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Form 990-PF

Return of Private Foundation

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

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation THE BUCCINO FOUNDATION C/O GERALD P BUCCINO
A Employer identification number 36-3743267
B Telephone number (see instructions) (917) 991-3410
C If exemption application is pending, check here
G Check all that apply Initial return, Final return, Address change, etc.
H Check type of organization Section 501(c)(3) exempt private foundation
I Fair market value of all assets at end of year \$ 1,061,622
J Accounting method Accrual

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26), ending with Excess of revenue over expenses and disbursements (27).

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash—non-interest-bearing	8,672	14,890	14,885	
	2 Savings and temporary cash investments	3,268	7,592	7,592	
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)	579,495 <input checked="" type="checkbox"/>	574,144	1,039,145	
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)				
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	591,435	596,626	1,061,622		
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg, and equipment fund				
29 Retained earnings, accumulated income, endowment, or other funds	591,435	596,626			
30 Total net assets or fund balances (see instructions)	591,435	596,626			
31 Total liabilities and net assets/fund balances (see instructions)	591,435	596,626			

Part III Analysis of Changes in Net Assets or Fund Balances

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	591,435
2	Enter amount from Part I, line 27a	2	7,363
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	598,798
5	Decreases not included in line 2 (itemize) ▶ _____ <input checked="" type="checkbox"/>	5	2,172
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	596,626

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	91,834
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	-3,511

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	61,714	930,434	0.066328
2012	38,600	779,002	0.049551
2011	25,750	770,509	0.033419
2010	35,725	752,875	0.047451
2009	29,045	589,205	0.049295

2 Total of line 1, column (d).	2	0.246044
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.049209
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	1,043,133
5 Multiply line 4 by line 3.	5	51,332
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	774
7 Add lines 5 and 6.	7	52,106
8 Enter qualifying distributions from Part XII, line 4.	8	97,465

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	774
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	774
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	774
6	Credits/Payments		
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	741
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	741
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	17
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	50
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IL _____		
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? <i>If "No," attach explanation.</i>	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part 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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of GERALD P BUCCINO Telephone no (917) 991-3410 Located at 14483 MARSALA WAY NAPLES FL ZIP+4 34109			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
1b	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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
1c	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		
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))			
a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20 , 20 , 20 , 20			
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) <input type="checkbox"/>	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 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i></p> <p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes" to 6b, file Form 8870.</i></p> <p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	5b	
	6b	No
	7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GERALD P BUCCINO 14483 MARSALA WAY NAPLES, FL 34109	PRESIDENT 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 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		

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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,041,813
b	Average of monthly cash balances.	1b	17,205
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,059,018
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,059,018
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	15,885
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,043,133
6	Minimum investment return. Enter 5% of line 5.	6	52,157

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	52,157
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	774
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	774
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	51,383
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	51,383
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	51,383

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	97,465
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		
a	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	97,465
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	774
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	96,691

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				51,383
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			8,640	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010.				
c From 2011.				
d From 2012.				
e From 2013.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <u>97,465</u>				
a Applied to 2013, but not more than line 2a			8,640	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2014 distributable amount.				51,383
e Remaining amount distributed out of corpus	37,442			
5 Excess distributions carryover applied to 2014 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	37,442			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
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	37,442			
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.	37,442			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a 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.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2a Enter the lesser of the adjusted net 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					
3 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					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 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

2 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

GERALD P BUCCINO
14483 MARSALA WAY
NAPLES, FL 34109
(917) 991-3410

b The form in which applications should be submitted and information and materials they should include

APPLICATIONS MUST BE SUBMITTED IN WRITING

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NONE

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total				▶ 3a 97,465
b <i>Approved for future payment</i>				
Total				▶ 3b

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
125 SHS QUALCOMM INC	P	2007-01-29	2014-02-10
200 SHS REALOGY HOLDINGS CORP	P	2013-05-28	2014-09-24
50 SHS COSTAR GROUP INC	P	2007-03-08	2014-03-27
100 SHS COVIDIEN PLC	P	2013-07-02	2014-10-03
115 SHS QUALCOMM INC	P	2007-01-29	2014-03-27
300 SHS COACH INC	P	2012-12-21	2014-10-24
55 SHS AFFILIATED MANAGERS GROUP INC	P	2009-06-23	2014-06-04
500 SHS RETAILMENOT INC SERIES 1	P	2013-12-16	2014-11-17
200 SHS SALESFORCE COM INC	P	2007-06-27	2014-06-04
750 SHS SERVICESOURCE INTERNAT'L	P	2011-07-25	2014-11-24

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
9,323		343	8,980
7,814		10,575	-2,761
9,444		2,253	7,191
9,377		5,778	3,599
9,063		315	8,748
10,728		17,295	-6,567
10,581		2,987	7,594
7,185		13,278	-6,093
10,230		2,124	8,106
2,977		12,872	-9,895

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			8,980
			-2,761
			7,191
			3,599
			8,748
			-6,567
			7,594
			-6,093
			8,106
			-9,895

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
90 SHS ECOLAB INC	P	2007-03-26	2014-06-04
500 SHS ARATANA THERAPEUTICS INC	P	2014-02-10	2014-11-26
310 SHS HFF INC CL A	P	2011-03-04	2014-06-04
300 SHS CONCUR TECHNOLOGIES INC	P	2010-03-10	2014-12-11
125 SHS QUALCOMM INC	P	2007-01-29	2014-06-04
135 SHS STARBUCKS CORP	P	2007-02-27	2014-06-04
110 SHS WATSCO INC	P	2010-10-20	2014-06-04
200 SHS COVIDIEN PLC	P	2013-07-02	2014-06-18
200 SHS NORTHERN TRUST CORP	P	2008-11-13	2014-06-18
200 SHS NORTHERN TRUST CORP	P	2011-05-25	2014-06-18

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
9,878		3,886	5,992
6,905		11,670	-4,765
10,156		4,046	6,110
38,700		12,839	25,861
9,966		343	9,623
10,039		4,176	5,863
11,058		6,119	4,939
17,963		11,556	6,407
12,745		9,113	3,632
12,745		9,726	3,019

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			5,992
			-4,765
			6,110
			25,861
			9,623
			5,863
			4,939
			6,407
			3,632
			3,019

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

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
199 SHS TRULIA INC	P	2013-06-24	2014-07-25
77 SHS TRULIA INC	P	2013-08-23	2014-07-25

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
11,013		5,702	5,311
4,289		3,349	940

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			5,311
			940

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
202020 420 FIFTH AVE 27TH FLOOR NEW YORK, NY 10018		PUBLIC	GENERAL FUND	100
ALZHEIMER'S ASSOC 8430 W BRYN MAWR AVE CHICAGO, IL 60631		PUBLIC	GENERAL FUND	100
AMERICAN HEART ASSOC 208 S LASALLE ST CHICAGO, IL 60604		PUBLIC	GENERAL FUND	100
AMERICAN LEPROSY MISSIONS ONE ALM WAY GREENVILLE, SC 29601		PUBLIC	GENERAL FUND	100
AMERICAN LUNG ASSOCIATION 1301 PENNSYLVANIA AVE NW WASHINGTON, DC 20004		PUBLIC	GENERAL FUND	100
AMERICAN PARKINSON DISEASE 135 PARKINSON AVE STATEN ISLAND, NY 10305		PUBLIC	GENERAL FUND	100
AMVETS 4647 FORBES BOULEVARD LANHAM, MD 20706		PUBLIC	GENERAL FUND	100
ANTI-CRUELTY SOCIETY 157 W GRAND AVE CHICAGO, IL 60654		PUBLIC	GENERAL FUND	100
BLINDED VETERANS ASSOC 477 H STREET NW WASHINGTON, DC 20001		PUBLIC	GENERAL FUND	200
BOYS TOWN 14100 CRAWFORD ST BOYS TOWN, NE 68010		PUBLIC	GENERAL FUND	100
CANCER CARE 275 SEVENTH AVE NEW YORK, NY 10001		PUBLIC	GENERAL FUND	100
CARE 151 ELLIS STREET NE ATLANTA, GA 30303		PUBLIC	GENERAL FUND	100
CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 21201		PUBLIC	GENERAL FUND	200
CHILDREN'S HUNGER RELIEF FUND PO BOX 5366 SANTA ROSA, CA 95402		PUBLIC	GENERAL FUND	100
CHILDREN'S MEDICAL CENTER PO BOX 650473 DALLAS, TX 75265		PUBLIC	GENERAL FUND	500
Total				97,465

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRISTIAN APPALACHIAN PROJECT 6550 SOUTH KY RT 321 HAGERHILL,KY 41222		PUBLIC	GENERAL FUND	100
CHRISTOPHER REEVES FOUNDATION 636 MORRIS TURNPIKE SHORT HILLS,NJ 07078		PUBLIC	GENERAL FUND	200
COALITION FOR THE HOMELESS 129 FULTON STREET NEW YORK,NY 10038		PUBLIC	GENERAL FUND	100
COALITION TO SALUTE AMERICA 552 FORT EVANS RD STE 300 LEESBURG,VA 20176		PUBLIC	GENERAL FUND	20
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON RD 2ND FL BETHESDA,MD 20814		PUBLIC	GENERAL FUND	100
DAN BARNEY MEMORIAL FUND 400 S ORAGE AVE SOUTH ORANGE,NJ 07079		PUBLIC	GENERAL FUND	100
DOCTORS WITHOUT BORDERS 333 SEVENTH AVE NEW YORK,NY 10001		PUBLIC	GENERAL FUND	200
FEED THE CHILDREN 801 EIGHTEENTH ST NW WASHINGTON,DC 20006		PUBLIC	GENERAL FUND	200
FIDELCO GUIDE DOG FOUNDATION FOR TH 103 OLD IRON ORE ROAD BLOOMFIELD,CT 06002		PUBLIC	GENERAL FUND	300
FOUNDATION HOUSE 160 PREBLE ST PORTLAND,ME 04101		PUBLIC	GENERAL FUND	100
FREEDOM FROM HUNGER 1644 DAVINCI COURT DAVIS,CA 95618		PUBLIC	GENERAL FUND	100
GREATER CHICAGO FOOD DEPOSITORY 4100 WEST ANN LURIE PLACE CHICAGO,IL 60632		PUBLIC	GENERAL FUND	200
GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS,NY 10598		PUBLIC	GENERAL FUND	200
HABITAT FOR HUMANITY 121 HABITAT ST AMERICUS,GA 31709		PUBLIC	GENERAL FUND	200
HEROBOX 500 SWANSON ROAD STE 1 TYRONE,GA 30290		PUBLIC	GENERAL FUND	100
Total				97,465

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOLY APOSTLES SOUP KITCHEN 296 9TH AVE NEW YORK, NY 10001		PUBLIC	GENERAL FUND	100
KIDS WISH NETWORK 4060 LOUIS AVE HOLIDAY, FL 34691		PUBLIC	GENERAL FUND	50
LAKEVIEW PANTRY 3831 N BROADWAY CHICAGO, IL 60613		PUBLIC	GENERAL FUND	50
LEUKEMIA LYMPHOMA SOCIETY 651 W WASHINGTON BLVD CHICAGO, IL 60661		PUBLIC	GENERAL FUND	100
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CTR DR CLARKSBURG, MD 20871		PUBLIC	GENERAL FUND	100
MAKE A WISH FOUNDATION PO BOX 29119 PHOENIX, AZ 85038		PUBLIC	GENERAL FUND	500
MARCH OF DIMES 1275 MAMARONECK AVE WHITE PLAINS, NY 10605		PUBLIC	GENERAL FUND	225
MARINE TOYS FOR TOTS 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172		PUBLIC	GENERAL FUND	200
MEALS - ON - WHEELS 355 LEXINGTON AVE NEW YORK, NY 10017		PUBLIC	GENERAL FUND	200
MERCY CORPS 12 SWANKENY ST PJORTLAND, OR 97204		PUBLIC	GENERAL FUND	200
MERCY HOME FOR BOYS AND GIRLS 1140 W JACKSON BLVD CHICAGO, IL 60607		PUBLIC	GENERAL FUND	100
MERCY HOUSING LAKEFRONT 120 S LASALLE STE 1850 CHICAGO, IL 60603		PUBLIC	GENERAL FUND	100
MISERICORDIA 6300 NORTH RIDGE AVE CHICAGO, IL 60660		PUBLIC	GENERAL FUND	750
MARIST CARE CENTER 66 NEWTON ST WALTHAM, MA 024536063		PUBLIC	GENERAL FUND	20
MULTIPLE SCLEROSIS ASSOCIATION 706 HADDONFIELD RD CHERRY HILL, NJ 08002		PUBLIC	GENERAL FUND	100
Total				97,465

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MUSCULAR DYSTROPHY ASSOCIATION 3300 EAST SUNRISE DRIVE TUCSON,AZ 85718		PUBLIC	GENERAL FUND	100
NATIONAL BREAST CANCER COAL FUND 1010 VERMONT AVE NW SUITE 900 WASHINGTON,DC 20005		PUBLIC	GENERAL FUND	100
NATIONAL FOUNDATION FOR CANCER RESE 4600 EAST WEST HIGHWAY SUITE 525 BETHESDA,MD 20814		PUBLIC	GENERAL FUND	100
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH STREET NW WASHINGTON,DC 20006		PUBLIC	GENERAL FUND	200
PARKINSON'S DISEASE FOUNDATION 1359 BROADWAY NEW YORK,NY 10018		PUBLIC	GENERAL FUND	100
PAWS FOR PURPLE HEARTS 5860 LABATH AVE STE A ROHNERT PARK,CA 94928		PUBLIC	GENERAL FUND	100
PROJECT HOPE 255 CARTER HALL LANE MILLWOOD,VA 22646		PUBLIC	GENERAL FUND	200
RAISE HOPE FOUNDATION 21 LAUREL COURT VERONA,NJ 07044		PUBLIC	GENERAL FUND	250
SALVATION ARMY 615 SLATERS LANE ALEXANDRIA,VA 22314		PUBLIC	GENERAL FUND	200
SAVE THE CHILDREN 54 WILTON ROAD WESTPORT,CT 06880		PUBLIC	GENERAL FUND	200
SEEING EYE INC 10 WASHINGTON VALLEY ROAD WESTPORT,CT 06880		PUBLIC	GENERAL FUND	200
SETON HALL UNIVERSITY 457 CENTRE STREET SOUTH ORANGE,NJ 07079		PUBLIC	GENERAL FUND	87,150
SOS CHILDREN'S VILLAGE USA 1001 CONNECTICUT AVE NW WASHINGTON,DC 20036		PUBLIC	GENERAL FUND	100
SOUP AT SIX 1933 CHICAGO AVE EVANSTON,IL 60202		PUBLIC	GENERAL FUND	50
ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105		PUBLIC	GENERAL FUND	300
Total				97,465

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SUSAN G KOMEN BREAST CANCER FOUND 5005 LBJ FREEWAY DALLAS, TX 75244		PUBLIC	GENERAL FUND	200
THE GLAUCOMA FOUNDATION 80 MAIDEN LANE STE 700 NEW YORK, NY 10038		PUBLIC	GENERAL FUND	100
THE GUILD FOR EXCEPTIONAL CHILDREN 260 68TH ST BROOKLYN, NY 11220		PUBLIC	GENERAL FUND	100
THE SMILE TRAIN 41 MADISON AVE NEW YORK, NY 10010		PUBLIC	GENERAL FUND	200
USO 2111 WILSON BLVD ARLINGTON, VA 22201		PUBLIC	GENERAL FUND	100
VETERANS OF FOREIGN WARS 406 WEST 34TH STREET KANSAS CITY, MO 64111		PUBLIC	GENERAL FUND	100
WOUNDED WARRIOR PROJECT 4899 BELFORT RD JACKSONVILLE, FL 32256		PUBLIC	GENERAL FUND	200
Total ▶ 3a				97,465

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990, 990-EZ, or 990-PF.**
▶ **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.**

2014

Name of the organization

THE BUCCINO FOUNDATION
C/O GERALD P BUCCINO

Employer identification number

36-3743267

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 foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
 THE BUCCINO FOUNDATION
 C/O GERALD P BUCCINO

Employer identification number
 36-3743267

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERALD BUCCINO 14483 MARSALA WAY NAPLES, FL 34109	\$ 27,391	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization
 THE BUCCINO FOUNDATION
 C/O GERALD P BUCCINO

Employer identification number
 36-3743267

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
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization
THE BUCCINO FOUNDATION
C/O GERALD P BUCCINO

Employer identification number
36-3743267

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 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, 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, 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, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

TY 2014 Accounting Fees Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,321	2,321		

TY 2014 Investments Corporate Stock Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Name of Stock	End of Year Book Value	End of Year Fair Market Value
300 SHS CONCUR TECHNOLOGIES INC (3/1		
200 SHS NORTHERN TRUST CORP (11/13/0		
500 SHS RETAILMENOT INC SERIES 1		
750 SHS SERVICESORCE INT'L INC (07/2		
145 SHS AFFILIATED MGRS GROUP INC (6	7,878	30,775
400 SHS ADVISORY BOARD CO	19,142	19,592
500 SHS ALLSTATE CORP	23,458	35,125
900 SHS ARATANA THERAPEUTICS INC (02	9,523	16,038
800 SHS ARM HOLDINGS PLC	35,369	37,040
500 SHS BOTTOMLINE TECHNOLOGIES INC	9,402	12,640
150 SHS CATERPILLAR INC (10/26/11)	13,768	13,730
300 SHS CITRIX SYSTEMS INC	21,251	19,140
0 SHS COACH INC	1	
200 SHS COSTAR GROUP (2007)	9,015	36,725
300 SHS DENTSPLY INT'L INC (12/21/09	10,462	15,981
400 SHS DEMANDWARE INC	10,414	23,016
1200 SHS DEXCOM (3/8/07)	6,597	49,545
180 SHS DYNAVAX TECHNOLOGIES CORP (1	5,655	3,035
260 SHS ECOLAB (3/26/07)	11,226	27,175
750 SHS EXACT SCIENCES CORP.	18,701	20,580
150 SHS GOLDMAN SACHS GROUP INC (11/	9,589	29,075
590 SHS HFF INC CL A (03/04/11)	7,703	21,193
1000 SHS HMS HOLDINGS CORP (200-11/2	9,020	21,140
400 SHS HMS HOLDINGS CORP	8,237	
750 SHS HEALTHCARE SERVICES GROUP IN	11,466	23,198
300 SHS HARLEY DAVIDSON INC	14,239	19,773
260 SHS IHS INC (6/25/08)	14,007	29,609
500 SHS INOGEN INC	9,705	15,685
400 SHS LULULEMON ATHLETICA INC	27,680	22,316
400 SHS MEDNAX INC	12,352	33,055

Name of Stock	End of Year Book Value	End of Year Fair Market Value
100 SHS MEDNAX INC	6,669	
900 SHS MARCUS & MILLICHAP INC	12,731	29,925
100 SHS MEAD JOHNSON NUTRITION CO. (7,116	15,081
50 SHS MEAD JOHNSON NUTRITION CO. (1	3,760	
1000 SHS NEKTAR THERAPEUTICS	6,245	15,500
800 SHS NXSTAGE MEDICAL (3/8/07)	9,472	14,344
500 SHS POLYPORT INT'L INC (6/24/08)	21,350	23,525
250 SHS PROTO LABS	17,149	16,790
285 SHS QUALCOMM (8/20/96)(2.74/SH)	782	
200 SHS QUALCOMM (34.21/SH)	6,842	36,050
300 SHS RACKSPACE HOSTING INC (9/29/	7,816	14,043
0 SHS REALOGY HOLDINGS COPR	1	
350 SHS RESMED (2/9/07)	8,673	19,642
600 SHS SALESFORCE.COM (6/27/07)	6,374	35,566
365 SHS STARBUCKS (2/27/07)	11,294	29,948
1 SHS TRULIA INC	1	
250 SHS ULTIMATE SOFTWARE GROUP INC	12,183	36,704
100 SHS VISA INC CL A COMMON STOCK	7,334	26,220
800 SHS WAGeworks INC	13,314	51,656
400 SHS WALGREEN (9/23/98)	9,163	30,420
190 SHS WATSCO INC (10/20/10)	10,570	20,330
300 SHS ZULILY INC	12,063	14,040
300 SHS ZULILLY	7,248	
400 SHS CATAMARAN CORP	19,411	20,700
0 SHS COVIDIEN PLC	1	
60 SHS IHS INC	7,092	
200 SHS NORTHERN TRUST CORP (05/25/1	13,630	13,480

TY 2014 Legal Fees Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	2,298	2,298		

TY 2014 Other Decreases Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Amount
50% MEALS & ENTERTAINMENT	822
FEDERAL INCOME TAX	1,350

TY 2014 Other Expenses Schedule

Name: THE BUCCINO FOUNDATION
 C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
LICENSE & FEES	15	15		
MISC EXPENSES	3	3		

TY 2014 Other Income Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISC INCOME	1,591	1,591	

TY 2014 Other Professional Fees Schedule

Name: THE BUCCINO FOUNDATION

C/O GERALD P BUCCINO

EIN: 36-3743267

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	9,927	9,927		

TY 2014 GeneralDependencySmall

Name: THE BUCCINO FOUNDATION
C/O GERALD P BUCCINO

EIN: 36-3743267

Business Name or Person Name:

Taxpayer Identification Number:

**Form, Line or Instruction
Reference:**

Regulations Reference:

Description: GENERAL FOOTNOTE

Attachment Information: PART XV - SUPPLEMENTAL INFORMATION -----
----- NONE OF THE RECIPIENTS WHO RECEIVED
GRANTS OR CONTRIBUTIONS DURING THE YEAR AS LISTED UNDER
PART XV ARE INDIVIDUALS AND THERE IS NO RELATIONSHIP WITH
THE FOUNDATION MANAGER OR CONTRIBUTOR. THE STATUS OF
EACH RECIPIENT IS A TAX-EXEMPT, CHARITABLE ORGANIZATION.
EACH OF THE GRANTS ARE CONSIDERED GIFTS OR DONATIONS TO
THE ORGANIZATION TO BE USED SOLELY FOR TAX-EXEMPT
PURPOSES.