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#### DLN: 93491134018705

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

For	cale	ndar year 2014, or tax year beginning 01-0	01-2014	, aı	nd ending 1	2-31-2014	
		ındatıon			A Employer id	entification numbe	er
		& Millicent P Brown undation			36-7295068		
		BROWN DUBOIS   street (or P O box number if mail is not delivered to street address	) Room/suite		<b>B</b> Telephone nu	mber (see instructior	ns)
	41 Benn	netts Pond Road	, Room, sake				
		, state or province, country, and ZIP or foreign postal code			C If exemption	application is pendin	a, check here ►
		, state of province, country, and ZIP of foreign postar code , VA 23185			C II exemption	аррисаціон із ренціні	g, check here 📮 j
		Г					_
G C	песк а	Il that apply   Initial return   Initial return of a	former public charity	<b>/</b>	_	ganizations, check he	•
		Address change Name change				rganizations meeting k here and attach coi	
<b>H</b> C I	neck ty	pe of organization Section 501(c)(3) exempt priva	ite foundation			indation status was t n 507(b)(1)(A), chec	
$\Gamma_{s}$	ection	4947(a)(1) nonexempt charitable trust Other taxa			ander section	1 307(0)(1)(7), ence	K Here
		ket value of all assets at end  J Accounting method	l ✓ Cash I Accr	rual		ation is in a 60-month n 507(b)(1)(B), chec	
		rom Part II, col. (c), \$ 6,809,646	be on cash basis.)		under section	1 307(b)(1)(b), chec	k liele F j
_	TE T	Analysis of Revenue and Expenses (The					(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	297,467				
	2	Check ► ┌ if the foundation is <b>not</b> required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	128		128		
	4	Dividends and interest from securities	187,418		187,418		
	5a	Gross rents					
ф	b	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	300,915				
Revenue	6a   b						
	"	Gross sales price for all assets on line 6a 2,493,569					
œ	7	Capital gain net income (from Part IV, line 2)			300,915		
	8	Net short-term capital gain				20,566	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other Income (attach schedule)					
	12	Total. Add lines 1 through 11	785,928		488,461	20,566	
	13	Compensation of officers, directors, trustees, etc	0				
	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
æ	16a	Legal fees (attach schedule)	10.200		F 120	0	F 120
Expenses		Accounting fees (attach schedule)	10,260 55,481		5,130 55,481	0	5,130
₹	17	Other professional fees (attach schedule)	35,461		33,401		
rati	18	<b>.</b>	<b>%</b> 5,783		953		
ž	19	Depreciation (attach schedule) and depletion	2,111				_
₫	20	Occupancy					
4	21	Travel, conferences, and meetings					
and Administrative	22	Printing and publications					
	23	Other expenses (attach schedule)					
atın	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	71,524		61,564	0	5,130
Ö	25	Contributions, gifts, grants paid	224,000				224,000
	26	<b>Total expenses and disbursements.</b> Add lines 24 and	205 524		61 ECA	0	229,130
	27	25 Subtract line 26 from line 12	295,524		61,564	U	229,130
	27   a	Excess of revenue over expenses and disbursements	490,404				
	b	Net investment income (if negative, enter -0-)			426,897		
	c	Adjusted net income (if negative, enter -0 -)				20,566	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book Talias	(2) Book Talled	(c) run riumer rund
	2	Savings and temporary cash investments	412,952	477,258	477,258
	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			
sets		Prepaid expenses and deferred charges			
w.	9	Investments—U S and state government obligations (attach schedule)			
⋖	10a	, , , , , , , , , , , , , , , , , , ,			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans	F 472 020	FI 5.007.704	( 222 200
	13	Investments—other (attach schedule)	5,473,829	5,897,704	6,332,388
	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)	5,886,781	6,374,962	6,809,646
	17	Accounts payable and accrued expenses			
ې	18	Grants payable			
₽	19	Deferred revenue			
abilities	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	
ķ		Foundations that follow SFAS 117, check here			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.			
盲	24	Unrestricted			
ä	25	Temporarily restricted			
핕	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ŏ		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds	5,886,781	6,374,962	
Š	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
Ř	30	Total net assets or fund balances (see instructions)	5,886,781	6,374,962	
	31	Total liabilities and net assets/fund balances (see instructions)	5,886,781	6,374,962	
	rt II			<del></del>	
1		Total net assets or fund balances at beginning of year—Part II, column (			<b></b>
_		, , , , , , , , , , , , , , , , , , , ,		<del></del>	5,886,781
2		Enter amount from Part I, line 27a		<del></del>	490,404
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3			6,377,185
5		Decreases not included in line 2 (itemize)		5	2,223
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art 11, column (b), lin	e 30 . 6	6,374,962

Parti	90-PF (2014)	nd Losses for Tax on I	nuoctm	ont Incomo			Page
	(a) List and describe th	ne kind(s) of property sold (e use, or common stock, 200 s	<b>(b)</b> How acquired P—Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
	See Additional Data Ta				D—Donation	( / 11/// /	( / ==// /. /
1a	See Additional Data 1 a						
ь							
С							
d							
е				_			
(e	) Gross sales price	(f) Depreciation a (or allowable		1 1-1	or other basis pense of sale		or (loss) ) mınus (g)
а	See Additional Data Ta	ble					
b							
c							
d							
e							
Cor	mplete only for assets sh	owing gain in column (h) and	owned by	the foundation	on 12/31/69	(I) Gains (Col	(h) gain minus
	FM V as of 12/31/69	(j) Adjusted ba as of 12/31/6	ISIS	(k) Exc	ess of col (ı) ol (j), ıf any	col (k), but not	less than -0-) <b>or</b> om col (h))
	See Additional Data Ta			Overc	or (j), ir arry	200000 (	· · · · · · · · · · · · · · · · · · ·
<u>в</u>							
						+	
<u>с</u>						+	
d							
е						<u> </u>	
2	Capital gain net income	e or (net capital loss) gain or (loss) as defined in s	{ If(I		in Part I, line 7	2	300,91!
-	·	art I, line 8, column (c) (see i		, , , , ,	,	3	20,566
Dart 1	V Qualification Un	nder Section 4940(e) f	or Pedi	iced Tay on	Net Investme		20,300
		vate foundations subject to t					
sectio	on 4940(d)(2) applies, lea	ave this part blank					
	foundation liable for the						
		section 4942 tax on the dist qualify under section 4940(		,	year in the base pe	eriod?	┌ Yes ┌ No
f"Yes,'	" the foundation does not	section 4942 tax on the dist	e) Do not	t complete this	year in the base pe part		「Yes <b>ア</b> No
"Yes,'  1 Ent  Base	" the foundation does not	section 4942 tax on the dist qualify under section 4940(	e) Do not ar, see in	t complete this	year in the base pe part re making any ent		n ratio
"Yes,'  1 Ent  Base	" the foundation does not ter the appropriate amoun (a) penod years Calendar	section 4942 tax on the dist qualify under section 4940 ( at in each column for each ye (b)	e) Do not ar, see in Ne	t complete this structions befo	year in the base pe part re making any ent	ries (d) Distributioi	n ratio
"Yes,'  1 Ent  Base	" the foundation does not ter the appropriate amoun  (a) period years Calendar or tax year beginning in)	section 4942 tax on the dist qualify under section 4940( nt in each column for each ye (b) Adjusted qualifying distributions	e) Do not ar, see in Ne	t complete this structions befo	year in the base pe part ire making any ent itable-use assets	ries (d) Distributioi	n ratio by col (c))
"Yes,'  1 Ent  Base	ter the appropriate amount  (a) period years Calendar or tax year beginning in) 2013	section 4942 tax on the dist qualify under section 4940 ( at in each column for each ye (b) Adjusted qualifying distributions	e) Do not ar, see in Ne 846	t complete this structions befo	year in the base per part re making any ent itable-use assets 5,969,936	ries (d) Distributioi	n ratio by col (c)) 0 051399
"Yes,'  1 Ent  Base	the foundation does not  ter the appropriate amoun  (a) penod years Calendar or tax year beginning in)  2013 2012	section 4942 tax on the dist qualify under section 4940 ( at in each column for each ye (b) Adjusted qualifying distributions 306,4	e) Do not ar, see in Ne 846 979 356	t complete this structions befo	year in the base per part re making any ent itable-use assets 5,969,936 5,467,893	ries (d) Distributioi	n ratio by col (c)) 0 051399 0 050107 0 050164
"Yes,'  1 Ent  Base	ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013  2012  2011	section 4942 tax on the dist qualify under section 4940 ( nt in each column for each ye (b) Adjusted qualifying distributions 306,6 273,6	e) Do not ar, see in Ne 846 979 356 494	t complete this structions befo	year in the base perpart  The making any entrollinate intable-use assets  5,969,936  5,467,893  5,229,989	ries (d) Distributioi	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212
"Yes,'  1 Ent  Base	ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013 2012 2011 2010 2009	section 4942 tax on the dist qualify under section 4940 ( at in each column for each ye (b) Adjusted qualifying distributions 306,6 273,6 262,7	e) Do not ar, see in Ne 846 979 356 494	t complete this estructions befo  (c) et value of nonchar	year in the base per part  re making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353	ries (d) Distributioi	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765
"Yes,'  1 Ent  Base year (o	the foundation does not ter the appropriate amount (a) penod years Calendar or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column A verage distribution ra	section 4942 tax on the dist qualify under section 4940 ( at in each column for each ye (b) Adjusted qualifying distributions 306,3 273,9 262,3 179,4	e) Do not ar, see in Ne 846 979 356 494 279 d—divide	t complete this astructions before to value of nonchar	year in the base per part  The making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291	ries (d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765 0 23564
"Yes,' 1 Ent Base year (o	" the foundation does not ter the appropriate amount (a) period years Calendar or tax year beginning in) 2013 2012 2011 2010 2009  Total of line 1, column A verage distribution rathe number of years the	tion for the 5-year base period	Ne N	t complete this astructions before (c) at value of nonchard the total on line ess than 5 year	year in the base per part  The making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291	(d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765 0 23564
"Yes,' 1 Ent Base year (o	ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column A verage distribution rather number of years the Enter the net value of neter the net value of neter the second content of the se	section 4942 tax on the dist qualify under section 4940 (at in each column for each year)  (b)  Adjusted qualifying distributions  306,6  273,6  262,6  179,6  135,6  (d)	Ne see in Ne see	t complete this astructions before (c) et value of nonchar the total on line ess than 5 year m Part X, line 5	year in the base per part  re making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291	(d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765 0 23564 0 04712 6,476,16
"Yes,' 1 Ent Base year (o	" the foundation does not ter the appropriate amount (a) penod years Calendar or tax year beginning in) 2013 2012 2011 2010 2009  Total of line 1, column A verage distribution rathe number of years the Enter the net value of numbility line 4 by line 3	section 4942 tax on the dist qualify under section 4940 (at in each column for each year)  (b)  Adjusted qualifying distributions  306,4  273,4  262,4  179,4  135,5  (d)	e) Do not ar, see in  846 979 356 494 279 d—divide tence if le 2014 froi	t complete this astructions before to value of nonchard to value of nonchard to the total on line to the total on	year in the base per part  re making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291  2 by 5, or by ss	ries  (d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765 0 23564 0 047124 6,476,16 305,21
"Yes,' 1 Ent Base year (o	ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column A verage distribution rathe number of years the Enter the net value of multiply line 4 by line 3 Enter 1% of net investi	tin each column for each ye  (b)  Adjusted qualifying distributions  306,i 273,i 262,i 179,i 135,i (d)	e) Do not ar, see in  846 979 356 494 279 d—divide tence if le 2014 froi ine 27b).	t complete this astructions before to value of nonchard value of n	year in the base per part  re making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291  2 by 5, or by ss	(d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107 0 050164 0 041212 0 042765 0 23564 0 047129 6,476,163 305,21
"Yes,' 1 Ent Base year (o	ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013  2012  2010  2010  2009  Total of line 1, column A verage distribution rather number of years the Enter the net value of multiply line 4 by line 3 Enter 1% of net investing Add lines 5 and 6	(d)	Ne see in Ne see	t complete this astructions before (c) et value of nonchar	year in the base per part  The making any ent stable-use assets  5,969,936  5,467,893  5,229,989  4,355,353  3,163,291   2 by 5, or by ss	(d) Distribution (col (b) divided	n ratio by col (c)) 0 051399 0 050107

	990-PF (2014) <b>t VI</b> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age <b>4</b>
1a		ructio	ns)	
14	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		{	3,538
	here Fand enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
_	enter -0-)			
3	Add lines 1 and 2		{	3,538
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			3,538
6	C redits/P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 3,100			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			3,100
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  from 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		!	5,438
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax			
	t VII-A Statements Regarding Activities		<b>V</b>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	12	Yes	No
ь	It participate or intervene in any political campaign?	1a		No
U	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			<b>.</b>
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	If "Yes," attach the statement required by General Instruction T.	$\vdash$		
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?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
	and Part XV.	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<u>FIL</u>			
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	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$	OD	162	
9	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►KEITH BROWN DUBOIS Telephone no ►(757)	221-	9533	
	Located at ►2841 BENNETTS POND ROAD WILLIAMSBURG VA ZIP+4 ►23185			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			
13	and enter the amount of tax-exempt interest received or accrued during the year	• •	,	,
	- · · · · · · · · · · · · · · · · · · ·		1	l
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	TT VII-B Statements Regarding Activities for Which Form 4720 May Be Required		I I	
_	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?  Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V 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)?			
	(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 ) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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		
	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 were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			-110
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20, 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from leopardy before the first day of the tax year beginning in 2014?	4b		No

Do	*+ V/TT D	Statements Boss	udi.	an Antivition for	. NA/L	sich Form 4720	Max	Po Poquired (cont	inua	<u>م ۱</u>	i age <b>c</b>
5a		Statements Regarder year did the foundation				iicii Foriii 4720	<u>ма у</u>	be Required (Cont	mue	<i>u)</i>	T
Эа	_	on propaganda, or othe		•		uslation (sostion 40	4 E ( a \)	)?	. No		
		· · · · - · ·		•	_	·			NO		
		nce the outcome of any	-			***			<del>-</del> N-		
		ectly or indirectly, any						Yes			
		le a grant to an individu							NO		
		le a grant to an organiza							7 N.		
		tion 4945(d)(4)(A)? (se						Yes	NO		
		le for any purpose other						□ v <sub>22</sub> □	7 No		
		tional purposes, or for t									
D		wer is "Yes" to 5a(1)-(								_	
		ns section 53 4945 or i						_	_	5b	
	=	ions relying on a curren		= =							
С		wer is "Yes" to questior	-			·		<b>-</b>			
		se it maintained expend					• • •	Yes	No		
_		ttach the statement requ									
6a		undation, during the yea									
_	•	I benefit contract?									
Ь		undation, during the yea	ır, pa	y premiums, directly	y or i	indirectly, on a perso	onal b	enefit contract?	•	6b	No
		6b, file Form 8870.							_		
7a		ne during the tax year, v									
<u>b</u>		the foundation receive								7b	
Pa		Information About and Contractors	t Of	ficers, Directors	s, T	rustees, Founda	ation	Managers, Highly	Paid	Empl	loyees,
_		icers, directors, trustee	s. for	undation managers a	nd t	heir compensation (	see in	structions).			
		,	Ť –	Title, and average		c) Compensation		d) Contributions to	, , ,	_	
	<b>(a)</b> Nar	ne and address	` `	hours per week		If not paid, enter		ployee benefit plans			e account, wances
			1	evoted to position		-0-)		deferred compensation			
	H BROWN DUE		TRU 10	ISTEE		0		0			
	1 Bennetts amsburg, V.										
	RT A BROWN	A 23103	ТВІ	JSTEE		0		0			0
		ERRY LANE	1 0	15166		U		U			U
		HILLS,IL 61548									
CHAF	RLES S BROWN	I JR	TRU	JSTEE		0		0			0
638	Spindlewoo	od	1 0								
	sboro,NC 2										
_2	Compensat	ion of five highest-paid	emp	loyees (other than	thos	e included on line 1–	-see ii	nstructions). If none, er	iter "I	NONE."	
<b>7</b> - 1	<b>.</b> N			(b) Title, and aver	age			(d) Contributions to	   , , , ,	<b>-</b>	
(a		address of each employ nore than \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred			e account, wances
	para	ποτο επαπ φοσγοσο		devoted to positi	on			compensation			, manie co
				1							
				-							
				-							
Tota	ul number of	other employees hald o	ver	\$50.000				<b>-</b>	I		

Form 990-PF (2014)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, H	ighly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers prod		er of Expenses
1N/A	uccu, ctc	
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		A mount
1 NO NE		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>•</b>

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 6.349.996 1h 224.789 1c 1d 6.574.785 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 6.574.785 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 98.622 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 6.476.163 5 323.808 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 323.808 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 8.538 2a Income tax for 2014 (This does not include the tax from Part VI). . . 8.538 2c 3 3 315.270 4 4 5 5 315.270 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 315.270 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 229.130 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 Ω 3 Amounts set aside for specific charitable projects that satisfy the За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 229,130 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 229,130 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

	all XIII Olidisti ibuted Tilcollie (see ilisti	•			
		<b>(a)</b> Corpus	(b) Years prior to 2013	(c) 2013	<b>(d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2013	2013	315,270
	Undistributed income, if any, as of the end of 2014				313,270
	Enter amount for 2013 only			16,843	
	Total for prior years 2012, 2011, 2010			23,510	
	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
е	From 2013 0				
f	Total of lines 3a through e		0		
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2013, but not more than line 2a			16,843	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
4	required—see instructions)				212,287
	Remaining amount distributed out of corpus		0		212,207
	Excess distributions carryover applied to 2014		0		(
,	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				102.003
	be distributed in 2015				102,983
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.		0		
10	Subtract lines 7 and 8 from line 6a				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014 0				

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total				224,000

Form 990-	·					Page <b>12</b>
	I-A Analysis of Income-Produci s amounts unless otherwise indicated		usiness income	Excluded by section	(e)	
	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
d						
f	and contracts from government agencies					
2 Member 3 Interes	ership dues and assessments st on savings and temporary cash ments			14	128	
	nds and interest from securities ntal income or (loss) from real estate			14	187,418	
<b>b</b> Not d <b>6</b> Net rea	-financed property lebt-financed property					
<b>7</b> Other o	r (loss) from sales of assets other than					
9 Net inc	ory			18	300,915	
<b>11</b> Other	profit or (loss) from sales of inventory revenue <b>a</b>					
с						
е	al Add columns (b), (d), and (e).				488,461	
(See v	Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify co	alculations )			.3	488,461
Line No.	Explain below how each activity for which the accomplishment of the foundation's instructions.)	h income is re	ported ın column (	e) of Part XVI-A c	ontributed importa	
N/A	NOT APPLICABLE					
	-					
	1					
-						
	<u> </u>					

Form 990-PI	(2014)  Information Roy Noncharitable					actio	ns and I	Relationships	With		Pa	ge <b>1</b> 3				
	rganization directly or i	ndırectly (	engage	in any of	the following wit						Yes	No				
organizat	tions?															
<b>a</b> Transfers	s from the reporting foui	ndatıon to	a nonc	harıtable	exempt organiza	ation of										
<b>(1)</b> Cas	h									1a(1)		No				
(2) Oth	erassets									1a(2)		No				
<b>b</b> O ther tra	insactions															
<b>(1)</b> Sale	s of assets to a noncha	rıtable ex	empt o	rganızatıo	n					1b(1)		No				
<b>(2)</b> Purc	hases of assets from a	noncharit	able ex	kempt orga	anızatıon					1b(2)		No				
<b>(3)</b> Rent	tal of facilities, equipme	nt, or othe	erasse	ts						1b(3)		No				
<b>(4)</b> Rein	nbursement arrangemer	nts								1b(4)		No				
<b>(5)</b> Loar	ns or loan guarantees.									1b(5)		No				
(6) Perfo	rmance of services or r	nembershi	ıp or fu	ndraising	solicitations					1b(6)		No				
<b>c</b> Sharing o	of facilities, equipment,	mailing lis	ts, oth	er assets,	, or paid employ	ees				1c		No				
of the go	swer to any of the above ods, other assets, or se ansaction or sharing arr	rvices giv angement	en by t , show	the reporti in column	ng foundation I (d) the value of	f the fou	ındatıon r	eceived less thai	n fair marke	et value						
(a) Line No	(b) Amount involved	(c) Name	of nonc	harıtable exe	empt organization	(d)	Description	of transfers, transact	tions, and sha	ring arra	ngemer	nts				
												-				
-																
describe	undation directly or indiding a section 501(c) of the complete the following (a) Name of organization	he Code (d schedule		nan sectio	•	ın sectı			•••• ption of relati	.FYe	es F	, No				
							_									
the	der penalties of perjury, best of my knowledge a ormation of which prepai	and belief,	ıt ıs tr	ue, correc					an taxpaye		sed on	all				
	Signature of officer or t	rustee			<u>l</u> Date	<b>-</b> •	Tıtle		with the below	preparei						
	- Signature of officer of t						1100		(see ins	tr )? 🔽 <b>Y</b>	/es	40				
	Print/Type preparer's Kevin Hodges	name	Prepa	arer's Sıgn	ature	Date		Check if self- employed ▶	PTIN P(	007427	715					
Paid Preparer Use		O LTD	1			1		Firm's EIN ►	1							
Only	Firm's address ▶															
<b>,</b>	1751 Lake Cook Road 60015	d Suite 40	0 Dee	erfield, IL				Phone no (757	7)221-953	9533						

#### 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	<b>(c)</b> Date acquired (mo , day, yr )	( <b>d)</b> Date sold (mo , day, yr )
GOLDMAN SACHS #57242 - ST COVERED - SEE ATTACHED			
GOLDMAN SACHS #57242 - ST NONCOVERED - SEE ATTACHED			
GOLDMAN SACHS #57242 - LT COVERED - SEE ATTACHED			
GOLDMAN SACHS #57242 - LT NONCOVERED - SEE ATTACHED			
GOLDMAN SACHS #57243 - ST COVERED - SEE ATTACHED			
GOLDMAN SACHS #57243 - LT COVERED - SEE ATTACHED			
GOLDMAN SACHS #57243 - LT NONCOVERED - SEE ATTACHED			
GOLDMAN SACHS #57253 - ST NONCOVERED - SEE ATTACHED			
GOLDMAN SACHS #57253 - LT NONCOVERED - SEE ATTACHED		2012-07-02	2014-05-13
GOLDMAN SACHS #81182 - ST COVERED - SEE ATTACHED			

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

(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
379,175		367,399	11,776
34,876		39,760	-4,884
938,815		836,505	102,310
495,671		434,172	61,499
36,682		33,524	3,257
79,194		53,451	25,743
17,863		9,147	8,716
100,196		100,632	-436
114,476		120,782	-6,306
8,525		7,432	1,093

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

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F M V as of 12/31/69	(j) A djusted basıs as of 12/31/69	( <b>k)</b> Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))		
			11,776		
			-4,884		
			102,310		
			61,499		
			3,158		
			25,743		
			8,716		
			-436		
			-6,306		
			1,093		

# 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 )
GOLDMAN SACHS #81182 - LT COVERED - SEE ATTACHED			
GOLDMAN SACHS #81183 - ST COVERED - SEE ATTACHED			
GOLDMAN SACHS #81183 - LT COVERED - SEE ATTACHED			
GOLDMAN SACHS #58073 - 2,648 PUT/XSP			
GOLDMAN SACHS - CAPITAL GAIN DISTRIBUTIONS			

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

(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
113,928		79,589	34,339
14,807		15,090	-278
123,256		76,647	46,609
28,666		18,628	10,038
7,439		0	7,439

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

Capita	ii dailis alia Eosses loi Ta	X OII THE CHINCING	Columnia
Complete only for assets shown	ng gaın ın column (h) and owned l	by the foundation on 12/31/69	(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	(j) A djusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))
			34,339
			-283
			46,609
			10,038
			7,439

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

If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
or substantial contributor	·		
NONE	PC		
NONE	PC		
		RELIGIOUS TEACHING AND FELLOWSHIP FOR COLLEGE STUDENTS	10,000
NONE	PC	TO SUPPORT HIGHER EDUCATION	10,000
NONE	PC	FULL SERVICE HEALTHCARE FOR CHILDREN	10,000
NONE	PC	RELIGIOUS CAMP AND RECREATION	20,000
NONE	PC	TO SUPPORT HIGHER EDUCATION	46,500
NONE	PC	TO SUPPORT AND PROMOTE PROFESSIONAL FINE ARTS	5,000
NONE	PC	TO SUPPORT HIGHER EDUCATION	30,000
NONE	PC	RELIGIOUS EDUCATION AND ACTIVITIES FOR YOUNG ADULTS IN HIGH SCHOOL AND COLLEGE	15,000
None	PC	MUSIC EDUCATION AND PERFORMANCE OPPORTUNITIES FOR MUSIC STUDENTS	5,000
NONE	PC	EARLY AMERICAN LIVING- HISTORY EXPERIENCE	12,500
NONE	PC	TO PROMOTE EARLY LITERACY AND SCHOOL READINESS IN CHILDREN AND PARENTS	5,000
none	PC	TO SUPPORT EDUCATION	6,000
NONE	PC	TO HELP IDENTIFY AND RESOLVE COMMUNITY ISSUES	5,000
NONE	PC	TO PROMOTE EDUCATION	12,000
	PC	TO SUPPORT HUMANITARIAN RELIEF	3,000
	NONE NONE NONE NONE NONE NONE NONE NONE	NONE PC  NONE PC	RONE  PC  FULL SERVICE HEALTHCARE FOR CHILDREN  NONE  PC  RELIGIOUS CAMP AND RECREATION  NONE  PC  TO SUPPORT HIGHER EDUCATION  NONE  PC  TO SUPPORT HIGHER EDUCATION  NONE  PC  TO SUPPORT HIGHER EDUCATION  NONE  PC  RELIGIOUS EDUCATION AND ACTIVITIES FOR YOUNG ADULTS IN HIGH SCHOOL AND COLLEGE  NONE  PC  MUSIC EDUCATION AND PERFORMANCE OPPORTUNITIES FOR MUSIC STUDENTS  NONE  PC  EARLY AMERICAN LIVING-HISTORY EXPERIENCE  NONE  PC  TO PROMOTE EARLY LITERACY AND SCHOOL READINESS IN CHILDREN AND PARENTS  NONE  PC  TO SUPPORT EDUCATION  NONE  PC  TO SUPPORT EDUCATION  NONE  PC  TO HELP IDENTIFY AND RESOLVE COMMUNITY ISSUES  NONE  PC  TO PROMOTE EDUCATION  TO PROMOTE EDUCATION  TO SUPPORT EDUCATION  TO PROMOTE EDUCATION  TO PROMOTE EDUCATION  TO SUPPORT EDUCATION  TO PROMOTE EDUCATION

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
SOUTH SIDE MISSION 1127 S LARAMIE PEORIA,IL 61605		PC	RELIGIOUS ACTIVITIES	5,000	
BETHLEHEM LUTHERAN CHURCH 48 PERRIN ST FAIRPORT,NY 14450		PC	RELIGIOUS ACTIVITIES	5,000	
PROJECT JUST BECAUSE INC 86 SOUTH STREET HOPKINTON,MA 01748		PC	TO SUPPORT HUMANITARIAN RELIEF	2,000	
THE ALS ASSOCIATION 4 N BLOUNT ST RALEIGH,NC 27601		PC	TO SUPPORT GLOBAL RESEARCH AND ADVOCACY	2,000	
CHILD SERVICES NC DIVISION OF SOCIAL SERVICES 2401 MAIL SERVICE CENTER RALEIGH,NC 276992401		PC	TO SUPPORT CHILDREN'S HEALTHCARE	15,000	
Total				224,000	

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As Filed Data -

DLN: 93491134018705

214. 00 10 1 10 10 10 10

OMB No 1545-0047

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Charles S & Millicent P Brown

#### Schedule of Contributors

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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

**Employer identification number** 

Family Fo	undation		36-7295068				
Organiza	tion type (check one	)					
Filers of:	:	Section:					
Form 990	or 990-EZ	501(c)( ) (enter number) organization					
	ı	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	I				
	ı	527 political organization					
Form 990-	-PF <b> </b>	501(c)(3) exempt private foundation					
	ı	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	ı	501(c)(3) taxable private foundation					
	or an organization filing	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions to y one contributor Complete Parts I and II See instructions for determining a co					
Special F		y one contributor. Complete Parts I and II. See Instructions for determining a co	ontributor's total contributions				
•							
ur re	nder sections 509(a)(1 eceived from any one o	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part I contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or (orm 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that				
du	uring the year, total co	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ntributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lielty to children or animals. Complete Parts I, II, and III					
dı th pı	uring the year, contribu is box is checked, ent urpose Do not comple	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ations <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an <i>exclu</i> te any of the parts unless the <b>General Rule</b> applies to this organization becall, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 If usively religious, charitable, etc, illuse it received nonexclusively				

**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

Charles S & Millicent P Brown

Family Foundation

Employer identification number

36-7295068

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_	BROWN CLAT-15 2841 BENNETTS POND ROAD WILLIAMSBURG, VA 23185	\$	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	DARKESVILLE UNITED METHODIST CHURCH ROUTE 11 INWOOD, WV 25428	\$5,520	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(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)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** Charles S & Millicent P Brown Family Foundation 36-7295068 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

<b>anization</b> Millicent P Brown			Employer identification number
dation			36-7295068
hat total more than \$1,000 for the year frentry. For organizations completing Part III, entended year. (Enter this information once. See inst	om any one er the total of ructions)	contributor. Complet	e columns (a) through (e) and the following line
(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
Transferee's name, address, and 2		_	onship of transferor to transferee
(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
Transferee's name, address, and a		_	onship of transferor to transferee
(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
Transferee's name, address, and a		_	onship of transferor to transferee
(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
	(e)	Transfer of gift	
Transferee's name, address, and a		_	onship of transferor to transferee
·	Millicent P Brown dation  Ixelusively religious, charitable, etc., con nat total more than \$1,000 for the year fr ntry For organizations completing Part III, enti- ne year (Enter this information once See inst se duplicate copies of Part III if additional spa  (b) Purpose of gift  Transferee's name, address, and if  (b) Purpose of gift  (b) Purpose of gift  Transferee's name, address, and if  (b) Purpose of gift  (b) Purpose of gift  Transferee's name, address, and if  (b) Purpose of gift	Millicent P Brown lation  Actor usively religious, charitable, etc., contributions to that total more than \$1,000 for the year from any one notry. For organizations completing Part III, enter the total of the year (Enter this information once. See instructions.) In see duplicate copies of Part III if additional space is needed.  (b) Purpose of gift  (c)  Transferee's name, address, and ZIP 4  (b) Purpose of gift  (c)  Transferee's name, address, and ZIP 4  (b) Purpose of gift  (c)  Transferee's name, address, and ZIP 4  (b) Purpose of gift  (c)  Transferee's name, address, and ZIP 4  (b) Purpose of gift  (c)  Transferee's name, address, and ZIP 4  (d) Purpose of gift  (e)  Transferee's name, address, and ZIP 4  (e)	Millicent P Brown datation  xclusively religious, charitable, etc., contributions to organizations desinat total more than \$1,000 for the year from any one contributor. Completing Part III, enter the total of exclusively religious, delegant year (Enter this information once See instructions)   less eduplicate copies of Part III if additional space is needed  (b) Purpose of gift  (c) Use of gift  Transferee's name, address, and ZIP 4  (b) Purpose of gift  (c) Use of gift  (d) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP 4  (e) Transfer of gift  Relation  (b) Purpose of gift  (c) Use of gift  (d) Use of gift  (e) Transfer of gift  (e) Transfer of gift  (f) Use of gift  (g) Transfer of gift  (h) Purpose of gift

OMB No 1545-0123

2014

Attachment
Sequence No 12A

(h)

Form **8949** 

Department of the Treasury Internal Revenue Service ► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of

Schedule D.

Sales and Other Dispositions of Capital Assets

Name(s) shown on return

Social security number or taxpayer identification number

36-7295068

Adjustment, if any, to gain or loss

Before you check Box A, B, or C below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

**Part I Short-Term.** Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note.** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	<b>(b)</b> Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter a enter a See the se  (f) Code(s) from	n amount in column (g), code in column (f) parate instructions  (g)  Amount of	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
				(2.2.2.2.)	instructions	adjustment	
GOLDMAN SACH			379,175	(367,399)		00	11,776
GOLDMAN SACH GOLDMAN SACH			36,682 8,525	(33,524) (7,432)		99	3,257
GOLDMAN SACH			14,807	(15,090)		5	1,093 -278
GOLDHAN SACII			14,007	(13,030)			270
-							
							_
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 1b checked), line 2 (if Box B above is c C above is checked)	each total her (If <b>Box A</b> abov checked), or <b>lin</b>	e and e ıs e 3 (ıf Box	439,189	` ' '		104	15,848

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term
transactions, see page 2.
<b>Note.</b> You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to
the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you
are not required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss (h) (e) 1 If you enter an amount in column (g), Gain or (loss). Cost or other basis (c) (d) Subtract column (a) enter a code in column (f) See the Note below (b) Date sold or Proceeds Description of property (e) Date acquired and see Column (e) See the separate instructions disposed (sales price) from column (d) (Example 100 sh XYZ Co) (Mo, day, yr) in the separate (Mo, day, yr) (f) (see instructions) and (g) instructions combine the result Code(s) from Amount of with column (g) instructions adjustment GOLDMAN SACH 34,876 (39,760) -4,884 GOLDMAN SACH 100,196 (100,632) -436 2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (If Box B above Is checked), or line 3 (If Box 135,072 (140,392) -5,320 

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note.** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

/ ( ) onere term transactions in	,						
(a) Description of property (Example 100 sh XYZ Co)	( <b>b)</b> Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter a	If any, to gain or loss an amount in column (g), code in column (f) eparate instructions  (g)  Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
GOLDMAN SACH			28 666	(18 628)			10.038
GOLDMAN SACH			28,666	(18,628)	Instructions	adjustment	10,038
	each total her (If <b>Box A</b> abov checked), or <b>lin</b>	e and e is e 3 (if Box	28,666				10,038
Note. If you checked Box A above I	but the basis re	ported to the I	RS was incorrect	. enter in column (	e) the bas	sis as reported to	o the IRS, and

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2014)

Attachment Sequence No 12A

Page 2

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side Charles S & Millicent P Brown Family Foundation

Social securitynumber or taxpayer identification number 36-7295068

Before you check Box D, E, or F below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

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

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter a	if any, to gain or loss an amount in column (g), code in column (f) eparate instructions  (g)  Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
COLDMAN CACH			020.045	(026 505)	IIISII UCIOIIS	44,4411611	102.210
GOLDMAN SACH			938,815				102,310
GOLDMAN SACH			113,928				34,339
GOLDMAN SACH			123,256	(76,647)			46,609
2 Totals Add the amounts in colum (subtract negative amounts) Enter include on your Schedule D, line 8b checked), line 9 (if Box E above is 6 Box F above is checked)  Note. If you checked Box D above leads to the second secon	each total her (If <b>Box D</b> abov checked), or <b>lin</b>	e and e is <b>e 10</b> (if <b>-</b>	1,175,999		a) the had	us as reported t	183,258

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term
transactions, see page 1.
<b>Note.</b> You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).
You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separat

Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) **▽** (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss (h) (e) 1 Gain or (loss). If you enter an amount in column (g), Cost or other basis (c) (d) Subtract column (a) enter a code in column (f) (b) See the Note below Date sold or Proceeds (e) Description of property and see *Column (e)* Date acquired See the separate instructions disposed (sales price) from column (d) (Example 100 sh XYZ Co) (Mo, day, yr) in the separate (f) (Mo, day, yr) (see instructions) and (g) instructions combine the result Code(s) from Amount of with column (g) adjustment instructions GOLDMAN SACH 495,671 (434,172) 61,499 GOLDMAN SACH 79,194 (53,451) 25,743 17,863 GOLDMAN SACH (9,147) 8,716 GOLDMAN SACH 07-02-2012 05-13-2014 114,476 (120,782) -6,306

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

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(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss (h) (e) 1 Gain or (loss). If you enter an amount in column (g), Cost or other basis (d) Subtract column (c) (a) enter a code in column (f) (b) See the Note below Date sold or Proceeds (e) Description of property Date acquired and see Column (e) See the separate instructions disposed (sales price) from column (d) (Example 100 sh XYZ Co) (Mo, day, yr) in the separate (Mo, day, yr) (see instructions) (f) and (g) instructions combine the result Code(s) from Amount of with column (g) instructions adjustment **GOLDMAN SACH** 7,439 7,439 (0) 2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if 7,439 (0)7,439 Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and

enter an adjustment in column (g) to correct the basis See Column (g) in the separate instructions for how to figure the amount of the

adjustment

# **TY 2014 Accounting Fees Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MILLER COOPER & CO, LTD	10,260	5,130		5,130

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134018705

### TY 2014 All Other Program **Related Investments Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Category	Amount
NONE	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491134018705

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

# **TY 2014 Depreciation Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

### **TY 2014 Investments - Other Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GOLDMAN SACHS	AT COST	5,897,704	6,332,388

efile GRAPHIC print - DO NOT PROCESS   As Filed Data -	DLN: 93491134018705
TY 2014 Other Decreases Schedule	

Name: Charles S & Millicent P Brown

Family Foundation

Description	Amount
OTHER COST BASIS ADJUSTMENTS	2,223

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491134018705

### **TY 2014 Other Income Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Federal Tax Refunds			

#### **TY 2014 Other Professional Fees Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GS ACCT 57242- INVESTMENT FEES	28,212	28,212		
GS ACCT 57243- INVESTMENT FEES	2,730	2,730		
GS ACCT 57253- INVESTMENT FEES	7,374	7,374		
GS ACCT 81182- INVESTMENT FEES	8,170	8,170		
GS ACCT 81183- INVESTMENT FEES	8,632	8,632		
GS ACCT 58073- INVESTMENT FEES	362	362		
BROOKFIELD PROPERTY PARTNERS	1	1		

### **TY 2014 Taxes Schedule**

Name: Charles S & Millicent P Brown

Family Foundation

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
IL CHARITY BUREAU FILING FEE	15	15		
FOREIGN TAXES	84	84		
FEDERAL TAXES	4,830			
OTHER TAXES	854	854		