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50m 990-PF

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection Internal Revenue Service 2014, and ending For calendar year 2014 or tax year beginning A Employer identification number Name of foundation 45-2133889 PEARSON FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Boom/suite B Telephone number (see instructions)) 11402 N. CANTERBURY LANE City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here MEOUON, WI 53092 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 85% test, check here and attach Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . (Part I, column (d) must be on cash basis) 1,264,969. 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions)) 113,055. Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to Check ▶ attach Sch B 3 Interest on savings and temporary cash investments. 25,504 25,837. ATCH 1° Dividends and interest from securities . . . 5a Gross rents Net rental income or (loss) 148,730 * Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 148,730 Capital gain net income (from Part IV, line 2) . Net short-term capital gain. . . Income modifications . RECEIVED Gross sales less returns and allowances 10a Less Cost of goods sold . SCGross profit or (loss) (attach schedule) $\overline{\mathbf{Q}}$ Other income (attach schedule) 287,289. 174,557 J Total. Add lines 1 through 11 12 OGDEN. UT 13 Compensation of officers, directors, trustees, etc., 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) strative 2,750. 1,375. 1,375 c Other professional fees (attach schedule).[2] 17 7,089. 680. 18 Taxes (attach schedule) (see instructions)[3]. 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings and 22 Printing and publications 6,934. 6,934 Operating 23 Other expenses (attach schedule) ATCH .4. . 24 Total operating and administrative expenses. 16,773 8,989 1,375 Add lines 13 through 23. 51,000. 51,000. Contributions, gifts, grants paid 25 8,989. 67,773. 52**,** 375. Total expenses and disbursements Add lines 24 and 25 26 Subtract line 26 from line 12 219,516 Excess of revenue over expenses and disbursements 165,578. b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). .

_	,	Belones Chaste	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	E	End o	f year
Ŀ	art II	Balance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-beari	ng	60,028.	69,2	37.	69,237.
			cash investments				
	3	Accounts receivable ▶				******	
			btful accounts ▶				
			btful accounts ▶				
	1		officers, directors, trustees, and other				
			tach schedule) (see instructions)				
	1	, ,	ecervable (attach schedule)		_		
			btful accounts ▶				
Ø	l .		se				
Assets	9		eferred charges				
As	100	• •	e government obligations (attach schedule)				
			e stock (attach schedule)				
			e bonds (attach schedule)		-		
	11 C	Investments - land, building					
		and equipment basis Less accumulated deprecia	etion b			~	
		(attach schedule)	·		<u> </u>		
	12	Investments - mortgage	loans ATCH 5	977,459.	1,138,3	ng	1,195,732.
	114	Land, buildings, and	ach schedule) ATCH 5	,	1,130,3		1,130,132
		equipment basis Less accumulated deprecia	ation		٠.		8009 NOTE 0 100
	l	(attach schedule)					
	13	Other assets (describe	/				
	16	•	completed by all filers - see the age 1, item l)		1,207,5	16	1,264,969.
				1,037,407.	1,201,5	40.	1,204,303.
			accrued expenses				
	18						
ĕ	19						
Ē	20		ors, trustees, and other disqualified persons				
Liabilities	21		otes payable (attach schedule)				
	22	Other liabilities (describe	e >)				:
	23	Total liabilities (add line	es 17 through 22)	l		Ω	
_	23		low SFAS 117, check here . ▶		` <u> </u>		2
			24 through 26 and lines 30 and 31.				
ěs		•	· ·				
lances	24						e*
둳	26						
Assets or Fund Ba		Foundations that do	not follow SFAS 117, ► X				* * *
5			plete lines 27 through 31.		1		
S	27	•	cipal, or current funds		_		
SSE	28	•	r land, bldg, and equipment fund	1,037,487.	1,207,5	16	ŧ
		•	ulated income, endowment, or other funds	1,037,487.	1,207,5		
Net	30		d balances (see instructions)	1,037,407.	1,201,3	40.	
	31		net assets/fund balances (see	1,037,487.	1 207 5	16	,
			was in Net Appets or Fried Dole		1,207,5	40.	
_			nges in Net Assets or Fund Bala		(
1			balances at beginning of year - Part		-		1 027 407
	end	i-ot-year tigure reporte	ed on prior year's return)				1,037,487
	2 Ent	er amount from Part I	I I A A A A A A A A A A A A A A A A A A			2	219,516
3	3 Oth	er increases not inclu	ded in line 2 (itemize) ► ATCH 6			3	13,600
4	Add	l lines 1, 2, and 3				4	1,270,603.
	5 Dec	creases not included in	n line 2 (itemize) ► ATCH 7		 	_ 5	63,057
€	5 Tota	al net assets or fund b	palances at end of year (line 4 minus	s line 5) - Part II, colu <u>mn</u>	(b), line 30	6	1,207,546.

Page 3

Part	V Capital Gains	and Losses for Tax on Inve	estment Income			
		d describe the kind(s) of property sold (rick warehouse, or common stock, 200 a	- · · · · · · · · · · · · · · · · · · ·	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
a S	EE PART IV SCHE	DULE		<u>Domanon</u>		
b						
С						
d						
e						
(e) Gross sales price	(f) Deprectation allowed (or allowable)	(g) Cost or other basis plus expense of sale	_	(h) Gain or (lo (e) plus (f) mini	
a _						
<u>b</u>	_			_		
C						
<u>d</u>						_ _
<u>e</u>	Complete only for accets	showing gain in column (h) and owner	d by the foundation on 12/31/69			····
	Complete only for assets				Gains (Col (h) g (k), but not less	
(i) F	M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	
<u>а</u>	· · · · ·					
b						- .
c C						
<u>d</u>						
<u>e</u>		/ If	gaın, also enter ın Part I, line 7			
	apital gain net income	or (net capital loss)	(loss), enter -0- in Part I, line 7	2		148,730.
		ain or (loss) as defined in sections and it, line 8, column (c) (see inst				
	<u>-</u>					0
Part		Under Section 4940(s) for Per	duced Tax on Net Investment Ir	COMA		<u>_</u>
			outable amount of any year in the ba	ase perio	d?	Yes X No
		not qualify under section 4940(e).	r; see the instructions before makin	a any ent	rios	
1 E	(a)			g any ent	(d)	
Calend	Base period years lar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution r (col (b) divided by	/ col (c))
	2013	42,900.	1,050,971.			0.040819
	2012	34,600.	733,156.	_		0.047193
	2011	25,034.	452,216.			0.055359
	2010					<u></u>
	2009					
		٦٧		2		0.143371
		d)		-		0.143371
		o for the 5-year base period - divid		3		0.047790
n	umber of years the fou	ndation has been in existence if les	ss than 5 years	-		0.047730
4 E	nter the net value of no	oncharitable-use assets for 2014 fr	om Part X, line 5	4	1,	199,792.
5 M	iultiply line 4 by line 3			5		57,338.
		ent income (1% of Part I, line 27b)		6		1,656.
				7		58,994.
		ions from Part XII, line 4		8		52,375.
lf	line 8 is equal to or grant VI instructions.	greater than line 7, check the box	in Part VI, line 1b, and complete		using a 1% ta	

Form	990-PF (2014) PEARSON FAMILY FOUNDATION 45-2133			age 4
Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	18		
	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		3,3	112.
	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		2000	
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		3,3	312.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3,3	312.
6	Credits/Payments:			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 7, 120.			
b	Exempt foreign organizations - tax withheld at source			· ·
С	Tax paid with application for extension of time to file (Form 8868) 6c			*
d	Backup withholding erroneously withheld			ئــــ ـ ـــــ <u>ـــــ</u>
7	Total credits and payments Add lines 6a through 6d		7,1	L20.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,8	308.
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 3,808. Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
_	Instructions for the definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			_
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$(2) On foundation managers \blacktriangleright \$			
е	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		X
	If "Yes," attach a detailed description of the activities.			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 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	Х	
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	WI,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			^
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10	names and addresses	10	Х	1
-				

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

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_		009		
	t VII-A Statements Regarding Activities (continued)		- 1	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	المما		х
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	امدا		Х
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	v	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13_	_ X	
	Website address ▶N/A		1.	
14	The books are in care of ▶ RICHARD PEARSON Telephone no. ▶ (312) 560	7-28	Τρ	-
	Located at ►114UZ N. CANTERBURY LANE MEQUON, WI ZIP+4 ► 53U92			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			,
	"Yes," enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1 a	During the year did the foundation (either directly or indirectly):			,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			j
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			Ø
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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	1		
	termination of government service, if terminating within 90 days)	ľ		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	â.		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here	1		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1		
	were not corrected before the first day of the tax year beginning in 2014?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1		
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	**		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		Х
c	If the provisions of section 4942(a) (2) are being applied to any of the years listed in 2a, list the years here.			1
•	•	1		,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?	1		
		1	i	

	Comr	missi	oner i	under	section	4943	(c)(7))	to dispo	se of h	noldings	acquired	by gift	t or	beques	t, or	(3) th	e lap	ose of		:	
	the	10-,	15-,	or	20-year	fırst	phase	holding	period'	? (Use	Schedule	C, F	orm	4720,	to	determ	ine i	f the	l	į	
	found	latior	had e	xcess	business	holdin	igs in 20	014)											3b		
											nner that								4a		Х
b	Did 1	the '	founda	ation	make ar	ny inv	estment	ın a pı	nor yea	r (but a	after Dece	mber 3	31, 1	969) th	at c	ould je	opard	ıze ıts			
											ore the fir								4b		Х

Part VIII Statements Regarding Activities for Which Form 4720 May Be Required (continued)		Ctotomonte Departing Activities		4700 May Ba Bar	usingd (continued)			age C
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(n))?	Pa			4/20 May Be Red	uirea (continuea)		1	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charidable, etc. organization described in section 495(d)(4)(N) (cee instructions). (5) Provide for any purposes other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purposes other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) Provides for any purposes of 4945 or in a current notice regarding desister assistance (seek there	5a	• • • • • • • • • • • • • • • • • • • •			<u> </u>			
directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)4(A)(A)? (see instructions). (5) Provide of or any purpose other than an charitable, etc., organization described in purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) If any answer is "Yes" to Sa(1)-16), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? (8) Grantable statement required by Agricultural Sa(1) Sa(· — —			ŧ
(3) Provide a grant to an individual for travel, study, or other similar purposes?					1 1 11			
(4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(ql/q)(A)(2) (see instructions). (5) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(ql/q)(A)(2) (see instructions). (6) Provide of rany purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of crucity to children or animals? b if any answer is "Yes" to \$3(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? C granizations relying on a current notice regarding disaster assistance (see instructions)? C if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? B Did the foundation, during the year, review any funds, directly or indirectly, to pay premiums on a personal benefit contract? B Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? B Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? B Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? B Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? B Did the foundation and price year, pay premiums, directly or indirectly, on a personal benefit contract? B Did the foundation or pay proceeds or have any net moore attributable to the transaction? B Did the foundation or receive any proceeds or have any net moore attributable to the transaction? B Did the foundation or receive any proceeds or have any net moore attributable to the transaction? B Did the foundation or pay proceeds or have any net moore attributable to the transaction? B Did the foundation of the process or pay and the process o		directly or indirectly, any voter registration drive?, .			` 			E E
section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b if any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions)? Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on a current notice regarding disaster assistance (see instructions). Crganizations relying on the text assistance (see instructions). Crganizations relying on the text assistance theorems of the text assistance (see instructions). Crganizations relying on the text assistance		(3) Provide a grant to an individual for travel, study, or of	ther similar purposes?	·	. Yes X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animas? Yes No		(4) Provide a grant to an organization other than a	charitable, etc., org	anızatıon described i			}	r
b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(0) But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53 4945-5(0) b Did the foundation, during the year, receive any funds, directly or indirectly, or pay premiums on a personal benefit contract? At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?. Yes \(\text{No} \) No If "Yes," did the foundation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and the foundation of the state of the transaction? List all officers, directors, Trustees, foundation managers and their compensation (see instructions). List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address of each employee pad more than \$50,000 (b) Title, and average hours per week devoted to position (from paid, more personal benefit contractors). (b) Title, and average (c) Compensation (d) Contrabutions to employee benefit plans, and deferred compensation. (c) Compensation (d) Contrabutions to employee benefit plans, and deferred compensation. (d) Compensation (d) Contrabutions to employee benefit plans, and deferred compensation. (e) Expense accountly, other allowances.					. — —			•
b if any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions)? Cirganizations relying on a current notice regarding disaster assistance (see instructions). Did the foundation diverser receive any funds directly or indirectly, to pay premiums on a personal benefit contract? Cirganization and promise and		(5) Provide for any purpose other than religious, ch	arıtable, scientific, I	iterary, or educationa	a — —			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? If "Yes," to describe the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes "If "Yes								ŧ
Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? A tan y time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Test Viii Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average of the compensation of title allowances and determed compensation of the hours per week devoted to position of the position of the highest-paid employees paid more than \$50,000 (b) Title, and average devoted to position of the highest-paid employee paid more than \$50,000 (c) Compensation of the highest-paid employees account, other allowances of employee bare account, other allowances of employee bare account, other allowances of employee paid more than \$50,000 (b) Title, and average devoted to position of the position	b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in		.	- *
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ## Yes		Regulations section 53 4945 or in a current notice regard	ding disaster assistan	ce (see instructions)?		5b		
because it maintained expenditure responsibility for the grani? #*Yes,** attach the statement required by Regulations section 53 4945-5(d) Both the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **Doth the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ##*TYes,** to be, file Form 8870 ##*TYes,** did the foundation are the foundation a party to a prohibited tax shelter transaction? #### A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ##### A transport of the form 8870 #### A transport of the form 8870 #### A transport of the form 8870 #### A transport of the foundation receive any proceeds or have any net moore attributable to the transaction? #### A transport of the foundation attribution and the foundation of the foundation attribution and the foundation of the foundation and the		Organizations relying on a current notice regarding disas	ter assistance check l	here	▶ l			4
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If "Yes," attach the statement required by Regulations section 53 4945-5(d) 5a		because it maintained expenditure responsibility for the g	rant?		. Yes X No			
on a personal benefit contract? Yes								
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a	Did the foundation, during the year, receive any fun	ds, directly or indire	ectly, to pay premiur	ns		26	
##Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		on a personal benefit contract?	<i></i>		Yes X No	1		,
##Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	act?	6b		X
b if Yas," did the foundation receive any proceeds or have any net income attributable to the transaction?								
b if Yas," did the foundation receive any proceeds or have any net income attributable to the transaction?	7a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?.	. Yes No			_
ATCH 8 Compensation of five highest-paid employees (other than those included on line 1 - see instructions).	b	If "Yes," did the foundation receive any proceeds or have	e any net income attr	butable to the transact	on?			X
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average hours per week devoted to position 2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter 'NoNE." (b) Title, and average hours per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter 'NoNE." (c) Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter 'NoNE." (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other allowances of each employee benefit plans and deferred compensation. NONE	Рa	t VIII Information About Officers, Director	s, Trustees, Fou	ndation Managers	s, Highly Paid Emp	loyees,		
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"NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances								
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NONE devoted to position NONE NONE	اها	Name and address of each employee haid more than \$50,000		(c) Compensation	`employee benefit	(e) Expens	se accou	ınt,
	(Traine and dad ood of dads on project paid more than too jobs	devoted to position	(0) 00		otner al	iowance	s
								
Fotal number of other employees paid over \$50,000		NONE						
Fotal number of other employees paid over \$50,000								
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Fotal number of other employees paid over \$50,000								
Total number of other employees paid over \$50,000								
Total number of other employees paid over \$50,000								
	Tota	I number of other employees paid over \$50,000.						

3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundat	ions,
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	1,151,059.
b	Average of monthly cash balances	1b	67,004.
C	Fair market value of all other assets (see instructions),	1c	
d	Total (add lines 1a, b, and c)	1d	1,218,063.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,218,063.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	18,271.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,199,792.
6	Minimum investment return. Enter 5% of line 5	6	59,990.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	59,990.
2 a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	3,312.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	56,678.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	56,678.
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	56,678.
Par	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	52,375.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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	52,375.
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)		0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	52,375.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years.	alculating	whether the foundation

Pa	t XIII Undistributed Income (see instru	ctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				56,678.
2	Undistributed income, if any, as of the end of 2014				ı
	Enter amount for 2013 only				
b	Total for pnor years 20 12 ,20 11 ,20 10	>		, ,	
3	Excess distributions carryover, if any, to 2014				
	From 2009			(14 %	
b	From 2010	* *			
С	From 2011 8, 328.		^		
d	From 2012 5,088.				
е	From 2013				
f	Total of lines 3a through e	13,416.			
	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$52,375.			-	
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election			1	
-	required - see instructions)				
d	Applied to 2014 distributable amount		,		52,375.
е	Remaining amount distributed out of corpus		₹ °		
5	Excess distributions carryover applied to 2014	4,303.			4,303.
	(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	9,113.			
þ	Prior years' undistributed income Subtract				i
	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	4a from line 2a. Taxable amount - see	· S	*		
	instructions	λ'			
f	Undistributed income for 2014 Subtract lines		. *		
	4d and 5 from line 1 This amount must be			}	
	distributed in 2015				
7	Amounts treated as distributions out of corpus				i
	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.	9,113.			
	Subtract lines 7 and 8 from line 6a	3,220			
10	· I				
a	Excess from 2010 4,025.				
b	Excess non 2011				
C	Excess IIIIII 2012				
d	Excess from 2014				
<u>e</u>	Excess from 2014		l		5 000 DE (0014)

Pa	rt XIV Private Ope	erating Foundations	s (see instructions ar	nd Part VII-A, quest	ion <u>9)</u>	NOT APPLICABLE
	If the foundation has foundation, and the ruling				ating -	
	Check box to indicate v				section 4942	(j) (3) or 4942(j) (5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
24	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(6) 1021
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
	2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed,					
С	*Support* alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)),					
	or royalties)	-				
	public and 5 or more exempt organizations as provided in section 4942 ()(3)(B)(ii)					
	(3) Largest amount of support from an exempt organization.		-			
	(4) Gross investment income					
Pa	rt XV Supplemei			t only if the found	dation had \$5,000	or more in assets
		e during the year - s				
1	Information Regardin			11 00/ - f 11 - 4-4	-11	
а	List any managers of before the close of any	the foundation who i y tax year (but only if the	nave contributed mor ney have contributed r	re than 2% of the tot more than \$5,000). (S	al contributions rece See section 507(d)(2).)
	N/A	N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	100/	f 11		Un laws marked of the
b	List any managers of ownership of a partne					lly large portion of the
	N/A					
2	Information Regardin	g Contribution, Grant	t, Gift, Loan, Scholarsi	nip, etc., Programs:		
	Check here ► X if the unsolicited requests for other conditions, com	or funds. If the found	lation makes gifts, gr	to preselected char ants, etc. (see instruc	ritable organizations ctions) to individuals	and does not accept or organizations under
а	The name, address, a	-		the person to whom ap	oplications should be a	ddressed
b	The form in which app	olications should be su	bmitted and information	on and materials they	should include:	
	Any submission dead	lines:				· · · · · · · · · · · · · · · · · · ·
-	,					
d	Any restrictions or I factors:	imitations on awards	, such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other

Form 990-PF (2014)	(continued)			Page 11
Part XV Supplementary Information (3 Grants and Contributions Paid Duri	ng the Vear or App	oved for F	irture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipioni		
a raid doming the year				
ATCH 9				
		-	j	
			l	
		ľ		
			i	
Total			▶ 3a	51,000.
b Approved for future payment				
			1	
Total			▶ 3b	
Total	<u></u>		<u> ► 3D</u>	

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	alysis of income-Produ		ited business income	Excluded by	section 512, 513, or 514	(e)
· ·		(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income
Program service re	venue.	Business code	Allount	Exclusion code	Amount	(See instructions)
				-		
						
_				-		
						
f	ate from accomment agencies					
-	ets from government agencies and assessments	-		+		<u> </u>
	nd temporary cash investments					
_	erest from securities			14	25,504.	
	or (loss) from real estate.					
	property					
	ced property					
	(loss) from personal property	1				
	income					
	ales of assets other than inventory			18	148,730.	·
	ss) from special events	1 1				
•	ss) from sales of inventory		·			
	ss) from sales of inventory.					
		———				
d		1				
d					174,234.	
d e Subtotal Add colu Total. Add line 12 e worksheet in line art XVI-B Re	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calculationship of Activities	culations) s to the Ac	complishment o	f Exempt Purpo	oses	
subtotal Add column Add Inc. 12 worksheet in line.	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calc	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
subtotal Add columber 12 e worksheet in line art XVI-B Rene No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
subtotal Add columber 12 e worksheet in line art XVI-B Rene No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
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subtotal Add colu Total. Add line 12 e worksheet in line art XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
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Subtotal Add colu Total Add line 12 e worksheet in line Int XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
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Subtotal Add colu Fotal. Add line 12 worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Fotal. Add line 12 worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Fotal. Add line 12 worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Fotal. Add line 12 worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Fotal. Add line 12 e worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Fotal. Add line 12 e worksheet in line rt XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total. Add line 12 e worksheet in line Int XVI-B Re	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total Add line 12 e worksheet in line Int XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total Add line 12 e worksheet in line Int XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total Add line 12 e worksheet in line Int XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total Add line 12 e worksheet in line Int XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to
Subtotal Add colu Total Add line 12 e worksheet in line art XVI-B Re ne No. Explai	imns (b), (d), and (e) , columns (b), (d), and (e) e 13 instructions to verify calce lationship of Activities of below how each activities.	s to the Ac	complishment on income is report	f Exempt Purpo	oses of Part XVI-A contribution	uted importantly to

JSA 4E1492 1 000

Form 990)-PF (20	14)		FAMILI FOUNDA				43-2133			ge io
Part >	(VII	Information R Exempt Organ		ansfers To and	Transacti	ons and	d Relationshi	ps With Nond	hari	table)
1 D	d the	organization direct	ly or indirectly	engage in any of t	he following	with an	y other organiza	tion described		Yes	No
ın	section	on 501(c) of the Co	ode (other than	section 501(c)(3)	organization	s) or in si	ection 527, relat	ing to political			ł
	ganıza								×ξ		
				a noncharitable e					-	-	۱
-									1a(1)		X
									1a(2)		Х
		ansactions:									- , -
				mpt organization							X
•	•			able exempt organiz							X
		·		assets							X
•	•										X
											X
•	•			sts, other assets, or						_	X
				es," complete the						faır m	narke
				ices given by the							
Vä	alue in	any transaction of	r sharing arran	gement, show in c	olumn (d) ti	he value	of the goods, ot	her assets, or se	ervice	s rec	eived
(a) Line	-	(b) Amount involved	T	noncharitable exempt or			cription of transfers,		_		
		N/A				N/A					
							<u></u>				
		<u></u>				ļ					
								··			
											
			 								
	<u> </u> .		+								
											
			+								
			+								
	-+		 								
									•		
d	escrib	oundation directly ed in section 501(c ' complete the folio	c) of the Code (c	ffiliated with, or re other than section 5	elated to, on 501(c)(3)) or	e or mor	e tax-exempt or n 527?	ganizations	Y	es X] No
		(a) Name of organization	n	(b) Type of	organization		(c) D	escription of relations	ship		
		<u> </u>									
	_										
			 -								
-	Under	penalties of perjury, 1 dec	lare that I have exam	nined this return, including	accompanying s	chedules and	statements, and to the	e best of my knowledg	ge and	belief, it	is true
٥.	correct	and complete Declaration	of preparer (other than	taxpayer) is based on all info	ormation of which	preparer has	any knowledge				
Sign		Supard	I Dear	a 15/12	12015	TRE	SIDENT	May the IRS with the pr			retum below
Here	Sign	ature of officer or trustee	,	Date		Title		(see instruction		Yes	X No
	_			-							
	•	Print/Type preparer's n	ame	Prepare signatu	ire //		Date	Check if	PTIN		
Paid		JAMES LEWIS		yan	er La	ew-	05/10/2015	self-employed	P004	4604	17
Prepa	arer	Firm's name P	RICEWATERHO	OUSECOOPERS L			Fin	m's EIN ▶ 13-4	0083	24	
Use C	Only	Firm's address ▶ 2	001 MARKET	ST, SUITE 17	00						

19103

Form **990-PF** (2014)

267-330-3000

Phone no

PHILADELPHIA, PA

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2014

Employer identification number

PEARSON FAMILY FOUNDATION 45-2133889							
Organization type (check one)	:	10 210000					
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion					
	501(c)(3) taxable private foundation						
Check if your organization is covered by the General Rule or a Special Rule . Note . Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
General Rule							
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions							
990-EZ, or 990-PF), but it mus	totaling \$5,000 or more during the year						

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 PEARSON FAMILY FOUNDATION

Employer identification number 45-2133889

Part I	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_	RICHARD D. AND SUSAN L. PEARSON 11402 N. CANTERBURY LANE MEQUON, WI 53092	\$113,055.	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

Name of organization PEARSON FAMILY FOUNDATION

Employer identification number 45-2133889

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	500 & 530 SH OF TOWER STOCK ON 8/13 & 11/7	-	
		- - \$113,055.	_11/07/2014_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
;		- - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	

Employer identification number

45-2133889

Part III	Exclusively religious, charitable, etc.	, contributions to o	rganizations desc	ribed in section 501(c)(7), (8), or (10)			
	that total more than \$1,000 for the y						
	following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, e						
	contributions of \$1,000 or less for the			ee instructions.) ► \$			
	Use duplicate copies of Part III if addit	ional space is neede	ed				
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
Part I	(b) i dipose of gilt	(0) 000		(a) becomplied of now girls held			
		(e) Transf	er of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee			
							
(a) No.	 						
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Part I							
							
		(e) Transf	er of gift				
	(-)						
	Transferee's name, address, ar	nship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
Part I	(5) 1 4.15000 01 gill	(0) 000					
							
				<u>L</u>			
	(e) Transfer of gift						
	Tuesdayeele mame edduces as	- d 71D . A	Deletie				
	Transferee's name, address, a	10 ZIP + 4		nship of transferor to transferee			
			 -				
(a) No. from	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
							
				/ - 			
							
		(e) Transf	er of gift	<u> </u>			
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee			

PEARSON FAMILY FOUNDATION 45-2133889
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of P	roperty		Desc	ription		D D	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
expenses of sale	allowable	basis TOTAL CAPITA	12/31/69 AL GAIN DIS'		i auj basiş		8,923.	
			.i. Gran 210				,,,,,	
90,704.		NORTHERN TRU 94,126.	JST X2994 -	ST			VAR -3,422.	V
·		NORTHERN TRI	JST X2994 -	LT			VAR	V
329,324.		186,095.					143,229.	
TAL GAIN(L	oss)	}			• • • • • •		148,730.	
							:	
						İ		

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

NET INVESTMENT INCOME	25,837.	25,837.
REVENUE AND EXPENSES PER BOOKS	25,504.	25,504.
		TOTAL
DESCRIPTION	DIVIDEND INCOME-NORTHERN TRUST	

ATTACHMENT 1 PAGE 19

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME_	CHARITABLE <u>PURPOSES</u>
PWC ACCOUNTING FEES		2,750.	1,375.	1,375.
	TOTALS	2,750.	1,375.	1,375.

FORM 990PF, PART I - TAXES

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

7,089. FOREIGN TAXES FEDERAL EXCISE TAXES

DESCRIPTION

680.

7,089. TOTALS

680.

ATTACHMENT 3 PAGE 21

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS 6,934.

NET INVESTMENT INCOME 6,934.

TOTALS

DESCRIPTION BROKERAGE FEES

6,934.

6,934.

ATTACHMENT 4 PAGE 22

S	l
ATTACHMENT	

PART II - OTHER INVESTMENTS FORM 990PF,

DESCRIPTION

NORTHERN TRUST 23-72994

TOTALS

ENDING BOOK VALUE

ENDING FMV

1,138,309. 1,138,309.

1,195,732. 1,195,732.

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

DESCRIPTION

OUTSTANDING GRANTS REPORTED IN 2014

13,600.

AMOUNT

TOTAL

13,600.

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

DESCRIPTION	AMOUNT
OUTSTANDING GRANTS REPORTED IN 2013 BOOK VS FMV DIFF OF CONTRIBUTED ASSETS OTHER DIFFRENCES	2,800. 60,155. 102.
TOTAL	63,057.

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

45-2133889

ATTACHMENT 8

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

11402 N. CANTERBURY LANE MEQUON, WI 53092 RICHARD PEARSON

PRESIDENT

45-2133889

ATTACHMENT 9

45-2133889

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	шI
WOUNDED WARRIORS PROJECT	N/A	-
4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256	PC	
WILDLIFE IN NEED CENTER	N/A	-
NA49 SI460 S. MAIERVILLE RUAD OCONOMOGOC, WI 53066		
FISHER HOUSE WISCONSIN 5000 WEST NATIONAL AVENUE	PC	-
MILMAUKEE, WI 53295 HUNGER TASK FORCE 201 S HAWLEY CT	N/A PC	F

51,000	
TOTAL CONTRIBUTIONS PAID	

7,650.

TO SUPPORT CHARITABLE FUNCTION

N/A PC

US FRIENDS OF DAVID SHELDRICK WILDLIFE TRUST 201 N ILLINOIS STREET 16TH FLOOR SOUTH TOWER

MILWUAKEE, WI 53214 201 S HAWLEY CT

INDIANAPOLIS, IN 46204

 PC

5,100

TO SUPPORT CHARITABLE FUNCTION

2,550

TO SUPPORT CHARITABLE FUNCTION

3,400

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

TO SUPPORT CHARITABLE FUNCTION

ATTACHMENT 9 (CONT'D)

2,550

TO SUPPORT CHARITABLE FUNCTION

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses
► Attach to Form 1041, Form 5227, or Form 990-T.

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

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

OMB No 1545-0092

Employer identification number Name of estate or trust 45-2133889 PEARSON FAMILY FOUNDATION Note: Form 5227 filers need to complete only Parts I and II

Part	Short-Term Capital Gains and Losses - Asse	ets Held One Year	or Less			
the lii This f	nstructions for how to figure the amounts to enter on nes below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
•	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with Box A checked	90,704.	94,126.			-3,422.
	Totals for all transactions reported on Form(s) 8949 with Box B checked					_
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4 5	Short-term capital gain or (loss) from Forms 4684, 62 Net short-term gain or (loss) from partnerships, S corp	porations, and other	estates or trusts		5	
6	Short-term capital loss carryover. Enter the amount Carryover Worksheet		6	()		
7	Net short-term capital gain or (loss). Combine line 17, column (3) on the back	<u></u>	<u></u>		7	-3,422.
Par	t II Long-Term Capital Gains and Losses - Ass	ets Held More Tha	an One Year			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales pnce)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	329,324.	186,095.			143,229.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Long-term capital gain or (loss) from Forms 2439, 46	884, 6252, 6781, and	d 8824		11	
12	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					
13	13 Capital gain distributions,					8,923.
14 15	Gain from Form 4797, Part I	it, if any, from line	e 14 of the 2013	Capital Loss	14	
16	Net long-term capital gain or (loss). Combine lines				15	152 152

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

Schedule D (Form 1041) 2014

Sched	, ule D (Form 1041) 2014				Page 2
Par		•	(1) Beneficiaries'	(2) Estate's	
	Caution: Read the instructions before completing this pa	art.	(see instr.)	or trust's	(3) Total
17	Net short-term gain or (loss)	17			-3,422.
18	Net long-term gain or (loss):				
а	Total for year	18a			152,152.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b	<u> </u>		
	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19			148,730.
Note gains, neces	: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and do not complete Part IV If line 19, column (3), is a ni sarv	(or Fol et loss	rm 990-T, Part I, line , complete Part IV a	4a) If lines 18a and nd the Capital Loss C	19, column (2), are ne Carryover Worksheet, a
Par					
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ne 4c, if a trust), the s	smaller of:	
а	The loss on line 19, column (3) or b \$3,000			<u>20 (</u>	
Note <i>Loss</i> (: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	i, line 22 (or Form 9	90-1, IIN <i>e 34), is a l</i> os	s, сотрієте тле Саріта
Par		es		-	
	1041 filers. Complete this part only if both lines 18a and 19 in col	umn (2) are gains, or an	amount is entered	in Part I or Part II an
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thai	n zero.		
	ion: Skip this part and complete the Schedule D Tax Worksheet in the i	instruc	ctions if:		
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.		an ar aughfiad dis	udanda ara inaluda	d in income in Port
of E	n 990-T trusts. Complete this part only if both lines 18a and 19 a orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the Sche c	lule D Tax Worksh	eet in the instruction
	ner line 18b, col. (2) or line 18c, col. (2) is more than zero.	4,10	omplete the conce	idio D'Ida II d'II d'II	
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	241	. 21		
21 22	Enter the smaller of line 18a or 19 in column (2)) , , ,	. 21		
22	but not less than zero				
22	Enter the estate's or trust's qualified dividends	_			
23	from Form 1041, line 2b(2) (or enter the qualified		*		
	dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the	-			
25	amount from line 4g; otherwise, enter -0 ► 25		, x 🚓		
26	Subtract line 25 from line 24. If zero or less, enter -0-		26		
27	Subtract line 26 from line 21. If zero or less, enter -0-				
28	Enter the smaller of the amount on line 21 or \$2,500		· —		
29	Enter the smaller of the amount on line 27 or line 28				
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is			▶ 30	
31	Enter the smaller of line 21 or line 26				
32	Subtract line 30 from line 26				
33	Enter the smaller of line 21 or \$12,150				
34	Add lines 27 and 30				
35	Subtract line 34 from line 33. If zero or less, enter -0-				
36	Enter the smaller of line 32 or line 35				
37	Multiply line 36 by 15%			▶ 37	
38	Enter the amount from line 31		. 38		_
39	Add lines 30 and 36				
40	Subtract line 39 from line 38. If zero or less, enter -0		. 40		
41	Multiply line 40 by 20%			▶ 41	
42	Figure the tax on the amount on line 27 Use the 2014 Tax Rate Schedule for		1 1	[-7	
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1 1		
43	Add lines 37, 41, and 42		. 43		
44	Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for		1 1		

Schedule D (Form 1041) 2014

and Trusts (see the Schedule G instructions in the instructions for Form 1041)

G, line 1a (or Form 990-T, line 36) . .

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

Form 8949

Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

Attachmen

Department of the Treasury Internal Revenue Service

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

Social security number or taxpayer identification number

45-2133889

Name(s) shown on return PEARSON FAMILY FOUNDATION

Before you check Box A, B, or C below, see 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 your bought in 2014 or later) 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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo , day, yr)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
NORTHERN TRUST X2994							
ST		<u> </u>	90,704.	94,126.			-3,422.
		-					
						_	
			<u> </u>		-		
			-				
		ļ					
2 Totals. Add the amounts in col act negative amounts) Enter of your Schedule D, line 1b (if Bo Box B above is checked), or line	each total here ar x A above is checl	nd include on ked), line 2 (if	90,704.	94,126.			-3,422.

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

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side PEARSON FAMILY FOUNDATION

Social security number or taxpayer identification number 45-2133889

Before you check Box D, E, or F below, see 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)

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.

- X (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

1 (a) Description of property	(b) Date acquired	te acquired Date sold or	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if a If you enter an a enter a coo See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co)	(Mo , day, yr)				(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
NORTHERN TRUST X2994 - LT			329,324.	186,095.			143,229.
	_						
	-						
2 Totals. Add the amounts in col (subtract negative amounts). E include on your Schedule D, Iir checked), Iine 9 (if Box E above (if Box F above is checked)) ▶	Enter each tota ne 8b (if Box I	at here and D above is	329,324	. 186,095.			143,229.

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