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### Form **990-PF**

### **Return of Private Foundation**

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

Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

OMB No 1545-0052

_		Revenue Service	► Information about Form	990-F					//тоrm990pt.	Open to Public Inspec
			or tax year beginning		11	./12 , 2014	, and endin			12/31, 20
١	lame	of foundation						'		tification number
_		NSON FAMILY					1	$\perp$	47-23236	
١	lumb	er and street (or P O	box number if mail is not delivered	to stree	et address)		Room/suite	E	3 Telephone nur	mber (see instructions)
									3)	800) 839-1754
]	FOU	NDATION SOUR	CE 501 SILVERSIDE	RD			123	- 1		
_	City or	town, state or province	ce, country, and ZIP or foreign pos	stal code	е		-			
									If exemption app pending, check h	lication is
,	WIL	MINGTON, DE	19809-1377						pending, check n	ere
_		ck all that apply	X Initial return		Initial return	of a former r	public charit	√I.	3 4 5	izations, check here
•	0110	on an marappi,	Final return	<u> </u>	Amended re	•		' '		izations, check here P
			Address change	F	Name chang				85% test, ched	ck here and attach
_	Cho	ok type of organi	zation X Section 501(	C)(3) (				$\dashv$	computation	
Ή	_			$\overline{}$			tion	1		ation status was terminated
1			onexempt charitable trust		Other taxable pr				under section 50	7(b)(1)(A), check here .
			f all assets at J Acco			asn Acc	cruai	F		is in a 60-month termination
		of year (from Par			specify)				under section 50	7(b)(1)(B), check here . >
_		<u> </u>		olumn	(d) must be on cas	sn basis )				(a) Diahilia
Р	art	Analysis of Rev	renue and Expenses (The columns (b), (c), and (d)		Revenue and	(b) Net inve	estment	(c)	Adjusted net	(d) Disbursemer for charitable
			ly equal the amounts in	€	expenses per	incon		(0)	income	purposes
		∞lumn (a) (see ıns			books					(cash basis onl
	1		s, etc , received (attach schedule) .		806,813.					
	2	Check ▶ ☐ If the	e foundation is not required to the Sch B							
	3		nd temporary cash investments.							
	4	=	rest from securities							
-	5a									
			(loss)							
a			m sale of assets not on line 10							
Revenue		Gross sales price for a								
Š	_	assets on line 6a	nome (from Dort IV June 2)				0			
2	,		come (from Part IV, line 2) .							
	8	•	oital gain		• •					
l	9 10a	Gross sales less return	ons							
İ		and allowances				<u> </u>				
1		Less Cost of goods so								
	С	•	s) (attach schedule)							+
	11		ach schedule)		806,813.		0			
4	12		through 11		806,813.		<del></del>			
ß	13	Compensation of office	cers, directors, trustees, etc							
	14	Other employee sa	alaries and wages							
ë	15	Pension plans, em	ployee benefits		[	BEC	CIVE	<u>)                                    </u>		
Expense	16 a	Legal fees (attach	schedule)				<u> </u>	_	10	
삣	b	Accounting fees (a	attach schedule)			2			08	
اڅ.	17 18 19 20	Other professional	fees (attach schedule)				1 2 2015	)	191	
ā	17	Interest				[2]			[왕]	
ist	18		dule) (see instructions)			ب ب		ī T	J	
듣	19	•	ch schedule) and depletion.			1. 1. 1	10.50	<u>.                                     </u>		
듄	20	•								
۲	21	• •	es, and meetings							
J D	21 22	·	cations				1			
g	22		ttach schedule)		<del></del>					<del></del>
Operating	23		•	<b>-</b>						
ra	24	-	nd administrative expenses		(					
be			igh 23	<b>-</b>			<del></del>			<del>- </del>
0	1	· =	s, grants paid	<del> </del>						
_	26		bursements Add lines 24 and 25	<del> </del>		1				<del> </del>
	27	Subtract line 26 fr			005 055					
i	l		expenses and disbursements		806,813.					
	b	Net investment in	come (if negative, enter -0-)				0			
	l c	Adjusted net inco	me (if negative, enter -0-)	l		1				Ī

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1 000

Form 990-PF (2014)

Part II	Ralanca Shacta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		End of year		
Part II	Dalance Sneets	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value	
1	Cash - non-interest-bear	ing				<u> </u>	
1		cash investments					
3	Accounts receivable ▶		•				
	Less allowance for dou	ıbtful accounts ▶				<u> </u>	
		ibtful accounts ▶				İ	
6		officers, directors, trustees, and other					
1 -		tach schedule) (see instructions)				İ	
1		receivable (attach schedule)					
		ubtful accounts ▶				İ	
		se			$\neg$		
		deferred charges			$\neg$		
		te government obligations (attach schedule)				<del></del>	
		e stock (attach schedule) ATCH 1		806,8	13.	801,023	
		e bonds (attach schedule)	• •	300,0			
11	Investments - land, building						
40	(attach schedule)	loans			$\neg$		
12 13	Investments - mortgage	ach schedule)			一		
14	Land, buildings, and	•			$\dashv$		
	equipment basis Less accumulated deprecia	ation			İ		
15	(attach schedule)	<b></b> )					
16		completed by all filers - see the					
	•	page 1, item I)	0	806,8	13	801,023	
		accrued expenses			-3:	002/023	
18							
20	·	ors, trustees, and other disqualified persons					
19 20 21 21 22 22 22 22 22 22 22 22 22 22 22		otes payable (attach schedule) e  )					
22	Other liabilities (describ	e)	1				
23	Total liabilities (add lia	on 17 through 22\	0		0		
- 23	· · · · · · · · · · · · · · · · · · ·	es 17 through 22)			$\dashv$		
ses	and complete lines	llow SFAS 117, check here . ▶ 24 through 26 and lines 30 and 31.					
24 25					$\dashv$		
E 25	Temporarily restricted				$\dashv$		
<sup>26</sup>	Permanently restricted				$\dashv$		
Net Assets or Fund Ba	check here and com	not follow SFAS 117, ► X nplete lines 27 through 31.					
<b>ည</b> 27		ncipal, or current funds					
မ္ဟု 28		or land, bldg, and equipment fund	ř.	225			
Ž 29	•	nulated income, endowment, or other funds		806,8			
30 S		d balances (see instructions)	C	806,8	13.		
31		I net assets/fund balances (see	_				
		<del></del>		806,8	13.		
		inges in Net Assets or Fund Bala		· · · · · · · · · · · · · · · · · · ·		<del>-</del>	
		balances at beginning of year - Part					
		ed on prior year's return)			1		
	er amount from Part I				2	806,813	
		ided in line 2 (itemize) ▶			3		
	I lines 1, 2, and 3			. <i></i>	4	806,813	
5 Dec	creases not included i	in line 2 (itemize) ►balances at end of year (line 4 minus			5		
6 Tota	al net assets or fund l	balances at end of year (line 4 minus	s line 5) - Part II. column	(b), line 30 I	6	806,813	

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Part	Part IV Capital Gains and Losses for Tax on Investment Income											
	(a) List an	d describe the kind(s) of property sold (		(b) How acquired	(c) Date acquired	(d) Date sold						
	2-story b	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )						
1a												
b												
С												
d												
<u>e</u>						<u> </u>						
(	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu							
<u>a</u>												
<u>b</u>												
<u> </u>												
<u>d</u>												
е	Complete only for assets	showing gain in column (h) and owne	ed by the foundation on 12/31/69									
	Complete only for assets				Gains (Col (h) g (k), but not less t							
(i) I	F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co							
			5/1	_								
<u>a</u> b					<del></del>							
C												
d			-									
e	<del></del>											
		l If	gain, also enter in Part I, line 7									
2 C	Capital gain net income	or (not conital loce)	(loss), enter -0- in Part I, line 7	2								
3 N	let short-term capital ga	ain or (loss) as defined in sections	,									
		art I, line 8, column (c) (see ins										
Р	Part I, line 8	<u> </u>	<u></u> <u></u> <u>.</u>	3								
Part	V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome								
(For c	ptional use by domesti	c private foundations subject to th	ne section 4940(a) tax on net investi	ment inco	me )							
•												
If sec	tion 4940(d)(2) applies,	, leave this part blank NO	T AVAILABLE FOR INITIAL	YEAR R	ETURNS							
					_							
			butable amount of any year in the b	ase perio	d?	_ Yes No						
		not qualify under section 4940(e)										
1 E		mount in each column for each yea	ar, see the instructions before makir	ng any ent								
	(a) Base penod years	(b)	(c)		(d) Distribution r	atio						
Calen	dar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by							
	2013				_							
	2012			_	_							
	2011			_								
	2010											
	2009											
				2								
			de the total on line 2 by 5, or by the									
r	number of years the fou	indation has been in existence if le	ss than 5 years	3								
4 E	Enter the net value of n	oncharitable-use assets for 2014 f	rom Part X, line 5	4								
				<u> </u>								
5 N	Multiply line 4 by line 3			5								
6 E	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6								
7 /	Add lines 5 and 6			7								
8 E	Enter qualifying distribu	tions from Part XII, line 4		8								
		greater than line 7, check the box	x in Part VI, line 1b, and complete	that part	using a 1% ta	ix rate. See the						
F	Part VI instructions											

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	s)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1							
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			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 J							
	Part I, line 12, col (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2							
3	Add lines 1 and 2			0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0				
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0			0				
6	Credits/Payments							
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a							
b	Exempt foreign organizations - tax withheld at source							
С	Tax paid with application for extension of time to file (Form 8868), 6c							
d	Backup withholding erroneously withheld			^				
7	Total credits and payments Add lines 6a through 6d			0				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid							
11	Enter the amount of line 10 to be Credited to 2015 estimated tax   Refunded   11							
	t VII-A Statements Regarding Activities		V	Na				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X				
	participate or intervene in any political campaign?							
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1ь		X				
	Instructions for the definition)?	10						
_	published or distributed by the foundation in connection with the activities	1c		Х				
	Did the foundation file Form 1120-POL for this year?			<u> </u>				
a	(1) On the foundation \$\\$ \							
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on							
е	foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
2	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 of							
J	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x				
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х				
	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							
	By state legislation that effectively amends the 'governing instrument so that no mandatory directions that							
	conflict with the state law remain in the governing instrument?	6	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)			İ				
	DE,							
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 <sup>2</sup> If "No," attach explanation	8b	Х	<u> </u>				
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		37					
	names and addresses . ATCH . 2	10	X	<u> </u>				
	Fr	.m 99	O-PF	(2014)				

Pai	rt 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	g of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the	e foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person h	nad advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	•	foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
		e address ► N/A			
14	The boo	oks are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-175	4	
•	Located	at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1	377		
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\prod$
		er the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
		ank, securities, or other financial account in a foreign country?	16	'	Х
		e instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
		nter the name of the foreign country			
Pa		Statements Regarding Activities for Which Form 4720 May Be Required			
I, G		rm 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4.		the year did the foundation (either directly or indirectly)			
16	_	rage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
		row money from, lend money to, or otherwise extend credit to (or accept it from) a			
		· · · · · · · · · · · · · · · · · · ·			
	` '	This is goods, so vices, or radinates to (or assept them from) a disquarried portion.			
		components to or pay or remarked and expenses of a sequence person.			
		nsfer any income or assets to a disqualified person (or make any of either available for benefit or use of a disqualified person)?  Yes X No			
		ee to pay money or property to a government official? (Exception Check "No" if the			
		ndation agreed to make a grant to or to employ the official for a period after			
		and the second s			
'		answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	46		
		53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	•	rations relying on a current notice regarding disaster assistance check here			
•		e foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	۱.,	1	Х
_		of corrected before the first day of the tax year beginning in 2014?	1c		
2		on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	•	ng foundation defined in section 4942(j)(3) or 4942(j)(5))			
4		end of tax year 2014, did the foundation have any undistributed income (lines 6d and t XIII) for tax year(s) beginning before 2014?			
_		I list the years	1		
		ere any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			,
	•	g to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	26		
		s listed, answer "No" and attach statement - see instructions )	2b	<del> </del>	
•		rovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1	
•		e foundation hold more than a 2% direct or indirect interest in any business enterprise			
3					
				İ	ļ
		" did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	•	ified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		ssioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1		
		)-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	25		
,		thon had excess business holdings in 2014)	3b		X
		e foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<del>  ^</del>
İ		e foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4		х
	cnarital	ble purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	<u>  4b</u>	1	

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)					
5a	During the	e year did the foundation pay or incur any amo	unt to		<u> </u>					
		on propaganda, or otherwise attempt to influe		1 4945(e))?	Yes X No	,				
	(2) Influe	nce the outcome of any specific public ele	ction (see section 4	955), or to carry on	 I,					
		ly or indirectly, any voter registration drive?	•	•		,				
		de a grant to an individual for travel, study, or o			1 1 11	,				
		de a grant to an organization other than a								
		on 4945(d)(4)(A)? (see instructions)	· · · -			,				
		de for any purpose other than religious, ch								
	• •	oses, or for the prevention of cruelty to children		•		,				
b		nswer is "Yes" to 5a(1)-(5), did any of the				,				
	Regulation	ns section 53 4945 or in a current notice regard	ding disaster assistand	ce (see instructions)?		5b				
	Organizat	tions relying on a current notice regarding disas	ster assistance check h	nere						
С	_	iswer is "Yes" to question 5a(4), does the								
_	because it maintained expenditure responsibility for the grant? Yes No									
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)									
6a		foundation, during the year, receive any fun		ectly, to pay premium	ns					
		onal benefit contract?	-			,				
b										
	If "Yes" to	o 6b, file Form 8870								
7a										
ь	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?									
Pai	t VIII	Information About Officers, Director	rs, Trustees, Fou	ndation Managers	s, Highly Paid Emp	oloyees,				
1	List all of	and Contractors fficers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions).					
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans		se account,			
		(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other al	lowances			
ATC.	н 3	FE I		·ь О	q		0			
					5					
	<u> </u>	ation of five highest sold amplement	(ather then then	a included on line	4					
2	"NONE."	sation of five highest-paid employees	(other than thos	e included on line	e i - see instructi	ons). It n	one, enter			
			(b) Title, and average		(d) Contributions to employee benefit	(a) Evnon	se account,			
(a)	Name and	address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other a	lowances			
					compensation					
	NONE									
	NONE						<del></del> -			
					,					
		<del>"</del> -			·					
Total	l number é	of other employees paid over \$50,000.								
1010	i ildilibel (	or carer employees paid over 400,000.				Form 99	0-PF (2014)			
							\== -7/			

Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 0 Total number of others receiving over \$50,000 for professional services Part IX-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 beneficianes served, conferences convened, research papers produced, etc. Expenses Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3

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Part	Minimum Investment Return (All domestic foundations must complete this part Forei see instructions )	gn foundations,	
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	400,512.
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	400,512.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	400,512.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	6,008.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	394,504.
6	Minimum investment return. Enter 5% of line 5	6	2,702.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here  and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	2,702.
2 a	Tax on investment income for 2014 from Part VI, line 5 2a		
b	26		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,702.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,702.
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	2,702.
Par	t XII Qualifying Distributions (see instructions)		·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	
b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
b		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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when a		ne foundation

Form 990-PF (2014)

_	n 990-PF (2014)		<del></del>		Page 9
Pa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				2,702.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only		_		
	Total for pnor years 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
f	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)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				
	Remaining amount distributed out of corpus				
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 indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				-
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				:
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				2,702.
7	Amounts treated as distributions out of corpus	•			· ·
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.	0			1
	Subtract lines 7 and 8 from line 6a	ļ			
10	Analysis of line 9				
а					
b					
C					
d	Excess from 2013				
е	Excess from 2014	I	i	I	1

	1 990-PF (2014)		AMILI FOUNDATIO			47-	232300	
Pa	rt XIV Private Op	erating Foundations	s (see instructions ar	nd Part VII-A, ques	tion 9)		NOT .	APPLICABLE
1 a	If the foundation has			•	rating			
	foundation, and the ruling				▶└			<del></del>
b	Check box to indicate v	whether the foundation	is a private operating t	oundation described i	n section	4942(j	)(3) or	4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years				e) Total
	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 20	)11	· ·	
	I or the minimum investment return from Part X for each							
	year listed							
b	85% of line 2a							
С	Qualifying distributions from Part							
	XII, line 4 for each year listed .							
d	Amounts included in line 2c not							
	used directly for active conduct of exempt activities							
е	Qualifying distributions made							
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
•	"Assets" alternative test - enter							
а	(1) Value of all assets							
	(2) Value of assets qualifying							· · · · · · · · · · · · · · · · · · ·
	under section							
ь	4942(j)(3)(B)(i) "Endowment" alternative test-							
	enter 2/3 of minimum invest-							
	ment return shown in Part X,				!			
c	"Support" alternative test - enter							
·	(1) Total support other than							
	gross investment income						ļ	
	(interest, dividends, rents, payments on securities	,						
	loans (section 512(a)(5)),	'						
	or royalties)							
	public and 5 or more							
	exempt organizations as provided in section 4942							
	(j)(3)(B)(III)			_				
	<li>(3) Largest amount of sup- port from an exempt</li>	•					-	
	organization							
Do	(4) Gross investment income .  rt XV Supplement	ntary Information (	Complete this part	only if the foun	dation had	\$5,000	or mo	ro in accote
Fa		during the year - s		. Omy if the tour	idadon nad	<b>\$5,000</b>	or illo	e III assets
1	Information Regardin		•	· · · · · · · · · · · · · · · · · · ·				
-	List any managers of			e than 2% of the to	tal contribution	ons recen	ved by the	ne foundation
	before the close of any	tax year (but only if th	ney have contributed n	nore than \$5,000) (	See section 5	07(d)(2))	•	
	NONE							
b	List any managers of	the foundation who	own 10% or more of	f the stock of a cor	poration (or	an equall	v large i	ortion of the
	ownership of a partner						,	
				-			,	
	N/A							
2	Information Regardin	g Contribution, Grant	. Gift. Loan. Scholarsh	ip. etc., Programs:				
	Check here ► X if t	-			ritable organ	nizatione :	and doe	s not accent
	unsolicited requests f	or funds If the found	ation makes difts, dra	ants etc (see instru	ctions) to inc	lividuals o	or organ	s not accept zations under
	other conditions, comp			, (	,			
a	The name, address, a	nd telephone number	or e-mail address of t	he person to whom a	pplications sh	ould be ad	dressed	
	•	•		,				
b	The form in which app	lications should be su	bmitted and information	on and materials the	y should inclu	de		
	A							
С	Any submission deadl	mes						

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

	rt XV Supplementary Information (	continued)			Page 11
3	Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amauat
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a	Paid during the year				
	•				
		1			
	Total				
b	Approved for future payment				
				ļ	
					İ
		1			
		L	1	J	
	Total			▶ 3b	

Page **12** 

Part XVI-A Analysis of Income-Produ	· ·		Evaluded b	v section 512 513 or 514	(e)
Enter gross amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	Related or exempt function income
Program service revenue     a	Business code	Amount	Exclusion code	Amount	(See instructions)
ab				-	
c					
d					
е					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					·
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e _ :					
12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calc					
Part XVI-B Relationship of Activities	s to the Ac	complishment of E	xempt Purp	oses	
Line No. Explain below how each activit	ty for whic	h income is reported	ın column (	e) of Part XVI-A contrib	uted importantly to the
▼ accomplishment of the foundation					
· · · · · · · · · · · · · · · · · · ·				· ·	
		-: <u>-</u> .			
	-	<del></del>			
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		<del></del>		<u> </u>	<del></del>
		<del></del>			<del> </del>

Form 990	)-PF (2			FAMILY FOUNDA					7-2323			ge <b>13</b>
Part X		Exempt Orga	nizations	ansfers To and						hari	table	<del>,</del>
ın	secti	organization direction 501(c) of the Cations?	tly or indirectly ode (other than	engage in any of t section 501(c)(3) o	he following organizations	with a s) or in s	ny other orga section 527, i	nization de relating to p	scribed political		Yes	No
	_	ations? ers from the reporti	ng foundation to	a noncharitable ex	kempt organ	zation of	f					
		h	_							1a(1)		Х
(2	) Oth	er assets										Х
		ransactions								,		
		es of assets to a no										X
		chases of assets fr										<u>X</u>
		ntal of facilities, equ mbursement arrang										X
		ns or loan guarante										X
		formance of service										Х
		of facilities, equip										Х
		inswer to any of t										
		f the goods, other										
	- $ -$	any transaction o						<del></del>				
(a) Line	no	(b) Amount involved N/A	(c) Name of r	noncharitable exempt org	janization	N/A	scription of transf	ers, transaction	is, and shar	ing arra	ingeme	nts
		N/A	<del> </del>	<del> </del>		N/A	<del></del>					
			<del> </del>	<del> </del>								
				······································								-
	_											
			<del></del>									
-									<del></del>			
										-		
		<del></del>										
de	escrib	oundation directly ed in section 501(c " complete the folio	of the Code (o	ther than section 50	01(c)(3)) or		n 527?				es X	] No
		(a) Name of organization	on	(b) Type of	organization			(c) Description	of relations	nıp		
	-	<u>-</u>										
-			-									
		penalties of perjury, I dec , and complete Declaration						o the best of n	ny knowledg	e and b	elief, it	is true
Sign		11/ Van	71	1/1/1	,		) , .	M	ay the IRS	discus	s this	return
Here	Sign	ature of officer or trustee		<b>7</b> //3/// Date	<i></i>	Title	Resident	(se		epar <u>er</u>		below No
		Print/Type preparer's na	ame	Preparer's signature	<u> </u>		Date	- In: :		TIN		
Paid		JEFFREY D HAS		JEFFREY D			04/14/2	Check 2015 self-en	<b>└</b> ''	P013	4577	Ω
Prepa	rer		OUNDATION S		*****		01/14/2		► 51039			<del>-</del>
Use O	nly		NE HOLLOW L					5 = 114				
			AKE SUCCESS			11	042	Phone no	800839	1754	1	

### 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.

2014

OMB No 1545-0047

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

Name of the organization Employer identification number BRONSON FAMILY FOUNDATION 47-2323601 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 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 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 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)

Employer identification number 47-2323601

Part I	art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	THE NATHANIEL R. BRONSON, II CRUT  C/O N.R.BRONSON 5718 POPPLE DUNGEON ROAD  WINDHAM, VT 05143	\$806,813.	Person Payroll Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Employer identification number

47-2323601

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

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ACTAVIS PLC ACT, 140 SH.	26 245	12/21/2014
		\$36,345.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	AIR LEASE CORP AL, 975 SH.		
		\$33,550.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	AMERICAN AIRLINES GROUP INC AAL, 775 SH.	\$41,835.	12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ANTERO RESOURCES CORPORATION AR, 845 SH.	\$34,349.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	H&R BLOCK INC. HRB, 1050 SH.	<b>\$</b> 35,459.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	BROOKFIELD RESIDENTIAL PROPERTIES BRP, 1525 SH.	\$36,760.	_12/31/2014

Employer identification number

art II	Noncash Property (see instructions). Use duplicate copies of	Part II if additional space is nee	edea.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	CBS CORP CL B CBS, 675 SH.	- - - - s 37,658.	12/31/2014
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	CELGENE CORP CELG, 350 SH.	- - - - \$39,606.	_12/31/2014_
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	COGNIZANT TECHNOLOGY SOLUTIONS CORPORAT CTSH, 650 SH.	- - - - \$34,586.	_12/31/2014
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	DELTA AIR LINES INC DAL, 800 SH.	\$\$.	_12/31/2014_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	THE HAIN CELESTIAL GROUP, INC HAIN, 620 SH.	\$36,707.	_12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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

Name of organization BRONSON FAMILY FOUNDATION

Employer identification number

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	LEVEL 3 COMMUNICATIONS, INC LVLT, 750 SH.		
		\$37,279.	_12/31/2014_
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MCKESSON CORP MCK, 170 SH.		
		\$35,593.	_12/31/2014_
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MERIDIAN INTERSTATE BANCORP		
		\$ <u>33,720.</u>	_12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MICRON TECHNOLOGY MU, 1275 SH.		
		\$44,963.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PACKAGING CORP AMER PKG, 450 SH.		
		\$35,417.	_12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	RANGE RESOURCES CORP DEL RRC, 605 SH.		
		32,567.	12/31/2014

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

Name of organization BRONSON FAMILY FOUNDATION

Employer identification number 47-2323601

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

ı artı			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	GRACE (W.R.) CO. GRA, 375 SH.	36 041	12/31/2014
		\$36,041.	_12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	WILLIAMS COS WMB, 700 SH.	<b>s</b> 31,581.	12/31/2014
		Ψ	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	W. P. CAREY INC WPC, 500 SH.	\$35,483.	12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	XPO LOGISTICS INC XPO, 1025 SH.	\$42,240.	12/31/2014
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b>_</b>		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	· · · · · · · · · · · · · · · · · · ·		

Name of organization BRONSON FAMILY FOUNDATION

Employer identification number

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
	Use duplicate copies of Part III if addit					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relatio	Relationship of transferor to transferee		
				<b></b>		
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
			<b>-</b>			
	Transferee's name, address, a	Transferee's name, address, and ZIP + 4 Relation		onship of transferor to transferee		
(a) No		T		<u> </u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
_	L		I			

## ATTACHMENT 1

ENDING <u>FMV</u>

ENDING BOOK VALUE

47-2323601

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ACTAVIS PLC AIR LEASE CORP AMERICAN AIRLINES GROUP INC ANTERO RESOURCES CORPORATION BROOKFIELD RESIDENTIAL PROPERT CBS CORP CL B CELGENE CORP COGNIZANT TECHNOLOGY SOLUTIONS DELTA AIR LINES INC GRACE (W.R.) CO. H&R BLOCK INC. HOME LOAN SERVICING SOLUTIONS, LEVEL 3 COMMUNICATIONS, INC MCKESSON CORP MICRON TECHNOLOGY PACKAGING CORP AMER RANGE RESOURCES CORP DEL THE HAIN CELESTIAL GROUP, INC W. P. CAREY INC WILLIAMS COS XPO LOGISTICS INC

TOTALS

6,03 3,45 1,56	6,69 7,35 9,15	5,77 5,77 5,36 5,13	37,035. 35,289. 33,660. 44,637. 35,123.	2,33 6,14 5,05 1,45 1,90	801,023.
6, 34 3, 55 1, 83 4, 34	6,76	5, 45 37	37,279. 35,593. 33,720. 44,962. 35,417.	2,56 6,70 5,48 1,58 2,24	806,813.

ATTACHMENT 2

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

### NAME AND ADDRESS

THE NATHANIEL R. BRONSON, II CRUT C/O N.R.BRONSON 5718 POPPLE DUNGEON ROAD WINDHAM, VT 05143

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

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

NATHANIEL R BRONSON III FOUNDATION SOURCE 501 SILVERSIDE RD

PRES / DIR / SEC / TREAS 1.00

WILMINGTON, DE 19809-1377

ATTACHMENT 3