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## Form 990-PF

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

2014

ORIGINAL

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OMB No 1545-0052

Department of the Treasury Internal Revelvue Service

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

For calendar year 2014, or tax year beginning 2014, and ending Aug 11 Dec 31 2014 Name of foundation Employer identification number ROBERT D WRAY CHARITABLE TRUST 47-6419741 Number and street (or P O box number if mail is not delivered to street address) Room/suite В Telephone number (see instructions) 580-R MAPLE AVENUE (401) 289-0999 City or town, state or province, country, and ZIP or foreign postal code С If exemption application is pending, check here. BARRINGTON RI 02806 X Initial return G Check all that apply. Initial return of a former public charity D 1 Foreign organizations, check here . . . . . . Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation . . . . . . . . . . X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here . . X Accrual Fair market value of all assets at end of year Accounting method: (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination **►** \$ (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here . . 6,747,261. Part I Analysis of Revenue and (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necesexpenses per books income ińcome for charitable purposes sarily equal the amounts in column (a) RECEL (=[) (cash basis only) (see instructions)) 6,723,762 Contributions, gifts, grants, etc, received (attach schedule) . 10.1 99 2 Ck ► if the foundn is not required to attach Sch B HIM 1.7 Interest on savings and temporary cash investments . . . 3,232 b Net rental income or (loss) . . . . 6 a Net gain or (loss) from sale of assets not on line 10 REVENUE b Gross sales price for all assets on line 6a . . . 205. Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . . . . Income modifications . . 10 a Gross sales less returns and allowances . b Less Cost of c Gross profit or (loss) (attach schedule) . . . . . . Other income (attach schedule) . . . . . . 30 NINED JUN 3 PRATIZE Total. Add lines 1 through 11. . . . . . . . 3,437. 6,726,994. 12 13 70,000. Compensation of officers directors trustees etc. Other employee salaries and wages . . . . Pension plans, employee benefits . . . . . . 16 a Legal fees (attach schedule) . . . . . . . . . **b** Accounting fees (attach sch). . . . . . . . . C Other prof fees (attach sch) . . . . . . . . . 18 Taxes (attach schedule)(see instrs) . . . . Depreciation (attach sch) and depletion . . . Travel, conferences, and meetings . . . 21 22 Printing and publications . . . . . Other expenses (attach schedule) 24 Total operating and administrative expenses Add lines 13 through 23 . . 70,000. 25 Contributions, oifts, grants paid . . . . . . Total expenses and disbursements Add lines 24 and 25 . . . . . . . . . . . . . . . . 70,000. Subtract line 26 from line 12. a Excess of revenue over expenses 6,656,994 3,437. b Net Investment income (if negative, enter -0-). . C Adjusted net income (if negative, enter -0-) . .

Dat	4 II	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	year
Fai	t II	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		230,326.	230,326.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
	1	Less: allowance for doubtful accounts			
	4	Pledges receivable			
	l	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
S		Less: allowance for doubtful accounts			
š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
s	10	a Investments — U.S. and state government obligations (attach schedule)			
	ł	<b>b</b> Investments — corporate stock (attach schedule) . L-10.b. Stmt		6,037,873.	6,057,935.
		c 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 459,000.			
		Less, accumulated depreciation			-
	١			459,000.	<u>459,000.</u>
	15 16	/			
	'8	see the instructions. Also, see page 1, item I)	0.	6,727,199.	6,747,261.
Ļ	17	Accounts payable and accrued expenses		70,000.	
A	18	Grants payable		<del>-</del>	
B	19	Deferred revenue			
- ¦	20	Loans from officers, directors, trustees, & other disqualified persons		-	
Ī	21	Mortgages and other notes payable (attach schedule)			
T	22	Other liabilities (describe			
Ė				50.000	
	23	Total liabilities (add lines 17 through 22)		70,000.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted		6,657,199.	
ΤŇ	25	Temporarily restricted			
D	26				
A S B S A E L		Foundations that do not follow SFAS 117, check here . And complete lines 27 through 31.			
E L T A S N	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
C O E	29	Retained earnings, accumulated income, endowment, or other funds			
ŔŚ	30	Total net assets or fund balances (see instructions)		6,657,199.	
	31	Total liabilities and net assets/fund balances (see instructions).	0.	6,727,199.	
Par	: 111	Analysis of Changes in Net Assets or Fund Balance	es		
1	Total	het assets or fund balances at beginning of year — Part II, column (a of-year figure reported on prior year's return)	a), line 30 (must agree wi	h • • • • • • • 1	
2	Ente	2	6,656,994.		
3	Other	increases not included in line 2 (itemize) * CAPITAL GAIN DI	STRIBUTIONS	3	205.
		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·		, <del> </del>	6,657,199.
5	Decre	ases not included in line 2 (itemize) ▶ I net assets or fund balances at end of year (line 4 minus line 5) — Pa		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Pa	rt II, column (b), line 30	6	6,657,199.

Pa	(a) List and describe	Losses for Tax on Investme the kind(s) of property sold (e.g., rea e; or common stock, 200 shares MLC	l estate,	(b) How acquired P — Purchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)	
1:		<u> </u>		D - Donation	<del> </del>		
	b				<u> </u>		
_	<u> </u>						
	<u></u>				<del> </del>		
	e		<del></del>		<del></del>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas		(h) Gaın or (e) plus (f) mi		
	<u> </u>					<del></del>	
	·					. 4	
$\overline{}$	1						
_	· · · · · · · · · · · · · · · · · · ·						
	Complete only for assets showing	ng gain in column (h) and owned by the	ne foundation on 12/31/69		M. Coine (Col	umn (h)	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		(I) Gains (Col gain minus column (k an -0-) <b>or</b> Losses (fr	), but not less	
	1						
1							
						<del></del>	
	3		<u> </u>				
	)					***	
2	Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7			205.	
3	Net short-term capital gain or (lo	oss) as defined in sections 1222(5) an		} <del></del>			
	If gain, also enter in Part I, line 8	3, column (c) (see instructions). If (los	s), enter -0-	3			
Pai	<del></del>	r Section 4940(e) for Reduce			<u> </u>	· <del></del>	
		foundations subject to the section 494			·		
Was		on 4942 tax on the distributable amou		riod?	· · · · Tes	No	
	<del></del>	y under section 4940(e). Do not comp	<del></del>	v ontrine	<del></del>		
		each column for each year; see the in	<del></del>	y entries.			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets (colu	(d) Distribution ratio (column (b) divided by column (c))		
	2013						
	2012						
	2011						
	2010					·	
	2009						
2	Total of line 1, column (d)			2			
3	Average distribution ratio for the number of years the foundation is	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			
4	Enter the net value of noncharita	able-use assets for 2014 from Part X,	line 5	4			
5	Multiply line 4 by line 3	5					
6	Enter 1% of net investment incom	me (1% of Part I, line 27b)		6			
7	Add lines 5 and 6			7			
8		n Part XII, line 4					
	If line 8 is equal to or greater tha Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% tax r	ate. See the		

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	s)		
	a 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 instrs)			
1	b Domestic foundations that meet the section 4940(e) requirements in Part V,			69.
	check 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, column (b)	-		
2				
	foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			69.
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			69.
6	Credits/Payments:			
	a 2014 estimated tax pmts and 2013 overpayment credited to 2014 6 a			
	b Exempt foreign organizations – tax withheld at source 6 b			
	c Tax paid with application for extension of time to file (Form 8868) 6 c 0 .			
_	d Backup withholding erroneously withheld			
7				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			69.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
	rt VII-A Statements Regarding Activities			Τ
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
	participate or intervene in any political campaign?	1 a		X
ı	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	4 6	l	١,,
	•	1 b		X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		Į	
	c Did the foundation file Form 1120-POL for this year?	1.0		x
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			┢ᢚ
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			1
€	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers • \$		. <u>-</u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	ı	,,
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		<del>  ^</del> -
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
Ŭ	If 'Yes,' attach the statement required by General Instruction T		-	<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	i		
-	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, column (c), and Part XV	7	X	$\overline{}$
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	$\neg \neg$		
	RI - Rhode Island		į	
b	of 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	8 b	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 names	_		
	and addresses	10		X
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Pa	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 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 person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address · · · · · · · · · · · · · · · · · ·			
14	The books are in care of DONOHUE FIDUCIAL CO Telephone no. (401)  Located at 580-R MAPLE AVENUE BARRINGTON RI ZIP+4 02806	<u> 289</u>	<u>-099</u>	9
45	Located at 580-R MAPLE AVENUE BARRINGTON RI ZIP+4 02806 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		. – – .	
13	and enter the amount of tax-exempt interest received or accrued during the year			∐ ——
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 'Yes,' enter the name of the foreign country			
Pai	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		L	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ĺ		
	(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			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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.)	į		
t	olf 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)?	_ 1 b	_	
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · · · · · · · · · ·			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			,
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20			
t	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 all years listed, answer 'No' and attach statement — see instructions.)	2 b		
c	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	► 20, 20, 20		]	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	o 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		<u>x</u> _
b	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		X
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1	1	P	age 6
	5 b		
•	6 b	_	Х
ŀ	7 b oyee	s,	
E: 0	xpens ther a	e acco llowan	ount, ces
	-	- <del></del>	0.
			<u>.</u>
<b>V</b>	ONE.' (pense ther al	e acco lowan	unt, ces
			_
			<del></del>

Part VII-B   Statements Regarding Activit		n 4/20 May Be Rec	uirea (continuea)	
5 a During the year did the foundation pay or incur a	•			1.,
(1) Carry on propaganda, or otherwise attempt	to influence legislation (s	ection 4945(e))?	· · · · · Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	on drive?			]No
(3) Provide a grant to an individual for travel, st	No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	n a charitable, etc, organ	ization described	· · · · Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	····· Yes 🗓	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)?	transactions fail to quali	fy under the exceptions disaster assistance		5
Organizations relying on a current notice regardi				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibility 'Yes,' attach the statement required by Regula	oility for the grant?		· · · · · Yes	]No
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	ly, to pay premiums	Yes X	No
<b>b</b> Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	on a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870				1
7 a At any time during the tax year, was the foundate b If 'Yes,' did the foundation receive any proceeds	or have any net income	attributable to the transa	ction?	7 b
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Mana	gers, Highly Paid I	∃mployees,
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see Inst	ructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not pald, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BERNARD G. DONOHUE JR 580-R MAPLE AVENUE	TRUSTEE			
BARRINGTON RI 02806	40.00	0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, er	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		·		
			***	
Total number of other employees paid over \$50,000 .				None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Employees,
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
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 beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	···-
2	
3	
4	
	· <b></b>
Dort IV D. Cummons of Drogram Deleted Investments (see instructions)	
Part IX-B 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	>
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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	. 1a	6,032,621.
<b>b</b> Average of monthly cash balances		195,597.
c Fair market value of all other assets (see instructions)	. 1 c	459,000.
d Total (add lines 1a, b, and c)	. 1 d	6,687,218.
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		
3 Subtract line 2 from line 1d	. 3	6,687,218.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	. 4	100,308.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 5	6,586,910.
6 Minimum Investment return. Enter 5% of line 5	. 6	128,129.
Part XI 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.)	g found	ations
1 Mınımum ınvestment return from Part X, line 6	. 1	128,129.
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		69.
3 Distributable amount before adjustments. Subtract line 2c from line 1		128,060.
4 Recoveries of amounts treated as qualifying distributions		
5 Add lines 3 and 4		128,060.
6 Deduction from distributable amount (see instructions)		
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	. 7	128,060.
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		
b Program-related investments — total from Part IX-B	. 1 b	
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	
<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	
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 calculating whether the f qualifies for the section 4940(e) reduction of tax in those years.	oundation	
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## Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
Distributable amount for 2014 from Part XI, line 7				128,060.
2 Undistributed income, if any, as of the end of 2014.				120,000.
a Enter amount for 2013 only				
<b>b</b> Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011				
<b>d</b> From 2012				
e From 2013				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from Part				
XII, line 4: \$				
a 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	0.			
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			<del> </del>
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
Enter the amount of prior years' undistributed		0.		<del> </del>
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				<del></del>
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				128,060.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by			Ì	
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)			<del></del>	
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2010 0 .				
<b>b</b> Excess from 2011 0 .				
<b>c</b> Excess from 2012 0 .				
d Excess from 2013 0 .		j	ļ	
e Excess from 2014 0 .				Form 900 PE (2014)

c Any submission deadlines:

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

BAA

TEEA0310 06/17/14

Form 990-PF (2014)

Part XV | Supplementary Information (continued) 3 Grants and Contributions Pald During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor oundation Recipient Purpose of grant or contribution Amount status of recipient Name and address (home or business) a Paid during the year b Approved for future payment 

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by	r section 512, 513, or 51	4 , ,
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					
b					
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					3,232.
5 Net rental income or (loss) from real estate:					
a Debt-financed property			1		
b Not debt-financed property		<del></del>	1	· · · · · · · · · · · · · · · · · · ·	
6 Net rental income or (loss) from personal property					
7 Other investment income	·		<del>                                     </del>		205.
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events			<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory			<del></del>		
11 Other revenue		,	+		
a			<del>                                     </del>		
b		<del></del>	+		
c			<del>  </del>		1
d			<del>                                     </del>		-
			+ +		<u> </u>
Subtotal. Add columns (b), (d), and (e)			-		3,437.
13 Total Add line 12 columns (b) (d) and (e)				13	3,437.
See worksheet in line 13 instructions to verify calculations					3,437.
· · · · · · · · · · · · · · · · · · ·		<del></del>			
Part XVI-B Relationship of Activities to the	Accomp	ishment of Exem	ipt Purpos	es	
Line No. Explain below how each activity for which inco	me is renorte	ed in column (e) of Par	t XVI-A contri	buted importantly to	the
▼ accomplishment of the foundation's exempt pu	rposes (other	er than by providing fur	nds for such p	urposes). (See instr	uctions.)
4 & 7 GROWTH IN MUTUAL FUNDS ASSIS	יי דאז ייי	ב כטאסזייאסוב ו	DIIDDOCE (	רב ייני	
TRUST BY MAKING ADDITIONAL F			•		
DONATIONS AS REQUIRED IN THE			LOW FOR	FUTURE	<del></del>
DONATIONS AS REQUIRED IN THE	IRUSI	DOCUMEN 1.5			
	•••				
		**			
		-			
		-			
		·, ···-			
				<del></del>	
					-
					<del></del>

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		·					<del></del>		
describe	organization directly o ed in section 501(c) of to political organizatio	the Code (oth	gage in any of the fol er than section 501(	llowing with an c)(3) organizat	y other organizatio ions) or in section !	n 527,		Yes	No
	rs from the reporting f			. •					ĺ
	sh								Х
_	er assets						1 a (2)		_X
	ansactions.								
	es of assets to a nonc								X
	chases of assets from								Х
	ntal of facilities, equipr								Х
	mbursement arrangen								Х
	ins or loan guarantees						<del>- ``</del>		X
	formance of services		-				<del></del>		X
• Snaring	of facilities, equipmer	it, mailing lists	, other assets, or par	a employees.			· · <u>1c</u>		Х
the good	nswer to any of the abo ds, other assets, or se saction or sharing arr	rvices aiven b	v the reportina found	lation. If the for	indation received li	ess than fair market v	rket value of alue in		
(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt	organization	(d) Description	of transfers, transactions,	and sharing arran	gements	<del></del>
	<del> </del>								
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	<del></del>								
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ļ_			******						
						<del></del>	<u> </u>		
	<del></del>						<del> </del>		
describe	undation directly or inc id in section 501(c) of complete the following	the Code (othe	d with, or related to, er than section 501(c	one or more ta c)(3)) or in sect	ix-exempt organization 527?	ations	· · · · · Yes	X	۷o
	) Name of organization		(b) Type of	organization		(c) Description of	relationship		
	<u> </u>		( ) ) )			(-/			
						<del></del>			
							· · · · · · · · · · · · · · · · · · ·		
							•		
Sign Here	enalties of perjury, I declare to and complete Declaration of	hat I have examine preparer (other that	d this return, including acco n taxpayer) is based on all	ompanying schedule information of whice	es and statements, and to n preparer has any knowl	o the best of my knowledge a ledge USTEG	May the IR this retum preparer si (see Instru	with the hown bel	
Signat	ture of officer or trustee		Date	е	Title	· · · · · · · · · · · · · · · · · · ·	(see list)		No.
	Print/Type preparer's name		Preparer's signal	ture	Date /	Check	ıf PTIN		
Paid	JUDITH_HETHE	RMAN	- While the	IL C	- 16/1h.	self-employed	P00428	696	
reparer	Firm's name ► _Jt	udith Het	herman CPA	•	7.7	Firm's EIN ► 26	-3281763		
Jse Only		10_Arnold							
		oventry		R	1 02816-563	36 Phone no. (4	01) 825-7	688	
BAA						<b>,</b>	Form 990		014)
								•	,

#### 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

Employer Identification number

ROBERT D WRAY CHARITABLE TRUST 47-6419741					
Organization type (check one):		-			
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a priv	vate foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private	foundation			
	501(c)(3) taxable private foundation	Touridation			
	50 1(c)(3) taxable private foundation				
Check if your organization is covered by the Gene	ral Rule or a Special Rule				
Note. Only a section 501(c)(7), (8), or (10) organiz	zation 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, o	or 990-PF that received, during the year, contributions totaling \$5	5,000 or more (in money or			
property) from any one contributor. Complete	Parts I and II. See instructions for determining a contributor's tot	al contributions.			
Special Rules					
For an organization described in section 501(c	c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support tes	t of the regulations			
received from any one contributor, during the y	that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 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-E	Z, line 1. Complete Parts I and II.	.,			
Ear an organization described in section 501/a	e)(7), (8), or (10) filing Form 990 or 990-EZ that received from an	w one contributor			
during the year, total contributions of more that	n \$1,000 exclusively for religious, charitable, scientific, literary, of	or educational			
purposes, or for the prevention of cruelty to chi	ildren or animals Complete Parts I, II, and III.				
	(7), (8), or (10) filing Form 990 or 990-EZ that received from an				
•	eligious, charitable, etc., purposes, but no such contributions total otal contributions that were received during the year for an <i>exclu</i>				
	of the parts unless the General Rule applies to this organizatio				
it received nonexclusively religious, charitable,	etc , contributions totaling \$5,000 or more during the year $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	▶ Ş			

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).

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

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

	B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part
Name of org	panization  T D WRAY CHARITABLE TRUST	' '	er identification number 419741
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space		419/41
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 ~.	ROBERT D WRAY TRUST  580-R MAPLE AVENUE  BARRINGTON RI 02806	\$6,264,762.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT D WRAY TRUST  580-R MAPLE AVENUE  BARRINGTON RI 02806	\$4 <u>59,</u> 0 <u>00</u> .	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
-~-		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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

(Complete Part II for noncash contributions.)

Page

1 to

1 of Part II

Name of organization

Employer identification number

ROBERT D WRAY CHARITABLE TRUST

47-6419741

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	
2	REAL ESTATE & LAND LOCATED AT: DAVIS STREET REHOBOTH MA DAVIS & FIRST STREET REHOBOTH MA MUNWHAGUE SWAMP REHOHOTH MA	\$459,000.	12/22/14	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
BAA	Sched	ule <b>B</b> (Form 990, 990-EZ, o	or 990-PF) (2014)	

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
CHARLES SCHWAB	6,037,873.	6,057,935.
Total	6,037,873.	6,057,935.

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	<b>(c)</b> Book Value
56 DAVIS STREET REHOBOTH MA 02769 DAVIS STREET LAND REHOBOTH MA 02769 DAVIS & FIRST STREET LAND REHOBOTH MA 02769 MUNWHAGUE SWAMP LAND REHOBOTH MA 02769	261,600. 187,100. 8,300. 2,000.	0. 0. 0.	261,600. 187,100. 8,300. 2,000.
Total	459,000.	0.	459,000.