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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 Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2014 Open to Public Inspection

Fo	r calen	dar year 2014 or tax year beginning		, 201	4, and endin	ıg		, 20
N	lame of	foundation				A Employer	Identification number	
F	RANK	LIN LEGACY FUND				46-466		
N	lumber	and street (or PO box number if mail is not delivered	ed to street address)		Room/suite	· · · · · · · · · · · · · · · · · · ·	number (see instructions	s)
3	16 M	ID VALLEY CENTER					59-1149	,
- 0	ity or to	wn, state or province, country, and ZIP or foreign po	ostal code				tion application is pending	chack hara
Ċ	ARME	L, CA 93923				G il exemp	non application is pending	, dieck fiele
G	Check	all that apply. X Initial return	Initial return o	of a former public ch	narity	D 1. Foreso	n organizations, check he	ere▶□
		Final return	Amended ret	•	•		,,,,	
		Address change	Name change				in organizations meeting t	
н	Check		501(c)(3) exempt priva				here and attach computa	· · · · · · · · · · · · · · · · · · ·
Ï	7	ion 4947(a)(1) nonexempt charitable trust		axable private found	tation		foundation status was ter. 07(b)(1)(A), check here	
 			Accounting method	X Cash	Accrual	1		
		year (from Part II, col (c),	Other (specify)	[25] 08311	_ Accidai		ndation is in a 60-month to	
	line 16)	· · · · · · · · · · · · · · · · · · ·	t i, column (d) must be	on each basic \		under se	ction 507(b)(1)(B), check l	mere · · · · · · ·
_	art I	Analysis of Revenue and Exper		Oli Casil Dasis)			1	T
	4111	amounts in columns (b), (c), and (d) may not nec	,	(a) Revenue and	(h) Net	investment	(a) Adverted not	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	cessarily equal	expenses per books		come	(c) Adjusted net income	purposes
	 	·	March activity					(cash basis only)
	1	Contributions, gifts, grants, etc., received (at	·	165,0	00	*		
	2	Check If the foundation is not required to a	<u></u>					
	3	Interest on savings and temporary cash inve		<u> </u>			-	
	4	Dividends and interest from securities • •	ļ-					
	5a	Gross rents	• • • • • • • • • • • • • • • • • • • •					1
	r .p .	Net rental income or (loss)					, , , , , , ,	.:
ē	6a	Net gain or (loss) from sale of assets not on	Ine 10	······		- [5]	NOV 2 3 2015	11
evenue	þ,	Gross sales price for all assets on line 6a					NOV DOZO	115
Š	7	Capital gain net income (from Part IV, line 2)) •••• [
α,	- ≓8	Net short-term capital gain					JUDFM D	
	≥9	Income modifications						
	10a	Gross sales less returns and allowances • • • •						
1	., b	Less: Cost of goods sold · · · · · · · L		, , , , , , , , , , , , , , , ,		·-·.		
(- C	Gross profit or (loss) (attach schedule) · ·	-					
ļ	111	Other income (attach schedule)	[-					
_	12	Total. Add lines 1 through 11		165,00	00	0		
s	13	Compensation of officers, directors, trustees	s, etc • • • • •					
cbenses	14	Other employee salaries and wages · · ·	• • • • • • • • • •	50,00	00			
ē	15	Pension plans, employee benefits						
		Legal fees (attach schedule)	 	3,5	71			
e E	ь	Accounting fees (attach schedule)	<u></u>	-				
ahd/Administrative E	C	Other professional fees (attach schedule)		2,8	35			
Ę	17	Interest						
nis	18	Taxes (attach schedule) (see instructions)						
Œ	19	Depreciation (attach schedule) and depletion	<u> </u>					
Ad	20	Occupancy · · · · · · · · · · · · · · · · · · ·	⊢					
P	21	Travel, conferences, and meetings · · · ·	-	1.010				
a A	22	Printing and publications · · · · · · · · ·	<u>-</u>	·*···				
F	23	Other expenses (attach schedule) · · · s	<u>}</u>	9,75	53			
ā	24	Total operating and administrative expens	1					
pe	23 24 25 26	Add lines 13 through 23 · · · · · · · · ·	<u> </u>	66,1	59	0		o
0	25	Contributions, gifts, grants paid) _	70,5	50			0
	26	Total expenses and disbursements. Add li	ines 24 and 25 •	136,70	9	0		0
ú	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and dis	sbursements .	28,29	91			
	b	Net investment income (if negative, enter-	.0-) [0		
	С	Adjusted net income (if negative, enter -0-)	<u> </u>				0	
For	Paper	work Reduction Act Notice, see instruction	ns.					Form 990-PF (2014)

Pa	art II	ର୍ଷ୍ଣance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year
	•	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		28,291	28,291
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	İ	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			
ţs	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	0	28,291	28,291
_	17	Accounts payable and accrued expenses		20,231	20,231
	18	Grants payable			
S		Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ä	21	Mortgages and other notes payable (attach schedule)			-
Ë	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	-
-		Foundations that follow SFAS 117, check here X	<u> </u>		-
ģ		and complete lines 24 through 26 and lines 30 and 31.			
ဦ	24	Unrestricted		28,291	
<u>a</u>	25	Temporanly restricted		20,231	1
Balances	26	Permanently restricted			-
Assets or Fund		Foundations that do not follow SFAS 117, check here			-
Ē		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
ফ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			-
se	29	Retained earnings, accumulated income, endowment, or other funds			1
¥		Total net assets or fund balances (see instructions)	0	20 201	-
Net	31	Total liabilities and net assets/fund balances (see		28,291	+
~	3.	instructions)		00 001	
Ps	art III	<u> </u>	0	28,291	
	-	net assets or fund balances at beginning of year - Part II, column (a), line 3		1	
		f-year figure reported on prior year's return)			
		amount from Part I, line 27a			00.000
					28,291
		increases not included in line 2 (itemize)		3	00.000
		eases not included in line 2 (itemize)		5	28,291
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	ump (h) lino 20		00.001
J	iotaii	not assets of fund balances at end of year (line 4 finitus line 5) - Fart II, Col	unni (D), mic 30 ••••	- · · · · · · b	28,291

(a) List and descri	be the kind(s) of property sold (e.g., real ehouse, or common stock, 200 shs MLC	estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus expe	other basis nse of sale		in or (loss) (f) minus (g)
а					
b		ļ		<u> </u>	
С		ļ			
d		 			
0	(h)		10/04/00		
Complete only for assets snow	wing gain in column (h) and owned b	by the foundation on	12/31/69	(I) Gains (C	ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col		COI (K), but no Losses (et less than -0-) or from col (h))
а			· · · · · · · · · · · · · · · · · · ·		
b					
С					·
d					
e					·
2 Capital gain net income or (ne	et capital loss)	also enter in Part I, lir . enter -0- in Part I, lir	ſ	2	
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6).			
If gain, also enter in Part I, line	e 8, column (c) (see instructions) If	(loss), enter -0- in	}		
				3	
Part V Qualification U	nder Section 4940(e) for F	Reduced Tax on	Net investme	ent Income	
If "Yes," the foundation does not q	ection 4942 tax on the distributable ualify under section 4940(e) Do not	complete this part.	·		Yes No
	in each column for each year, see t	he instructions before	e making any entri	es	(d)
(a) Base period years Calendar year (or tax year beginnir	ng in) Adjusted qualifying distribution	ons Net value of	(c) noncharitable-use a		(d) tribution ratio divided by col_(c))
2013					
2012					
2011					
2010					
2009					
2 Total of line 1, column (d)				2	
	he 5-year base period - divide the to		by the	- -	
	on has been in existence if less than			3	
4 Enter the net value of nonchar	ritable-use assets for 2014 from Par	t X, line 5		4	
5 Multiply line 4 by line 3 · · ·				5	0
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	0
8 Enter qualifying distributions fr	•			8	
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI,	line 1b, and complet	e that part using a	1% tax rate See the	

Pa	rt V[·] Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instr	uctio	ns)	
, 1a				
`	Date of ruling or determination letter. (attach copy of letter if necessary-see instructions)			
b				0
	here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			
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-			0
6	Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 · · 6a			
þ	Exempt foreign organizations - tax withheld at source 6b			
C .	Tax paid with application for extension of time to file (Form 8868)			
_d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 (Par	Enter the amount of line 10 to be Credited to 2015 estimated tax			
			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	163	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	- Ia		1
b	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	15		 ^
	published or distributed by the foundation in connection with the activities	į		l
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
~	(1) On the foundation \$ \$ (2) On foundation managers \$			İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	İ		
ŭ	on foundation managers > \$	İ		ļ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	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	ĺ		
_	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
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
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	İ		ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1	İ	
	conflict with the state law remain in the governing instrument?	6		X
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)			
	CA		1	
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			
	names and addressesSTM114	10	X	

Form	990-PF (2014) FRANKLIN LEGACY FUND 46-4662	563	F	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		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address • www.franklinlegacyfund.org			
14	The books are in care of SUSAN B FRANKLIN Telephone no 831-2	36-2	236	
	Located at ► 316 MID VALLEY CENTER 112, CARMEL, CA ZIP+4 ► 93923			
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 15			
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90 22 1) If	ŀ		
	"Yes," enter the name of the foreign country			<u> </u>
Pa	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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(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			
	termination of government service, if terminating within 90 days) Yes 🗵 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)?	1b		
	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.		ļ <u>, , </u>
	were not corrected before the first day of the tax year beginning in 2014?	1c		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))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			Ì
	6e, Part XIII) for tax year(s) beginning before 2014? Yes X No			
_	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)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	.		
	atl years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	<u> </u>			
3a	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			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	2		
4-	foundation had excess business holdings in 2014)	3b	<u> </u>	V
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	i	L

Form	990-PF (2014) FRANKLIN LEGACY FUND)					46-4662	563	Page 6
Pa	t VII-B Statements Regarding Activitie	s for \	Which Forn	n 472 0	May Be	Requir	ed (continued)		
5à	During the year did the foundation pay or incur any arr	ount to			•	_			
	(1) Carry on propaganda, or otherwise attempt to infli	ience leg	gislation (sectio	n 4945(e	e))?	[Yes X No		
	(2) Influence the outcome of any specific public electi	on (see s	section 4955), (or to car	ry on,	_			
	directly or indirectly, any voter registration drive?					[Yes X No		
	(3) Provide a grant to an individual for travel, study, or						Yes X No		
	(4) Provide a grant to an organization other than a ch					_		1 1	
	• •					[Yes X No	1 1	
	(5) Provide for any purpose other than religious, char					_		1 1	
	purposes, or for the prevention of cruelty to children					[Yes X No	1 1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans						in		
-	Regulations section 53 4945 or in a current notice reg							5b	
	Organizations relying on a current notice regarding dis	_					▶ □		
c	If the answer is "Yes" to question 5a(4), does the foun								i
·	because it maintained expenditure responsibility for th					[Yes No		
	If "Yes," attach the statement required by Regulations								
6a	Did the foundation, during the year, receive any funds,			pay prei	mums				
Va	on a personal benefit contract?					Г	Yes X No	1 1	
h	Did the foundation, during the year, pay premiums, dir							6ь	Х
b		ectly of it	idirectly, on a p	Cisonai	Denem Cont	act.		52	
	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a p		prohibited tox	chalter t	ransaction?	. Г	Yes X No	1 1	
						stion?		7b	
b	If "Yes," did the foundation receive any proceeds or hat VIII Information About Officers, Direction	ctore	Trustees	Found	lation Ma	nagers			vees.
Fa	and Contractors	ciors,	musices,	Ound	iation ma	nagers	, riigiliy r ala	Linpio	, 000,
			d their same	nastian	/ooo inetru	otions\			
1 1	ist all officers, directors, trustees, foundation man		e, and average		ompensation		Contributions to	(a) Evac	ense account,
	(a) Name and address	` hou	rs per week	(If r	not paid,	emplo	oyee benefit plans erred compensation		allowances
			ed to position		nter -0-)	and der	erred compensation		
	N B FRANKLIN	INCOR	PORATOR A	ľ	0		0		0
316	MID VALLEY CENTER, CA 93923	 	2.00						
		1		l					
		 				 			
				1		}			
		 		<u> </u>					
		ŀ				i			
		- 46-0 48	anning in aludad	on line	1 coo instr	l	If none enter		
2 (compensation of five highest-paid employees (other	r than tr	iose included	on line	1 - 500 111511	uctions	i. Il none, enter		
	NONE."						(d) Contributions to	Ī	
	(a) Name and address of each employee paid more than \$50	000	(b) Title, and		/=\ C=====		employee benefit		nse account,
	(a) Name and address of each employee paid more than \$50	,000	hours per v devoted to pe		(c) Compe	isation	plans and deferred compensation	other a	allowances
			-				OS. Aparica in a		
NON	E								
								. -	
			İ						
		_ 							
					 				
					ļ			1	
			1			. .	L		
	number of other employees paid over \$50,000 · · ·	<u> </u>		• • • • •	• • • • • •	• • • •			0
EEA								⊢orm 99	0-PF (2014)

Form 990-PF (2014)

All other program-related investments. See instructions

Total. Add lines 1 through 3

EEA

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	founda	ations,
<u></u>	see instructions.)		
1`	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	0_
þ	Average of monthly cash balances	1b	23,440
C	Fair market value of all other assets (see instructions)	1c	0_
d	Total (add lines 1a, b, and c)	1d	23,440
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	0
3	Subtract line 2 from line 1d	3	23,440
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	270
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	23,170
6_	Minimum investment return. Enter 5% of line 5	6	1,159
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundati	ons
	and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,159
2a	Tax on investment income for 2014 from Part VI, line 5 2a	1 1	
þ	Income tax for 2014 (This does not include the tax from Part VI)	1 . 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,159
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,159
6		6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	_	
	line 1 · · · · · · · · · · · · · · · · · ·	7	1,159
Pa	rt XII Qualifying Distributions (see instructions)		
1	Analysts and (natively a designate type of a green which about a big and a surrocce	Т	
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0
a b	Program-related investments - total from Part IX-B	1b	0_
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	" 	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	- -	
a	Suitability test (prior IRS approval required)	3a	
ь ь	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	
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	للت	tion
	qualifies for the section 4940(e) reduction of tax in those years		

	990;PF (2014) FRANKLIN LEGACY FUND			46-4662563	Page 9
Pa	rt XIII Undistributed Income (see instruc	tions)			
`	Distributable and a second for a Dad VI	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI,	Corpus	rears prior to 2013	2013	
2	Undistributed income, if any, as of the end of 2014				1,159
a	Enter amount for 2013 only	1			
b	Total for prior years , ,				
3	Excess distributions carryover, if any, to 2014				
· a	From 2009		i		
b	From 2010	1			
С	From 2011				
d	From 2012				
0	From 2013				
Ţ	Total of lines 3a through e				····
4	Qualifying distributions for 2014 from Part XII, line 4 \$				
а	Applied to 2013, but not more than line 2a · · ·				· · · · · · · · · · · · · · · · · · ·
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				
e	Remaining amount distributed out of corpus	69,391			
5	Excess distributions carryover applied to 2014				
	(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				
Ů	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 •	69,391			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b · · · · · · · · · · · · · · ·				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
0	Undistributed income for 2013 Subtract line		İ		
	4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2014 Subtract lines				<u> </u>
•	4d and 5 from line 1. This amount must be				
	distributed in 2015				1,159
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	70,550			
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
40	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
_	Excess from 2010 Excess from 2011		į		
p	Excess from 2012 · · · ·				
d	Excess from 2013		į		
-	Excess from 2014 · · · · ·				
	2.0000 1001 2014				

_	_			_	_	_
4	6-	46	62	5	6	3

Par	XIV . Private Operating Foun	dations (see ins	tructions and Part	t VII-A, question 9)	
1ą	If the foundation has received a ruling or o	determination letter th	at it is a private operati	ng		
	foundation, and the ruling is effective for 2	014, enter the date o	f the ruling		<u> </u>	
b	Check box to indicate whether the founda	tion is a private opera	ating foundation describ	ed in section	4942(J)(3) or 4	9 42 (j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	(4)	(-,,	(-,	(-,	···
h	85% of line 2a			 		· · · · · · · · · · · · · · · · · · ·
	F					
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					
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					
а	"Assets" alternative test - enter					
	(1) Value of all assets · · · · ·		 	 		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) · · · ·					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed • • •					
c	"Support" alternative test - enter					
	(1) Total support other than gross			+		
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part		tion (Complete	this part only if th	he foundation ha	d \$5,000 or more i	n assets at
	any time during the year					
1	Information Regarding Foundation M		·			
a	List any managers of the foundation who	have contributed mo	ore than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	rif they have contribu	ted more than \$5,000)	(See section 507(d)(2)))	
	List any managers of the foundation who	0 0 0 10% or more of	the stock of a corporat	tion (or an equally large	nortion of the	
Ь	ownership of a partnership or other entit	v) of which the found:	ation has a 10% or grea	ater interest	e portion of the	
	Company or a partitioning of other office	,, 2				
	Information Regarding Contribution,	Count Cift Loop S	shelambin etc. Progr	mme:	·····	
2	 1					
	Check here ► ☐ if the foundation only		•	-		
	unsolicited requests for funds If the four	-	rants, etc. (see instruct	tions) to individuals or c	organizations under	
	other conditions, complete items 2a, b, c		-646	and at the state of the state o		
а	The name, address, and telephone num	ber or e-mail address	s of the person to whom	applications snould be	e addressed	
	990APP					
b	The form in which applications should be	submitted and infori	mation and materials th	ey should include		
	• •					
С	Any submission deadlines					
d	Any restrictions or limitations on awards	, such as by geograp	hical areas, charitable f	ields, kınds of ınstitutioi	ns, or other	
	factors:					

Form 990-PF (2014) FRANKLIN LEGACY FUND

Part XV. Supplementary Information (continued)

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

3. Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient				
Paid during the year						
MONTEREY PUBLIC LIBRARY						
625 PACIFIC STREET						
MONTEREY, CA 93940	NONE	NC	GENERAL	2,500		
CAL STATE MONTEREY BAY						
100 CAMPUS CENTER						
SEASIDE, CA 93955	NONE	NC	GENERAL	5,300		
YOUTH ARTS COLLABORATIVE						
472 CALLE PRINCIPAL		,	j			
MONTEREY, CA 93940	NONE	NC	GENERAL	20,000		
WOMEN'SINTERNATIONAL PERSPECTIVE						
460 PIERCE STREET						
MONTEREY, CA 93940	NONE	NC	GENERAL	500		
KITCHEN SISTERS						
916 KEARNEY STREET						
SAN FRANCISCO, CA 94133	NONE	NC	GENERAL	25,000		
SAN PARIOTISCO, OR 54155	NONE					
PARK MC CULLOUGH HOUSE	1					
1 PARK STREET						
NORTH BENNINGTON, VT 05257	NONE	NC	GENERAL	250		
NEW						
1100 NO MAIN STREET STE 100		1				
ANN ARBOR, MI 48104	NONE	NC	GENERAL	500		
TARAB INSTITUTES INTERNATIONAL						
HORSHOLM KONGEVEJ 40C/O STORE SOHOJ						
HORSHOLM, HORSHOLM Denmark	NONE	NC	GENERAL	1,000		
Total			▶ 3a			
b Approved for future payment						
		1				
			,			
		1				
•						
		i				
Total			▶ 3b			

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or

3 Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	roupiern			
Paid during the year	į				
CLAIRE'S PLACE FOUNDATION					
2110 ARTESIA BLVD SUITE 819					
REDONDO BEACH, CA 90278	NONE	NC	GENERAL	1,000	
BURMESE LEARNING CENTER					
KURABURI AREA					
THAILAND, SOUTHERN THAILAND Thailand	NONE	NC	GENERAL	1,000	
BREAST CANCER ACTION					
657 MISSION STREET SUITE 302					
SAN FRANCISCO, CA 94105	NONE	NC	GENERAL	1,000	
MONTEREY BAY AQUARIUM					
886 CANNERY ROW	ļ				
MONTEREY, CA 93940	NONE	NC	GENERAL	1,000	
KUSP					
203 8TH STREET					
SANTA CRUZ, CA 95062	NONE	NC	GENERAL	2,500	
SANTA CRUZ COMMUITY FDTN					
7807 SOQUEL DRIVE					
APTOS, CA 95003	NONE	NC	GENERAL	1,000	
GRID ALTERNATIVES					
1171 OCEAN AVENUE SUITE 200				0.000	
OAKLAND, CA 94601	NONE	NC	GENERAL	2,000	
ADDICTION DAVICE					
SPECTOR DANCE					
3343 PAUL DAVIS DRIVE	1000	NG	CHMEDAT	1 000	
MARINA, CA 93933	NONE	NC	GENERAL	1,000	
Total					
b Approved for future payment					
b Approved to lattice payment					
			1		
				i	
	Ì				
		}			
Total			≯ 3b		

Part XV. Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager or substantial contributor recipient Name and address (home or business) a Paid during the year THE BARON SCHOOL SCHOLARSHIP 3200 MOTOR AVENUE NONE NC CHILD SERVICES 2,500 LOS ANGELES, CA 90034 CARMEL VALLEY TRAIL & SADDLE CLUB P O BOX 873 NÇ 1,000 NONE **GENERAL** CARMEL VALLEY, CA 93924 NETWORK FOR GOOD 1140 CONNECTICUT AVENUE NW WASHINGTON, DC 20030 NONE NC GENERAL 1,500 70,550 Approved for future payment

Total

Enter gro	oss amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ection 512, 513, or 514	(e)
•		(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Prog	gram service revenue	code				
- b						
- c						
d ⁻						
е _						
f_						
	ees and contracts from government agencies		 			
	nbership dues and assessments					
	est on savings and temporary cash investments dends and interest from securities	ļ				
	rental income or (loss) from real estate					
	Debt-financed property			 		
	lot debt-financed property					
	rental income or (loss) from personal property · · ·					
	er investment income					·
	or (loss) from sales of assets other than inventory					
9 Net i	ncome or (loss) from special events					
	ss profit or (loss) from sales of inventory					
11 Othe	er revenue a]		ļ		
						·
d _				 		
e _ 12 Subt	otal Add columns (b), (d), and (e)			 		·····
	il. Add line 12, columns (b), (d), and (e)				13	
	rksheet in line 13 instructions to verify calculations)					
	(VI-B Relationship of Activities to the	Accompli	shment of Exe	mpt Purpos	es	
Line N	Explain below how each activity for which incol accomplishment of the foundation's exempt put	=			· · · · · · · · · · · · · · · · · · ·	
			······································			
		······································				
					 	
			·····			
						
						
						
	1					

Form 990-PF (2014)

	90-PF (2		RANKLIN LEGAC						46-4	6625	63		ge 13
Part	ΧΛΙΙ		n Regarding Tr	ansfers To	and Transac	tions and	d Relation	ıships	With	Nonc	harita	ble	
			rganizations	·									
1 [old the or	ganızatıon dire	ctly or indirectly enga	ge in any of the	following with ar	y other orga	ınızatıon desi	cribed				Yes	No
			Code (other than secti	on 501(c)(3) org	ganizations) or ir	section 527	, relating to	oolitical					
(rganızatı	ons?											
		•	ting foundation to a n		. •								
											1a(1)		Χ
(Other	assets · · ·									1a(2)		X
b (Other tran	sactions											
(1) Sales	of assets to a	noncharitable exempt	organization							1b(1)		Χ
			from a noncharitable								1b(2)		Χ
			quipment, or other as:								1b(3)		X
,	-		ngements								1b(4)		X
(5) Loans	or Ioan guarar	ntees				• • • • •			• • •	1b(5)		X
(6) Perfo	mance of servi	ices or membership o	or fundraising so	licitations •					• • •	1b(6)		X
	_		pment, mailing lists, o								1c		Χ
d I	f the ansv	ver to any of the	e above is "Yes," con	plete the follow	ing schedule Co	olumn (b) sh	ould always	show the	e fair ma	rket			
١	alue of th	ne goods, other	r assets, or services g	given by the repo	orting foundation	If the found	dation receive	ed less t	han fair	market			
\	alue in a	ny transaction o	or sharing arrangeme	nt, show in colu	mn (d) the value	of the good	s, other asse	ts, or se	rvices re	eceived	·		
(a) Line	no (b) A	mount involved	(c) Name of non	charitable exempt	organization	(d) Desc	cription of trans	sfers, tran	sactions,	and sha	aring arra	ngeme	nts
					 	. 							
													
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	<u> </u>					†··							
2a i	s the four	ndation directly	or indirectly affiliated	with, or related	to, one or more	lax-exempt	organizations						
		-	(c) of the Code (other								Yes	s X	No
b 1	f "Yes," c	omplete the foll	lowing schedule										
	(a) Name of organ	nization	(b) T	ype of organization	1		(c) De	scription	of relation	nship		
			·					_		_		_	
				<u> </u>									
e:		enalties of perjury, I and complete Decla	declare that I have examinated aration of preparer (other the	ed this retum, includ ian taxpayer) is base	ing accompanying so ed on all information of	hedules and sta of which prepare	atements, and to er has any knowl	the best o edge	f my know	ledge and	l belief, it is	s true,	
Sign				ı							RS discuss		
Here		SAN B FRAN			16-2015	<i>'</i>	RATOR/ 1	RUSTE		vith the pi see inst)	reparer sho	own belo	พื №
	Sign	Print/Type prepar		Date Date Sur		Title	Date		_		PTIN		
Paid				Preparer's sig	/ <u>`</u> ` / /	l CPA-		• -	'	X f			
	arer	Nancy Cal		0 000	y our	~~~	11-16-20		self-emp	loyed	200400)111	
	Only	Firm's name Firm's address	Nancy Calla PO Box 1406		EF EA			Firm's Ell					
J36	Unity	Filling address	Carmel By	· · · · · · · · · · · · · · · · · · ·	93921			LINOUA UC		625-	A272		
		<u> </u>	Carmer by .	THE DEG CH	JJJE1				<u> </u>	<u> </u>	1414		

(Fòrm 990, 990-EZ,

Department of the Treasury

Internal Revenue Service

or 990-PF) 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

Schedule of Contributors

OMB No 1545-0047

Employer identification number Name of the organization FRANKLIN LEGACY FUND 46-4662563 Organization type (check one) Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule [X] 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 for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

Name of organization

FRANKLIN LEGACY FUND

Employer identification number

46-4662563

Parti	Contributors (see instructions). Use duplicate copie	es of Part i if additional space is f	пееаеа.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	SUSAN B FRANKLIN 316 MID VALLEY CENTER CARMEL, CA 93923	\$165,000	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

Federal Supporting Statements 2014 pg 01 Your Social Security Number 46-4662563

FORM 990PF, PART XV, LINE 2 APPLICATION SUBMISSION INFORMATION

GRANT PROGRAM

APPLICANT NAME

SUSAN B FRANKLIN

ADDRESS

316 MID VALLEY CENTER CARMEL, CA 93923

TELEPHONE

831-659-1149

EMAIL ADDRESS

WWW.FRANKLINLEGACY FUND.ORG

FORM & CONTENT

APPLICATIONS SHOULD BE SUBMITTED IN WRITING

SUBMISSION DEADLINE

NONE

RESTRICTIONS ON AWARD

GIFTS ARE MADE TO ANY ORGANIZATIONS WITH EXEMPTION STATUS FROM FEDERAL AND STATE GOVERNMENTS

		Federal Supporting Statements	2014 PG 01
I	Name(s) as shown on return		FEIN
İ	FRANKLIN LEGAC	Y FUND	46-4662563

FORM 990PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS SCHEDULE

STATEMENT #114

NAME

SUSAN B FRANKLIN

ADDRESS

316 MID VALLEY CENTER 122

CARMEL, CA 93923

		Federal Su	Federal Supporting Statements	nents	2014 PG 01
Name(s) as shown on return FRANKLIN LEGACY FUND					Your Social Security Number 46-4662563
	FORM 990PF, PART I,	LINE 23	- OTHER EXPENSES SCHEDULE	EDULE	STATEMENT #103
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
OFFICE SUPPLIES PAYROLL TAXES PAYROLL SERVICES COMPUTER EXPENSE TRAVEL FUEL	350 4,399 550 25 4,223 206 9,753	000000	000000	000000	
	FORM 990E	PE, PART I, LINE 16	FORM 990PF, PART I, LINE 16(A) - LEGAL FEES SCHEDULE	EDULE	PG 01 STATEMENT #107
DESCRIPTION ATTORNEY FEES TOTALS	AND EXPENSES 3,571	NET INVESTMENT 0	ADJUSTED NET INCOME 0	CHARITABLE PURPOSE 0	

• .•	umber	66				 		-	
2014 PG 01	Your Social Security Nu 46-4662563	STATEMENT #109							
			37. B						
ments		FEES SCHEDULE	CHARITABLE						
Federal Supporting Statements		- OTHER PROFESSIONAL FEES SCHEDULE	ADJUSTED NET INCOME	0					
deral Supp			TNE						
Fec		PART I, LINE	NET INVEST						
		FORM 990PF, PART I, LINE 16(C)	REVENUE AND EXPENSES	2,835					
			7	ı II					
	Name(s) as shown on return FRANKLIN LEGACY FUND		ION	S I					
	Name(s) as s		DESCRIPTION	CONSULTA	 	 			