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# Form **990-PF**

EXTENDED TO AUGUST 17, 20: 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

Department of the Treasury Internal Revenue Service

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

Fore	calendar year 2014 or tax year beginning			, and ending		
Nar	me of foundation				A Employer identification	on number
$\mathbf{T}$	THE NOMMONTU FOUNDATION	I, N	NC.			
F	F/K/A MARISA MULLER CH	ARIT	ABLE FOUNDAT	IO	31-178745	5
Nun	mber and street (or PO box number if mail is not delivered	to street	address)	Room/suite	8 Telephone number	
C	C/O FIDUCIARY TRUST 20	) so	UTH BISCAYNE	3050	305-349-2	368
-	ty or town, state or province, country, and ZIP or t				C If exemption application is	pending, check here
_	MIAMI, FL 33131					<b>3</b> ,
	Check all that apply: Initial return		Initial return of a fo	ormer public charity	D 1. Foreign organizatio	ns. check here
_ `	Final return		Amended return	,		,
	Address change		Name change		Foreign organizations in check here and attach	meeting the 85% test,
н С		(c)(3) ex	empt private foundation		7	
	Section 4947(a)(1) nonexempt charitable trus	` `—	Other taxable private founda	ation	E If private foundation s under section 507(b)(	
L Fa			ng method: X Cash	Accrual	7	
	from Part II, col. (c), line 16)	_	ther (specify)	Noordar	F If the foundation is in under section 507(b)(	
-	\$ 7,114,564.	t L. colu	mn (d) must be on cash b	basis )	under section 507(b)(	T)(D), GIROK HEIC
_	art   Analysis of Revenue and Expenses	.,			(a) Advicted not	(d) Disbursements
FC	(The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a) )	nay not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for charitable purposes (cash basis only)
	T		, , ,		N/A	(cash pasis only)
	1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach	Sch B		<del> </del>	IN/A	1
	Interest on sayings and temporary	OUII D	54,941.	54,941	<del></del>	STATEMENT 1
			102,159.	102,159		STATEMENT 2
	4 Dividends and interest from securities		104,139.	104,139	•	DIVIEWENI 7
	5a Gross rents					+
	b Net rental income or (loss)		264 550			
e	62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		264,559.		+	
ē	b Gross sales price for all 2,488,4	3/.		264 550	-	
Revenue	7 Capital gain net income (from Part IV, line 2)			264,559	•	
	8 Net Snort-term capital gain				-	
	9 Income modifications Gross sales less returns					
	10a and allowances			·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·	+	
	b Less Cost of goods sold				-	
	c Gross profit or (loss)		2 507			STATEMENT 3
	11 Other income		2,597. 424,256.	0 421,659		STATEMENT 3
	12 Total. Add lines 1 through 11		7 0.	421,639		0.
	13 Compensation of officers, directors, trissdes/dic	ט	0.		•	0
	14 Other employee salaries and wages	7	<del>\</del>			
Š	15 Pension plans, employee benefits	ς   δ	<b>b</b>		-	-
nSe	16a Legal fees   S JUN 01 201		3,500.	875		2,625
Expenses	b Accounting fees STMT		43,690.	21,845		21,845
		1 h	43,030	41,040	•	41,043
Administrative	17 Interest STMT	6	49,534.	2,654		0
stra	18 Taxes STMT	U	45,334.	4,054	•	
ij	19 Depreciation and depletion			<u> </u>	<del> </del>	<del></del>
Ē	20 Occupancy				<del>                                     </del>	<del>- </del>
Þ	21 Travel, conferences, and meetings			<u>-</u>	-	
and,		7	2 777	^	+	
ting	23 Other expenses STMT	7	2,777.	0	•	0
perating	24 Total operating and administrative		00 501	25 274		24 470
ŏ	<b>N</b> I		99,501. 425,000.	25,374	•	24,470 425,000
-	25 Contributions, gifts, grants paid		445,000.		<del> </del>	425,000
	26 Total expenses and disbursements.		524 E01	25 274		449,470
	Add lines 24 and 25		524,501.	25,374	•	445,470
	27 Subtract line 26 from line 12;		_100 245			
	a Excess of revenue over expenses and disburseme		-100,245.	206 205		
	b Net investment income (if negative, enter -0-)			396,285		<del></del>
	C Adjusted net income (if negative, enter -0-)		1		N/A	

LHA For Paperwork Reduction Act Notice, see instructions.

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_			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	5,791,0
2	Enter amount from Part I, line 27a	2	-100,2
3	Other increases not included in line 2 (itemize)	3	

3 Other increases not included in line 2 (itemize) ► 3 0
4 Add lines 1, 2, and 3 4 5, 690, 840

5 Decreases not included in line 2 (itemize) ► 5 0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 5,690,840.

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Part III Analysis of Changes in Net Assets or Fund Balances

31-1787455

Рапе	2

Part IV Capital Gains	and Losses for Tax on in	ivesiment ii				·
	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 sha			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FIDUCIARY TRUS	T #6100 (SEE ATT	ACHED)		P	VARIOUS	VARIOUS
b FIDUCIARY TRUS				P	VARIOUS	VARIOUS
6 FIDUCIARY TRUS		ACHED)		P	VARIOUS	VARIOUS
	I HOTOO (BELL	<b>АСПЦ</b>			VILITOOD	VIECEGOD
<u>d</u>						<del></del>
e (e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (los (e) plus (f) minus	
a 514,510.	,		492,83	7		21,673.
4 005 454	<u></u>	<del></del>	910,15			94,999.
			820,889			147,887.
<u>c</u> 968,776.		-	040,00.	<b>7</b> •		14/,00/•
<u>d</u>						
e			10/01/00			<del></del>
(i) F.M.V. as of 12/31/69	ggain in column (h) and owned by  (j) Adjusted basis	(k) Exces	s of col. (1)		(I) Gains (Col. (h) gai col. (k), but not less th Losses (from col.	an -0-) <b>or</b>
(1)1.101.0. 23 01 12/0 1/03	as of 12/31/69	over co	l. (j), if any			
_a						21,673.
b						94,999.
C						147,887.
d						
e						
2 Capital gain net income or (net ca	If gain, also ente	r in Part I, line 7		} 2		264,559.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8				3	N/2	A
Part V   Qualification L	Inder Section 4940(e) for	Reduced T	ax on Net	Investment	Income	
(For optional use by domestic private	e foundations subject to the section	4940(a) tax on пе	t investment ind	come.)		
If section 4940(d)(2) applies, leave t	his part blank.					
Was the foundation liable for the sec	tion 4942 tax on the distributable an	nount of any year	in the base peri	od?		X Yes No
If "Yes," the foundation does not qua	lify under section 4940(e). Do not co	omplete this part.				
	each column for each year; see the I	instructions before	e making any en			(4)
(a) Base period years Calendar year (or tax year beginni	ing in) Adjusted qualifying dis	stributions	Net value of nor	(c) ncharitable-use a: 	ssets Distr (col. (b) d	(d) ibution ratio ivided by col. (c))
2013						
2012						
2011						
2010						
2009						
1000						
2 Total of line 1, column (d)					2	
	5-year base period - divide the total	on line 2 by 5 or	hy the number (	of vears	-	·
		un mie z by 3, or	by the number (	ui years		
the foundation has been in existe	ence ii iess man 5 years				3	
4 Enter the net value of noncharital	ble-use assets for 2014 from Part X,	line 5			4	
5 Multiply line 4 by line 3					5	
	mo /19/ of Dort Line 27h)				6	
6 Enter 1% of net investment incor	116 ( 176 OI MART I, IINE 270)				6	
7 Add lines 5 and 6					7	
8 Enter qualifying distributions from	·				8	
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and complet	e that part using	a 1% tax rate.		
423521 11-24-14						Form <b>990-PF</b> (2014)

THE NOMMONTU FOUNDATION, INC.

Form 990-PF (2014) F/K/A MARISA MULLER CHARITABL Part VI Excise Tax Based on Investment Income (Section 494)		31-178 948 - see			Page 4 ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and Date of ruling or determination letter: (attach copy of letter if ne b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	ecessary-see instructions)	1		7,9	26.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2		3		7,9	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		7,9	<u> 26.</u>
6 Credits/Payments:	1 1 0 000				
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 8,080.				
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c	<b> </b>			
d Backup withholding erroneously withheld	6d	{ <u> </u>			0.0
7 Total credits and payments. Add lines 6a through 6d	to the d	7		8,U	80.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	acned	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			E 1
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	154. Refunded ▶	10			<u>54.</u> 0.
Part VII-A Statements Regarding Activities   11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶	T34. Kerunded	11			<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it participate or intervene	ın		Yes	No
any political campaign?	islation of did it paradipate of intervent		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses (see instructions for the definition	13	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a		•	-:5		
distributed by the foundation in connection with the activities.	no copies el ally maionale publich				
c 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	ne vear:				
(1) On the foundation. > \$ (2) On foundation manager					
e Enter the reimbursement (if any) paid by the foundation during the year for political expeni		•			
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					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation, o	r	İ		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ear?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	3		5		_X_
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	erther:				
<ul><li>By language in the governing instrument, or</li></ul>					
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandate</li> </ul>	ory directions that conflict with the state	law law			
remain in the governing instrument?			6	_X_	<u></u>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	emplete Part II, col (c), and Part XV	<b>,</b>	7	_X_	<u> </u>
	, <b>.</b>				
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ions) ►		-		
FL	Attorney Conoral (or decorate)		-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Allorney General (or designate)		AL.	v	
of each state as required by General Instruction G? If "No," attach explanation		ndor	8b	X	<del> </del>
9 Is the foundation claiming status as a private operating foundation within the meaning of s year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"		iiuai			v
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a scher	•		10		X
to blo any porodia decente substantial contributors during the tax year. If Yes, attach a sched	Jule libring their names and addresses		10		

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had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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

Form 990-PF (2014) F/K/A MARISA MULLER CHARITAB Part VIII Information About Officers, Directors, Trustees, F		1787455 Page 7
Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If non	<del></del>	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevanumber of organizations and other beneficiaries served, conferences convened, research pa		Expenses
1 N/A		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax	c year on lines 1 and 2.	Amount
1 <u>N/A</u>		
<u></u>		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

F/K/A MARISA MULLER CHARITABLE FOUNDATIO

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Р	art X Minimum Investment Return (All domestic foundations r	must complete this	part Foreign foui	ndations, s	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le, etc., purposes:			
а	Average monthly fair market value of securities			1a	7,170,957.
	Average of monthly cash balances			1b	7,170,957. 105,991.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d _	7,276,948.
	Reduction claimed for blockage or other factors reported on lines 1a and				· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	7,276,948.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see instructions)		4	109,154.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	n Part V, line 4		5	7,167,794.
6	Minimum investment return. Enter 5% of line 5			6	358,390.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a		ating foundations ar	nd certain	
	foreign organizations check here  and do not complete this part	.)			250 200
1	Minimum investment return from Part X, line 6	1.	7 006	1	358,390.
	Tax on investment income for 2014 from Part VI, line 5	2a	7,926.		
	Income tax for 2014. (This does not include the tax from Part VI.)	2b			7 026
	Add lines 2a and 2b			2c	7,926. 350,464.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	
4	Recoveries of amounts treated as qualifying distributions			4 -	<u>0.</u>
5	Add lines 3 and 4			5	350,464.
6	Deduction from distributable amount (see instructions)		-	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	t XIII, line 1		7	350,464.
	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	poses:			449,470. 0.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	449,470.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	ble, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	, , ,			3a	
b	Cash distribution test (attach the required schedule)			3b	440 450
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, a			4	449,470.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	estment			_
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	449,470.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years v	when calculating whet	her the foundation	qualifies for	the section

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4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	( <b>a</b> ) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				350,464.
2 Undistributed income, if any, as of the end of 2014				500/1010
a Enter amount for 2013 only			316,147.	
b Total for prior years:				
2010, 2009,		118,265.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				<del></del>
Part XII, line 4: ►\$ 449,470.				
a Applied to 2013, but not more than line 2a			316,147.	
b Applied to undistributed income of prior			320/22/5	
years (Election required - see instructions) *		118,265.		
c Treated as distributions out of corpus		110,2031		
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				15,058.
e Remaining amount distributed out of corpus	0.			13,030.
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		- 0.		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014, Subtract	_		•	
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				335,406.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9;				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581 + CTE CMA MENTENTE 1.0				5 000 DE (0044)

THE NOMMONTU FOUNDATION, INC. 31-1787455 Form 990-PF (2014) F/K/A MARISA MULLER CHARITABLE FOUNDATIO Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling 4942(j)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (d) 2011 (a) 2014 (b) 2013 (c) 2012 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon; a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

# NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗶 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.

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:

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F/K/A MARISA MULLER CHARITABLE FOUNDATIO

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year PUBLIC CHARITY PROGRAM SUPPORT AMREF USA 4 WEST 43RD STREET, 2ND FLOOR 40,000. NEW YORK, NY 10036 PUBLIC CHARITY PROGRAM SUPPORT GLOBAL NOMADS GROUP 132 NASSAU STREET SUITE 822 NEW YORK, NY 10038 60,000. TEACH FOR ALL PUBLIC CHARITY PROGRAM SUPPORT 315 WEST 36TH STREET NEW YORK, NY 10018 50,000. ARTEEAST C/O SSRC PUBLIC CHARITY PROGRAM SUPPORT 300 CAMDEN PLAZA WEST 5,000. BROOKLYN, NY 11201 PUBLIC CHARITY PROGRAM SUPPORT UNITED WAY 205 E 42ND STREET 50 000. NEW YORK NY 10017 SEE CONTINUATION SHEET(S) ➤ 3a 425 000. Total **b** Approved for future payment NONE Total

Form 990-PF (2014) Part XVI-A

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		by section 512, 513, or 514	(e)		
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue:	code	·-	Code				
a			<del>                                     </del>				
ь							
C		·-·	ļ.—ļ.				
d							
e							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			14	54.941.			
4 Dividends and interest from securities			14	54,941. 102,159.	<del> </del>		
5 Net rental income or (loss) from real estate:			1	102,133.			
• •	-	<del></del>	-				
a Debt-financed property			ļ. <del></del>		<del> </del>		
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory			18	264,559.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a NON-TAXABLE							
b DISTRIBUTIONS			01	2,597.			
				2/35/6			
c							
d							
e		0.	<del> </del>	424 256	0.		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	<u> </u>	<u> </u>	424,230.	<u>0.</u> 424,256.		
13 Total. Add line 12, columns (b), (d), and (e)				13	424,230.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities	to the Acc	omplishment of Ex	cempt F	Purposes			
Line No. Explain below how each activity for which inco		un column (a) of Bort V/I A	. aantrihiita	d importantly to the ecomp	lichment of		
the foundation's exempt purposes (other than			Continuuto	a importantly to the accomp	manner of		
the regulation a exempt purposes (early than	r by providing to	mao ioi cacii parpoccoji	<del>.</del>		<del></del>		
					<del></del>		
					<del> </del>		
					<del></del>		
					<del></del>		
		<del></del>	******				
	<u>.</u>						
				<del></del>			
				<del>.</del>			
					. <u></u>		
423621			•		Form <b>990-PF</b> (2014)		

F/K/A MARISA MULLER CHARITABLE FOUNDATIO 31-1787455 Page 13

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	nips With Noncharit	able	)	
1 Did the o	rganization directly or indi	rectly engage in any	of the followin	g with any other organizati	on described in secti	on 501(c) of		Yes	No
				7, relating to political organ			İ		
	from the reporting found							1	
(1) Cash	• •		•	•			1a(1)		X
(2) Othe						f i	1a(2)	-	X
b Other tra									
	s of assets to a noncharita	ble exempt organizat	tion				16(1)		X
	hases of assets from a no						1b(2)		X
	al of facilities, equipment,		J				1b(3)		X
	nbursement arrangements						1b(4)		X
	ns or loan guarantees						1b(5)		X
, ,	ormance of services or me	mbership or fundrai	sing solicitatio	ns			1b(6)		Х
	of facilities, equipment, ma		-				1c		Х
_		-			ways show the fair m	arket value of the goods, oth	er asse	ets,	
						or sharing arrangement, sho		-	
column (	d) the value of the goods,	other assets, or serv	ices received.						
(a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and sha	ring arra	angeme	nts
			N/A						
	·						·		
				<del>-</del> ·					
				<del></del>					
				<del>_</del>					
2a Is the fou	indation directly or indirect	tly affiliated with, or i	elated to, one	or more tax-exempt organ	izations described				
ın sectior	n 501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 527?			Yes	$\mathbf{x}$	No
b If "Yes," o	omplete the following sch	edule.		<del></del> ·		·			
	(a) Name of org	janization		(b) Type of organization	(	c) Description of relationship			
	N/A			<del>-</del> -					
				<del></del>					
									<u>_</u>
					<u> </u>				
المحمأ				g accompanying schedules and n taxpayer) is based on all inforr		has any knowledge May th		scuss t	
Sign		1 OLLER	opa o tomor ma	1		shown	with the below (	prepare see inst	1)2 1
Here		<u> </u>	<u> </u>		DIRECT	OR X	Yes	L_	No
Sig	nature of officer or trustee		<u> </u>	Date	Title				
	Print/Type preparer's na	ame	Preparer's a	gnature /. /		Check if PTIN			
Do:-J			1 40	1/1/2	15/1/1	self- employed			
Paid	LEIF NOVIE	<del></del>	I pe	////LONY	19/11/11	P005			
Preparer	Firm's name ► MOR	RISON, BR	OWN, A	KGIZ & FARRA	, LLC	Firm's EIN $\triangleright 01-072$	2005	52	
Use Only		<u> </u>	<i>\</i>	/			- ,		
	Firm's address ► 14			NUE, 18TH FL	OOR	,			
	MI	AMI, FL 3	3131		·	Phone no. (305) 3			
						Form	1 <b>990</b>	-PF(	2014)

THE NOMMONTU FOUNDATION, INC.

F/K/A MARISA MULLER CHARITABLE FOUNDATIO 31-1787455

Part XV | Supplementary Information

3 Grants and Contributions Paid During the Y		<del></del>	T	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Manie and addisse (manie or basiness)	or substantial contributor	recipient		
			DDOGDAY GUDDODE	
CAMFED		PUBLIC CHARITY	PROGRAM SUPPORT	
165 CALIFORNIA STREET				20.00
CAN FRANCISCO, CA 94104				20,00
EVERY MOTHER COUNTS		PUBLIC CHARITY	PROGRAM SUPPORT	
.80 VARICK STREET, STE 1116				
IEW YORK, NY 10014				20,00
SOS CHILDREN'S VILLAGE		PUBLIC CHARITY	PROGRAM SUPPORT	
HERMANN-GMEINER-STR. 51				
INNSBRUCK, AUSTRIA 6020				10,000
ONE VOICE MOVEMENT		PIIBLIC CHARTTY	PROGRAM SUPPORT	
PO BOX 1577-OCS		TODDIC CHARTIT	I NOORAN BOITONI	
NEW YORK, NY 10113				5,00
			-	
ASPEN INSTITUTE		PUBLIC CHARITY	PROGRAM SUPPORT	
ONE DUPONT CIRCLE, NW, STE 700				
WASHINGTON, DC 20036-1133				10,00
INTERNATIONAL CRISIS GROUP		PUBLIC CHARITY	PROGRAM SUPPORT	
708 3RD AVENUE, SUITE 1705				35.00
NEW YORK, NY 10017				25,00
ASHOKA		PUBLIC CHARITY	PROGRAM SUPPORT	
1700 NORTH MONROE STREET, 20TH FL				
ARLINGTON, VA 22209				20,00
WORLD WILDLIFE FUND		PUBLIC CHARITY	PROGRAM SUPPORT	
1250 24TH STREET, N.W WASHINGTON, DC 20037				15,00
10012NG 2011, 20 20007				13,00
FAUNA AND FLORA INTERNATIONAL INC		PUBLIC CHARITY	PROGRAM SUPPORT	
1720 N STREET, NW,				
WASHINGTON, DC 20036				15,00
ECOPEACE/FRIENDS OF THE EARTH MIDDLE		PUBLIC CHARITY	PROGRAM SUPPORT	
EAST				
PO BOX 840252 AMMAN, JORDAN 11181				15,00
Total from continuation sheets				220,00

THE NOMMONTU FOUNDATION, INC. F/K/A MARISA MULLER CHARITABLE FOUNDATIO 31-1787455

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
SUNDANCE INSTITUTE		PUBLIC CHARITY	PROGRAM SUPPORT	
9900 WILSHIRE BLVD. SUITE 800				
OS ANGELES, CA 90036				25,00
GLOBAL FUND FOR CHILDREN	:	PUBLIC CHARITY	PROGRAM SUPPORT	
101 FOURTEENTH STREET, NW VASHINGTON, DC 20005				20,00
SYNERGOS		PUBLIC CHARITY	PROGRAM SUPPORT	
B EAST 54TH STREET, 14TH FLOOR NEW YORK, NY 10022				20,00
		-		

FORM 990-PF INTERE	ST ON SAVII	NGS AND T	EMPOR	ARY CASH	INVESTMENTS	STATEMENT 1
SOURCE			(A) VENUE BOOK:		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MONEY MARKET FUNDS			54,9	41.	54,941.	
TOTAL TO PART I, LI	NE 3		54,9	41.	54,941.	
FORM 990-PF	DIVIDENDS	S AND INT	EREST	FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENUE PER BOOK		
OTHER DIVIDENDS	102,159	•	0.	102,15	9. 102,15	59.
TO PART I, LINE 4	102,159		0.	102,15	9. 102,15	59.
FORM 990-PF		OTHER	INCO	ME		STATEMENT 3
DESCRIPTION			RE	(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	
NON-TAXABLE DISTRIE	BUTIONS			2,597.	(	).
TOTAL TO FORM 990-F	PF, PART I,	LINE 11		2,597.	(	).
FORM 990-PF		ACCOUN	TING 1	FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) I INVEST- NT INCOME		
ACCOUNTING FEE	_	3,50	0.	875	•	2,625.
TO FORM 990-PF, PG	1, LN 16B	3,50	0.	875	•	2,625.
				<del></del>	<del></del>	

FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT ADVISORY FEES	43,690.	21,845.		21,84	5.
TO FORM 990-PF, PG 1, LN 16C =	43,690.	21,845.		21,84	5.
FORM 990-PF	TAX	ES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
FOREIGN TAXES WITHHELD FEDERAL TAXES	2,654. 46,880.	2,654.			0. 0.
TO FORM 990-PF, PG 1, LN 18 =	49,534.	2,654.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
225011212011					
OTHER DEDUCTIONS	2,777.	0.			0.
	2,777.	0.			0.
OTHER DEDUCTIONS TO FORM 990-PF, PG 1, LN 23	-	0.			
OTHER DEDUCTIONS	2,777.	0. E STOCK	OK VALUE		8
OTHER DEDUCTIONS  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	2,777.	E STOCK	OK VALUE 3,629,621.	STATEMENT FAIR MARKET	8

FORM 990-PF	CORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
FIDUCIARY TRUST COMPANY INTER	NATIONAL	1,519,112.	1,513,327.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	1,519,112.	1,513,327.

FORM 990-PF ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO APPLY EXCESS QUALIFYING DISTRIBUTIONS TO PRIOR YEAR'S UNDISTRIBUTED INCOME STATEMENT 10

PURSUANT TO CODE SEC. 4942(H) AND REG 53.4942(A)-3(D)(2) THE FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF UNDISTRIBUTED INCOME FROM THE TAX YEARS PRIOR TO 2013.

# 2014 Tax Information Statement

FIDUCIARY TRUST COMPANY INTL Payer's Name and Address: NEW YORK, NY 10020 **600 FIFTH AVENUE** 

FL (800)618-1260 31-1787455 13-6122956 141016100 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Questions? State:

Page 7 of 40 Ref: 785 200 SOUTH BISCAYNE BOULEVARD SUITE THE NOMMONTU FOUNDATION INC Recipient's Name and Address: C/O FTCI OF THE SOUTH

MIAMI, FL 33131

2nd TIN notice Corrected

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

State

Tax

Federal Income

Withheld

or Loss Tax Withheld

(Box 16)

(Box 4)

00 0

-2,002.19

0.0

0.00

5,376.58

-7,156.76

0.00

0.00

-691.73

sceeds Other Basis if any Adjustments or 1d) (Box 1e) 000 0.00 0.00 0.00 0.00 0.00 0.00 0.00 47,868.00 8,814.80 64,961.25 49,635.25 13,349.99 42,061.40 6,812.61 9,335.44 72,007.89 27,589.22 54,212.60 (Box 1d) 57,804.49 55,011.83 12,658.26 Proceeds Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked) Form 8949 Checkbox SAMSUNG ELECTRS LTD GDR 95 RPSTG REGS 03/10/2014 03/15/2013 A ۷ VANGUARD FTSE EMERGING MARKETS ETF 02/26/2014 03/15/2013 A 04/01/2014 05/13/2013 A ∢: ⋖ 05/19/2014 06/06/2013 A. ⋖ 01/14/2014 02/27/2013 BORG WARNER AUTOMOTIVE INC. 04/21/2014 07/23/2013 06/19/2014 10/25/2013 CHIPOTLE MEXICAN GRILL CL A 07/28/2014 10/25/2013 LAUDER ESTEE COS INC CL A Date Sold; Date or Disposed Acquired (Box 1b) NATIONAL-OILWELL INC Short Term Sales Reported on 1099-B 150.0 TERADATA CORP Description of property (80x 1a) COVIDIEN PLC (Box 1c) 88076W103 099724106 922042858 637071101 518439104 G2554F113 169656105 79699A107 Cusip Number 1500.0 1200.0 300.0 700.0 130.0 20.0

0.00

0.00

892.00

0.00

0.00

24,139 89

0.00

0.00

12,151.20

0.00

0.00

8,356.97

This is important tax information and is being furnished to the internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

# 2014 Tax Information Statement

Payer's Name and Address: FIDUCIARY TRUST COMPANY INTL NEW YORK, NY 10020 **600 FIFTH AVENUE** 

2nd TIN notice (800)618-1260 31-1787455 13-6122956 141016100 교 Payer's Federal ID Number: Recipient's Tax ID Number: Payer's State ID Number: Account Number: Corrected **Questions?** State:

Page 8 of 40 200 SOUTH BISCAYNE BOULEVARD SUITE THE NOMMONTU FOUNDATION INC Recipient's Name and Address: C/O FTCI OF THE SOUTH 3050 MIAMI, FL 33131

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Covered (Box	Covered (Box 5 is not checked)								
Description o	Description of property (Box 18)	1	· · · · · · · · · · · · · · · · · · ·						
Cusip	Date Sold Date or Disposed Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code Hany A	Adjustments	Net Gain or Loss	Federal intome Tax Withheld	State Tax Withheld
•	(Box 1c) (Box 1b) FLOWSERVE CORP		(Box 1d)	(Box 1e)		(Box 1g)	-	(Box 4)	(Box 16)
34354P105	10/15/2014 11/22/2013	₹	56,163.75	65,112.82	:	0.00	-8,949.07	00.00	0.00
1000.0	WHOLE FOODS MKT INC								
966837106	10/15/2014 Various	∢ .	37,182.97	46,936.91		0.00	-9,753.94	0.00	0.00
400.0	CERNER CORP								
156782104	11/26/2014 07/07/2014 A	∢	25,378 44	20,747.40	:	0.00	4,631.04	0.00	0.00
110.0	REGENERON PHARMACEUTICALS INC	INC							
75886F107	11/26/2014 05/09/2014	۷	45,617.36	30,815.79	:::::::::::::::::::::::::::::::::::::::	0.00	14,801.57	0.00	0.00
2000.0	SOUTHWESTERN ENERGY CO								
845467109	12/30/2014 Various	4	54,735.39	74,857.56		0.00	-20,122.17	0.00	00.0
Total Short Ter	Total Short Term Sales Reported on 1099-B		514,510.25	492,836.86		0.00	21,673.39	0.00	00.00

Report on Form 8949, Part I, with Box A checked

Long Term Sales Reported on 1099-B TERADATA CORP

88076W103	01/14/2014 Various D	Q	40,875.67	43,825.10 0.00 -2,949.43 0.00 0.00	00 0	-2,949.43	0.00	0.00
4.643	TEMPLETON INCOME TR GLOBAL BD FD AD CL \$0.568	OBAL BD FD AD CL \$0.56	8					
880208400	880208400 02/13/2014 Various	<u>a</u>	59.62	31,19	00.00	-1.57 0.00	0.00	0.00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

# Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File 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

If you ar	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			ightharpoonup
If you ar	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
o not cor	nplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868	
Electronic	c filing (e-file) . You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (	6 months for a	corporation
equired to	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 8	868 to request	an extension
f time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers.	Associated Wit	h Certaın
Personal E	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	ctronic filing of	this form,
ısıt www	irs.gov/efile and click on e-file for Charities & Nonprofits	1				
Part I	Automatic 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).		
corporat	tion required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete		
art I only						ightharpoons
All other c	orporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	st an exter	sion of time	
o file inco	me tax returns.			Enter file	er's identifying	number
ype or	Name of exempt organization or other filer, see instru	ctions		Employe	r identification	number (EIN) or
rint	THE NOMMONTU FOUNDATION, IN	_				
	F/K/A MARISA MULLER CHARITA	ABLE 1	FOUNDATIO		31-178	7455
ile by the lue date for	date for Number, street, and room or suite no. If a PO box, see instructions Social security no					(SSN)
ng your   C/O FIDUCTARY TRUST 200 SOUTH BISCAYNE, NO. 3050						
structions City, town or post office, state, and ZIP code. For a foreign address, see instructions						
	MIAMI, FL 33131					
nter the I	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
						<del></del>
Application	on .	Return	Application			Return
s For		Code	Is For			Code
orm 990	or Form 990-EZ	01	Form 990-T (corporation)			07
orm 990-	BL	02	Form 1041-A			08
orm 4720	) (individual)	03	Form 4720 (other than individual)			09
orm 990-		04	Form 5227			10
orm 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
	FIDUCIARY TRUS	r				
The bo	oks are in the care of > 200 S. BISCAYNI	E BLVI	D, SUITE 3050 - MI	AMI,	FL 3313	1
	one No ► 305-349-2368		Fax No ▶			
If the o	rganization does not have an office or place of business	s in the Ur	nited States, check this box			
If this is	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole gro	up, check this
oox 🕨 🛚	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all memb	ers the extens	ion is for
1 I rec	uest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		
	AUGUST 15, 2015 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
ıs fo	r the organization's return for					
▶[	X calendar year <u>2014</u> or					
▶[	tax year beginning	, an	d ending			
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return	Fınal retui	'n	
	Change in accounting period					
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any			
	refundable credits. See instructions.			3a	\$	7,926.
<b>b</b> If th	is application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
estu	mated tax payments made. Include any prior year overp	ayment a	llowed as a credit	3b	\$	8,080.
c Bala	ance due. Subtract line 3b from line 3a. Include your pa	ıyment wıt	h this form, if required,			
by u	ising EFTPS (Electronic Federal Tax Payment System)	See ınstru	ctions	3c	\$	0.
Caution.	f you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO a	nd Form 8879-	EO for payment
nstructior	ns.					

Form 8868 (Rev. 1-2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 423841 05-01-14