

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 990-PF

### Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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

For calendar year 2014 or tax year beginning , and ending Name of foundation Employer identification number CHARLES & SANDRA CHANDLER FOUNDATION, INC 43-1958022 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite 9831 UNION ROAD 912-678-1167 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here METTER 30439 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization |X| Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method. X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 277,691 (Part I, column (d) must be on cash basis ) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per books amounts in columns (b), (c), and (d) may not necessarily equal ıncome ıncome purposes the amounts in column (a) (see instructions)) (cash basis only) 274,015 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ I If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4,338 4,338 4,338 Dividends and interest from securities Gross rents b Net rental income or (loss) Revenue 8,368 6a Net gain or (loss) from sale of assets not on line 10. 40,506 h Gross sales price for all assets on line 6a 8,368 Capital gain net income (from Part IV, line 2) 8,353 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Operating and Administrative Expenses | 1 6 2015 Less Cost of goods sold Gross profit or (loss) (attach schedule) STMT 1 -198 -198 18 11 Other income (attach schedule) 286,529 12,730 12,499 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. Other employee salaries and wages Pension plans, employee benefits Legal fees (attach schedule) ٦, 2. Accounting fees (attach schedule) Other professional fees (attach schedule) 8 8 17 75 1/2 STMT 2 75 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings 22 Printing and publications STMT 3 23 669 669 Other expenses (att. sch.) 24 Total operating and administrative expenses. 752 752 0 Add lines 13 through 23 6,000 6,000 25 Contributions, gifts, grants paid 6,752 752 6,000 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 279,777 Excess of revenue over expenses and disbursements 11,978 Net investment income (if negative, enter -0-) 12,499 Adjusted net income (if negative, enter -0-)

Form 990-PF (2014)

279,777

279,777

3

4

5

6

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

	sses for Tax on Investment	Income	13 13300LL			
(a) List and describe the ki 2-story brick warehouse,	(b) How acquired P – Purchase D – Donation	(c) Date (mo , d		(d) Date sold (mo , day, yr )		
1a KINDER MORGAN ENER	GY PARTNERS		D	01/0	3/14	12/02/14
b SEE ATTACHED			P	06/1	9/14	12/31/14
c CAPITAL GAINS DIST	RIBUTIONS					
d						
e			Ĺ			l
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			or (loss) ) minus (g)
a 31,118			23,179			7,939
ь 9,373			8,959			414
c 15						15
d						
Complete only for goods above a rain	a column (b) and arread by the formed	-1				
Complete only for assets showing gain i	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any		(k), but not	(h) gain minus less than -0-) or om col (h))
а						7,939
b						414
C						15
d						
е		<del> </del>				
2 Capital gain net income or (net capital lo	If gain, also enter in Part If (loss), enter -0- in Part	•		2		8,368
3 Net short-term capital gain or (loss) as of lf gain, also enter in Part I, line 8, column Part I, line 9.	, , , , ,	-0- ın		3		8,353
Part V Qualification Under S	Section 4940(e) for Reduced	Tay on Not I	Investment Inco			0,332
f section 4940(d)(2) applies, leave this part  Was the foundation liable for the section 494 f "Yes," the foundation does not qualify und	42 tax on the distributable amount of a		pase period?			Yes X No
Enter the appropriate amount in each co			ng any entries			
(a)	(b)		(c)	Ī		(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	e of noncharitable-use asset	s		ribution ratio divided by col. (c))
2013	5(	04		78	, , , ,	6.461538
2012	174,89	90	29,	396		5.949449
2011	153,84		43,8			3.512374
2010	175,79		14,:			12.285275
2009	167,40	00	27,4	483	<del></del>	6.091038
2 Total of line 1, column (d)				2		34.299674
3 Average distribution ratio for the 5-year in number of years the foundation has bee		by 5, or by the		3	ļ	6.859935
4 Enter the net value of noncharitable-use	assets for 2014 from Part X, line 5			4		68,965
5 Multiply line 4 by line 3				5		473,095
6 Enter 1% of net investment income (1%	of Part I, line 27b)			6		120
7 Add lines 5 and 6				7	-	473,215
8 Enter qualifying distributions from Part X	•			8		6,000
If line 8 is equal to or greater than line 7 Part VI instructions	, check the box in Paπ VI, line 15, and	complete that	part using a 1% tax r	ate See ti	ne 	

	1990-PF (2014) CHARLES & SANDRA CHANDLER 43-1958				_	<u>_</u>	age 4			
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	instructions	5)	<del></del>						
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line									
	Date of ruling or determination letter (attach copy of letter if necessary—see instr	ructions)								
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	1	<del> </del>			<u> 240</u>			
	here and enter 1% of Part I, line 27b	}								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of									
_	Part I, line 12, col (b)						_			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0			
3	Add lines 1 and 2		3	-			240			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4			-	<u> 0</u>			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				240			
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		4							
d -	Backup withholding erroneously withheld  6d		┥ _							
7	Total credits and payments Add lines 6a through 6d		7	1						
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.		8	+			240			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9	+			240			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	+						
11		funded >	11	1						
	rt VII-A Statements Regarding Activities						r			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No X			
participate or intervene in any political campaign?										
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see										
	Instructions for the definition)?									
	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  c Did the foundation file Form 1120-POL for this year?										
· · · · · · · · · · · · · · · · · · ·										
u	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:									
е	(1) On the foundation \$ (2) On foundation managers. \$ \$									
C	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose on foundation managers > \$	<del>2</del> 0								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		x			
-	If "Yes," attach a detailed description of the activities				_					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti-	cles of								
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	CIES OI			3		x			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		<del></del>			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			,	5		x			
	If "Yes," attach the statement required by General Instruction T				- V					
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	nt								
	conflict with the state law remain in the governing instrument?				6	X	Ì			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, co	ol (c), and Pa	art XV		7	X				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	` ''								
	GA.									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	al								
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3	or or								
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "						Ī			
	complete Part XIV				9		x			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eir					l			
	names and addresses STMT 6 10 X									
				F	om 99	0-PF	(2014)			

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?

Form 990-PF (2014)

Form 990-PF (20	014) CHARLES & SANDRA CHANDLER	43-1958022	Page 7
Part VIII	Information About Officers, Directors, Trustees, For	undation Managers, Highly Paid I	
	and Contractors (continued)		
3 Five high	est-paid independent contractors for professional services (see in	structions). If none, enter "NONE."	·
<del></del>	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of	others receiving over \$50,000 for professional services	•	<b>&gt;</b>
Part IX-A	Summary of Direct Charitable Activities		
List the foundation's	s four largest direct charitable activities during the tax year. Include relevant statistical informa	ation such as the number of	
	ther beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A			
• -			
2			
_			
3			
4	<del></del>		
•			
Part IX-B	Summary of Program-Related Investments (see ins	structions)	<u> </u>
	rgest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 N/A			
•			
2			·
All other program-re	elated investments. See instructions		
3			

Total. Add lines 1 through 3

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n fou	ndations,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	68,740
b	Average of monthly cash balances	1b	1,275
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	70,015
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		_
2	Acquisition indebtedness applicable to line 1 assets	2_	0
3	Subtract line 2 from line 1d	3_	70,015
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,050
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	68,965
6	Minimum investment return. Enter 5% of line 5	6	3,448
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	lations
	and certain foreign organizations check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	3,448
2a	Tax on investment income for 2014 from Part VI, line 5 2a 240		
b	Income tax for 2014 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	240
3	Distributable amount before adjustments Subtract line 2c from line 1	3_	3,208
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,208
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	3,208
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	6,000
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
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	6,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2014)

503,446

175,075

151,659 173,420

500

2,792

10

Subtract lines 7 and 8 from line 6a

Analysis of line 9.Excess from 2010

Excess from 2011

Excess from 2012

Excess from 2013

Excess from 2014

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

factors N/A

Total	 	<b>▶</b> 3a	6,000
b Approved for future payment N/A			
		1 1	

**Total** 

DAA

Part XVI-	A Analysis of Income-Producing A	ctivities				
	mounts unless otherwise indicated		ed business income	Excluded	1 by section 512, 513, or 514	
Ū				1 1	·	(e)
		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income
1 Program s	ervice revenue			code	,	(See instructions)
		· · · · · ·				
b						
c						
d		_				
e						
f						
g Feesa	and contracts from government agencies					
	up dues and assessments					
	savings and temporary cash investments					
	and interest from securities			_		4,338
	income or (loss) from real estate					
	inanced property					
	ebt-financed property			++		
	income or (loss) from personal property		<del>                                     </del>			
	stment income		<del> </del>	1		10
	ss) from sales of assets other than inventory	<u> </u>		<del>  </del>		8,368
	e or (loss) from special events			$+ \cdots +$		
11 Other reve	it or (loss) from sales of inventory			<del> </del>		
	) GAIN	-		+		
	TNERSHIPS	-		+ +		-216
	THE COURT OF THE C	-		$+ \cdots +$		-216
e		-		+		<del></del>
	Add columns (b), (d), and (e)			0	0	12,514
	line 12, columns (b), (d), and (e)			<u>-1</u>	13	12,514
	et in line 13 instructions to verify calculations)				13	12,01
Part XVI-E		ccomplishm	ent of Exempt F	ourpose:	s	· ·
Line No.	Explain below how each activity for which incom					
	accomplishment of the foundation's exempt purp					
N/A						
						·
·						
						- · · - · · · · · · · · · · · · · · · ·
	<u> </u>					· · · · · · <del>· · ·</del>
<del></del>						
·						<del></del>
		<del></del>				· · <u> </u>
		<del></del>				
	<u> </u>					
		<del>_</del>				

r CH	,	Exempt Organiz	_	alisicis IV ali	u mansaciil	nis and Relationships W	itii Monchantable		
1	Did the or			ge in any of the follo	lowing with any	other organization described		Yes	No
1	in section	501(c) of the Code (other	er than section	on 501(c)(3) organ	izations) or in se	ection 527, relating to political			
(	organizati	ons?							
а	Transfers	from the reporting found	dation to a no	oncharitable exemp	pt organization o	of			
	(1) Cash						<u>1a(1</u>		X
	(2) Other						1a(2	Ц	X
	Other tran								v
	•	of assets to a noncharit	•	•			1b(1	1	X
	•	ases of assets from a no I of facilities, equipment			on		1b(2	4	X
	• •	oursement arrangement	•	sets			1b(3 1b(4	$\top$	X
		or loan guarantees	9				1b(5	1	X
		mance of services or m	embership o	r fundraising solici	tations		1b(6	4	х
		facilities, equipment, m	•	•			1c	1	X
d I	If the ansv	ver to any of the above i	s "Yes," com	plete the following	schedule Colu	mn (b) should always show the t	aır market		
,	value of th	e goods, other assets, o	or services g	iven by the reporti	ng foundation. If	the foundation received less that	ın fair market		
,	value in ar	ny transaction or sharing	arrangemei	nt, show in column	(d) the value of	the goods, other assets, or serv	rices received		
	) Line no	(b) Amount involved	(c) Name	e of noncharitable exemp	pt organization	(d) Description of transfers, t	transactions, and sharing arrangen	nents	
N/A	<u> </u>								
		<del></del>							
					-				
			<u> </u>	<del> </del>					
		-	<b>†</b>		<del></del>				
						· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
						1			
		•	•			x-exempt organizations	<b>—</b> .	. 🖘	a
		in section 501(c) of the	•	than section 501(d	c)(3)) or in section	on 52/7		Yes X	.j No
<u> </u>	ii res, co	omplete the following so  (a) Name of organization	nedule.	(b) Type of o	organization	(c) Descr	iption of relationship		
N	/A	(a) Hame of organization		(5) 1900 010	y garnization	(6) 2533	phon of relationship		
	<del>/</del>								
						nedules and statements, and to the best of which preparer has any knowledge	i my knowledge and belief, it is tr	ие,	
	Coneci,	and complete Declaration of	preparer (outer i	A	On an information of	which preparer has any knowledge	May the IRS discuss this		
Sign with the preparer shown below (see instructions)? Yes									
lere	, ,	hale 1	W/W	A. bla	. 4	////		] 163	No
	-	Mane 1	011	mer_			SIDENT		
	Sig	gnature of officer or trustee			Date	Title	<del></del>	<del></del>	
	Print/	Type preparer's name			Preparer's signatu	ле	Date	Check	X n
Paid	h		· -						nployed
<sup>о</sup> гера	rer 💳	LIAM R. HICKMA		ZMANT TITT	<del></del>	R. HICKMAN JR.	04/02/1		
Jse O	nly Firm's	name ► DABBS	<del></del>		L & CANN	ON, LLP	PTIN P0074		
	Firm's		S MAIN ESBORO		58-0716		Firm's EIN ► 58-11 Phone no 912-7		
		SIATI	UNUACE	, GA 304:	29-0119			990-PF	
							Form	/3ひ-ピト	(2014)

### Schedule B-(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

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

OMB No 1545-0047

2014

Name of the organization	Employer identification number
CHARLES & SANDRA CHANDLER	
_FOUNDATION, INC	43-1958022
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	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Note. Only a section 501(c)(7), instructions	vered by the <b>General Rule</b> or a <b>Special Rule</b> . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 operty) from any one contributor. Complete Parts I and II. See instructions for determining a butions
Special Rules	
regulations under section 13, 16a, or 16b, and that \$5,000 or (2) 2% of the	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3 % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line at received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
contributor, during the y	rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, burposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
contributor, during the y contributions totaled mo during the year for an e	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one rear, contributions exclusively for religious, charitable, etc., purposes, but no such ore than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the orthis organization because it received nonexclusively religious, charitable, etc., contributions during the year.
990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 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 ertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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

Name of organization
CHARLES & SANDRA CHANDLER

Employer identification number 43-1958022

Part i	Contributors (see Inst	ructions) Use duplicate copies o	of Part I if additional space is ne	eded.
(a) No.	Name, add	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES R. CHAN 9831 UNION RD METTER	DLER GA 30439	\$ 274,015	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name add	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	valito, au	incos, and all 1.4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name add	(b) Iress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name. add	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name. add	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name. ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		,	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

	•	Adjusted Net Income	\$ 10 8 -216	\$ -198		Charitable Purpose		o     		Charitable Purpose	φ.		\$	Fair Market
	lncome	Net Investment Income	\$ 10	ۍ 18	Taxes	Adjusted Net		w.	Expenses	Adjusted Net	φ.		\$ tock Investments	Basis of
Federal Statements	- Form 990-PF, Part I, Line 11 - Other Income	Revenue per Books	\$ 10 8 -216	\$ -198	- 1	Net Investment		\$ 75	- Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	φ.	586 83	\$ ne 10b - Corporate S	End of
Federal S					Statement 2 - Form 990-PF, Part I, Line 18	Total		75		Total	φ.	586 83	\$ Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning
43-1958022	Statement 1	Description	ROYALTY INCOME 1250 GAIN PARTNERSHIPS	TOTAL	Sta	Description	FOREIGN TAXES	TOTAL	Statement 3	Description		EXPENSES ADVISORY FEES SECTION 59(E)(2) EXPNSES	Statement 4 - Fo	:

Fair Market Value	\$ 274,722	\$ 274,722
Basis of Valuation	COST	
End of Year	276,808	276,808
Beginning of Year	ა. '	\$ 0
Description	MARKETABLE SECURITIES	TOTAL

43-1958022

# **Federal Statements**

# Statement 5 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	_	Fair Market Value
ACCRUED INCOME	\$ 	\$ 37	\$_	37
TOTAL	\$ 0	\$ 37	\$_	37

					Œ
Federal Statements	Statement 6 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors	METTER GA 30439			
Fed		9831 UNION RD			
43-1958022	Name	CHARLES R CHANDLER			

# 2014 Year-End Account Summary

As of Date: 03/14/15

Account Number: 2956-5999

CHARLES AND SANDRA CHANDLER FOUNDATION, INC.

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes.

Please consult with your Financial Advisor or tax advisor regarding specific questions.

Short Term Gains or Losses (Box 2) For Covered Securities (Box 5)

	Date Acquired Acquired Acquired	Date Sold or Disposed (Box 1c)	Proceeds	Cost or Other Basis	eg e	Adjustments	Galn/Loss	
ABBVIE INC CUSIP: 00287Y109	21.00000 06/12/2014	07/09/2014	1,154.90	1,131.90	E WAS	0.00	23.00	Additional Information
ALTRIA GROUP INC CUSIP: 02209S103	12.00000 06/12/2014	10/02/2014	543.90	500.52		0.00	43.38	
BRISTOL MYERS SQUIBB CO CUSIP: 110122108	19.00000 06/12/2014	11/03/2014	1,094.54	898.99		0.00	195.55	
CONOCOPHILLIPS CUSIP: 20825C104 Subtotals	20.00000 06/12/2014 1.00000 06/12/2014 21.00000	08/18/2014 11/04/2014	1,583.39 69.17 \$1,652.56	1,656.52 82.83		0.00	-73.13	
CUSIP: 40650V100	0.59524 06/12/2014 0 02976 06/12/2014 1.90476 06/12/2014 0.09524 06/12/2014	11/03/2014 11/03/2014 11/04/2014	22.90 1.14 72.96 3.64	21.59 1.08 69.08 3.45		0000	1.31 0.06 3.88 0.19	
JOHNSON & JOHNSON CUSIP: 478160104	06/12/2014	11/03/2014	965.22	924.27		0.00	40.95	
KIMBERLY-CLARK CORP CUSIP: 494368103	1.00000 06/12/2014	11/04/2014	111.45	105.42		0.00	6.03	

Account Number: 2956-5999

CHARLES AND SANDRA CHANDLER FOUNDATION, INC.

This information is NOT provided to the internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or tax advisor regarding specific questions.

Short Term Gains or Losses (Box 2) For Covered Securities (Box 5)

Additional Information			
Additional			
Gain/Loss Amount	206.23	-19,13	\$414.66
Adjustments (8x 10)	0.00	0.00	\$0.00
Code (Box 11)			
Cost or Other Basis	947.94	2,615.07	\$8,958.66
Proceeds (Box 10)	1,154.17	2,595.94	\$9,373.32
Date Sold or Disposed (8æ te)	12/11/2014	06/12/2014 07/15/2014	
Date Acquired Quantity Sold (क∞ to)	16.00000 06/12/2014 12/11/2014	43.00000 06/12/2014	
Description CUSIP (8xt ts)	ELI LILLY & CO CUSIP: 532457108	LORILLARD INC CUSIP: 544147101	Totals

The Code column will reflect W for wash sale, C for collectibles, or D for market discound.
For some tax lots complete data is not available. Therefore, you may see N/A in the Proceeds, Gain/Loss or Cost columns. In these situations, you should determine the actual cost or proceeds and calculate the Gain/Loss.
Please note that the totals will include any available cost or proceeds, even if the Gain/Loss is marked N/A.