization. (15) Loans or or organizations. (15) A mount involved. (16) Name of nonchambilitie exempt organization. (17) A mount involved. (18) N/A  (19) N/A  (19) N/A  (19) N/A  (10) Description of relationships  (19) N/A  (1										,	Yes	No
a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash . (2) Other transactions (1) Sales of assets to a nonchantable exempt organization . (2) Purchases of assets from a nonchantable exempt organization . (3) Rental of facilities, equipment, or other assets . (4) Reimbursement arrangements . (5) Loans or loan guarantees . (6) Performance of services or membership or fundrasing solicitations . (6) Performance of services or membership or fundrasing solicitations . (7) Sharing of facilities, equipment, maining lists, other assets, or paid employees . (8) Loans or loan guarantees . (9) Line no (1) Amount avoided . (9) Name of nonchantable exempt organization in the foundation of the found			• •	ode (other than	section 501(c)(3) o	rganızatıor	ns) or in	section 527, relatii	ng to political			
(1) Cash (2) Other assets.  b Other transactions (1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (16,3) X (4) Rental of facilities, equipment, or other assets (16,3) X (5) Loans or loan guarantees (16,9) Expression or loan guarantees (16,9) Expressio								•		ļ		
(2) Other transactions (1) Sales of assets to a noncharitable exempt organization. (1) Sales of assets from a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundrasing solicitations. (8) Performance of services or membership or fundrasing solicitations. (9) Performance of services or membership or fundrasing solicitations. (10) It is asset to any of the above is "res," complete the following schedule of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value or any fransaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any fransaction or sharing arrangement, show in column (b) the value of the goods, other sesses, or services given by the reporting foundation if the foundation received less than fair market value in any fransaction or sharing arrangement, show in column (b) the value of the goods, other sesses, or services received (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements of the goods, other sesses, or services received (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements of the goods, other sesses, or services received (a) Line no (b) Amount involved (c) The Code (other than section 501(c)(3)) or in section 527?  (a) I we not consider the following schedule (b) Type of organization (d) Description of transfers, transactions, and sharing arrangements (d) The value of the goods, other assets, or services services (e) Line no (e) Description of relationship.  (b) Type (f) Type (f) Type (f) Type (f) Ty			•	-								v
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(2) Purchases of assets from a noncharitable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundrating solicitations.  (6) Performance of services or membership or fundrating solicitations.  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received (9) Line no (9) Amount involved (9) Name of noncharitable exempt organization (4) Description of transfers, transactions, and sharing arrangements.  (8) Line no (9) Amount involved (9) Name of noncharitable exempt organization (9) Description of transfers, transactions, and sharing arrangements.  (9) If "Yes." complete the following schedule (9) Type of organization (9) Description of relationship (9) Description of relationship (9) Type of organization (9) Description of relationship (9) Descripti				naharitahla aya	mpt organization					46/41	1	x
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2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No if "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penjury, if declare that if have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penjury, if declare that if have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Under penalties of penjury, if declare that if have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Under penalties of penjury, if declare that if have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true.  Print Prin	Va	alue in	any transaction of	r sharing arran	gement, show in co	lumn (d) t	the value	e of the goods, oth	er assets, or s	ervice	s rece	eived
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line	no	<del>```</del>	(c) Name of	noncharitable exempt orga	anization			insactions, and shar	ng am	ngeme	nts
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name			<del></del>	<u> </u>				<del></del>				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name				-			<del> </del>					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name							<del> </del>					_
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name								·				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name												_
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name												
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name												
b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Signature of officer or trustee  Print/Type preparer's name  L/NDA O. Doty  Preparer  Preparer's signature  Preparer's signature  Date  Date  Date  Date  Check X if PTIN Proparer  Proparer  Proparer's signature  Date  Proparer  Proparer's signature  Date  Proparer  Proparer's signature  Date  Proparer's signature  Date  Date  Date  Proparer's signature  Proparer's signature  Date  Date  Date  Proparer's signature  Proparer's signature  Date  Date  Date  Proparer's signature  Proparer's signature  Date  Date  Proparer's signature  Date  Proparer's signature  Date  Proparer's signature  Date  Date  Date  Date  Proparer's signature  Date  Date  Date  Date  Date  Proparer's signature  Date	2a ls	the fo	oundation directly	or indirectly a	ffiliated with, or rela	ated to, or	ne or me	ore tax-exempt org	anizations			
(c) Description of relationship  Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Sign  Here  Signature of officer or trustee  Date  Print/Type preparer's name  L/NDA O. Doty  Preparer	d	escribe	ed in section 501(c	) of the Code (d	other than section 50	)1(c)(3)) oi	r ın secti	on 527?		Y	es X	No
Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Preparer's signature  Preparer's signature  LINDA O. DOTY  Date  Print/Type preparer's name  LINDA O. DOTY  Date  Proparer  Preparer's signature  Date  All Date  Print/Type preparer's name  LINDA O. DOTY  Date  Proparer  Preparer's signature  Date  All Date  Proparer  Preparer's signature  Date  All Date  Proparer  Preparer's signature  Date  Proparer  Preparer's signature  Date  All Date  Proparer  Proparer  Preparer's signature  Date  Proparer  Proparer  Preparer's signature  Date  Proparer  Proparer  Preparer's signature  Date  Proparer  Proparer  Proparer	<u>b</u> If	"Yes,"	complete the folio	wing schedule	,				<del> </del>			
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop			(a) Name of organization	on	(b) Type of c	rganization		(c) De:	scription of relations	ship		
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop				<del></del> _								
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop												
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop												
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop												
Sign Here  Correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  May the IRS discuss this return with the preparer shown below (see instructions)? X yes N  Print/Type preparer's name  Print/Type preparer's name  Preparer's signature  LINDA O. DOTY  Anda O. DOTY  Proparer  Prop		Under r	nenalises of nenury I dec	are that I have exam	aned this return including a	ccompanying	schedules a	nd statements and to the	hest of my knowledge	ie and	helief it	ıs tru
Here Signature of officer or trustee Date Title With the preparer shown below (see instructions)? X yes No.  Print/Type preparer's name Preparer's signature CPA 7/31/20/3 self-employed P00649754  Proparer Print/Type preparer's name Preparer's signature CPA 7/31/20/3 self-employed P00649754										,		
Print/Type preparer's name  LINDA O. DOTY  Preparer's signature  P	Sign	100	1 110 1/	PARIA	10. "	22015	P	and and				
Paid  Print/Type preparer's name  Preparer's signature  Preparer's	Here	Sign	ture of officer or trustee	wie	Date Date	7 8013	Title	esecon			. r	
Propager LINDA O. DOTY Sanda O. Day CPA 7/31/2013 self-employed P00649754		""	tano or ormoor or trustee	τ	Dail F				(see manuchon	.5).		
Propager LINDA O. DOTY Sanda O. Day CPA 7/31/2013 self-employed P00649754		~Т	Print/Type preparer's na	ame	Preparer's signature			Date	Check X if	PTIN		
Dranger - Domy c accortance	Paid		_ >		Buda O	J.J.	CPA	1 / /	* Cecv []		4975	54
	Prepa	arer	. DV		CIATES	7		<del></del>				

Form 990-PF (2014)

303-985-0602

80228-1838 Phone no

Use Only

Firm's address > 141 UNION BLVD., #450

LAKEWOOD, CO

### Schedule B (Form 990, 990-EZ, or 990-PF)

**Schedule of Contributors** 

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Department of the Treasury Internal Revenue Service ▶ information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Name of the organization		Employer identification number
ARTEMIS FOUNDATION	LTD.	
		31-1728878
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
	on filing Form 990, 990-EZ, or 990-PF that received, during the ye y or property) from any one contributor. Complete Parts I and II. S contributions	<del>-</del>
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that n sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A and that received from any one contributor, during the year, total of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-	A (Form 990 or 990-EZ), Part II, line contributions of the greater of (1)
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 9 g the year, total contributions of more than \$1,000 exclusively for cional purposes, or the prevention of cruelty to children or animals	religious, charitable, scientific,
contributor, durin contributions tota during the year fo General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 9 g the year, contributions exclusively for religious, charitable, etc., led more than \$1,000. If this box is checked, enter here the total or an exclusively religious, charitable, etc., purpose. Do not completelies to this organization because it received nonexclusively religious more during the year.	purposes, but no such contributions that were received ete any of the parts unless the s, charitable, etc, contributions
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special Rules do nust answer "No" on Part IV, line 2, of its Form 990, or check the to certify that it does not meet the filing requirements of Schedule	box on line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization ARTEMIS FOUNDATION LTD.

Employer identification number

			31-1/288/8
Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JULIA V. PARRY  36 MONEY POINT ROAD  MYSTIC, CT 06355	\$ 8,100.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization ARTEMIS FOUNDATION LTD.

Employer identification number 31-1728878

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ 3	160.048 SHARES VANGUARD TOTAL STOCK MARKET INDEX FUND (VTSMX)		
		\$8,100.	12/18/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

**Employer identification number** 31-1728878

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) ▶ \$ Use duplicate copies of Part III if additional space is needed				
(a) No. from Part l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
			ationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4 Re	lationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	and ZIP + 4 Re	lationship of transferor to transferee		

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	32.
REVENUE AND EXPENSES PER BOOKS	32.
NO	SCHWAB & CO INC.
NOTHOTODOGU	CHARLES SCHWAB

TOTAL

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	4,851.	4,851.
REVENUE AND EXPENSES PER BOOKS	4,851.	4,851.
		TOTAL
DESCRIPTION	CHARLES SCHWAB & CO INC.	

5

3	
ATTACHMENT	

CHARITABLE	570.	570.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	571.	571.
REVENUE AND EXPENSES PER BOOKS	1,141.	1,141.
DESCRIPTION	DOTY & ASSOCIATES - TAX RETURN	TOTALS

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

2013 FED EXCISE TAX PAYMENT

32.

TOTALS

32.

2

ATTACHMENT

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS

48. 10.

DESCRIPTION POSTAGE FILING FEES

10,

58.

TOTALS

48.

CHARITABLE PURPOSES 58.

ATTACHMENT 5

STOCK
CORPORATE
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PART
990PF,
FORM

ARTEMIS FOUNDATION LID.

		INDEX
		TUND K MKT
		NDEX STOCE
- / -	NO	500 INDEX FUND TOTAL STOCK MKT
1 - 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	DESCRIPTION	VANGUARD VANGUARD
	DES	VANG

ENDING	FMV
ENDING	BOOK VALUE

156,628. 137,869.	
69,428. 94,578.	

294,497.

TOTALS

ATTACHMENT 6

EXPENSE ACCT AND OTHER ALLOWANCES

АТТАСНМЕ	CONTRIBUTIONS E TO EMPLOYEE BENEFIT PLANS	0
	COMPENSATION	0
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT/DIRECTOR 1.00
FORM 990PE, PART VIII -	NAME AND ADDRESS	JULIA V. PARRY 36 MONEY POINT ROAD MYSTIC, CT 06355

0

0

0

0

SEC/TREAS/DIRECTOR

1.00

JOHN R. PARRY
36 MONEY POINT ROAD
MYSTIC, CT 06355

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GRAND TOTALS	

FORM 990PF,

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PART

AMOUNT	AROUND 5,000.	ISIITON 2,500.	A 7,500.	ND EQUIP 5,000.	E ElJING
PURPOSE OF GRANT OR CONTRIBUTION	FREE MEDICAL TREATMENT TO DESPERATE WOMEN AROUND THE WORLD	WHITE BARN REFURBISHMENT-COOGAN FARM ACQUISIITON	EBOLA PROJECT-HOSPITAL BEDS TO WEST AFRICA	MATERNAL AND CHILD HEALTH PROGRAM-TRAIN AND EQUIP MIDWIVES	PREPARE UNITED NATIONS EVENTS TO EMPHASIZE GOVERNMENTS' FAILURES TO LIVE UP TO THE BEIJING PLATFORM FOR ACTION
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE PC	NONE PC	NONE PC
RECIPIENT NAME AND ADDRESS	THE FISTULA FOUNDATION 1900 THE ALAMEDA, SUITE 500 SAN JOSE, CA 95126-1427	DENISON PEQUOTSEPOS NATURE CENTER PO BOX 122 MYSTIC, CT 06355	PROJECT CURE (BENEVOLENT HEATHCARE FOUNDATION) 10377 E. GEDDES AVE., SUITE 200 CENTENNIAL, CO 80112	DIRECT RELIEF INTERNATIONAL 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117-3214	EQUALITY NOW 250 WEST 57TH ST, STE 1720 NEW YORK, NY 10107

TOTAL CONTRIBUTIONS PAID

23,000.

7:42:03 PM

### Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To rile an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

THE THE TOTAL	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		<del></del>	<del></del>		
<ul> <li>If you are</li> </ul>	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Month lette Part II unless you have already been grain to the state of t	onth Exten	sion, complete only P	art II (on page 2 of this form)	<del></del>	
Electronic fi a corporation 8868 to req Return for	ling (e-file). You can electronically file Form an required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Persona. For more details on the electronic filing of the	8868 if yo ial (not aut forms liste I Benefit (	u need a 3-month auto comatic) 3-month exter id in Part I or Part II w Contracts, which mus	omatic extension of time to file (6 nsion of time. You can electronical in the exception of Form 8870, it be sent to the IRS in paper.	months for ally file Form Information format (see	
Part I Au	tomatic 3-Month Extension of Time. On	ly submit	original (no copies n	eeded).		
	n required to file Form 990-T and requesting					
All other cor	porations (including 1120-C filers), partnersh	 ıps, REMIC	Cs, and trusts must use	Form 7004 to request an extension		
to file incom	Name of exempt organization or other filer, see in	structions		Enter filer's identifying number, so Employer identification number (EIN)		
Type or	Hame of exempt organization of other mer, see in	30 dellons		Employer Identification number (EIN)	ation number (EIN) or	
print	ARTEMIS FOUNDATION LTD.			31-1728878		
File by the	Number, street, and room or sulte no If a P.O box	x, see instruc	ctions.	Social security number (SSN)		
due date for	C/O JULIA V. PARRY, 36 MONEY			Cocial Security Hamber (CON)		
filing your retum See	City, town or post office, state, and ZIP code. For			<del></del>		
instructions	MYSTIC, CT 06355	_				
Enter the Re	eturn code for the return that this application	is for (file a	separate application for	or each return)	0 4	
Application		Return	Application		Return	
Is For		Code	ls For		Code	
Form 990 o	Form 990-EZ	01	Form 990-T (corpora	tion)	07	
Form 990-B	L	02	Form 1041-A	Form 1041-A		
Form 4720	(ındıvıdual)	03	Form 4720 (other that	Form 4720 (other than individual)		
Form 990-P	F	04	Form 5227	Form 5227		
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069	rm 6069		
Form 990-T	(trust other than above)	06	Form 8870		12	
	s are in the care of ▶JULIA V. PARRY,	36 MONE	Y POINT ROAD MY	/STIC, CT_06355		
Telephon	e No ► 860 536-5152		FAX No ▶			
• If the org	anization does not have an office or place of	business ir	the United States, che	ck this box	. ▶ 📗	
	or a Group Return, enter the organization's fo				his is	
	le group, check this box		art of the group, check	this box ▶ L and at	tach	
	e names and EINs of all members the extens					
•	est an automatic 3-month (6 months for a cor			· · · · ·		
until_		exempt or	ganization return for the	e organization named above. The	extension is	
	organization's return for.					
► X	calendar year 20 14 or	00		••		
▶[	tax year beginning					
2 If the	tax year entered in line 1 is for less than 12 m	onths, che	ck reason. 🔃 Initial i	return Final return		
	Change in accounting period			<del></del>		
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the	tentative tax, less any		
	fundable credits. See instructions.	4700	2000	3a \$	86.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$ 0						
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS						
(Electronic Federal Tax Payment System) See instructions 3c \$ 86.  Caution If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment						
-	ou are going to make an electronic funds withdrawa	ıı (airect det	ni) with this Form 8868, s	ee Form 8453-EO and Form 8879-EO f	or payment	
Instructions	Act and Paperwork Reduction Act Notice, see inst	ructions		Ear OOCC	Rev 1-2014)	
roirnivacy	mot and a abelia of Vennetion Ver House, see mist			Low 0000	/ (NEV 1-2014)	