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

OMB No 1545-0052 2014

Department of the Treasury Internal Reverue 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.

Open to Public Inspection

			year 2014, or tax year beginnin	g	, 2014	, and ending			
Name of			···				Α	Employer identification num	nber
Number	ريلي <u>ا</u> and	stree	CHARITABLE FUND t (or P O. box number if mail is not delivered	to street a	address)	Room/suite	В	45-4027960 Telephone number (see instru	ictions)
3150	) 5	SOU	TH ST NW			2B		(202) 966-341	
			or province, country, and ZIP or foreign post	al code		<u> </u>			
WASI						20007	С	If exemption application is	pending, check here.
G Cr	neci	k all	that apply Initial return	ĺ	Initial return of a form	er public charity	D	1 Foreign organizations, che	ck here ▶
			Final return Address change	. •	Amended return			2 Foreign organizations mee	ting the 85% test, check
H Ch	2001	hin	<del></del>		Name change (c)(3) exempt private for	Indation	ł	here and attach computation	on
11 01			tion 4947(a)(1) nonexempt charita			private foundation	E	If private foundation status	was terminated
I Fai		_	value of all assets at end of year		counting method: X C		1	under section 507(b)(1)(A)	
(fro	om F	Part II	l, column (c), line 16)		Other (specify)		F	If the foundation is in a 60-	month termination —
	\$			(Part I,	column (d) must be on c	eash basis )	Ĺ	under section 507(b)(1)(B),	
Part	<u> </u>		nalysis of Revenue and		(a) Revenue and	(b) Net investmen	t	(c) Adjusted net	(d) Disbursements
		col sar	( <b>penses</b> (The total of amounts in umns (b), (c), and (d) may not ned rily equal the amounts in column (density in column). The instructions)	es-	expenses per books	income		Income	for charitable purposes (cash basis only)
	T		Contributions, gifts, grants, etc, received (attach sched	iule)	2,948,913.				
		2	Ck ► If the foundn is not required to attach	Sch B					
		3	Interest on savings and temporary cash investments		468.	4 6	8.		
		4	Dividends and interest from securities		559,267.	559,26			
	ļ	-	Gross rents	• • • •	-4.		-4.		
_	1		or (loss) • • • •	<del></del>	2 216 402				
R E V		ь	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all		2,316,483.	L-6a Stmt			
¥			assets on line 6a		·	2,316,48	3	<del>                                     </del>	
E		8	Net short-term capital gain		-	2,510,40	· J ·	17,300.	
U E		9	Income modifications Gross sales less RECEIVED	<del></del> -					
	'	10 a	returns and allowances	੍ਹ <b>==</b> ਰ ੈ					
			Less Cost of goods sold . NOV 2 4 2015	Ś					
	1.		Gross profit or (loss) (atlach schedule) Other income (attach-schedule)	930					
		• •	See Line 1825mCEN UT	, Q. '.	352,073.	352,07	7 3		
	-	12	Total Add-lines-l-through 11	المدوعواسة	6,177,200.	3,228,28	37.	17,300.	
	77		Compensation of officers, directors, trustees						
			Other employee salaries and wages .						
	- 1		Pension plans, employee benefits $\cdot \cdot \cdot$ Legal fees (attach schedule) $\cdot \cdot L = 1.6a$		4.60	ļ			
A D	;		Accounting fees (attach sch)L-16b		469. 16,726.	8,27	5		0.
M I	'		Other prof fees (attach sch) . L-16C		99,034.	99,03		<del></del>	
o i	ˈ	17	Interest			33703			<del></del>
ET	.   1		Taxes (attach schedule)(see instrs) See Line. 1	8 Stmt	23,443.	13,45	6.		
A A	1	19	Depreciation (attach sch) and depletion	Stmt	(5)				
a i i			Occupancy		653.			<del></del>	
-ZG A:	Ι.		Travel, conferences, and meetings					<u> </u>	
A E		22	Printing and publications						
⇒ D P P N	1	23	Other expenses (attach schedule) See Line 23 Stmt		35,146.	1 5	0.		0
Ñ ∑≫ S		24	Total operating and administrative		35,140.			<del> </del>	0.
⊃ E S	1		expenses Add lines 13 through 23		175,471.	120,91	5.		0.
			Contributions, gifts, grants paid		905,000.				905,000.
SCANIZED RUY	2	26	Total expenses and disbursements.  Add lines 24 and 25 · · · · · · · · · · ·		1,080,471.	120,91	5		905,000.
7/	+ 2	27	Subtract line 26 from line 12:		1,000,471.	120,91			303,000.
Z		а	Excess of revenue over expenses		5 000 700				
		h	and disbursements		5,096,729.	3,107,37	2	<del> </del>	
<b>₩</b> /			Net Investment Income (if negative, enter - Adjusted net Income (if negative, enter -0-)			3,107,37	۷.	17,300.	
								17,300.	

Dow II	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
Part II	See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash – non-interest-bearing			
	2 Savings and temporary cash investments	363,742.	1,308,502.	1,308,502.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			r
	Less allowance for doubtful accounts			
1	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other			
ŀ	disqualified persons (attach schedule) (see instructions)	292.	292.	292.
_ 1	7 Other notes and loans receivable (attach sch)			
ŝ	Less: allowance for doubtful accounts			
A S S E T	8 Inventories for sale or use			
두	9 Prepaid expenses and deferred charges	11,293.	26,120.	26,120.
S 1	10 a Investments - U.S. and state government	2 501 202	4 011 142	2 076 400
	obligations (attach schedule) L-10.a. Stmt	3,501,893.	4,011,143.	3,976,400.
	<b>b</b> Investments — corporate stock (attach schedule) . L=10.b. Stmt	11,900,000.	12,665,652.	17,324,118.
	c Investments — corporate bonds (attach schedule)			<u></u>
1	Investments – land, buildings, and equipment basis · · · · · · · · · · · · · · · · · ·			
	Less accumulated depreciation (attach schedule)			
1	12 Investments – mortgage loans			
	13 Investments — other (attach schedule) L=13. Stmt	2,094,783.	2,268,037.	2,143,152
1.	14 Land, buildings, and equipment: basis 2,720.			
	Less accumulated depreciation (attach schedule) L-1.4. Stmt . •2,394.	979.	326.	326
	15 Other assets (describe L-15 Stmt )	0.	260,446.	260,446
1	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	17,872,982.	20,540,518.	25,039,356
<del></del>	17 Accounts payable and accrued expenses	1,510.	0.	
1   ,	18 Grants payable			
	19 Deferred revenue			
1	20 Loans from officers, directors, trustees, & other disqualified persons			İ
<u> </u>	21 Mortgages and other notes payable (attach schedule)			
T [ ,				
	22 Other liabilities (describe			
E S	23 Total liabilities (add lines 17 through 22)	1,510.	0.	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			•
N F	24 Unrestricted			' '
Ξ U   .	25 Temporarily restricted		· · · · · · · · · · · · · · · · · · ·	•
TN '	26 Permanently restricted			1
	Foundations that do not follow SFAS 117 check here	-		1
A B B B B B B B B B B B B B B B B B B B	Foundations that do not follow SFAS 117, check here x and complete lines 27 through 31.			
E L   2	27 Capital stock, trust principal, or current funds			
SN	28 Paid-in or capital surplus, or land, bldg, and equipment fund			1
OE :	29 Retained earnings, accumulated income, endowment, or other funds	17,871,472.	20,540,518.	1
	30 Total net assets or fund balances (see instructions)	17,871,472.	20,540,518.	1
;	31 Total liabilities and net assets/fund balances (see instructions)	17,872,982.	20,540,518.	
Part I	II Analysis of Changes in Net Assets or Fund Balance	es		
4 T/	otal net assets or fund balances at beginning of year — Part II, column nd-of-year figure reported on prior year's return)	(a), line 30 (must agree w	ith	17,871,472
9 F	nter amount from Part I, line 27a		2	5,096,729
2 E	ther Increases not included in line 2 (itemize) Unrealized Gai	n on Contribute	d Property 3	-2,427,683
	ther increases not included in line 2 (itemize) <u>Unrealized</u> Gail .dd lines 1, 2, and 3			20,540,518
			5	20,340,310
	ecreases not included in line 2 (itemize)		- <b></b>	20,540,518

Pai	telly Capital Gains and I	Losses for Tax on Investmer	nt Income			
	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e g , real e, or common stock, 200 shares MLC	estate, Company)	(b) How acquir P — Purchase D — Donation	e (month, day, year)	(d) Date sold (month, day, year)
	Valeant Pharmaceuti		D	)	01/01/00	01/30/14
	Valeant Pharmaceuti	cals Intl. Inc.	D	)	01/01/00	02/21/14
	Primerica Inc Com		D	<u> </u>	01/01/00	11/18/14
	Valeant Pharmeceuti	cals Intl. Inc.	D	)	01/01/00	11/18/14
	See Columns (a) thru (d)	<del>,</del>				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) mi	
e	190,822.		19	,419.		171,403.
	234,852.		22	,193.		212,659.
	<u> </u>			,571.		38,221.
	154,534.			<u>,701.</u>		127,833.
e				<u>,192.</u>		1,766,367.
	Complete only for assets showin  (i) Fair Market Value	ng gain in column (h) and owned by th	e foundation on 12/31/69 (k) Excess of column (i	<del>,                                    </del>	(I) Gains (Co gain minus column (I	
	as of 12/31/69	as of 12/31/69	over column (j), if any		than -0-) or Losses (fr	om column (h))
	<del></del>					171,403.
						212,659.
	<del></del>					38,221.
	<del></del>	<u> </u>				127,833.
е	See Columns (ı) thru (l)				<del></del>	1,766,367.
2	Capital gain net income or (net o	capital loss) If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7		2	216 402
3	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	<del></del> '	-		2,316,483.
		s, column (c) (see instructions) If (loss			3	17,300.
<b>Par</b>	Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Incor	ne	
If sec	ction 4940(d)(2) applies, leave this the foundation liable for the section	on 4942 tax on the distributable amou	nt of any year in the base per		· · · · · · · Yes	No
	<del></del>	y under section 4940(e). Do not comp	<del></del>	/ ontrios		
	<del></del>	each column for each year; see the in		/ entries	(4)	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use asse	ts (	(d) Distribution column (b) divided t	
	2013	986,315.	20,916	,543.		0.047155
	2012	639,936.	19,046	,521.		0.033599
	2011	637,267.	18,230	,402.		0.034956
	2010	437,555.	16,988	,475.		0.025756
	2009	617,343.	13,790	,958.		0.044764
2	Total of line 1, column (d)			[	2	0.186230
3	Average distribution ratio for the number of years the foundation I	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears		3	0.037246
4	Enter the net value of noncharita	able-use assets for 2014 from Part X,	line 5		4 2	3,967,426.
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investment inco					892,691.
		me (1% of Part I, line 27b)			6	892,691. 31,074.
7				_	7	
7	Add lines 5 and 6	me (1% of Part I, line 27b)			7	31,074.

Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see it	nstruc	ctions)			<u> </u>
1 6	Exempt operating foundations described in section 4940(d)(2), check here   and enter 'N/A' on line 1	1,30,00	, i.o.i.s			
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)					
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		6	2 1	47.
	check here ► and enter 1% of Part I, line 27b	-	-, ,	- ,	<u>-, -</u>	<u> </u>
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2		1				
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		6	2.1	47.
4	Subtifle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		<u>~</u>	<u> </u>	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		6	2.1	47.
6	Credits/Payments:		·			
a	a 2014 estimated tax pmts and 2013 overpayment credited to 2014 6 a 19,397.	1				
	Exempt foreign organizations — tax withheld at source					
c	Tax paid with application for extension of time to file (Form 8868) 6c 65,000.					
•	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7		8	4,3	97.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		2	2,2	50.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	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			7	Yes	No
	participate or intervene in any political campaign?		7	l a		Х
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					
	(see Instructions for the definition)?			i b	_ ]	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					
	Did the foundation file Form 1120-POL for this year?		· · · L_	l c		Х
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					l
•	(1) On the foundation > \$ (2) On foundation managers > \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on					l
	foundation managers * \$					l
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		= 3	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, articles		ļ	ŀ		İ
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		;	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			1 a	Х	
	o If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	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.			$\neg$		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		}	-		1
	By language in the governing instrument, or		İ			ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict					L
	with the state law remain in the governing instrument?			5		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		🗔	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		_			
	DE - Delaware		_			İ
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			-		ļ
	(or designate) of each state as required by General Instruction $\dot{G}^2$ If 'No,' attach explanation		• • •   _1	8 b	Х	<b></b>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5)		_ -		ļ
	for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part X	<i>IV</i>	· · · <u>      </u>	9		_X_
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names					
DAA	and addresses	· · · · ·	Form		DE /	X 2014)
BAA			LOHIN	220.	TT (4	2U 14)

FOIM	990-PF(2014) TRELLIS CHARITABLE FUND	45-402796	0	Р	age 5
Par	t VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement (see instructions)	son had	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic  Website address			Х	
14	The books are in care of PRETICAL WARRING TRELLISHUND. ORG				
• •	The books are in care of BETSY K. KAREL Telephone  Located at 3150 SOUTH STREET NW WASHINGTON DC 7/P+4	20007	900	-341	<u> </u>
15	Located at 3150 SOUTH STREET., NW WASHINGTON DC ZIP + 4 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		<del>-</del>		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	<u> </u>		Yes	No
	bank, securities, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1). If "enter the name of the foreign country	Yes,' 			
Pari	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
4.0	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
	During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	ĺ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			ı
	(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)?	Yes X No			ı [
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in				
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here		1 b		
_	Did the foundation engage in a prior year in any of the acts described in 1a other than excepted acts	السا			·
	that were not corrected before the first day of the tax year beginning in 2014?		1 c		X
_	private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	Yes X No			
	If 'Yes,' list the years ► 20 , 20 , 20				
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ĺ			
	all years listed, answer 'No' and attach statement — see instructions)		- Z D		
Ī	► 20 , 20 , 20 , 20		ĺ	ĺ	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
	If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to				
	determine if the foundation had excess business holdings in 2014.)	· · · · · · · · · · /	3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		Х
	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?		4 b		
BAA				-PF (2	

Form 990-PF (2014) TRELLIS CHARITABLE			45-40	27960	Page 6
Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)	- · · · · · · · · · · · · · · · · · · ·	
5 a During the year did the foundation pay or incur a	•		г. –	1	
(1) Carry on propaganda, or otherwise attempt to	o influence legislation (se	ection 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?			No	
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?	Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organiz	zation described	Yes X	No	
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	chantable, scientific, lite of cruelty to children or ar	erary, or nimals?	· · · · Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b	
Organizations relying on a current notice regardi				1	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	· · · · Yes	No	
If 'Yes,' attach the statement required by Regular	tions section 53.4945-5(d	d)		<b>'</b> ] ]	
6 a Did the foundation, during the year, receive any to on a personal benefit contract?				No	
<b>b</b> Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?	6 b	X
If 'Yes' to 6b, file Form 8870				,	
7 a At any time during the tax year, was the foundati				]	
b If 'Yes,' did the foundation receive any proceeds  Part VIII Information About Officers. D					
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	roundation Manag	gers, Highly Paid	⊏mployee:	s,
1 List all officers, directors, trustees, foundatio	n managers and their c	omnensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	e account, lowances
Betsy Karel			<u> </u>	<del></del>	
3150 South Street NW #2B Washington DC 20007	Chair/Secretary 5.00	0.	0.		0.
					_
		<u></u>		l	
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ii	nstructions). If none, e	nter 'NONE.'	<del></del>
(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	e account, lowances
NONE					
				1	
			<u> </u>	<del> </del>	
				[	
				<del> </del>	
	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000 .	TEFA0306 06/		· · · · · · · · · · · · · · · · · · ·	Form 990	None -PF (2014)

Particular Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	None
Raftlix:A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
PartiX-By Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
ВАА	Form 990-PF (2014)

see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	22,590,467.
b Average of monthly cash balances	1 b	1,741,945.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	24,332,412.
e 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	24,332,412.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	364,986.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	23,967,426.
6 Minimum Investment return. Enter 5% of line 5	6	1,198,371.
Part XIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here   ☐ and do not complete this part.)	found	dations
1 Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	1,198,371.
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.)		
c Add lines 2a and 2b	2 c	62,147.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	1,136,224.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	1,136,224.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,136,224.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes  a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	The last	
	1 a	905,000.
b Program-related investments — total from Part IX-B	1ь	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	905,000.
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	905,000.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forqualifies for the section 4940(e) reduction of tax in those years	undatio	
BAA		Form 990-PF (2014)

### Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7	<u> </u>			1,136,224.
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years 20, 20, 20	<u> </u>		0.	
3 Excess distributions carryover, if any, to 2014				<del></del>
a From 2009	}			
<b>b</b> From 2010 0 .	1			
<b>c</b> From 2011 0 .	1			
<b>d</b> From 2012 176, 311.				
e From 2013 992, 686.				
f Total of lines 3a through e	1,168,997.			
4 Qualifying distributions for 2014 from Part				
XII, line 4. \$ 905,000.				
a Applied to 2013, but not more than line 2a				·
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				······································
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2014 distributable amount		·		905,000.
e Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2014	231,224.			231,224.
(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:				1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	937,773.			<del></del>
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		ı
c Enter the amount of prior years' undistributed				,
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed `.'				
d Subtract line 6c from line 6b. Taxable				
amount – see instructions		0.		
e Undistributed income for 2013 Subtract line 4a from			_	
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2014 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of				<u></u>
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)				
8 Excess distributions carryover from 2009 not	: <del></del>			
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	937,773.			
10 Analysis of line 9				
a Excess from 2010				
<b>b</b> Excess from 2011 0 .		ĺ		1
<b>c</b> Excess from 2012 0 .				
<b>d</b> Excess from 2013 937,773.		ĺ		
e Excess from 2014 0 .				

Part XIV Private Operating Foundat		ctions and Part \	/II-A guestion 9	15-402/960	N/A
1a If the foundation has received a ruling or dete is effective for 2014, enter the date of the ruli	ermination letter that	it is a private operat	ing foundation, and	the ruling	N/A
<b>b</b> Check box to indicate whether the foundation	•			4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 10 120/(07 01	1 120/(0)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a					<del></del>
line 4 for each year listed	· ·				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					<del>-                                    </del>
a 'Assets' alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>	<u> </u>		
Part XV Supplementary Information assets at any time during th	(Complete this e year – see in	part only if the structions.)	foundation had	i \$5,000 or more	in 
Information Regarding Foundation Manag     List any managers of the foundation who hav     close of any tax year (but only if they have co	e contributed more t	than 2% of the total of	contributions receive	d by the foundation b	efore the
None	minibated thore than	, ф <b>3,000</b> ). (Зее зесно	511 507 (d)(2).)		
b List any managers of the foundation who own a partnership or other entity) of which the foundation.	n 10% or more of the ndation has a 10% o	e stock of a corporation greater interest.	on (or an equally lar	ge portion of the own	ership of
2 Information Regarding Contribution, Gran Check here  X if the foundation only ma requests for funds. If the foundation makes g complete items 2a, b, c, and d.	kes contributions to	preselected charitab	ole organizations and		
a The name, address, and telephone number of	r e-mail address of	the person to whom	applications should l	pe addressed:	-
b The form in which applications should be sub	mitted and information	on and materials the	w should include:		<del></del>
The form in which applications should be suc	mittee and informati	on and materials the	y snoula iliciade.		
c Any submission deadlines					
d Any restrictions or limitations on awards, suc	n as by geographica	l areas, charitable fie	elds, kinds of instituti	ons, or other factors:	
		<del>-</del> <del></del>	<del></del>		

Form 990-PF (2014) TRELLIS CHARITABLE FUND

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Appr

3 Grants and Contributions Paid During the Ye	ar or Approved for Future Paymen		t	
<del></del>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor			
a Paid during the year				
ProPublica				
One Exchange Plaza, 55 Broadway 23rd				100 000
Washington DC 20002		PUBLIC CHARITY	General Support	100,000.
Center for Civilians in Conflict				
1210 18th Street NW, 4th Floor				75 000
Washington DC 20036		PUBLIC CHARITY	General Support	75,000.
Global Justice Center				
275 7th Ave. #510		DUDITO OURDIMU	Garage 1 Commant	50,000.
New York NY 10001		PUBLIC CHARITY	General Support	30,000.
Center for Reproductive Rights				
1634 Eye Street NW #600		DUDITO OURDINA	G	50,000.
Washington DC 20006-4069	i	POBLIC CHARITY	General Support	50,000.
International Center for Research on Women				
1120 20th Street NW #500n		DUDITA AUDTON	Garage 1 Command	25 000
Washington DC 20036		PUBLIC CHARITY	General Support	25,000.
Voice of Witness				
849 Valencia Street		NUDITO QUADITO	G	2,500.
San Francisco CA 94110	1	PUBLIC CHARITY	General Support	2,500.
Pulitzer Center on Crisis Reporting			,	
1779 Massachusetts Avenue, NW, Ste. 615	1	DUDITO CUADITOV	Conseral Cumpart	60,000.
Washington DC 20036		PUBLIC CHARITY	General Support	80,000.
Smithsonian American Art Museum				
750 9th Street, NW, Ste. 3100		DUDITO CUADIMV	Cananal Cupport	45,000.
Washington DC 20001		PUBLIC CHARITI	General Support	45,000.
Yale University Art Gallery				
PO Box 208271		DUDI TO CUADTMY	Canamal Support	75,000.
New Haven CT 06520		PUBLIC CHARITI	General Support	/5,000.
See Line 3a statement				
				422,500.
	,			122,500.
Total			3a	905,000.
<b>b</b> Approved for future payment				
		1	İ	
		ŀ		
	1			
		1		
Total			3t	)

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	d business income	Excluded b	y section 512, 513, or 514	
Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
2			code		
	<del>   </del>				
<del>"</del>	<del>-</del> -	<del></del>			<u> </u>
c	<del>   </del>	<del> </del>			
4	+ +	<del></del>			
g Fees and contracts from government agencies	-	<del></del>			
		<del></del>			
•	-	<del></del>	14	468.	
<ul><li>Interest on savings and temporary cash investments</li><li>Dividends and interest from securities</li></ul>			<del></del>		<del>-</del> .
			14	559,267.	
5 Net rental income or (loss) from real estate:	, :	~			
a Debt-financed property			ļ		<del></del>
<b>b</b> Not debt-financed property			14	-4.	
6 Net rental income or (loss) from personal property					
7 Other investment income	900099	-501.	14	352,571.	
8 Gain or (loss) from sales of assets other than inventory	900099	64,694.	18	2,251,788.	<del></del>
9 Net income or (loss) from special events					_ <del>.</del>
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue					
a Other			1	3.	
b					
С	<del></del>		1	· · · · · · · · · · · · · · · · · · ·	
c d					
е					
e Subtotal. Add columns (b), (d), and (e)		64,193.		3,164,093.	
12 Subtotal. Add columns (b), (d), and (e)		64,193.		3,164,093. 13	3,228,286.
12 Subtotal. Add columns (b), (d), and (e)		64,193.		3,164,093. 13	3,228,286.
12 Subtotal. Add columns (b), (d), and (e)	s.)			13	3,228,286.
12 Subtotal. Add columns (b), (d), and (e)	s.) e Accompl	ishment of Exemp	ot Purpo	ses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities to the	e Accompl	ishment of Exemp	ot Purpo	ses	he
12 Subtotal. Add columns (b), (d), and (e)	e Accompl	ishment of Exemp	ot Purpo	ses	he
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities to the	e Accompl	ishment of Exemp	ot Purpo	ses	he
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities to the	e Accompl	ishment of Exemp	ot Purpo	ses	he

Form 990-PI Part XVII	Information Reg	CHARITAI	BLE FUND nsfers To and Transactio	ns and	Relations	ships W		027960 charitable	Pa	ge <b>13</b>
	Exempt Organiz	ations						<del></del>	Yes	No
1 Did the	e organization directly or bed in section 501(c) of	r indirectly eng the Code (othe	age in any of the following with are frighter than section 501(c)(3) organiza	y other or	rganization <sup>.</sup> n section 52	7.				
relating	g to political organization	ns?				,				
	•		noncharitable exempt organization					4 5 (4)		
										X
	transactions:							10 (2)		<del>  ^</del>
		naritable exemi	pt organization		. <i>.</i>			1 b (1)		X
` '			e exempt organization							Х
(3) Re	ental of facilities, equipm	nent, or other a	ssets					1 b (3)		Х
										Х
• •	~									Х
		•	or fundraising solicitations							X
c Sharin	ig of facilities, equipmen	it, mailing lists,	other assets, or paid employees.		• • • • • •			<u>1 c</u>	l	X
the go	ods, other assets, or se-	rvices given by	mplete the following schedule Co vithe reporting foundation If the fo win column (d) the value of the g	undation oods, oth	received les er assets, or	s than fair services i	market va eceived.	alue in 		
(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt organization	(d)	Description of	transfers, tr	ansactions,	and sharing arran	gement	<u>s</u>
				ļ		···				
				<u> </u>						
	<del></del>			-						
				_						
	<u> </u>			ļ			_			
				ļ						
	<del></del> -			<del> </del>						
	"			<del>                                     </del>	···					
	<del></del>			<del>                                     </del>	<del>-</del>	<u> </u>			"	
descri	foundation directly or inc bed in section 501(c) of the complete the following	the Code (other	ed with, or related to, one or more er than section 501(c)(3)) or in se	tax-exem	pt organizat	ions		Ye	s [x	No
	(a) Name of organization		(b) Type of organization			(c) Desc	ription of	relationship		
	(-)	··· <u>·</u>	()					<u> </u>		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with the preparer shown below (see instructions)? Here Title Date/ Signature of officer or trustee X Yes Preparer's signature Date PTIN Print/Type preparer's name Check 11/13/15 self-employed P00047619 Robert D Huey Paid Firm's EIN > 52-1658535 HUEY & ASSOCIATES PC **Preparer** Firm's name 7101 WISCONSIN AVE STE 1010 Firm's address **Use Only** 20814-4881 Phone no (703)437-6269 MD BETHESDA Form **990-PF** (2014) BAA

TEEA0503 06/17/14

#### 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
TRELLIS CHARITABLE FUND		45-4027960
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 trust trust treated as a private trust trust treated as a private trust treated as a private trust trust trust treated as a private trust trust trust trust trust trust trust trust trust trust trust trust trust trust trust trust trus	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gen	eral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organi	zation can check boxes for both the General Rule and a Spo	ecial Rule See instructions
General Rule		
X For an organization filing Form 990, 990-EZ, property) from any one contributor. Complete	or 990-PF that received, during the year, contributions totalii Parts I and II See instructions for determining a contributor	ng \$5,000 or more (in money or 's total contributions.
under sections 509(a)(1) and 170(b)(1)(A)(vi)	(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support, that checked Schedule A (Form 990 or 990-EZ), Part II, lingular, total contributions of the greater of (1) \$5,000 or (2) 2° EZ, line 1. Complete Parts I and II	e 13, 16a, or 16b, and that
during the year, total contributions of more that	c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro an \$1,000 exclusively for religious, charitable, scientific, liter hildren or animals. Complete Parts I, II, and III	m any one contnbutor, ary, or educational
during the year, contributions exclusively for i \$1,000. If this box is checked, enter here the charitable, etc., purpose. Do not complete an	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro religious, charitable, etc., purposes, but no such contribution total contributions that were received during the year for any of the parts unless the <b>General Rule</b> applies to this organic, etc., contributions totaling \$5,000 or more during the year	s totaled more than exclusively religious, ization because
990-PF) but it must answer 'No' on Part IV line:	he General Rule and/or the Special Rules does not file School, of its Form 990, or check the box on line H of its Form 990 ing requirements of Schedule B (Form 990, 990-EZ, or 990-the the Instructions for Form 990, 990-EZ.	D-EZ or on its Form 990-PF.
or 990-PF.	o the mendending for Fermi deal and and	,

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part
•	IS CHARITABLE FUND		027960
Partl	Contributors (see instructions) Use duplicate copies of Part I if additional sp	ace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Betsy Karel  3150 South St. NW #2B  Washington DC 20007	 <sup>\$</sup> 2,948,913.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   <sup>\$</sup>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 <sup>\$</sup>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   <sup>\$</sup>	Person Payroll Noncash (Complete Part II for
			noncash contributions.)

Page

1 to

2 of Part II

Name of organization

TRELLIS CHARITABLE FUND

45-4027960

Employer Identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Comcast Corp Stock	-	
		\$91 <u>,877</u> .	01/30/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Valeant Pharmaceuticals Intl. Stock	-	
		\$185,696.	01/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Comcast Corp Stock	-	
		\$356,789.	02/13/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Valeant Pharmaceuticals Intl. Stock		
		\$236,800.	02/21/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 1	Cimpress N.V. stock		
		\$32,400.	11/17/14
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Primerica, Inc. stock	-	
		]	

Page

2 to

2 of Part II

TRELLIS CHARITABLE FUND

45-4027960

Employer Identification number

(b) Description of noncash property given	(c) FMV (or estimate)	(d)
- Cookingtion of Honouchi property given	(see instructions)	Date received
Valeant Pharmaceuticals Intl. Stock	-	
	\$154,437.	11/17/14
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Valeant Pharmaceuticals Intl. Stock	-	
	\$285,120.	<u> 11/17/14</u>
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Primerica, Inc. Stock	-	
	\$ 379,260.	11/21/14
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Primerica, Inc. Stock	-	
	\$ 198,342.	<u>11/25/14</u>
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Cimpress N.V. Stock	-	
	\$102,352.	12/23/14
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Merchants Natl PPTYS Inc Stock	-	
	\$ 875,000.	03/26/14
	Description of noncash property given  Valeant Pharmaceuticals Intl. Stock  Description of noncash property given  Primerica, Inc. Stock  Description of noncash property given  Primerica, Inc. Stock  Description of noncash property given  Cimpress N.V. Stock  Description of noncash property given	Valeant Pharmaceuticals Intl. Stock    Description of noncash property given   FMV (or estimate) (see instructions)

#### **Net Gain or Loss From Sale of Assets**

2014

Employer Identification Number TRELLIS CHARITABLE FUND 45-4027960 Asset Information: Description of Property: . . . . Valeant Pharmaceuticals Intl. Inc. Date Acquired: . 01/01/00 How Acquired . . . Donated Date Sold. . . . 01/30/14 Name of Buyer. . . . Sales Price: . . 190,822. Cost or other basis (do not reduce by depreciation) . . . 19,419. Sales Expense. . Valuation Method: . . . Description of Property . . . . . Valeant Pharmaceuticals Intl. Inc. Date Acquired . 01/01/00 How Acquired . . . Donated Date Sold. . . . 02/21/14 Name of Buyer . . . Sales Expense. . Valuation Method.... 212, 659. Accumulation Depreciation . . . Total Gain (Loss): . . Description of Property: . . . . Primerica Inc Com Date Acquired. . 01/01/00 How Acquired. . . . Donated Date Sold . . . 11/18/14 Name of Buyer: . . . Sales Price: . . 51,792. Cost or other basis (do not reduce by depreciation) . . . 13,571. Sales Expense: . . Valuation Method . . . . 38,221. Accumulation Depreciation: . . . Total Gain (Loss): . . Date Acquired . 01/01/00 How Acquired: . . . Donated Name of Buyer . . . Date Sold . . . 11/18/14 Sales Price: . . \_\_\_\_\_154,534. Cost or other basis (do not reduce by depreciation) . . . 26,701. Sales Expense: . . Valuation Method . . . . Total Gain (Loss) . . 127,833. Accumulation Depreciation . . . Description of Property: . . . . . Cimpress N.V. Cmn Stk Date Acquired. . 01/01/00 How Acquired . . . Donated Name of Buyer: . . . Date Sold. . . . 11/18/14 Sales Price: . . \_\_\_\_\_\_33,281. Cost or other basis (do not reduce by depreciation) . . . 16,770. Sales Expense. . . Valuation Method: . . . 16,511. Accumulation Depreciation: . . Total Gain (Loss) . . Description of Property: . . . . . Valeant Pharmaceuticals Intl. Inc. Date Acquired . 01/01/00 How Acquired . . . Donated \_\_\_\_\_ Name of Buyer. . . . Date Sold. . . . 11/18/14 Sales Price. . . \_\_\_\_\_\_283, 305. Cost or other basis (do not reduce by depreciation) . . . 48, 868. Sales Expense: . Valuation Method: Total Gain (Loss). . . 234, 437. Accumulation Depreciation. . . . Description of Property..... Primerica Inc Com Date Acquired: . 01/01/00 How Acquired . . . Donated Date Sold . . . 11/24/14 Name of Buyer . . . Sales Price: . . \_\_\_\_\_ 379,068. Cost or other basis (do not reduce by depreciation) . . . 98,035. Sales Expense . . Valuation Method: . . . .

281,033 Accumulation Depreciation: . . . Valuation Method: . . . Total Gain (Loss): . . Description of Property: . . . . . See Net Gain or Loss from Sale of Assets Date Acquired: . How Acquired: . . . Date Sold . . . Name of Buyer . . . Cost or other basis (do not reduce by depreciation) . . . Sales Price: . . \_\_\_\_\_Valuation Method.... Sales Expense . . Total Gain (Loss): . . Accumulation Depreciation . . . \_\_\_\_\_\_

Form 990-PF, Part I, Lines 6a Net Gain or Loss from Sale of Assets

Asset Information:
Description of Property Primerica Inc Com
Business Code Exclusion Code 41
Date Acquired01/01/00 How Acquired . Donated
Date Sold11/25/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price 198,173. Cost or other basis (do not reduce by depreciation) 51,772.
Sales Expense Valuation Method
Total Gain (Loss) 146, 401. Accumulated Depreciation
Description of Property Cimpress N.V. Cmn Stk
Business Code Exclusion Code 41
Date Acquired 01/01/00 How Acquired Departed
Date Acquired01/01/00 How Acquired . Donated
Date Sold 12/24/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price 102, 402. Cost or other basis (do not reduce by depreciation) 45, 313.
Sales Expense Valuation Method Valuation Method
Total Gain (Loss)
Description of Property Merchants Natl PPTYS Inc Com
Business Code Exclusion Code <u>41</u>
Date Acquired06/30/84 How Acquired . Donated
Date Sold04/03/14 Name of Buyer
Check Box, if Buyer is a Business L
Sales Price 1,650. Cost or other basis (do not reduce by depreciation) 97.
Sales Expense Valuation Method
Total Gain (Loss)
Description of Property Merchants Natl PPTYS Inc Com
Business Code Exclusion Code 41
Date Acquired 06/30/84 How Acquired . Donated
Date Sold 04/22/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price8,250. Cost or other basis (do not reduce by depreciation)486.
Sales Expense Valuation Method
Total Gain (Loss)
Description of Property Merchants Natl PPTYS Inc Com
Business Code Exclusion Code 41
Date Acquired06/30/84 How Acquired . Donated
Date Sold04/25/14 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 1,650. Cost or other basis (do not reduce by depreciation) 97.
Sales Expense · Valuation Method · · ·
Total Gain (Loss)
Description of Property Merchants Natl PPTYS Inc Com
Business Code Exclusion Code 41
Date Acquired06/30/84 How Acquired . Donated
Date Sold 05/23/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price1,650. Cost or other basis (do not reduce by depreciation)97.
Sales Expense Valuation Method
Total Gain (Loss)

Form 990-PF, Part I, Lines 6a Continued Net Gain or Loss from Sale of Assets **Asset Information:** Description of Property.... Merchants Natl PPTYS Inc Com Business Code . \_\_\_\_ Exclusion Code. . . . 41 Date Acquired . \_\_\_\_06/30/84 How Acquired . Donated Date Sold . . . . \_ \_05/28/14 Name of Buyer. \_ \_ \_ Check Box, if Buyer is a Business. . . . Sales Price . . . \_ \_ 16, 499. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ 972. Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ Date Acquired . \_ \_ 06/30/84 How Acquired . Donated \_ \_ \_ \_ Date Sold . . . \_ \_ 06/18/14 Name of Buyer. \_ \_ \_ \_ Check Box, if Buyer is a Business. . . . Sales Price . . . \_ \_ 146,817. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ 8,653. Total Gain (Loss) . . . . 138, 164. Accumulated Depreciation . . . . . . . . Description of Property. . . . . Merchants Natl PPTYS Inc Com Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ \_ Date Acquired . \_ \_ 06/30/84 How Acquired . Donated Date Sold . . . . \_ \_\_08/08/14 Name of Buyer. \_ \_ \_ \_ \_ Check Box, if Buyer is a Business. . . . Sales Price . . . \_ \_ 204, 907. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ 12,055. Description of Property.... Merchants Natl PPTYS Inc Com Business Code . \_ \_ Exclusion Code. . . . 41 \_ \_ \_ Date Acquired. 06/30/84 How Acquired . Donated Date Sold . . . . \_\_\_08/13/14 Name of Buyer. \_\_\_\_\_\_ Check Box, if Buyer is a Business. . . . Sales Price  $\dots _{16,499}$ . Cost or other basis (do not reduce by depreciation)  $\dots _{972}$ . Description of Property..... Merchants Natl PPTYS Inc Com Business Code . \_\_\_\_ Exclusion Code. . . . 41 \_\_\_\_\_

Date Acquired . \_\_\_\_ 06/30/84 How Acquired . \_\_\_\_ Donated \_\_\_\_\_\_ Check Box, if Buyer is a Business. . . . Sales Price . . . \_ \_ \_ 9, 900. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ \_ 583. Sales Expense . . \_ \_ \_ Valuation Method . . . \_ \_ \_ \_ \_ Description of Property . . . . . Merchants Natl PPTYS Inc Com Business Code . \_ \_ \_ Exclusion Code. . . 41 \_ \_ \_ \_ Date Acquired . \_\_\_\_06/30/84 How Acquired . Donated \_\_\_\_\_

Date Sold . . . \_ \_\_12/30/14 Name of Buyer. \_\_\_\_\_

Sales Price . . . \_ \_ 151,794. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ 8,944. Sales Expense · \_ \_ \_ Valuation Method · · \_ \_ \_ \_ Total Gain (Loss) . . . 142,850. Accumulated Depreciation . . . . . . . . .

Check Box, if Buyer is a Business. . . .

45-4027960 Form 990-PF, Part I, Lines 6a Continued Net Gain or Loss from Sale of Assets Asset Information: Description of Property.... Comcast Corp Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ \_ Date Acquired. . \_ 01/01/00 How Acquired . Donated Date Sold . . . . \_\_01/31/14 Name of Buyer. \_\_\_\_\_ Check Box, if Buyer is a Business. . . . Sales Price ... 93,832. Cost or other basis (do not reduce by depreciation) . 27,290. Sales Expense . . \_ \_ Valuation Method . . . Description of Property . . . . . Comcast Corp Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ Date Acquired . \_ \_ 01/01/00 How Acquired . Donated \_ \_ \_ Date Sold . . . . \_ \_02/13/14 Name of Buyer. Check Box, if Buyer is a Business. . . . Sales Price . . . \_ \_ 352,796. Cost or other basis (do not reduce by depreciation) . . \_ \_ 102,687. Total Gain (Loss) . . . . 250,109 . Accumulated Depreciation . . . . . . . . Description of Property.... Forester Partnership K-1 Short-term Capital Gain Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ \_ Date Acquired . \_ \_ 01/01/14 How Acquired . Purchased Date Sold . . . . \_ \_12/31/14 Name of Buyer. \_ \_ \_ Check Box, if Buyer is a Business. . . . Sales Price ... \_\_\_\_ 1,032. Cost or other basis (do not reduce by depreciation) ..\_\_\_ 0. Description of Property . . . . . Forester Partnership K-1 Long-term Capital Gain Business Code . \_ \_ \_ Exclusion Code. . . . 41 \_ \_ \_ \_ Date Acquired . \_ \_ 01/01/00 How Acquired . Purchased Date Sold . . . . \_\_\_12/31/14 Name of Buyer. \_\_\_\_\_ Check Box, if Buyer is a Business. . . . Sales Price  $\dots _{82,751}$ . Cost or other basis (do not reduce by depreciation)  $\dots _{92,751}$ . Description of Property..... Collectible Gains (28%) Gain Business Code . Exclusion Code . . . 41

Date Acquired . \_\_\_\_01/01/00 How Acquired . Purchased Date Sold . . . . \_ \_12/31/14 Name of Buyer. \_ \_ \_ \_ Check Box, if Buyer is a Business. . . . Sales Expense . . \_ \_ \_ Valuation Method . . . \_ \_ \_ \_ \_ \_ Description of Property . . . . . Sec. 1250 Gain From K-1 Business Code . Exclusion Code . . . 41

Date Acquired . 01/01/00 How Acquired . Purchased

Date Sold . . . . \_\_\_12/31/14 Name of Buyer. \_\_\_\_\_

Sales Price . . . \_ \_ \_ 1. Cost or other basis (do not reduce by depreciation) . . \_ \_ \_ \_ 0. Sales Expense · · \_ \_ Valuation Method · · · \_ \_ \_ \_

Check Box, if Buyer is a Business. . . . \_

Form 990-PF, Part I, Lines 6a Net Gain or Loss from Sale of Assets Continued

Asset Information:
Description of Property Sec. 1231 Gain From K-1
Business Code Exclusion Code 41
Date Acquired01/01/00 How Acquired . Purchased
Date Sold12/31/14 Name of Buyer.
Check Box, if Buyer is a Business
· · · · · · · · · · · · · · · · · · ·
Sales Price 7. Cost or other basis (do not reduce by depreciation) 0.
Sales Expense
Total Gain (Loss) 7 . Accumulated Depreciation
Description of Property AG Super Fund Capital Gain
Business Code Exclusion Code 41
Date Acquired01/01/00 How Acquired . Purchased
Date Sold12/31/14 Name of Buyer
Check Box, if Buyer is a Business
Sales Price <u>37,525</u> . Cost or other basis (do not reduce by depreciation) <u>0</u> .
Sales Expense Valuation Method
Total Gain (Loss) 37,525. Accumulated Depreciation
Description of Property Capital Gains Dividends
Business Code Exclusion Code 41
Date Acquired01/01/00 How Acquired . Purchased
Date Sold12/31/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price 5,103. Cost or other basis (do not reduce by depreciation) 0.
Sales Expense Valuation Method
Total Gain (Loss) 5,103. Accumulated Depreciation
Description of Property Sale of K-1 Forester Partners
Business Code Exclusion Code 41
Date Acquired01/01/11 How Acquired . Purchased
Date Sold08/31/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price 0. Cost or other basis (do not reduce by depreciation) 3,501.
Sales Fine 0. Cost of other basis (do not reduce by depreciation) 3/3011
Sales Expense Valuation Method
Total Gain (Loss)3, 501. Accumulated Depreciation
Description of Property Forester ST Capital Gain subject to UBIT
Business Code . 900099 Exclusion Code
Date Acquired12/01/14 How Acquired . Purchased
Date Sold 12/31/14 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 16,268. Cost or other basis (do not reduce by depreciation)
Sales Expense Valuation Method
Total Gain (Loss) 16, 268. Accumulated Depreciation
Description of Property Forester LT Capital gain subject to UBIT
Business Code . 900099 Exclusion Code
Date Acquired01/01/11 How Acquired . Purchased
Date Sold12/31/14 Name of Buyer.
Check Box, if Buyer is a Business
Sales Price48, 426. Cost or other basis (do not reduce by depreciation)0.
Sales Expense 0 . Valuation Method
Total Gain (Loss)

### **Supporting Statement of:**

Net Gain or Loss From Sale of Assets/Sales Price-23

Description	Amount
Total Per K-1 Less: Allocable to UBIT	131,177. -48,426.
Total	82,751.

#### **Supporting Statement of:**

Form 990-PF, p2/Line 9(c)

Description	Amount
Prepaid 990-PF Federal Taxes	19,397.
Prepaid 990-T Federal Taxes	4,723.
Prepaid D20 State Taxes	2,000.
Total	26,120.

### **Supporting Statement of:**

Form 990-PF, p2/Line 9(b)

Description	Amount
Prepaid 990-PF Federal Taxes	19,397.
Prepaid 990-T Federal Taxes	4,723.
Prepaid D20 State Taxes	2,000.
Total	26,120.

#### **Supporting Statement of:**

Form 990-PF, p2/Line 9(a)

Description	Amount
Prepaid Federal Excise Taxes	6,783.
Prepaid Federal 990-T Taxes	3,000.
DC Income Tax	1,510.
Total	11,293.

Form 990-PF, Line 19
Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
Office Equipment	01/01/10	2720	1741	200DB	5.00	653		

Total

### **Supporting Statement of:**

Form 990-PF,p12/Line 7 Column (d)

Description	Amount
Forrester K-1 Box 11 C Sec 1256	-788.
Forrester K-1 Box 11 A Other Portfolio	5,173.
Forrester K-1 Box 11 F Other Income	309,571.
Forrester K-1 Box 1 Ordinary Income	-12.
AG Super Fund	30,512.
Settlement Income	7,614.
Plus: Loss on UBIT Income	501.
Total	352,571.

### **Supporting Statement of:**

Form 990-PF,p12/Line 7 Column (b)

Description	Amount
Forester K-1 Other income items subject to UBIT	-501.
Total	-501.

### Form 990-PF, Page 1, Part I, Line 11 Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Partnership Investment K-1	313,956.	313,956.	
Partnership K-1 Royalty Income	0.		
Passthrough Income K-1	30,500.	30,500.	
Miscellaneous Income	3.	3.	
Settlement Income	7,614.	7,614.	

Total

352,073.

352,073.

### Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Foreign Taxes Paid_	13,456.	13,456.		
DC 990T Taxes Paid	1,498.		<u> </u>	
Fed 990T Taxes	2,253.			
Fed 990PF Taxes	6,236.			

Total

23,443.

13,456.

### Form 990-PF, Page 1, Part I, Line 23

#### Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Computer	125.			0.
Bank Charges	150.	150.		
Non-Deductible	34,871.			
Total	35,146.	150.		0.

# Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
Cimpress N.V. Cmn Stk	D	01/01/00	11/18/14
Valeant Pharmeceuticals Intl. Inc.	D	01/01/00	11/19/14
Primerica Inc Com	D	01/01/00	11/24/14
Primerica Inc Com	D	01/01/00	11/25/14
Cimpress N.V. Cmn Stk	D	01/01/00	12/24/14
Merchants Natl PPTYS Inc Com	D	06/30/84	04/03/14
Merchants Natl PPTYS Inc Com	D	06/30/84	04/22/14
Merchants Natl PPTYS Inc Com	D	06/30/84	04/25/14
Merchants Natl PPTYS Inc Com	D	06/30/84	05/23/14
Merchants Natl PPTYS Inc Com	D	06/30/84	05/28/14
Merchants Natl PPTYS Inc Com	D	06/30/84	06/18/14
Merchants Natl PPTYS Inc Com	D	06/30/84	08/08/14
Merchants Natl PPTYS Inc Com	D	06/30/84	08/13/14
Merchants Natl PPTYS Inc Com	D	06/30/84	08/15/14

# Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

Continued

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
Merchants Natl PPTYS Inc Com	D	06/30/84	12/30/14
Comcast Corp	D	01/01/00	01/30/14
Comcast Corp	D	01/01/00	02/13/14
Partnership K-1 Short-term Capital Gain	P	01/01/14	12/31/14
Partnership K-1 Long-term Capital Gain	P	01/01/00	12/31/14
Collectible Gains (28%) Gain	P	01/01/00	12/31/14
Sec. 1250 Gain from K-1	P	01/01/00	12/31/14
Sec. 1231 Gain from K-1	P	01/01/00	12/31/14
AG Super Fund Capital Gain	P	01/01/00	12/31/14
Capital Gains Dividends	P	01/01/00	12/31/14
Sale of K-1 Forester Partners	P	01/01/11	08/31/14

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

(e) Gross sales price	Gross sales Depreciation allowed Cost or oth		(h) Gain or (loss) (e) plus (f) minus (g)
33,281.		16,770.	16,511.
283,305.		48,868.	234,437.
379,068.		98,035.	281,033.
198,173.		51,772.	146,401.
102,402.		45,313.	57,089.
1,650.		97.	1,553.
8,250.		486.	7,764.
1,650.		97.	1,553.
1,650.		97.	1,553.
16,499.		972.	15,527.
146,817.		8,653.	138,164.
204,907.		12,055.	192,852.
16,499.	,	972.	15,527.
9,900.		583.	9,317.
151,794.		8,944.	142,850.
93,832.		27,290.	66,542.
352,796.		102,687.	250,109.
17,300.		0.	17,300.
131,177.		0.	131,177.
-27.	}	0.	-27.
1.		0.	1.
7.		0.	7.
37,525.		0.	37,525.
5,103.		0.	5,103.
0.		3,501.	-3,501.

Total 427, 192. 1,766, 367.

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

Complete only for assets by the foundation on 12/	(I) Gains (column (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) <b>or</b> losses (from column (h))
			16,511. 234,437. 281,033. 146,401.
			57,089. 1,553. 7,764. 1,553.
			1,553. 1,553. 15,527. 138,164.
			192,852. 15,527. 9,317.
			142,850. 66,542. 250,109. 17,300.
			131,177. -27. 1.
			7. 37,525. 5,103. -3,501.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

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	Person or Business Checkbox Amount
a Paid during the year  The Art Institute of Chicago  111 South Michigan Avenue  Chicago IL 60603  Global Giving  1110 Vermont Ave. NW, Ste. 550  Washington DC 20005		PUBLIC CHARITYP	Memeral Support General Support	Person or Business X 40,000.  Person or Business X 40,000.

### Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpo grant or co		Person or Business Checkbox Amount
a Paid during the year  Human Rights Watch  350 Fifth Ave. 34th Floor  New York NY 10018  Fund for Global Human Rights  1666 Connecticut Ave. NW, Ste 410  Washington DC 20009  Witness		PUBLIC CHARITY  PUBLIC CHARITY	General General		Person or Business X 300,000. Person or Business 40,000. Person or
80 Hanson Place, 5th Floor Brooklyn NY 11217		PUBLIC CHARITY	General	Support	2,500.

Total

422,500.

# Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Loeb & Loeb LLP	Legal	469.			0.

Total

469.

0.

## Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RAFFA Huey & Associates, PC	Accounting Accounting	4,452.	<u>2,125.</u> 6,150.		0.

Total

16,726.

8,275.

0.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment Fees	Investment	60,658.	60,658.		
Investment Fees K-1	Investment	25,487.	25,487.		
Investment Interest Expense K-1	Investment	12,889.	12,889.		

Total

99,034. 99,034.

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

	End of Year		End of Year	
Line 10a - Investments - US and State Government Obligations:	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
MFO Vanguard Bond Index			4,011,143.	3,976,400.

Total

4,011,143. 3,976,400.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
Merchants Natl. PPTYS Inc.	15,652.	264,040.	
MFO Vanguard 500 Index Fund Sig	5,600,000.	9,043,832.	
MFO Vanguard Developed Markets	4,600,000.	5,532,486.	
MFO Vanguard Intl. Equity Index	2,450,000.	2,483,760.	

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

End of Year		
Book Value	Fair Market Value	
0.	<u>0.</u> 2,143,152.	
	Book	

Total

Total

2,268,037. 2,143,152.

12,665,652. 17,324,118.

Form 990-PF, Page 2, Part II, Line 14 L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Office Equipment	2,720.	2,394.	326.
Total	2,720.	2,394.	326.

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

	Beginning	End of Year	
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value
Exchange - Forester Partners	0.	248,553.	248,553.
Exchange - Northern Trust	0.	11,893.	11,893.
Total	0.	260,446.	260,446.