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## SCANNED WAY 0 4 2015

Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

OMB No 1545-0052

		endar year 2014 or tax year beginning			, 2014,	and endi			, 20
		of foundation					^	Employer Identifi	
_		OFF FAMILY PRIVATE CHARITABLE						35-693274	
		er and street (or P O box number if mail is not delivere	d to street	address)		Room/suit	е   Е	Telephone numb	•
C/O THE AYCO COMPANY, L.P NTG							(51	8) 640-5000	
_		BOX 15014							
	City or	town, state or province, country, and ZIP or foreign po	stal code						_
							٥	If exemption application pending, check here	ition is
_		ANY, NY 12212	<del></del>	T	<del></del>		_		. $\square$
G	Che	ck all that apply Initial return		Initial return	•	oublic char	LITY C	1 Foreign organizat	<u>-</u>
		Final return		Amended ref				2. Foreign organiza 85% test, check h	
_		Address change		Name change				computation .	
H		ck type of organization: X Section 501					ε	If private foundation	status was terminated
$\perp$		ection 4947(a)(1) nonexempt chantable trust		ther taxable pr				under section 507(b	)(1)(A), check here
i			_	nethod. X C	ash Acc	rual	F		in a 60-month termination
		, , , , , , , , , , , , , , , , , , , ,	ther (sp					under section 507(b)	(1)(B), check here
_			,	i) must be on cas	n dasis )	<del></del> -		<del></del>	(d) Disbursements
L	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(~,.	Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in	ex	penses per books	incom		. ,	income	purposes
_		column (a) (see instructions) )	<u> </u>		<del></del>				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) .  Check if the foundation is not required to		7,896,986.					
	2	attach Sch B		56.		56.			ΛπCU 1
	3	Interest on savings and temporary cash investments.	<u> </u>	93,266.	۵	3,266.			ATCH 1 ATCH 2
	4	Dividends and interest from securities		93,200.		3,200.			ATON 2
		Gross rents			-				
		Net rental income or (loss)		1,344,271.					
Ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 344 271	-	1,344,211.					-
Je/	_	assets on line 6a			1 3/	4,271.			<u> </u>
Revenue	7	Capital gain net income (from Part IV, line 2) .	<u> </u>		1,54	4,2/1.			
_	8	Net short-term capital gain	-					· · · · · · · · · · · · · · · · · · ·	
	9 10a	Income modifications							
		and allowances • • • •					3 . 1/	711-31 1	
		Less Cost of goods sold					, , (		700
		Gross profit or (loss) (attach schedule)			<u> </u>				101
	11 12	Other income (attach schedule) Total. Add lines 1 through 11	<del>                                     </del>	9,334,579.	1.43	7,593.	n: ΛΥ	0 7 27.3	
_			<del>                                     </del>	0		,,,,,,,,,,	10.11	<u>u, , , , , , , , , , , , , , , , , , , </u>	•
Ś	13 14	Compensation of officers, directors, trustees, etc		-	-				<u> </u>
cpenses	15	Other employee salaries and wages Pension plans, employee benefits						-	
be								· · · · · · · · · · · · · · · · · · ·	
EX	16a	Legal fees (attach schedule)							<del></del>
Ve.	,	Other professional fees (attach schedule)							
aţį	17	Interest		-					
str	18	Taxes (attach schedule) (see instructions)[3].		500.		0.		· · · · · · · · · · · · · · · · · · ·	
Ē	b c 17 18 19 20 21	Depreciation (attach schedule) and depletion.				- 1			
ᄩ	20	Occupancy						<u>-</u> -	
Ĭ	21	Travel, conferences, and meetings						_	
Ind	22	Printing and publications							
Q.	23	Other expenses (attach schedule)				·			
Ë	23 24 25	Total operating and administrative expenses.							
era	~~	Add lines 13 through 23		500.		0.			
ď	25	Contributions, gifts, grants paid						<del></del>	
_	26	Total expenses and disbursements. Add lines 24 and 25		500.					(
_	27	Subtract line 26 from line 12		·				<del> </del>	
	l	Excess of revenue over expenses and disbursements	1 :	9,334,079.					
	l	Net investment income (if negative, enter -0-)	-		1,43	7,593.			
	ŀ	Adjusted net income (if negative, enter -0-).					_		
Ē		perwork Reduction Act Notice, see instruction							Form 990-PF (2014)

_	art II	L Balanas Chasta	Attached schedules and amounts in the	Beginning of year	Ε	nd of	f year
للا	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bear	ing	454,270.	1,461,82	5.	1,461,825
			cash investments				
	3	Accounts receivable					
	ĺ	Less allowance for dou	btful accounts ▶		<u> </u>		
						- [	
		Less allowance for dou	btful accounts ▶	·			
	5	Grants receivable					
	6		officers, directors, trustees, and other				
		disqualified persons (at	tach schedule) (see instructions)		······································	$\rightarrow$	
	7	Other notes and loans i	receivable (attach schedule) 🕨				
		Less. allowance for dou	btful accounts ▶			_	
š	8	Inventories for sale or us	se			_	
Assets	9	Prepaid expenses and d	eferred charges			_	
4	าบล		e government obligations (attach schedule).				
	b	Investments - corporate	stock (attach schedule) ATCH 4	12,043,262.	15,965,41	2.	29,929,605
			bonds (attach schedule)			_	
	11	Investments - land, building and equipment basis Less accumulated depreca (attach schedule)					
	12	Investments - mortgage	loans			_	
	13	Investments - other (atta	ach schedule)			<b>-</b>	
	` `	Land, buildings, and equipment basis Less accumulated deprecia (attach schedule)	ation			į	
			<b>&gt;</b> )			$\Box$	
			completed by all filers - see the				
	<u> </u>		page 1, item I)		17,427,23	7.	31,391,430
	17	Accounts payable and a	accrued expenses				
es	19	Deferred revenue					
∄	20	Loans from officers, director	ors, trustees, and other disqualified persons				
Liabilities	21		otes payable (attach schedule)			_	
	22	Other Irabilities (describ	e <b>&gt;</b> )			_	
_	23		es 17 through 22)	0	<del></del>	_9	
Se			low SFAS 117, check here . ► 24 through 26 and lines 30 and 31.				
Balances	24	Unrestricted			<del></del>		
3ala	25	Temporarily restricted				—	
or Fund		Foundations that do check here and com	not follow SFAS 117, ► X plete lines 27 through 31.				
S	27	Capital stock, trust prin	cipal, or current funds				
sel	28	Paid-in or capital surplus, o	r land, bldg, and equipment fund			_	
Net Assets	29	Retained earnings, accum	ulated income, endowment, or other funds	12,497,532.	17,427,23		
de le	30		d balances (see instructions)	12,497,532.	17,427,23	<del>7.</del>	
_	31	Total liabilities and	net assets/fund balances (see	10 107 500	15 405 00	_	
_			<del> </del>	12,497,532.	17,427,23	<u> </u>	
			nges in Net Assets or Fund Bala		<del></del>	<del></del>	
1			balances at beginning of year - Part				10 407 505
			ed on prior year's return)			1	12,497,532
2	Ente	er amount from Part I	, line 27a			2	9,334,079
			ded in line 2 (itemize) ▶			3	21 021 611
4	Add	i lines 1, 2, and 3	n line 2 (itemize) ► ATCH 5			4	21,831,611
			n line 2 (itemize) ►ATCH_5 palances at end of year (line 4 minus			5	4,404,374
- 15	I Inta	arnet assets of tund t	Jalances at end of Year (line 4 minus	sine or- Part II. Column (C	n. une su	6	11,441,431.

Page 3

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and	d describe the kind(s) of property sold (erick warehouse, or common stock, 200 s	e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
		P - Purchase D - Donation	(mo , day, yr )	(mo, day, yr)		
<u>1a</u>	SEE PART IV SCHEE	DULE				
<u>b</u>						
<u>c</u>	<del></del>					
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
а					·	
b						
<u>c</u>						
<u>d</u>						
<u>e</u>	Complete only for assets	showing gain in column (h) and owned	d by the foundation on 12/31/69		Caran (Cal. (b) a	
		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(	i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l. (h))
а						
b				<u> </u>		
<u>c</u>						
<u>d</u>				<u> </u>		<del></del>
е		. 15	gain, also enter in Part I, line 7	<del>   </del>	· · · · · · · · · · · · · · · · · · ·	
2	Capital gain net income		(loss), enter -0- in Part I, line 7	2	1,	344,271.
3	Net short-term capital qu	ain or (loss) as defined in sections 1	• •			
		art I, line 8, column (c) (see inst				
	Part I, line 8	<del> <u> </u></del>	<u> </u>	3		0
		Under Section 4940(e) for Recommendations subject to the				
	ection 4940(d)(2) applies, s the foundation liable for	leave this part blank. the section 4942 tax on the distrib	utable amount of any year in the b	ase penod	i? [	Yes X No
<u>lf "\</u>		not qualify under section 4940(e)				
1		nount in each column for each yea	r; see the instructions before makir	ig any ent		<u>-</u>
	(a) Base penod years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution of	
_Ca	lendar year (or tax year beginning in)	2,305,958.	18,198,322.		(col (b) divided by	0.126713
	2013	73,313.	12,744,719.			0.005752
	2011	0.	4,255,009.			0.000000
	2010	0.	0.			0.00000
	2009	0.	0			0.000000
						0 100465
2		ŋ		2		0.132465
3	•	o for the 5-year base period - divid		_		0.044155
	number of years the four	ndation has been in existence if les	s than 5 years	3		0.044133
	Enter the net value of ne	oncharitable-use assets for 2014 fro	om Part X line 5	4	22,	989,495.
4	Efficience file filet value of fic	inchantable-use assets for 2014 in	on rait X, inic o			
5	Multiply line 4 by line 3			5	1,	015,101.
Ů	maniply line 1 by line 0					
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		14,376.
				_		000 477
7	Add lines 5 and 6			7	1,	029,477.
_		and the second second		8		0
8	Enter qualifying distribut If line 8 is equal to or g Part VI instructions	ions from Part XII, line 4 preater than line 7, check the box	in Part VI, line 1b, and complete		using a 1% ta	

Form	990-PF (2014) DANOFF FAMILE FRIVATE CHARITABLE FOUNDATION 33-033	2/42		age 4			
Paï	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)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		28,7	<i>1</i> 52.			
	here ▶ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of						
	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2						
3	Add lines 1 and 2		28,7	752.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			(			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		28,7	752.			
6	Credits/Payments						
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 39,768.						
b	Exempt foreign organizations - tax withheld at source						
c	Tax paid with application for extension of time to file (Form 8868), 6c						
d	Backup withholding erroneously withheld						
7	Total credits and payments Add lines 6a through 6d		39,7	168.			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		11,0	)16.			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 11,016. Refunded ▶ 11						
Pai	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
	participate or intervene in any political campaign?	1a		X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see						
	Instructions for the definition)?	1b		Х			
	if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			ł			
	published or distributed by the foundation in connection with the activities			l			
С	Did the foundation file Form 1120-POL for this year?	1c		Х			
di	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ►\$(2) On foundation managers ►\$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			l			
	foundation managers > \$		1				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	X.			
	If "Yes," attach a detailed description of the activities			į			
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	<u> </u>	X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/	/ A			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	Х			
	If "Yes," attach the statement required by General Instruction T		į '				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		<b> </b>				
	By language in the governing instrument, or		'				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?	6	X				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	1	'				
	MASSACHUSETTS	]	'				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b_	Х	<u> </u>			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		'				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			İ			
	complete Part XIV	9	<u> </u>	X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		'	1			
	names and addresses	10	'	X			
			_ ==				

Pai	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?		X	
	• · · · ·			
14	TUD AVCO COMPANY ID NMC	-500	0	
	Located at ▶25 BRITISH AMERICAN BLVD. LATHAM, NY ZIP+4 ▶ 12110			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		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 ▶			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes 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			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	,		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	İ		
	(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	ì		
	termination of government service, if terminating within 90 days)			
t	of 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	N	<u>A</u>
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			1.7
	were not corrected before the first day of the tax year beginning in 2014?	1c_		<u>X</u>
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?	1		
	If "Yes," list the years			
Ľ	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	2.		Х
	all years listed, answer "No" and attach statement - see instructions )	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
36	at any time during the year?			
	of "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014)	3ь	N,	A
A	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	- '1	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		_
•	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х
			0-PF	(2014)

Form 990-PF (2014)

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

Form 990-PF(2014)

NONE

3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		00 750 404
	Average monthly fair market value of secunties	1a	22,759,484.
b	Average of monthly cash balances	1b	580,105.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	23,339,589.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	23,339,589.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	350,094.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	22,989,495.
6	Minimum investment return. Enter 5% of line 5	6	1,149,475.
Par	Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	1,149,475.
	Tax on investment income for 2014 from Part VI, line 5		
h	Income tax for 2014. (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	28,752.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,120,723.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,120,723.
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	1,120,723.
Par	XII Qualifying Distributions (see instructions)		
$\overline{}$	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
1	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
a		1b	
	Program-related investments - total from Part IX-B		<del></del>
2	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	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	
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	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years.	alculating	whether the foundatio

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Pa	rt XIII Undistributed Income (see instru	ictions)			<del></del>
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				1,120,723.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
	Total for pnor years: 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
	From 2010 0.				
c	From 2011				
d	From 2012 0.				
_	From 2012				
	Total of lines 3a through e	849,909.			
	Qualifying distributions for 2014 from Part XII,				
•	line 4 > \$				-
-	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
	, , , , , , , , , , , , , , , , , , , ,				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				<del></del>
	Applied to 2014 distributable amount				
_	Remaining amount distributed out of corpus  Excess distributions carryover applied to 2014	849,909.			849,909.
5	(If an amount appears in column (d), the same	0137303.			
	amount must be shown in column (a))				
6	Enter the net total of each column as	;			
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				<del>                                     </del>
þ	Prior years' undistributed income Subtract				
_	line 4b from line 2b				<del></del>
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)				
	tax has been previously assessed				<del>                                     </del>
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				<del></del>
е	Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
	Undistributed income for 2014 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2015				270,814.
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)				.]
8	Excess distributions carryover from 2009 not				
•	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
•	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
a	Excess from 2010 0 .				
b	Excess from 2011 0 .				
C	Excess from 2012				
-					
ď					
e	Excess from 2014 0 .	<u></u>			Ferr 990 PE (2014)

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).)

ATTACHMENT 7

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.

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

Check here ► X 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.

JSA 4E1490 1 000

Page **11** 

Part XV	Supplementary Information (				
3 Gran	ts and Contributions Paid Duri	ng the Year or Appr		uture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name	and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
	and address (home or business)	or substantial contributor	recipient	Contribution	
Total		<u> </u>	<u> </u>	▶ 3a	0.
	ved for future payment				
Total	<u> </u>	<u> </u>	<u></u>	3b	<u> </u>

JSA 4E 1491 1 000

Page 12

	A Analysis of Income-Produ amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
		(a)	(b) Amount	(c)	(d) Amount	Related or exempt function income
	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
. —			<u> </u>	<del> </del>		
			<del></del>	T		
				<u> </u>		
-						
f						
g Fees a	and contracts from government agencies					
	ship dues and assessments			1.4		<del> </del>
	savings and temporary cash investments		·	14	56. 93,266.	<del></del>
	s and interest from securities			14	93,200.	
	Income or (loss) from real estate			<del>                                     </del>		<del></del>
	ebt-financed property					
	income or (loss) from personal property					
	vestment income		_			
	oss) from sales of assets other than inventory			18	1,344,271.	
Net incor	me or (loss) from special events					
•	ofit or (loss) from sales of inventory	-		<u> </u>		
Other rev	renue a					
						<u> </u>
			-	-		<u>-</u>
d				1		
-				+		
Subtotal	Add columns (b) (d) and (e)				1,437,593.	
	Add columns (b), (d), and (e)				1,437,593.	1,437,59
Total. Ad e worksh	d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calc	ulations)			13	1,437,59
Total. Ad e worksh	d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calc	ulations)			13	1,437,59
Total. Ad e worksh art XVI-	d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activity	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Ad e worksh art XVI-	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Ad se worksh art XVI- ine No. ▼	d line 12, columns (b), (d), and (e) eet in line 13 instructions to venfy calce  Relationship of Activities  Explain below how each activity	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Ad e worksh art XVI- ne No. ▼	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities  Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Ad se worksh art XVI- ine No. ▼	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities  Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
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Total. Ad e worksh art XVI- ne No. ▼	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities  Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
Total. Ad e worksh ert XVI- ne No. ▼	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities  Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to
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Total. Ad ee worksh art XVI- ine No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calce  Relationship of Activities  Explain below how each activity accomplishment of the foundation	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	ited importantly to

Form 990-PF			ILY PRIVATE CHARI					ge 13
Part XVI	Information R Exempt Organ		sfers To and Transa	ctions a	nd Relationships With Nor	chari	itable	3
in secorgai a Trans (1) C (2) O b Othe (1) S (2) P (3) R (4) R (5) L	ne organization direct ction 501(c) of the Conzations? If the reporting ash	ly or indirectly enode (other than set of groundation to a secondation to	t organization e exempt organization sets	anization o	any other organization described section 527, relating to political of	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5)		X X X X X X
c Shar	ng of facilities, equipn	nent, mailing lists,	other assets, or paid emp	loyees		1c	<u> </u>	Х
value	of the goods, other	assets, or services	s given by the reporting	foundation	Column (b) should always sho n If the foundation received less e of the goods, other assets, or	than	fair m	narke
(a) Line no	(b) Amount involved		chantable exempt organization		escription of transfers, transactions, and sh			
	N/A			N/A				
				<del>-  </del>				
	<u> </u>							
					-			
	·							
					_			
			· · · ·					
desc		) of the Code (other	ated with, or related to, er than section 501(c)(3))		ore tax-exempt organizations on 527?	Y	es X	No
	(a) Name of organization		(b) Type of organization		(c) Description of relation	nship		
				_				
Un	der penalties of penjury, I decl	are that I have examined	this return, including accompanyin	g schedules ar	nd statements and to the best of my knowle	dge and	belief, it	is true
Sign cor	rect, and complete Declaration of	Threpayer tother than taxpa	ayer) is based on all information of wh	ich preparer ha	as any knowledge			

Paid Preparer **Use Only** 

Here

WILLIAM ADANOFF Pnnt/Type preparer's name CHRISTINE W DIIONNA

Preparer's signature

Check If PTIN CODING self-employed P00999533 Firm's EIN > 33-1187432

with the preparer shown

THE AYCO COMPANY, ▶ PO BOX 15014 Firm's address ALBANY, NY

12212-5014

518-640-5000 Phone no

### Schedule B

(Form 990, 990-EZ, or 990-PF)

### **Schedule of Contributors**

OMB No 1545-0047

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

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

Name of the organization		Employer identification number		
DANOFF FAMILY PRIVATE	E CHARITABLE FOUNDATION	05 6000740		
		35-6932749		
Organization type (check one	,			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private	e foundation		
	527 political organization			
Form 990-PF X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private fou	indation		
	501(c)(3) taxable private foundation			
instructions.	), (8), or (10) organization can check boxes for both the General Rule and	и а оресіаї киїе ове		
General Rule				
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributor property) from any one contributor. Complete Parts I and II. See instributions.			
Special Rules				
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 that received from any one contributor, during the year, total contributor, the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	990 or 990-EZ), Part II, line tions of the greater of (1)		
contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, total contributions of more than \$1,000 exclusively for religious nal purposes, or the prevention of cruelty to children or animals. Comple	s, charitable, scientific,		
contributor, during to contributions totaled during the year for a General Rule applies	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Do not complete any of this organization because it received nonexclusively religious, charitance during the year.	s, but no such tions that were received of the parts unless the able, etc, contributions		
Caution. An organization that 990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not fi st answer "No" on Part IV, line 2, of its Form 990, or check the box on li o certify that it does not meet the filing requirements of Schedule B (Form	ile Schedule B (Form 990, ine 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)

Part I	Contributors (see instructions). Use duplicate copies of Par	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	DANOFF 2012 CHARITABLE LEAD ANNUITY TRUS  19 LOWER FIELD ROAD  WESTON, MA 02493-2050	\$1,008,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	WILLIAM A. DANOFF  19 LOWER FIELD ROAD  WESTON, MA 02493-2050	\$6,888,986.	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 il 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)

Employer identification number

35-6932749 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 75,000 SHS CAMBREX, CORP. \_ \_2\_\_\_ 1,720,875. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) 95,694 SHS FIDELITY ADVISOR NEW \_2\_\_ 2,813,404. 12/03/2014 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 37,110 SHS ULTRAGENYX PHARMA., INC. 2\_\_ 1,579,773. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) 2\_. 419,203. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 25,301 SHS XOOM CORPORATION 2 355,732. 12/03/2014 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

DANOFF FAMILY PRIVATE CHARITABLE FOUNDATION 35-6932749
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F		INS AND LOSSES FOR TAX ON INVESTI					√l Date I	Date sold	
						D D	acquired		
Gross sale	Depreciation allowed/	Cost or	FMV as of	Adj basis as of	Excess of FMV over	1	Gain or		
price less expenses of sale	allowable	other basis	as of 12/31/69	12/31/69	adı basıs		(loss)		
		_				Γ			
		TOTAL CAPITA	AL GAIN DIST	RIBUTIONS			1,344,271.		
						1			
OTAL GAIN(L	SS)			. <b></b>			1,344,271.		
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ATTACHMENT 1

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

REVENUE	EXPENSES INVESTMENT		56. 56.	56.	
				TOTAL	
		DESCRIPTION	FIDELTIY #7023		

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

	NET	INVESTMENT	INCOME	93,266.	93,266.
REVENUE	AND	EXPENSES	PER BOOKS	93,266.	93,266.
					TOTAL
			DESCRIPTION	FIDELITY #7023	

19980056F1

ATTACHMENT 3

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

COMMONWEALTH OF MA - TAX

500.

TOTALS

500.

DESCRIPTION

ENDING BOOK VALUE

ENDING

15,965,412.

29,929,605.

FIDELITY INVESTMENTS

15,965,412.

29,929,605.

ATTACHMENT 5

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

APPRECIATION OVER DONOR'S COST BASIS FOR STOCK DONATED TO THE FOUNDATION

4,404,374.

TOTAL

4,404,374.

АТТАСНМЕИТ 6

EXPENSE ACCT

CONTRIBUTIONS

AND OTHER ALLOWANCES

TO EMPLOYEE BENEFIT PLANS

COMPENSATION

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

NAME AND ADDRESS

0

0

0

TRUSTEE - AS NEEDED

C/O THE AYCO COMPANY, L.P. - NTG

ALBANY, NY 12212

P.O. BOX 15014

WILLIAM A. DANOFF

0

0

0

TRUSTEE - AS NEEDED

AMI T. DANOFF C/O THE AYCO COMPANY, L.P. - NTG

ALBANY, NY 12212

P.O. BOX 15014

GRAND TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT
ATTACHME
ATTACH
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ATTACHMENT 7

### FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

WILLIAM A. DANOFF AMI K. DANOFF

### **SCHEDULE D** (Form 1041)

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Employer identification number

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

1	DANOFF FAMILY PRIVATE CHARITABLE FOUNDS	ATION		35-69327	49	
Note	e: Form 5227 filers need to complete only Parts I and II.			· · · · · · · · · · · · · · · · · · ·		
Pai	tl Short-Term Capital Gains and Losses - Ass	ets Held One Yea	r or Less	_		
the I	instructions for how to figure the amounts to enter on lines below.  form may be easier to complete if you round off cents hole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4_	
5	Net short-term gain or (loss) from partnerships, S con		5			
6	Short-term capital loss carryover Enter the amount Carryover Worksheet		6	( )		
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	s 1a through 6 in	column (h) Enter	here and on	7	
Pai	t II Long-Term Capital Gains and Losses - Ass	ets Held More Tha	ın One Year			<del></del>
	instructions for how to figure the amounts to enter on		(h) Gain or (loss)			
Proceeds Cost to gain or los				Adjustments to gain or loss		Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents hole dollars	(sales pnce)	(or other basis)	Form(s) 8949, P line 2, column	art II, (g)	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	-		-		
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	8824		11	
12 Net long-term gain or (loss) from parmerships, S corporations, and other estates or trusts						
13	Capital gain distributions	13	1,344,271.			
14	Gain from Form 4797, Part I		14			
15						( )
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	8a through 15 in	column (h). Enter	here and on	15 16	1,344,271.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2014

Sched	ule D (Form 1041) 2014				Page 2
Pari	Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this pa	art.	(see instr )	or trust's	(3) Total
7	Net short-term gain or (loss)	17			
8 8	Net long-term gain or (loss):				
а	Total for year	18a			1,344,271.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b			
С	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19			1,344,271.
Note	: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a n	(or Fo	rm 990-T, Part I, line 4 , complete Part IV and	a) If lines 18a and the Capital Loss C	19, column (2), are ne arryover Worksheet, a
neces Par			· · · · · ·		
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, Ii	ne 4c, if a trust), the sm	naller of	
а	The loss on line 19, column (3) or b \$3,000			20   (	
Note	: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 990	-T, line 34), is a los	s, complete the Capita
		) C			
Par	1041 filers. Complete this part only if both lines 18a and 19 in col		2) are gains, or an ar	mount in ontored i	n Port I or Port II on
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor		•	mount is entered i	ii Fait I Oi Fait II aik
	ion: Skip this part and complete the Schedule D Tax Worksheet in the				
	her line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
<ul> <li>Bo</li> </ul>	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	990-T trusts. Complete this part only if both lines 18a and 19 a				
	rm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the Schedul	e D Tax Workshe	et in the instruction
f eith	er line 18b, col. (2) or line 18c, col. (2) is more than zero.				
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 21		
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero			1	
23	Enter the estate's or trust's qualified dividends			1 1	
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 25				
26	Subtract line 25 from line 24 If zero or less, enter -0		. 26		
27	Subtract line 26 from line 21 If zero or less, enter -0		27		
28	Enter the smaller of the amount on line 21 or \$2,500		. 28		
29	Enter the smaller of the amount on line 27 or line 28		. 29		
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is	taxed	at 0%	▶ 30	
31	Enter the smaller of line 21 or line 26		. 31		
32	Subtract line 30 from line 26		. 32		
33	Enter the smaller of line 21 or \$12,150		. 33		
34	Add lines 27 and 30		34		
35	Subtract line 34 from line 33. If zero or less, enter -0		35		
36	Enter the smaller of line 32 or line 35		. 36		
37	Multiply line 36 by 15%			▶ 37	
38	Enter the amount from line 31		. 38		
39	Add lines 30 and 36		. 39		
40	Subtract line 39 from line 38. If zero or less, enter -0- ,				
41	Multiply line 40 by 20%			▶ 41	
42	Figure the tax on the amount on line 27 Use the 2014 Tax Rate Schedule for		1 1		
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)				
43	Add lines 37, 41, and 42				
44	Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44		·	chedule	
. •	C line 1a for Form 000 T line 36)	•		► AE	