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EXTENDED TO AUGUST 17, 2015

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014Open to Public
Inspection**A** For the 2014 calendar year, or tax year beginning and ending**B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

PLYMOUTH ENDOWMENT FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

202 N CLIFTON

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

WICHITA, KS 67208

F Name and address of principal officer GRANT A. STANNARD
SAME AS C ABOVE**D** Employer identification number

48-6124180

E Telephone number

(316) 744-0433

G Gross receipts \$ 398,682.**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ N/A**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation 1966 **M** State of legal domicile: KS**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	TO SUPPORT LOCAL CHARITIES AND PROVIDE SCHOLARSHIPS TO STUDENTS	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	27
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	1,000.	10,500.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	216,275.	216,956.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	34.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	217,275.	227,490.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	113,605.	126,048.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17,888.	41,566.
	18	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	131,493.	167,614.
	19	Revenue less expenses - Subtract line 18 from line 12	85,782.	59,876.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	2,067,752.	2,127,778.
	22	Net assets or fund balances - Subtract line 21 from line 20	2,850.	3,000.
		2,064,902.	2,124,778.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	GRANT A. STANNARD, PRESIDENT		Date	06-23-2015
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	RICK E. GOLUBSKI	RICK E. GOLUBSKI	JUN 23 2015	☐	P00281940
	Firm's name ▶ ALLEN, GIBBS & HOULIK, L.C.	Firm's EIN ▶	48-1032601		
	Firm's address ▶ 301 N. MAIN, SUITE 1700 WICHITA, KS 67202-4868	Phone no.	316-267-7231		

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

432001 11-07-14

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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SCANNED JUL 21 2015

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission.**TO SUPPORT LOCAL CHARITIES AND PROVIDE SCHOLARSHIPS TO STUDENTS****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code _____) (Expenses \$ 126,048. including grants of \$ 126,048.) (Revenue \$ _____)

LOCAL CONTRIBUTIONS	\$ <u>112,048</u>
SCHOLARSHIPS	\$ <u>14,000</u>

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4c** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4d** Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **126,048.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O.	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: <u>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</u>			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	11	
b Enter the number of voting members included in line 1a, above, who are independent	11	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		X
13 Did the organization have a written whistleblower policy?		X
14 Did the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official		X
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **KS**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records **▶**
GRANT STANNARD - (316) 744-0433
6015 N. BROADWAY, WICHITA, KS 67219

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees; highest compensated employees, and former such persons

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
-----------------	--

[illegible]

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	0
---	---	---

		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0
---	--	---

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,500.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		10,500.			
	Program Service Revenue				Business Code		
2 a							
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			74,479.		74,479.
	4	Income from investment of tax-exempt bond proceeds			2,804.		2,804.
	5	Royalties					
	6 a	Gross rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		139,673.		139,673.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
	Miscellaneous Revenue			Business Code			
	11 a	CASH IN LIEU OF INVEST	900001	34.			34.
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		34.				
12	Total revenue. See instructions.			227,490.	0.	0.	216,990.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	112,048.	112,048.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	14,000.	14,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees).				
a Management				
b Legal				
c Accounting	3,000.		3,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	29,664.		29,664.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	123.		123.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PURCHASE GRAPEFRUIT	7,550.		7,550.	
b FOREIGN TAX WITHHELD	1,189.		1,189.	
c SECRETARY OF STATE REPO	40.		40.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	167,614.	126,048.	41,566.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	2,067,752.	12	2,127,778.
	13 Investments - program related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,067,752.	16	2,127,778.	
Liabilities	17 Accounts payable and accrued expenses	2,850.	17	3,000.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,850.	26	3,000.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets			27	
28 Temporarily restricted net assets			28	
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117 (ASC 958), check here ☒ and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds		0.	30	0.
31 Paid-in or capital surplus, or land, building, or equipment fund		0.	31	0.
32 Retained earnings, endowment, accumulated income, or other funds		2,064,902.	32	2,124,778.
33 Total net assets or fund balances		2,064,902.	33	2,124,778.
34 Total liabilities and net assets/fund balances		2,067,752.	34	2,127,778.

Form 990 (2014)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	227,490.
2	Total expenses (must equal Part IX, column (A), line 25)	2	167,614.
3	Revenue less expenses Subtract line 2 from line 1	3	59,876.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,064,902.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,124,778.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization **PLYMOUTH ENDOWMENT FOUNDATION** Employer identification number **48-6124180**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☒ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

1

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
PLYMOUTH CONGREGATIONAL CHUR	5		X		102,183.	
Total					102,183.	0.

Part II. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

Schedule A (Form 990 or 990-EZ) 2014

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1	X	
2		X
3a		X
3b		
3c		
4a		X
4b		
4c		
5a		X
5b		
5c		
6		X
7		X
8		X
9a		X
9b		X
9c		X
10a		X
10b		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		X
b A family member of a person described in (a) above?		X
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		X

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	X	

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12

Also complete this part for any additional information. (See instructions)

(This area contains horizontal lines for supplemental information.)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

PLYMOUTH ENDOWMENT FOUNDATION

Employer identification number

48-6124180

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,031,410.	1,979,120.	2,113,599.	1,810,261.	1,731,241.
b Contributions	10,500.	1,000.	3,811.	336,523.	25,000.
c Net investment earnings, gains, and losses	213,767.	168,307.	5,485.	77,173.	139,902.
d Grants or scholarships	126,048.	113,605.	117,962.	80,688.	64,055.
e Other expenditures for facilities and programs					
f Administrative expenses	41,566.	3,412.	25,813.	29,670.	21,827.
g End of year balance	2,088,063.	2,031,410.	1,979,120.	2,113,599.	1,810,261.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ► 100.00 %
 b Permanent endowment ► %
 c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by.

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 0.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) SECURITIES	2,127,778.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,127,778.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Schedule D (Form 990) 2014

Part XI	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
----------------	--

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
-----------------	--

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

PLYMOUTH ENDOWMENT FOUNDATION

Employer identification number

48-6124180

FORM 990, PART VI, SECTION B, LINE 11:

THE PRESIDENT WILL REVIEW THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE UPON REQUEST.

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Dividends from related organization(s)**g** Sale of assets to related organization(s)**h** Purchase of assets from related organization(s)**i** Exchange of assets with related organization(s)**j** Lease of facilities, equipment, or other assets to related organization(s)**k** Lease of facilities, equipment, or other assets from related organization(s)**l** Performance of services or membership or fundraising solicitations for related organization(s)**m** Performance of services or membership or fundraising solicitations by related organization(s)**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**o** Sharing of paid employees with related organization(s)**p** Reimbursement paid to related organization(s) for expenses**q** Reimbursement paid by related organization(s) for expenses**r** Other transfer of cash or property to related organization(s)**s** Other transfer of cash or property from related organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Yes No	
					1a	1b
(1) PLYMOUTH CONGREGATIONAL CHURCH		B	88,158.CASH			X
(2)						
(3)						
(4)						
(5)						
(6)						

Part VII	Supplemental Information
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Provide additional information for responses to questions on Schedule R (see instructions)

Provide additional information or responses to questions on Schedule A (see instructions).

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number
26-4310632Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

OMB NO. 1545-0715

This information is NOT being furnished to the Internal Revenue Service. It is provided to you for informational purposes only.

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Short Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part 1 with box A checked.)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CUSIP: 010198208 Symbol: ELUXY								
AB ELECTROLOX SPON ADR	3.000	05/20/13	04/30/14	\$166 19	\$168 20	\$0.00	(\$2 01)	\$0 00
	10.000	05/20/13	05/14/14	\$526 44	\$560 67	\$0.00	(\$34 23)	\$0 00
	11.000	06/18/13	05/14/14	\$579 08	\$604 36	\$0.00	(\$25 28)	\$0 00
	4.000	07/15/13	05/14/14	\$210.57	\$209.95	\$0.00	\$0.62	\$0.00
Security Subtotal	28.000			\$1,482.28	\$1,543.18	\$0.00	(\$60.90)	\$0.00
CUSIP: 011659109 Symbol: ALK								
ALASKA AIR GROUP INCORPORATED	3.000	08/13/13	04/30/14	\$281 18	\$179 23	\$0.00	\$101 95	\$0 00
CUSIP: 053015103 Symbol: ADP								
AUTOMATIC DATA PROCESSING INC	3.000	08/26/13	04/30/14	\$233 66	\$216 72	\$0.00	\$16 94	\$0 00
CUSIP: 05964H105 Symbol: SAN								
BANCO SANTANDER S A	0.092	08/08/13	02/12/14	\$0 82	\$0 67	\$0.00	\$0 15	\$0 00
	15.000	08/08/13	04/30/14	\$149 09	\$108 58	\$0.00	\$40 51	\$0 00
	0.629	10/20/14	11/13/14	\$5.33	\$5.50	\$0.00	(\$0.17)	\$0.00
Security Subtotal	15.721			\$155.24	\$114.75	\$0.00	\$40.49	\$0.00
CUSIP: 05565A202 Symbol: BNPQY								
BNP PARIBAS SP ADR REPSTG	4.000	07/19/13	04/30/14	\$150 07	\$118 94	\$0.00	\$31 13	\$0 00
	22.000	07/19/13	05/09/14	\$803 93	\$654 14	\$0.00	\$149 79	\$0 00
	4.000	07/24/13	05/09/14	\$146 17	\$125 57	\$0.00	\$20 60	\$0 00

CONTINUED ON NEXT PAGE

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number: 26-4310632Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

This information is NOT being furnished to the Internal Revenue Service. It is provided to you for informational purposes only.

1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Short Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part I with box A checked)
(Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CUSIP: 05565A202 Symbol: BNPQY								
BNP PARIBAS SP ADR REPSTG(Cont.)	12.000	07/26/13	05/09/14	\$438.51	\$387.05	\$0.00	\$51.46	\$0.00
Security Subtotal	42.000			\$1,538.68	\$1,285.70	\$0.00	\$252.98	\$0.00
CUSIP: 055622104 Symbol: BP								
BP PLC ADS	1.000	02/28/14	04/30/14	\$50.61	\$50.39	\$0.00	\$0.22	\$0.00
CUSIP: 12508E101 Symbol: CDK								
CDK GLOBAL INC COM	0.334	02/27/14	09/30/14	\$9.61	\$10.97	\$0.00	(\$1.36)	\$0.00
	5.000	02/27/14	11/06/14	\$180.11	\$155.66	\$0.00	\$24.45	\$0.00
	1.000	02/28/14	11/06/14	\$36.02	\$39.17	\$0.00	(\$3.15)	\$0.00
Security Subtotal	6.334			\$225.74	\$205.80	\$0.00	\$19.94	\$0.00
CUSIP: 23636T100 Symbol: DANQY								
DANONE SPONSORED ADR	1.000	04/08/14	04/30/14	\$14.79	\$14.60	\$0.00	\$0.19	\$0.00
CUSIP: 25490E103 Symbol: DIISY								
DIRECT LINE INS GROUP PLC ADR	66.000	12/03/13	05/14/14	\$1,098.73	\$1,005.64	\$0.00	\$93.09	\$0.00
	4.000	04/30/14	05/14/14	\$66.59	\$68.80	\$0.00	(\$2.21)	\$0.00
Security Subtotal	70.000			\$1,165.32	\$1,074.44	\$0.00	\$90.88	\$0.00

CONTINUED ON NEXT PAGE

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorNew York, NY 10004
Identification Number: 26-4310632THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Short Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section These transactions should be reported on Form 8949 Part 1 with box A checked.)
(Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
EBAY INC		CUSIP: 278642103 Symbol: EBAY						
	5 000	06/28/13	05/08/14	\$254 40	\$260.77	\$0.00	(\$6.37)	\$0.00
	38.000	06/28/13	05/08/14	\$1,933.43	\$1,981.84	\$0.00	(\$48.41)	\$0.00
Security Subtotal	43.000			\$2,187.83	\$2,242.61	\$0.00	(\$54.78)	\$0.00
FACEBOOK INC CL-A		CUSIP: 30303M102 Symbol: FB						
	70 000	07/30/13	02/25/14	\$4,873 15	\$2,557 05	\$0.00	\$2,316.10	\$0.00
FOREST STK 30122		CUSIP: 34STK8106 Symbol:						
	1 000	04/30/14	07/01/14	\$25 67	\$17 77	\$0.00	\$7 90	\$0.00
GENERAL ELECTRIC CO		CUSIP: 369604103 Symbol: GE						
	11 000	11/13/13	04/30/14	\$295 01	\$297.86	\$0.00	(\$2.85)	\$0.00
INCITEC PIVOT LTD UNSPON ADR		CUSIP: 45326Y107 Symbol:						
	13.000	11/13/13	04/30/14	\$33.40	\$33.71	\$0.00	(\$0.31)	\$0.00
ITAU UNIBANCO MULTIPLE ADR		CUSIP: 465562106 Symbol: ITUB						
	0 800	06/12/14	06/12/14	\$12 25	\$12.16	\$0.00	\$0.09	\$0.00
JTEKT CORP UNSPONSORED ADR		CUSIP: 48124H102 Symbol: JTEKY						
	18 000	04/26/13	04/08/14	\$815 90	\$577 94	\$0.00	\$237 96	\$0.00
	5.000	06/18/13	04/08/14	\$226 64	\$174 43	\$0.00	\$52 21	\$0.00
	7.000	07/02/13	04/08/14	\$317.30	\$241.70	\$0.00	\$75.60	\$0.00
Security Subtotal	30.000			\$1,359.84	\$994.07	\$0.00	\$365.77	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

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Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor

THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

New York, NY 10004
Identification Number: 26-4310632

Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Short Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section These transactions should be reported on Form 8949 Part I with box A checked)
(Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
KINGFISHER PLC SPONS ADR NEW	12 000	CUSIP: 495724403	04/30/14	Symbol: KGFHY	\$170 03	\$135 83	\$0 00	\$34 20
LIXIL GROUP CORP ADR	3 000	CUSIP: 53931R103	04/30/14	Symbol: JSGRY	\$158 03	\$139 89	\$0 00	\$18 14
MARATHON OIL CO	4 000	CUSIP: 565849106	04/30/14	Symbol: MRO	\$144 75	\$136 67	\$0 00	\$8 08
MASTERCARD INC CL A	3 000	CUSIP: 57636Q104	04/30/14	Symbol: MA	\$219 20	\$186 67	\$0 00	\$32 53
MATTEL INC	1 000	CUSIP: 577081102	09/15/14	Symbol: MAT	\$34 35	\$38 37	\$0 00	(\$4 02)
ROYAL DUTCH SHELL PLC CL B	2 000	CUSIP: 780259107	04/30/14	Symbol: RDS'B	\$169 05	\$135 60	\$0 00	\$33 45
STANLEY BLACK & DECKER INC	2 000	CUSIP: 854502101	04/30/14	Symbol: SWK	\$171 55	\$165 15	\$0 00	\$6 40
TAKATA CORP TOKYO ADR	1 000	CUSIP: 87405B103	04/30/14	Symbol: TKTDY	\$46 85	\$44 65	\$0 00	\$2 20
TELEPERFORMANCE SA UNSP ADR	1 000	CUSIP: 87946F100	04/30/14	Symbol: TLPFY	\$28 55	\$25 52	\$0 00	\$3 03

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement Tax Year 2014

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Short Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part I with box A checked) (Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
TJX COS INC NEW	4 000	CUSIP: 872540109	12/02/13	04/30/14	Symbol: TJX			
				\$232.35	\$252.20	\$0.00	(\$19.85)	\$0.00
TOTAL S A SPON ADR	1 000	CUSIP: 89151E109	07/30/13	04/30/14	Symbol: TOT			
				\$70.46	\$53.27	\$0.00	\$17.19	\$0.00
VERIZON COMMUNICATIONS	0 080	CUSIP: 92343V104	02/21/14	02/21/14	Symbol: VZ			
				\$3.79	\$3.85	\$0.00	(\$0.06)	\$0.00
	27 000		02/21/14	03/04/14		\$0.00	(\$3.91)	\$0.00
	15 000		02/21/14	03/04/14		\$0.00	(\$0.11)	\$0.00
	42 080			\$2,020.61	\$2,024.69	\$0.00	(\$4.08)	\$0.00
Security Subtotal				\$17,400.43	\$14,178.55	\$0.00	\$3,221.88	\$0.00
Total Short Term Covered Securities								

Corporate Tax Statement Tax Year 2014

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

OMB NO. 1545-0715

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Short Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section. These transactions should be reported on Form 8949 Part I with box B checked)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
BANCO SANTANDER S.A.	0.000	05/12/14	05/12/14	\$28.02	\$0.00	\$0.00	\$28.02	\$0.00
BLACKHAWK NETWORK HLDGS INC	0.079	04/14/14	04/14/14	\$1.87	\$1.93	\$0.00	(\$0.06)	\$0.00
	6.000	04/14/14	04/23/14	\$139.21	\$146.74	\$0.00	(\$7.53)	\$0.00
Security Subtotal	6.079			\$141.08	\$148.67	\$0.00	(\$7.59)	\$0.00
Total Short Term Noncovered Securities				\$169.10	\$148.67	\$0.00	\$20.43	\$0.00
Total Short Term Covered and Noncovered Securities				\$17,569.53	\$14,327.22	\$0.00	\$3,242.31	\$0.00

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
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WICHITA KS 67219-2013New York, NY 10004
Identification Number: 26-4310632Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

OMB NO. 1545-0715

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Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box D checked.)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ACTAVIS PLC	CUSIP: G0083B108	Symbol: ACT						
	0.281	02/01/11	07/01/14	\$62.35	\$27.78	\$0.00	\$34.57	\$0.00
AMADEUS IT HLDG SA UNSPON ADR	CUSIP: 02263T104	Symbol: AMADY						
	6.000	05/10/12	04/30/14	\$248.51	\$120.21	\$0.00	\$128.30	\$0.00
AVIVA PLC ADR	CUSIP: 05382A104	Symbol: AV						
	25.000	09/07/12	04/30/14	\$446.24	\$280.72	\$0.00	\$165.52	\$0.00
BAKER HUGHES INC	CUSIP: 057224107	Symbol: BHI						
	8.000	12/28/12	04/30/14	\$559.82	\$319.94	\$0.00	\$239.88	\$0.00
	1.000	12/28/12	05/20/14	\$69.39	\$39.99	\$0.00	\$29.40	\$0.00
	7.000	12/28/12	05/21/14	\$486.48	\$279.94	\$0.00	\$206.54	\$0.00
	10.000	12/28/12	05/23/14	\$700.47	\$399.92	\$0.00	\$300.55	\$0.00
Security Subtotal	26.000			\$1,816.16	\$1,039.79	\$0.00	\$776.37	\$0.00
CALIFORNIA RES CORP COM	CUSIP: 13057Q107	Symbol: CRC						
	0.800	12/19/12	11/28/14	\$5.44	\$5.36	\$0.00	\$0.08	\$0.00
CDK GLOBAL INC COM	CUSIP: 12508E101	Symbol: CDK						
	3.000	08/26/13	11/06/14	\$108.07	\$82.18	\$0.00	\$25.89	\$0.00
	2.000	08/27/13	11/06/14	\$72.04	\$45.00	\$0.00	\$27.04	\$0.00
	3.000	08/28/13	11/06/14	\$108.07	\$80.94	\$0.00	\$27.13	\$0.00
	2.000	08/29/13	11/06/14	\$72.04	\$45.11	\$0.00	\$26.93	\$0.00
	4.000	08/29/13	11/06/14	\$144.09	\$99.25	\$0.00	\$44.84	\$0.00
	3.000	08/30/13	11/06/14	\$108.07	\$89.81	\$0.00	\$18.26	\$0.00
Security Subtotal	17.000			\$612.38	\$442.29	\$0.00	\$170.09	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number: 26-4310632Taxpayer ID Number: XX-XXX4180
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box D checked.) (Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CITIGROUP INC NEW	5 000	CUSIP: 172967424 03/13/13	Symbol: C 04/30/14	\$239 74	\$234 22	\$0 00	\$5 52	\$0 00
CORBION NV ADR	3 000	CUSIP: 218333102 12/14/12	Symbol: CSNVY 04/30/14	\$68 24	\$64 40	\$0 00	\$3 84	\$0 00
CREDIT SUISSE GROUP	8 000	CUSIP: 225401108 11/19/12	Symbol: CS 04/30/14	\$253 11	\$184 30	\$0 00	\$68 81	\$0 00
DEUTSCHE BOERSE AG UNSPON ADR	20 000	CUSIP: 251542106 01/23/13	Symbol: DBOEY 04/30/14	\$145 59	\$127 18	\$0 00	\$18 41	\$0 00
	132 000	01/23/13	09/25/14	\$904 34	\$839 39	\$0 00	\$64 95	\$0 00
Security Subtotal	152 000			\$1,049.93	\$966.57	\$0 00	\$83.36	\$0 00
DOLBY CLA A COM STK	18 000	CUSIP: 25659T107 08/07/12	Symbol: DLB 03/21/14	\$800 37	\$608 24	\$0 00	\$192.13	\$0 00
DU PONT EI DE NEMOURS & CO	4 000	CUSIP: 263534109 12/28/12	Symbol: DD 04/30/14	\$269 15	\$179 98	\$0 00	\$89 17	\$0 00
EBAY INC	5 000	CUSIP: 278642103 05/01/13	Symbol: EBAY 05/08/14	\$254 40	\$261 38	\$0 00	(\$6 98)	\$0 00
	42 000	05/01/13	05/08/14	\$2,136.96	\$2,195.55	\$0 00	(\$58.59)	\$0 00
Security Subtotal	47 000			\$2,391.36	\$2,456.93	\$0 00	(\$65.57)	\$0 00

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Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor
New York, NY 10004
Identification Number: 26-4310632

Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box D checked)
(Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ESPRIT HLDGS LTD SPONSORED ADR CUSIP: 29666V204 Symbol: ESPGY								
	10 000	06/25/12	05/19/14	\$28 52	\$25.20	\$0 00	\$3 32	\$0 00
	106.000	10/11/12	05/19/14	\$302.31	\$350.74	\$0 00	(\$48.43)	\$0.00
Security Subtotal	116.000			\$330.83	\$375.94	\$0 00	(\$45.11)	\$0.00
FASTENAL CO CUSIP: 311900104 Symbol: FAST								
	3 000	02/15/13	04/30/14	\$149 60	\$158.75	\$0 00	(\$9 15)	\$0 00
GARTNER INC CUSIP: 366651107 Symbol: IT								
	2 000	01/24/13	04/30/14	\$136.97	\$100 20	\$0 00	\$36 77	\$0 00
GTECH S P A SPONSORED ADR CUSIP: 40053Q104 Symbol: GTKYY								
	18 000	06/21/13	08/15/14	\$420 47	\$473.56	\$0 00	(\$53 09)	\$0 00
	20.000	07/16/13	08/15/14	\$467.20	\$525.64	\$0 00	(\$58.44)	\$0.00
Security Subtotal	38 000			\$887.67	\$999.20	\$0 00	(\$111 53)	\$0.00
HESS CORPORATION CUSIP: 42809H107 Symbol: HES								
	1 000	06/25/12	07/15/14	\$98 02	\$39 84	\$0 00	\$58 18	\$0 00
HONDA MOTOR COMPANY LTD ADR CUSIP: 438128308 Symbol: HMC								
	3 000	11/19/12	04/30/14	\$99 77	\$96 49	\$0 00	\$3 28	\$0 00
	17 000	11/19/12	06/04/14	\$587.44	\$546 77	\$0 00	\$40 67	\$0 00
	13 000	12/12/12	06/04/14	\$449 22	\$436 79	\$0 00	\$12 43	\$0 00
	9.000	02/07/13	06/04/14	\$310.99	\$342.87	\$0 00	(\$31.88)	\$0.00
Security Subtotal	42.000			\$1,447.42	\$1,422.92	\$0 00	\$24.50	\$0.00

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Morgan Stanley

Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box D checked) (Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
JOY GLOBAL INC		CUSIP: 481165108	Symbol: JOY					
	1 000	09/27/12	04/30/14	\$60.44	\$56.99	\$0.00	\$3.45	\$0.00
KINGFISHER PLC SPONS ADR NEW		CUSIP: 495724403	Symbol: KGFHY					
	74 000	07/08/13	09/16/14	\$754.51	\$837.64	\$0.00	(\$83.13)	\$0.00
LG DISPLAY CO LTD ADR		CUSIP: 50186V102	Symbol: LPL					
	15 000	09/14/12	04/30/14	\$199.19	\$195.24	\$0.00	\$3.95	\$0.00
LLOYDS BANKING GROUP PLC		CUSIP: 539439109	Symbol: LYG					
	8 000	10/16/12	04/30/14	\$41.19	\$21.76	\$0.00	\$19.43	\$0.00
MARINE HARVEST ASA SPD ADR		CUSIP: 56824R205	Symbol: MHG					
	14 000	05/10/12	04/30/14	\$174.01	\$78.56	\$0.00	\$95.45	\$0.00
NIDEC CORP		CUSIP: 654090109	Symbol: NJ					
	16 000	03/20/13	04/30/14	\$225.59	\$118.15	\$0.00	\$107.44	\$0.00
NIKE INC B		CUSIP: 654106103	Symbol: NKE					
	4 000	06/05/12	04/30/14	\$291.83	\$210.07	\$0.00	\$81.76	\$0.00
	4 000	08/13/12	04/30/14	\$291.83	\$189.99	\$0.00	\$101.84	\$0.00
Security Subtotal	8 000			\$583.66	\$400.06	\$0.00	\$183.60	\$0.00
NINTENDO CO LTD ADR NEW		CUSIP: 654445303	Symbol: NTDGY					
	6 000	06/25/12	05/09/14	\$78.99	\$85.92	\$0.00	(\$6.93)	\$0.00
	5 000	11/19/12	05/09/14	\$65.83	\$82.76	\$0.00	(\$16.93)	\$0.00
Security Subtotal	11 000			\$144.82	\$168.68	\$0.00	(\$23.86)	\$0.00

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box D checked.) (Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
OCCIDENTAL PETROLEUM CORP DE	3 000	CUSIP: 674599105	Symbol: OXY 12/14/12 04/30/14	\$286 88	\$228 29	\$0 00	\$58 59	\$0 00
OTSUKA HOLDINGS CO LTD UNS ADR	8 000	CUSIP: 689164101	Symbol: OTSKY 08/02/12 04/30/14	\$115.43	\$123 05	\$0 00	(\$7 62)	\$0 00
RAYTHEON CO (NEW)	15 000	CUSIP: 755111507	Symbol: RTN 03/06/13 04/30/14	\$1,431 26	\$828 47	\$0 00	\$602 79	\$0 00
SAFEWAY INC COM NEW	21,000	CUSIP: 786514208	Symbol: 01/15/13 02/18/14	\$716 08	\$370 61	\$0 00	\$345 47	\$0 00
	1 000		01/15/13 04/30/14	\$34 06	\$17 65	\$0 00	\$16 41	\$0 00
	16 000		01/15/13 08/19/14	\$554.38	\$282 37	\$0 00	\$272 01	\$0 00
	12 000		01/15/13 08/21/14	\$415.79	\$211 78	\$0 00	\$204 01	\$0 00
	8,000		01/15/13 08/26/14	\$277.19	\$141.18	\$0 00	\$136.01	\$0 00
Security Subtotal	58,000			\$1,997.50	\$1,023.59	\$0 00	\$973.91	\$0 00
SUMITOMO MITSUI FINL GROUP INC	3 000	CUSIP: 86562M209	Symbol: SMFG 04/25/13 04/30/14	\$23 81	\$28 17	\$0 00	(\$4.36)	\$0 00
TAKATA CORP TOKYO ADR	10,000	CUSIP: 87405B103	Symbol: TKTDY 07/11/13 07/30/14	\$398 68	\$446.52	\$0 00	(\$47 84)	\$0 00
TERADYNE INC	1 000	CUSIP: 880770102	Symbol: TER 11/02/12 04/30/14	\$17.61	\$15 30	\$0 00	\$2 31	\$0 00

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Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number 26-4310632Taxpayer ID Number XX-XXX4180
Account Number 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Covered Securities (Consider Box 3 (Basis Reported to IRS) as being checked for this section These transactions should be reported on Form 8949 Part II with box D checked) (Continued)

DESCRIPTION (Box 1a)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
TEVA PHARMACEUTICALS ADR CUSIP: 881624209 Symbol: TEVA								
	2,000	07/17/12	04/30/14	\$97.63	\$83.46	\$0.00	\$14.17	\$0.00
	2,000	07/17/12	04/30/14	\$97.64	\$83.46	\$0.00	\$14.18	\$0.00
Security Subtotal	4,000			\$195.27	\$166.92	\$0.00	\$28.35	\$0.00
VEECO INSTRUMENTS INC DEL CUSIP: 922417100 Symbol: VECO								
	12,000	11/02/12	04/30/14	\$441.23	\$371.88	\$0.00	\$69.35	\$0.00
	6,000	11/13/12	04/30/14	\$220.61	\$180.00	\$0.00	\$40.61	\$0.00
Security Subtotal	18,000			\$661.84	\$551.88	\$0.00	\$109.96	\$0.00
VISA INC CL A CUSIP: 92826C839 Symbol: V								
	3,000	02/07/13	04/30/14	\$606.52	\$471.84	\$0.00	\$134.68	\$0.00
VOESTALPINE AG UNSPONSORED ADR CUSIP: 928578103 Symbol: VLPNY								
	15,000	12/21/12	04/30/14	\$135.59	\$107.93	\$0.00	\$27.66	\$0.00
	89,000	12/21/12	09/16/14	\$759.50	\$640.38	\$0.00	\$119.12	\$0.00
Security Subtotal	104,000			\$895.09	\$748.31	\$0.00	\$146.78	\$0.00
W W GRAINGER INC CUSIP: 384802104 Symbol: GWW								
	1,000	10/16/12	04/30/14	\$253.32	\$208.41	\$0.00	\$44.91	\$0.00
WOLTERS KLUWER NV SPON ADR CUSIP: 977874205 Symbol: WTKWY								
	3,000	03/12/13	04/30/14	\$83.45	\$63.42	\$0.00	\$20.03	\$0.00
	21,000	03/12/13	07/30/14	\$580.46	\$443.94	\$0.00	\$136.52	\$0.00
Security Subtotal	24,000			\$663.91	\$507.36	\$0.00	\$156.55	\$0.00
Total Long Term Covered Securities				\$21,044.02	\$16,932.83	\$0.00	\$4,111.19	\$0.00

Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor
New York, NY 10004
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THE PLYMOUTH ENDOWMENT
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6015 N BROADWAY
WICHITA KS 67219-2013

Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

OMB NO. 1545-0715

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Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ABBOTT LABORATORIES	21 000	002824100	Symbol (Box 1d): ABT 11/16/11 04/30/14	\$814.15	\$544.96	\$0.00	\$269.19	\$0.00
ACCENTURE PLC IRELAND CL A	8 000	G1151C101	Symbol (Box 1d): ACN 02/01/11 04/30/14	\$640.30	\$418.80	\$0.00	\$221.50	\$0.00
ADECCO SA UNSPON ADR	8 000	006754204	Symbol (Box 1d): AHEXY 02/01/12 04/30/14	\$333.59	\$204.48	\$0.00	\$129.11	\$0.00
	5 000	02/01/12	09/11/14	\$182.04	\$127.80	\$0.00	\$54.24	\$0.00
	5 000	02/01/12	09/12/14	\$182.94	\$127.80	\$0.00	\$55.14	\$0.00
Security Subtotal	18 000			\$698.57	\$460.08	\$0.00	\$238.49	\$0.00
AKZO NOBEL NV ADR	5 000	010199305	Symbol (Box 1d): AKZOY 02/22/10 04/30/14	\$127.85	\$89.45	\$0.00	\$38.40	\$0.00
	9 000	03/09/10	04/30/14	\$230.12	\$166.50	\$0.00	\$63.62	\$0.00
Security Subtotal	14 000			\$357.97	\$255.95	\$0.00	\$102.02	\$0.00
ALLERGAN INC	7 000	018490102	Symbol (Box 1d): AGN 02/01/11 04/30/14	\$1.160.22	\$498.96	\$0.00	\$661.26	\$0.00
	41 000	02/01/11	12/02/14	\$8,640.67	\$2,922.46	\$0.00	\$5,718.21	\$0.00
Security Subtotal	48 000			\$9,800.89	\$3,421.42	\$0.00	\$6,379.47	\$0.00
ALLIED WORLD ASSUR CO HLDG LTD	6 000	H01531104	Symbol (Box 1d): AWH 04/10/07 04/30/14	\$643.19	\$256.84	\$0.00	\$386.35	\$0.00
	6 000	04/20/09	04/30/14	\$643.18	\$227.00	\$0.00	\$416.18	\$0.00
Security Subtotal	12 000			\$1,286.37	\$483.84	\$0.00	\$802.53	\$0.00
AMC NETWORKS INC CL A	12 000	00164V103	Symbol (Box 1d): AMCX 12/14/04 04/30/14	\$787.06	\$131.29	\$0.00	\$655.77	\$0.00

IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

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Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza

8th Floor

New York, NY 10004

Identification Number 26-4310632

Taxpayer ID Number: XX-XXX4180

Account Number: 185 221597 302

Customer Service: 866-324-6088

THE PLYMOUTH ENDOWMENT

ATTN: GRANT STANNARD

6015 N BROADWAY

WICHITA KS 67219-2013

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ANADARKO PETE								
		CUSIP: 032511107	Symbol (Box 1d): APC					
	3 000	06/15/06	04/30/14	\$296.33	\$143.20	\$0.00	\$153.13	\$0.00
	4 000	12/28/06	04/30/14	\$395.11	\$175.71	\$0.00	\$219.40	\$0.00
Security Subtotal	7 000			\$691.44	\$318.91	\$0.00	\$372.53	\$0.00
APPLE INC								
		CUSIP: 037833100	Symbol (Box 1d): AAPL					
	1 000	02/01/11	04/30/14	\$592.63	\$345.47	\$0.00	\$247.16	\$0.00
	1 000	02/01/11	04/30/14	\$592.63	\$345.47	\$0.00	\$247.16	\$0.00
	5 000	02/01/11	09/05/14	\$494.25	\$246.77	\$0.00	\$247.48	\$0.00
Security Subtotal	7 000			\$1,679.51	\$937.71	\$0.00	\$741.80	\$0.00
APPLIED MATERIALS INC								
		CUSIP: 038222105	Symbol (Box 1d): AMAT					
	32 000	03/24/05	03/21/14	\$647.50	\$531.43	\$0.00	\$116.07	\$0.00
	132 000	04/29/08	03/21/14	\$2,670.96	\$2,511.37	\$0.00	\$159.59	\$0.00
Security Subtotal	164 000			\$3,318.46	\$3,042.80	\$0.00	\$275.66	\$0.00
ARYZTA AG ZUERICH								
		CUSIP: 04338X102	Symbol (Box 1d): ARZTY					
	4 000	07/01/11	04/30/14	\$184.31	\$108.12	\$0.00	\$76.19	\$0.00
	3 000	07/01/11	09/11/14	\$129.92	\$81.09	\$0.00	\$48.83	\$0.00
	2 000	08/12/11	09/11/14	\$86.62	\$46.84	\$0.00	\$39.78	\$0.00
Security Subtotal	9 000			\$400.85	\$236.05	\$0.00	\$164.80	\$0.00
AT&T INC								
		CUSIP: 00206R102	Symbol (Box 1d): T					
	1 000	06/15/09	04/30/14	\$35.69	\$24.44	\$0.00	\$11.25	\$0.00
AUTODESK INC DELAWARE								
		CUSIP: 052769106	Symbol (Box 1d): ADSK					
	26 000	01/24/05	04/30/14	\$1,240.17	\$721.56	\$0.00	\$518.61	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorNew York, NY 10004
Identification NumberTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

26-4310632

Taxpayer ID Number: XX-XXX4180

Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
AXA ADS	8 000	05/28/09	04/30/14	Symbol (Box 1d): AXAHY \$200.31	\$201.20	\$0.00	(\$0.89)	\$0.00
BARCLAYS PLC ADR	19,000	06/28/09	04/30/14	Symbol (Box 1d): BCS \$324.51	\$366.07	\$0.00	(\$41.56)	\$0.00
	28,000	02/01/11	04/30/14	\$478.23	\$500.70	\$0.00	(\$22.47)	\$0.00
	7,000	06/02/11	04/30/14	\$119.56	\$113.68	\$0.00	\$5.88	\$0.00
	2,000	11/09/11	04/30/14	\$34.15	\$19.96	\$0.00	\$14.19	\$0.00
Security Subtotal	56,000			\$956.45	\$1,000.41	\$0.00	(\$43.96)	\$0.00
BAYER AG SPON ADR	2 000	05/20/11	04/30/14	Symbol (Box 1d): BAYRY \$276.79	\$163.04	\$0.00	\$113.75	\$0.00
BIOGEN IDEC INC	11 000	03/22/05	03/21/14	Symbol (Box 1d): BIIB \$3,548.74	\$421.02	\$0.00	\$3,127.72	\$0.00
BLACKROCK INC	4 000	09/24/10	04/30/14	Symbol (Box 1d): BLK \$1,203.01	\$665.10	\$0.00	\$537.91	\$0.00
BOEING CO	14 000	10/06/05	04/30/14	Symbol (Box 1d): BA \$1,806.80	\$948.81	\$0.00	\$857.99	\$0.00
BROADCOM CORP CL A	15 000	11/07/07	04/30/14	Symbol (Box 1d): BRCM \$461.98	\$477.35	\$0.00	(\$15.37)	\$0.00
C & C GRP PLC SPONS ADR	9 000	12/45/10	04/30/14	Symbol (Box 1d): CCGGY \$159.38	\$108.28	\$0.00	\$51.10	\$0.00

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Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor

THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

New York, NY 10004
Identification Number
26-4310632

Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CABLEVISION SYSTEMS CORP	20 000	12/14/04	04/30/14	\$333.39	\$144.52	\$0.00	\$188.87	\$0.00
CARNIVAL CP NEW PAIRED COM	6 000	10/28/09	04/30/14	\$235.61	\$176.34	\$0.00	\$59.27	\$0.00
CARNIVAL PLC	8 000	10/12/11	04/30/14	\$318.79	\$277.52	\$0.00	\$41.27	\$0.00
CHUBB CORP	3 000	12/14/04	01/22/14	\$267.67	\$114.44	\$0.00	\$153.23	\$0.00
	9 000	12/14/04	04/01/14	\$796.81	\$343.31	\$0.00	\$453.50	\$0.00
	1 000	12/14/04	04/30/14	\$92.00	\$38.15	\$0.00	\$53.85	\$0.00
Security Subtotal	13 000			\$1,156.48	\$495.90	\$0.00	\$660.58	\$0.00
CISCO SYS INC	2 000	12/09/08	04/30/14	\$46.13	\$34.20	\$0.00	\$11.93	\$0.00
COMCAST CORP CL A SPECIAL NEW	14 999	07/21/05	04/30/14	\$765.53	\$293.20	\$0.00	\$472.33	\$0.00
	24 001	03/14/08	04/30/14	\$1,224.98	\$446.74	\$0.00	\$778.24	\$0.00
Security Subtotal	39 000			\$1,990.51	\$739.94	\$0.00	\$1,250.57	\$0.00
COVIDIEN PLC	6 000	04/21/05	04/30/14	\$426.17	\$221.83	\$0.00	\$204.34	\$0.00
DAIMLER AG	1 000	03/18/11	04/30/14	\$92.41	\$64.86	\$0.00	\$27.55	\$0.00

CONTINUED ON NEXT PAGE

Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
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THE PLYMOUTH ENDOWMENT
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued)

OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CUSIP: 25179M103 Symbol (Box 1d): DVN								
DEVON ENERGY CORP NEW	12.000	08/11/09	04/30/14	\$839.86	\$770.99	\$0.00	\$68.87	\$0.00
	9.000	08/11/09	05/06/14	\$631.14	\$578.24	\$0.00	\$52.90	\$0.00
Security Subtotal	21.000			\$1,471.00	\$1,349.23	\$0.00	\$121.77	\$0.00
CUSIP: 25490A309 Symbol (Box 1d): DTV								
DIRECTV COM	9.000	12/14/04	04/30/14	\$696.40	\$132.59	\$0.00	\$563.81	\$0.00
CUSIP: 25659T107 Symbol (Box 1d): DLB								
DOLBY CLA A COM STK	1.000	10/23/08	03/21/14	\$44.46	\$29.40	\$0.00	\$15.06	\$0.00
	1.000	10/24/08	03/21/14	\$44.46	\$29.98	\$0.00	\$14.48	\$0.00
	8.000	10/27/08	03/21/14	\$355.71	\$243.65	\$0.00	\$112.06	\$0.00
	8.000	10/28/08	03/21/14	\$355.71	\$233.78	\$0.00	\$121.93	\$0.00
	13.000	10/29/08	03/21/14	\$578.03	\$386.62	\$0.00	\$191.41	\$0.00
	6.000	10/30/08	03/21/14	\$266.78	\$183.76	\$0.00	\$83.02	\$0.00
	1.000	10/31/08	03/21/14	\$44.46	\$31.86	\$0.00	\$12.60	\$0.00
	3.000	02/04/11	03/21/14	\$133.39	\$168.96	\$0.00	(\$35.57)	\$0.00
	4.000	04/06/11	03/21/14	\$177.86	\$196.03	\$0.00	(\$18.17)	\$0.00
	1.000	04/12/11	03/21/14	\$44.46	\$50.06	\$0.00	(\$5.60)	\$0.00
	3.000	04/15/11	03/21/14	\$133.39	\$141.26	\$0.00	(\$7.87)	\$0.00
	18.000	08/05/11	03/21/14	\$800.35	\$558.97	\$0.00	\$241.38	\$0.00
	4.000	11/09/11	03/21/14	\$177.86	\$114.16	\$0.00	\$63.70	\$0.00
Security Subtotal	71.000			\$3,156.92	\$2,368.49	\$0.00	\$788.43	\$0.00

CONTINUED ON NEXT PAGE

Corporate Tax Statement
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section. These transactions should be reported on Form 8949 Part II with box E checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
EBAY INC								
		CUSIP: 278642103	Symbol (Box 1d): EBAY					
	2 000	08/06/10	04/30/14	\$103 19	\$42 54	\$0 00	\$60 65	\$0 00
	4 000	08/06/10	05/08/14	\$203 52	\$85 07	\$0 00	\$118 45	\$0 00
	2 000	08/06/10	05/08/14	\$101 76	\$42 54	\$0 00	\$59 22	\$0 00
	28 000	08/06/10	05/08/14	\$1 424 64	\$595 52	\$0 00	\$829 12	\$0 00
Security Subtotal	36 000			\$1 833 11	\$765 67	\$0 00	\$1 067 44	\$0 00
EMCOR GROUP INC								
		CUSIP: 29084Q100	Symbol (Box 1d): EME					
	6 000	08/30/10	04/30/14	\$275 69	\$135 60	\$0 00	\$140 09	\$0 00
ESPRIT HLDS LTD SPONSORED ADR								
		CUSIP: 29666V204	Symbol (Box 1d): ESPGY					
	9 000	01/13/12	04/30/14	\$29 60	\$26 89	\$0 00	\$2 71	\$0 00
	55 000	01/13/12	05/19/14	\$156 86	\$164 34	\$0 00	(\$7 48)	\$0 00
Security Subtotal	64 000			\$186 46	\$191 23	\$0 00	(\$4 77)	\$0 00
FACTSET RESEARCH SYSTEMS INC								
		CUSIP: 303075105	Symbol (Box 1d): FDS					
	3 000	11/21/11	04/30/14	\$318 56	\$270 78	\$0 00	\$47 78	\$0 00
FLETCHER BLDG LTD SPN ADR NEW								
		CUSIP: 339305302	Symbol (Box 1d): FCREY					
	52 000	04/29/11	04/30/14	\$868 38	\$774 16	\$0 00	\$94 22	\$0 00
FLUOR CORP NEW								
		CUSIP: 343412102	Symbol (Box 1d): FLR					
	2 000	01/12/09	01/29/14	\$153 19	\$95 29	\$0 00	\$57 90	\$0 00
	1 000	01/12/09	01/29/14	\$76 60	\$47 65	\$0 00	\$28 95	\$0 00
	4 000	02/09/09	08/26/14	\$301 59	\$166 56	\$0 00	\$135 03	\$0 00
	5 000	02/09/09	09/05/14	\$367 04	\$208 20	\$0 00	\$158 84	\$0 00
	3 000	02/09/09	09/18/14	\$211 50	\$124 91	\$0 00	\$86 59	\$0 00
	2 000	02/09/09	09/18/14	\$141 00	\$83 28	\$0 00	\$57 72	\$0 00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza

8th Floor

New York, NY 10004

Identification Number: 26-4310632

THE PLYMOUTH ENDOWMENT

ATTN: GRANT STANNARD

6015 N BROADWAY

WICHITA KS 67219-2013

Taxpayer ID Number XX-XXX4180

Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section. These transactions should be reported on Form 8949 Part II with box E checked.) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
FLUOR CORP NEW (Cont.)								
		CUSIP: 343412102	Symbol (Box 1d): FLR					
	1 000	02/09/09	09/18/14	\$70.50	\$41.64	\$0.00	\$28.86	\$0.00
	1.000	02/10/09	09/18/14	\$70.49	\$42.68	\$0.00	\$27.81	\$0.00
Security Subtotal	19.000			\$1,391.91	\$810.21	\$0.00	\$581.70	\$0.00
FOREST LABORATORIES INC								
		CUSIP: 345838106	Symbol (Box 1d):					
	40.000	12/14/04	03/21/14	\$3,776.23	\$1,784.43	\$0.00	\$1,991.80	\$0.00
	30.000	03/29/05	03/21/14	\$2,832.17	\$1,096.34	\$0.00	\$1,735.83	\$0.00
	30.000	12/27/07	03/21/14	\$2,832.17	\$1,109.30	\$0.00	\$1,722.87	\$0.00
Security Subtotal	100.000			\$9,440.57	\$3,990.07	\$0.00	\$5,450.50	\$0.00
FOREST STK 30122								
		CUSIP: 34STK8106	Symbol (Box 1d):					
	20.000	12/27/07	07/01/14	\$513.41	\$0.00	\$0.00	\$513.41	\$0.00
	5.000	05/11/10	07/01/14	\$128.35	\$0.00	\$0.00	\$128.35	\$0.00
	26.000	02/01/11	07/01/14	\$667.43	\$0.00	\$0.00	\$667.43	\$0.00
	3.000	04/04/11	07/01/14	\$77.01	\$0.00	\$0.00	\$77.01	\$0.00
	18.000	11/09/11	07/01/14	\$462.06	\$0.00	\$0.00	\$462.06	\$0.00
Security Subtotal	72.000			\$1,848.26	\$0.00	\$0.00	\$1,848.26	\$0.00
FRANKLIN RESOURCES INC								
		CUSIP: 354613101	Symbol (Box 1d): BEN					
	3.000	10/16/08	04/30/14	\$157.03	\$61.36	\$0.00	\$95.67	\$0.00
	1.000	10/31/08	04/30/14	\$52.34	\$22.57	\$0.00	\$29.77	\$0.00
Security Subtotal	4.000			\$209.37	\$83.93	\$0.00	\$125.44	\$0.00
GLAXOSMITHKLINE PLC ADS								
		CUSIP: 37733W105	Symbol (Box 1d): GSK					
	6.000	07/12/10	04/30/14	\$332.51	\$209.43	\$0.00	\$123.08	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor

THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

New York, NY 10004
Identification Number: 26-4310632

Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section. These transactions should be reported on Form 8949 Part II with box E checked.) (Continued)

DESCRIPTION (Box 8)	QUANTITY	ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
GOOGLE INC CL C	1 000	CUSIP: 38259P706	Symbol (Box 1d): GOOG					
		09/22/08	04/30/14	\$526.01	\$220.69	\$0.00	\$305.32	\$0.00
GOOGLE INC-CL A	1 000	CUSIP: 38259P508	Symbol (Box 1d): GOOGL					
		09/22/08	04/30/14	\$533.54	\$221.40	\$0.00	\$312.14	\$0.00
GTECH S P A SPONSORED ADR	23 000	CUSIP: 40053Q104	Symbol (Box 1d): GTKYY					
		04/08/14		\$684.65	NOT ON FILE	\$0.00	\$0.00	\$0.00
	1 000	04/30/14		\$29.34	NOT ON FILE	\$0.00	\$0.00	\$0.00
	14 000	08/15/14		\$327.03	NOT ON FILE	\$0.00	\$0.00	\$0.00
Security Subtotal	38 000			\$1,041.02	\$0.00	\$0.00	\$0.00	\$0.00
H LUNDBECK AS SPON ADR LEV 1	28 000	CUSIP: 40422M206	Symbol (Box 1d): HLUY					
		11/11/11	04/08/14	\$789.13	\$585.19	\$0.00	\$203.94	\$0.00
HALLIBURTON CO	2 000	CUSIP: 406216101	Symbol (Box 1d): HAL					
		12/30/09	03/07/14	\$112.40	\$59.75	\$0.00	\$52.65	\$0.00
	5 000	08/10/11	03/07/14	\$281.00	\$218.86	\$0.00	\$62.14	\$0.00
	4 000	08/23/11	03/07/14	\$224.80	\$157.34	\$0.00	\$67.46	\$0.00
	4 000	10/17/11	03/07/14	\$224.79	\$139.10	\$0.00	\$85.69	\$0.00
	8 000	10/17/11	04/16/14	\$483.77	\$278.20	\$0.00	\$205.57	\$0.00
	11 000	10/17/11	04/16/14	\$665.19	\$382.53	\$0.00	\$282.66	\$0.00
	1 000	10/17/11	04/30/14	\$63.17	\$34.78	\$0.00	\$28.39	\$0.00
Security Subtotal	35 000			\$2,055.12	\$1,270.56	\$0.00	\$784.56	\$0.00
HEIDELBERG CEMENT ADR	16 000	CUSIP: 42281P205	Symbol (Box 1d): HDELY					
		01/19/12	04/30/14	\$276.47	\$158.13	\$0.00	\$118.34	\$0.00

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Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number: 26-4310632Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued)

OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
HESS CORPORATION								
		CUSIP: 42809H107	Symbol (Box 1d): HES					
	1 000	07/27/11	04/30/14	\$89.17	\$70.40	\$0.00	\$18.77	\$0.00
	5 000	08/18/11	04/30/14	\$445.83	\$275.49	\$0.00	\$170.34	\$0.00
	3 000	08/18/11	07/14/14	\$296.39	\$165.30	\$0.00	\$131.09	\$0.00
	5 000	08/18/11	07/15/14	\$490.07	\$275.49	\$0.00	\$214.58	\$0.00
Security Subtotal	14 000			\$1,321.46	\$786.68	\$0.00	\$534.78	\$0.00
HOME DEPOT INC								
		CUSIP: 437076102	Symbol (Box 1d): HD					
	2 000	06/26/08	04/30/14	\$158.69	\$49.87	\$0.00	\$108.82	\$0.00
HONEYWELL INTERNATIONAL INC								
		CUSIP: 438516106	Symbol (Box 1d): HON					
	6 000	11/03/05	01/10/14	\$540.92	\$212.69	\$0.00	\$328.23	\$0.00
	3 000	11/03/05	04/30/14	\$278.45	\$106.35	\$0.00	\$172.10	\$0.00
Security Subtotal	9 000			\$819.37	\$319.04	\$0.00	\$500.33	\$0.00
HOYA CORP SPONS ADR								
		CUSIP: 443251103	Symbol (Box 1d): HOCYP					
	7 000	02/09/12	04/30/14	\$205.30	\$161.98	\$0.00	\$43.32	\$0.00
	18 000	02/09/12	09/11/14	\$586.78	\$416.52	\$0.00	\$170.26	\$0.00
Security Subtotal	25 000			\$792.08	\$578.50	\$0.00	\$213.58	\$0.00
HSBC HOLDINGS PLC SPON ADR NEW								
		CUSIP: 404280406	Symbol (Box 1d): HSBC					
	1 000	10/28/09	04/30/14	\$51.25	\$55.03	\$0.00	(\$3.78)	\$0.00
INDRA SISTEMAS SA FGN ORD ADR								
		CUSIP: 45579R106	Symbol (Box 1d): ISMAY					
	11 000	03/28/11	04/30/14	\$102.29	\$109.58	\$0.00	(\$7.29)	\$0.00

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Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor
New York, NY 10004
Identification Number: 26-4310632
Taxpayer ID Number XX-XXX4180
Account Number 185 221597 302
Customer Service: 866-324-6088

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WICHITA KS 67219-2013

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	SYMBOL (Box 1d)	PROCEEDS (Box 1e)	COST OR OTHER BASIS (Box 1f)	ADJUSTMENTS/CODE (Box 1g)/(Box 1h)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ISIS PHARM INC									
		CUSIP: 464330109		Symbol (Box 1d): ISIS					
	30 000	10/20/10	03/21/14		\$1,334.71	\$281.66	\$0.00	\$1,053.05	\$0.00
	20 000	02/01/11	03/21/14		\$889.81	\$182.36	\$0.00	\$707.45	\$0.00
Security Subtotal	50 000				\$2,224.52	\$464.02	\$0.00	\$1,760.50	\$0.00
ITAU UNIBANCO MULTIPLE ADR									
		CUSIP: 465562106		Symbol (Box 1d): ITUB					
	24 000	10/24/11	04/30/14		\$393.11	\$414.83	\$0.00	(\$21.72)	\$0.00
	2 000	10/28/11	04/30/14		\$32.76	\$35.83	\$0.00	(\$3.07)	\$0.00
Security Subtotal	26 000				\$425.87	\$450.66	\$0.00	(\$24.79)	\$0.00
JACOBS ENGINEERING GROUP INC									
		CUSIP: 469814107		Symbol (Box 1d): JEC					
	4 000	12/30/08	04/30/14		\$230.07	\$180.90	\$0.00	\$49.17	\$0.00
	4 000	12/30/08	11/24/14		\$190.02	\$180.90	\$0.00	\$9.12	\$0.00
	2 000	12/31/08	11/24/14		\$95.01	\$98.38	\$0.00	(\$3.37)	\$0.00
	5 000	08/17/09	11/24/14		\$237.53	\$212.63	\$0.00	\$24.90	\$0.00
	5 000	02/01/11	11/24/14		\$237.53	\$263.20	\$0.00	(\$25.67)	\$0.00
	3 000	06/02/11	11/24/14		\$142.52	\$132.90	\$0.00	\$9.62	\$0.00
	2 000	11/09/11	11/24/14		\$95.00	\$75.86	\$0.00	\$19.14	\$0.00
Security Subtotal	25 000				\$1,227.68	\$1,144.77	\$0.00	\$82.91	\$0.00
JOHNSON & JOHNSON									
		CUSIP: 478160104		Symbol (Box 1d): JNJ					
	18 000	12/14/04	04/30/14		\$1,817.23	\$1,106.81	\$0.00	\$710.42	\$0.00
JONES LANG LASALLE INC									
		CUSIP: 48020Q107		Symbol (Box 1d): JLL					
	1 000	07/06/09	04/30/14		\$115.55	\$32.20	\$0.00	\$83.35	\$0.00
	1 000	07/06/09	08/01/14		\$129.89	\$32.20	\$0.00	\$97.69	\$0.00
	2 000	02/01/11	08/01/14		\$259.78	\$185.98	\$0.00	\$73.80	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number 26-4310632Taxpayer ID Number XX-XXX4180
Account Number 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities * (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
JONES LANG LASALLE INC (Cont.)		CUSIP: 48020Q107	Symbol (Box 1d): JLL					
	5.000	02/01/11	08/11/14	\$651.23	\$484.95	\$0.00	\$186.28	\$0.00
Security Subtotal	9.000			\$1,156.45	\$715.33	\$0.00	\$441.12	\$0.00
JPMORGAN CHASE & CO		CUSIP: 46625H100	Symbol (Box 1d): JPM					
	6.000	08/20/08	04/30/14	\$335.87	\$212.81	\$0.00	\$123.06	\$0.00
	8.000	12/16/10	04/30/14	\$447.83	\$318.99	\$0.00	\$128.84	\$0.00
Security Subtotal	14.000			\$783.70	\$531.80	\$0.00	\$251.90	\$0.00
KEYCORP NEW		CUSIP: 493267108	Symbol (Box 1d): KEY					
	45.000	10/28/09	04/30/14	\$611.53	\$249.64	\$0.00	\$361.89	\$0.00
KLA TENCOR CORP		CUSIP: 482480100	Symbol (Box 1d): KLAC					
	4.000	09/29/11	04/30/14	\$256.35	\$156.40	\$0.00	\$99.95	\$0.00
	2.000	09/29/11	12/10/14	\$138.43	\$89.95	\$0.00	\$68.48	\$0.00
Security Subtotal	6.000			\$394.78	\$226.35	\$0.00	\$168.43	\$0.00
L-3 COMMUNICATIONS HOLDING INC		CUSIP: 502424104	Symbol (Box 1d): LLL					
	11.000	12/14/04	04/30/14	\$1,269.04	\$789.47	\$0.00	\$479.57	\$0.00
LIBERTY BROADBAND CORP S-A		CUSIP: 530307107	Symbol (Box 1d): LBRDA					
	0.250	11/09/11	11/04/14	\$11.35	\$4.02	\$0.00	\$7.33	\$0.00
LIBERTY BROADBAND CORP S-C		CUSIP: 530307305	Symbol (Box 1d): LBRDK					
	0.500	11/09/11	11/04/14	\$22.57	\$15.97	\$0.00	\$6.60	\$0.00
LIBERTY INTER CO VENTURE SER A		CUSIP: 53071M880	Symbol (Box 1d): LVNTA					
	0.364	01/28/09	10/20/14	\$10.66	\$1.19	\$0.00	\$9.47	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

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LIBERTY INTERACTIVE CO INTER A								
		CUSIP: 53071M104	Symbol (Box 1d): QVCA					
	13 000	12/14/04	04/30/14	\$377.25	\$233.74	\$0.00	\$143.51	\$0.00
	22 000	03/17/08	04/30/14	\$638.42	\$308.46	\$0.00	\$329.96	\$0.00
	3 000	01/28/09	04/30/14	\$87.06	\$9.11	\$0.00	\$77.95	\$0.00
Security Subtotal	38 000			\$1,102.73	\$551.31	\$0.00	\$551.42	\$0.00
MATTEL INC								
		CUSIP: 577081102	Symbol (Box 1d): MAT					
	5 000	11/03/09	01/09/14	\$228.89	\$87.80	\$0.00	\$141.09	\$0.00
	8 000	11/03/09	01/09/14	\$365.17	\$140.48	\$0.00	\$224.69	\$0.00
	6 000	10/19/10	01/09/14	\$273.88	\$128.88	\$0.00	\$145.00	\$0.00
	11 000	10/19/10	01/22/14	\$478.90	\$236.27	\$0.00	\$242.63	\$0.00
	3 000	10/19/10	01/22/14	\$130.55	\$64.44	\$0.00	\$66.11	\$0.00
	10 000	10/27/10	01/22/14	\$435.16	\$217.08	\$0.00	\$218.08	\$0.00
	2 000	02/01/11	01/22/14	\$87.03	\$45.32	\$0.00	\$41.71	\$0.00
	11 000	02/01/11	08/26/14	\$383.89	\$242.57	\$0.00	\$141.32	\$0.00
	6 000	02/01/11	09/12/14	\$206.10	\$129.44	\$0.00	\$76.66	\$0.00
	12 000	02/01/11	09/15/14	\$412.19	\$258.85	\$0.00	\$153.34	\$0.00
Security Subtotal	74 000			\$3,001.76	\$1,551.13	\$0.00	\$1,450.63	\$0.00
MERCK & CO INC NEW COM								
		CUSIP: 58933Y105	Symbol (Box 1d): MRK					
	29 000	04/02/08	04/30/14	\$1,689.50	\$1,098.66	\$0.00	\$590.84	\$0.00

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued)

OMB NO. 1545-0715

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DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
MUENCHENER RUECK-UNSPONS ADR		CUSIP: 626188106	Symbol (Box 1d): MURGY					
	5 000	10/13/11	04/30/14	\$111.64	\$67.30	\$0.00	\$44.34	\$0.00
	19 000	10/13/11	09/19/14	\$378.37	\$255.72	\$0.00	\$122.65	\$0.00
	28 000	11/09/11	09/19/14	\$557.60	\$332.36	\$0.00	\$225.24	\$0.00
Security Subtotal	52 000			\$1,047.61	\$655.38	\$0.00	\$392.23	\$0.00
NEWFIELD EXPL CO		CUSIP: 651290108	Symbol (Box 1d): NFX					
	3 000	04/12/12	04/30/14	\$101.36	\$100.71	\$0.00	\$0.65	\$0.00
	7 000	04/12/12	08/28/14	\$306.24	\$234.98	\$0.00	\$71.26	\$0.00
Security Subtotal	10 000			\$407.60	\$335.69	\$0.00	\$71.91	\$0.00
NINTENDO CO LTD ADR NEW		CUSIP: 654445303	Symbol (Box 1d): NTDOY					
	3 000	11/08/11	04/30/14	\$39.26	\$59.09	\$0.00	(\$19.83)	\$0.00
	13 000	11/08/11	05/09/14	\$171.15	\$256.08	\$0.00	(\$84.93)	\$0.00
	15 000	11/11/11	05/09/14	\$197.49	\$302.54	\$0.00	(\$105.05)	\$0.00
	10 000	11/30/11	05/09/14	\$131.66	\$190.21	\$0.00	(\$58.55)	\$0.00
Security Subtotal	41 000			\$539.56	\$807.92	\$0.00	(\$268.36)	\$0.00
NOVARTIS AG ADR		CUSIP: 66987V109	Symbol (Box 1d): NVS					
	17 000	04/07/08	04/30/14	\$1,476.07	\$858.50	\$0.00	\$617.57	\$0.00
NOW INC		CUSIP: 67011P100	Symbol (Box 1d): DNOW					
	0 750	10/24/08	05/30/14	\$25.20	\$8.34	\$0.00	\$16.86	\$0.00
NSK LTD SPONSORED ADR		CUSIP: 670184100	Symbol (Box 1d): NPSKY					
	3 000	10/28/09	04/30/14	\$62.57	\$35.83	\$0.00	\$26.74	\$0.00

CONTINUED ON NEXT PAGE

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza

8th Floor

New York, NY 10004

Identification Number: 26-4310632

Taxpayer ID Number: XX-XXX4180

Account Number: 185 221597 302

Customer Service: 866-324-6088

THE PLYMOUTH ENDOWMENT

ATTN: GRANT STANNARD

6015 N BROADWAY

WICHITA KS 67219-2013

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked)(Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ORACLE CORP								
		CUSIP: 68389X105	Symbol (Box 1d): ORCL					
	19 000	12/06/10	04/30/14	\$776 32	\$546 55	\$0.00	\$229.77	\$0.00
	3 000	02/01/11	04/30/14	\$122.58	\$100.20	\$0.00	\$22.38	\$0.00
Security Subtotal	22 000			\$898.90	\$646.75	\$0.00	\$252.15	\$0.00
PALL CORPORATION								
		CUSIP: 696429307	Symbol (Box 1d): PLL					
	4 000	01/07/05	04/30/14	\$336 35	\$112.36	\$0.00	\$223.99	\$0.00
PEBBLEBROOK HOTEL TR COM								
		CUSIP: 70509V100	Symbol (Box 1d): PEB					
	22 000	02/01/11	04/30/14	\$755 51	\$468 22	\$0.00	\$287.29	\$0.00
PENTAIR LTD								
		CUSIP: H6169Q108	Symbol (Box 1d):					
	1 000	04/21/05	04/30/14	\$74 26	\$30 31	\$0.00	\$43 95	\$0.00
	4 000	04/27/05	04/30/14	\$297 03	\$161 91	\$0.00	\$135.12	\$0.00
	1 000	05/03/05	04/30/14	\$74.26	\$39.26	\$0.00	\$35.00	\$0.00
Security Subtotal	6 000			\$445.55	\$231.48	\$0.00	\$214.07	\$0.00
PLANTRONICS INC								
		CUSIP: 727493108	Symbol (Box 1d): PLT					
	1 000	08/17/11	04/30/14	\$43 01	\$33 86	\$0.00	\$9 15	\$0.00
PUBLICIS GROUPE SA ADS								
		CUSIP: 74463M106	Symbol (Box 1d): PUBGY					
	26 000	03/29/10	04/10/14	\$567 03	\$281.17	\$0.00	\$285.86	\$0.00
	50 000	05/28/10	04/10/14	\$1,090 45	\$520.33	\$0.00	\$570.12	\$0.00
	18 000	06/07/11	04/10/14	\$392.56	\$247.95	\$0.00	\$144 61	\$0.00
	20 000	11/09/11	04/10/14	\$436.19	\$236.40	\$0.00	\$199.79	\$0.00
Security Subtotal	114 000			\$2,486.23	\$1,285.85	\$0.00	\$1,200.38	\$0.00

CONTINUED ON NEXT PAGE

IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th FloorTHE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013New York, NY 10004
Identification Number 26-4310632Taxpayer ID Number: XX-XXX4180
Account Number: 185 221597 302

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CUSIP: 747525103 Symbol (Box 1d): QCOM								
	10 000	02/01/11	04/30/14	\$783.98	\$551.48	\$0.00	\$232.50	\$0.00
	59 000	02/01/11	08/01/14	\$4,278.14	\$3,253.73	\$0.00	\$1,024.41	\$0.00
	50 000	02/01/11	09/19/14	\$3,783.12	\$2,757.40	\$0.00	\$1,025.72	\$0.00
	8 000	02/01/11	09/22/14	\$603.90	\$441.18	\$0.00	\$162.72	\$0.00
Security Subtotal	127 000			\$9,449.14	\$7,003.79	\$0.00	\$2,445.35	\$0.00
CUSIP: 7591EP100 Symbol (Box 1d): RF								
REGIONS FINANCIAL CORP NEW	69 000	04/13/12	04/30/14	\$698.26	\$427.48	\$0.00	\$270.78	\$0.00
CUSIP: 761655505 Symbol (Box 1d):								
REXAM PLC SPONSADR COMMOPA	1 000	01/07/11	02/28/14	\$41.38	\$30.15	\$0.00	\$11.23	\$0.00
	11 000	02/07/11	02/28/14	\$455.16	\$356.98	\$0.00	\$98.18	\$0.00
	7 000	04/13/11	02/28/14	\$289.65	\$246.48	\$0.00	\$43.17	\$0.00
	14 000	05/27/11	02/28/14	\$579.30	\$488.93	\$0.00	\$90.37	\$0.00
	6 000	06/30/11	02/28/14	\$248.27	\$216.81	\$0.00	\$31.46	\$0.00
	7 000	07/01/11	02/28/14	\$289.65	\$252.24	\$0.00	\$37.41	\$0.00
	9 000	11/09/11	02/28/14	\$372.40	\$260.40	\$0.00	\$112.00	\$0.00
	9 000	08/02/12	02/28/14	\$372.40	\$336.97	\$0.00	\$35.43	\$0.00
Security Subtotal	64 000			\$2,648.21	\$2,188.96	\$0.00	\$459.25	\$0.00
CUSIP: 786584102 Symbol (Box 1d): SAFRY								
SAFRAN SA	4 000	03/16/12	04/30/14	\$66.87	\$34.66	\$0.00	\$32.21	\$0.00
	3 000	04/30/12	04/30/14	\$50.16	\$27.93	\$0.00	\$22.23	\$0.00
Security Subtotal	7 000			\$117.03	\$62.59	\$0.00	\$54.44	\$0.00

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Morgan Stanley

Corporate Tax Statement Tax Year 2014

Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
8th Floor

THE PLYMOUTH ENDOWMENT
ATTN: GRANT STANNARD
6015 N BROADWAY
WICHITA KS 67219-2013

New York, NY 10004
Identification Number: 26-4310632

Taxpayer ID Number XX-XXX4180
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section. These transactions should be reported on Form 8949 Part II with box E checked.) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CUSIP: 80004C101 Symbol (Box 1d): SNDK								
	30.000	07/09/08	03/21/14	\$2,414.18	\$523.84	\$0.00	\$1,890.34	\$0.00
	2.000	07/09/08	04/30/14	\$169.33	\$34.92	\$0.00	\$134.41	\$0.00
Security Subtotal	32.000			\$2,583.51	\$558.76	\$0.00	\$2,024.75	\$0.00
CUSIP: 80105N105 Symbol (Box 1d): SNY								
SANOFL ADR	1.000	07/15/11	04/30/14	\$54.10	\$39.26	\$0.00	\$14.84	\$0.00
CUSIP: 80687P106 Symbol (Box 1d): SBGSY								
SCHNEIDER ELEC SA UNSP ADR	4.000	03/18/11	04/30/14	\$74.55	\$64.33	\$0.00	\$10.22	\$0.00
	2.000	06/10/11	04/30/14	\$37.28	\$32.41	\$0.00	\$4.87	\$0.00
Security Subtotal	6.000			\$111.83	\$96.74	\$0.00	\$15.09	\$0.00
CUSIP: G7945M107 Symbol (Box 1d): STX								
SEAGATE TECHNOLOGY PLC	29.000	08/23/10	04/30/14	\$1,508.25	\$317.85	\$0.00	\$1,190.40	\$0.00
	8.000	02/01/11	04/30/14	\$416.07	\$112.39	\$0.00	\$303.68	\$0.00
Security Subtotal	37.000			\$1,924.32	\$430.24	\$0.00	\$1,494.08	\$0.00
CUSIP: 855244109 Symbol (Box 1d): SBUX								
STARBUCKS CORP WASHINGTON	8.000	02/01/11	04/30/14	\$564.46	\$257.89	\$0.00	\$306.57	\$0.00
CUSIP: 85571Q102 Symbol (Box 1d): STRZA								
STARZ SERIES A	4.000	06/26/08	04/30/14	\$128.67	\$6.19	\$0.00	\$122.48	\$0.00
CUSIP: 74144T108 Symbol (Box 1d): TROW								
T ROWE PRICE GROUP INC	44.000	02/01/11	04/08/14	\$3,498.73	\$2,962.34	\$0.00	\$536.39	\$0.00
	1.000	02/01/11	04/30/14	\$81.88	\$67.33	\$0.00	\$14.55	\$0.00
	34.000	02/01/11	08/08/14	\$2,637.27	\$2,289.08	\$0.00	\$348.19	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

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DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
T ROWE PRICE GROUP INC (Cont)								
		CUSIP: 74144T108	Symbol (Box 1d): TROW					
	9.000	07/14/11	08/08/14	\$698.10	\$527.24	\$0.00	\$170.86	\$0.00
	24.000	07/14/11	08/11/14	\$1,884.49	\$1,405.97	\$0.00	\$478.52	\$0.00
Security Subtotal	112.000			\$8,800.47	\$7,251.96	\$0.00	\$1,548.51	\$0.00
TE CONNECTIVITY LTD NEW								
		CUSIP: H84989104	Symbol (Box 1d): TEL					
	3.000	11/07/07	03/21/14	\$180.97	\$98.97	\$0.00	\$82.00	\$0.00
	27.000	11/08/07	03/21/14	\$1,628.74	\$892.00	\$0.00	\$736.74	\$0.00
	14.000	11/09/07	03/21/14	\$844.53	\$460.17	\$0.00	\$384.36	\$0.00
Security Subtotal	44.000			\$2,654.24	\$1,451.14	\$0.00	\$1,203.10	\$0.00
TECHTRONIC IND LTD SPONS ADR								
		CUSIP: 87873R101	Symbol (Box 1d): TTNDY					
	12.000	01/19/12	04/30/14	\$189.59	\$71.43	\$0.00	\$118.16	\$0.00
	8.000	01/19/12	05/16/14	\$127.27	\$47.62	\$0.00	\$79.65	\$0.00
	23.000	02/09/12	05/16/14	\$365.90	\$143.38	\$0.00	\$222.52	\$0.00
	55.000	02/09/12	05/19/14	\$834.06	\$342.85	\$0.00	\$491.21	\$0.00
Security Subtotal	98.000			\$1,516.82	\$605.28	\$0.00	\$911.54	\$0.00
TEXAS INSTRUMENTS								
		CUSIP: 882508104	Symbol (Box 1d): TXN					
	9.000	11/11/08	04/30/14	\$409.40	\$152.97	\$0.00	\$256.43	\$0.00
TYCO INTERNATIONAL LTD NEW								
		CUSIP: H89128104	Symbol (Box 1d):					
	3.424	04/21/05	04/30/14	\$140.17	\$84.75	\$0.00	\$55.42	\$0.00
	18.636	04/27/05	04/30/14	\$762.93	\$452.66	\$0.00	\$310.27	\$0.00
	1.940	05/03/05	04/30/14	\$79.43	\$42.85	\$0.00	\$36.58	\$0.00
Security Subtotal	24.000			\$982.53	\$580.26	\$0.00	\$402.27	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
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ATTN: GRANT STANNARD
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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

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Long Term - Noncovered Securities # (Consider Box 5 (Noncovered Security) as being checked and Box 3 (Basis Reported to IRS) as not being checked for this section These transactions should be reported on Form 8949 Part II with box E checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY	DATE ACQUIRED (Box 1b)	DATE SOLD (Box 1c)	PROCEEDS (Box 1d)	COST OR OTHER BASIS (Box 1e)	ADJUSTMENTS/CODE (Box 1g)/(Box 1f)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
U S BANCORP COM NEW		CUSIP: 902973304	Symbol (Box 1d): USB					
	10 000	12/16/10	04/30/14	\$406 99	\$260 33	\$0.00	\$146.66	\$0.00
	12,000	12/16/10	10/14/14	\$479 43	\$312 39	\$0.00	\$167 04	\$0.00
	2,000	02/01/11	10/14/14	\$79.91	\$55.19	\$0.00	\$24.72	\$0.00
Security Subtotal	24,000			\$966.33	\$627.91	\$0.00	\$338.42	\$0.00
UBS AG NEW		CUSIP: H89231338	Symbol (Box 1d): OUBSF					
	22 000	12/22/11	04/30/14	\$459 34	\$261 49	\$0.00	\$197.85	\$0.00
UNILEVER NV NY SH NEW		CUSIP: 904784709	Symbol (Box 1d): UN					
	2 000	11/09/11	04/30/14	\$85 55	\$65 62	\$0.00	\$19.93	\$0.00
	1,000	03/09/12	04/30/14	\$42.78	\$33.47	\$0.00	\$9.31	\$0.00
Security Subtotal	3,000			\$128.33	\$99 09	\$0.00	\$29.24	\$0.00
UNITEDHEALTH GP INC		CUSIP: 91324P102	Symbol (Box 1d): UNH					
	36 000	12/14/04	03/21/14	\$2,934 83	\$1,554 48	\$0.00	\$1,380.35	\$0.00
VERTEX PHARMACEUTICALS		CUSIP: 92532F100	Symbol (Box 1d): VRTX					
	25 000	11/11/08	04/30/14	\$1,688 71	\$680 91	\$0.00	\$1,007.80	\$0.00
VODAFONE GROUP PLC		CUSIP: 92857W308	Symbol (Box 1d): VOD					
	0 272	01/26/11	02/21/14	\$11 38	\$14 47	\$0.00	(\$3 09)	\$0.00
WALT DISNEY CO HLDG CO		CUSIP: 254687106	Symbol (Box 1d): DIS					
	13 000	09/26/05	04/30/14	\$1,029 31	\$298 81	\$0.00	\$730 50	\$0.00

CONTINUED ON NEXT PAGE

Corporate Tax Statement
Tax Year 2014Morgan Stanley Smith Barney Holdings LLC
1 New York Plaza
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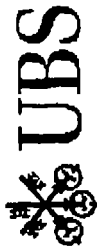
1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc. Consider the Net Proceeds box checked in IRS box 6 (Reported to IRS) for all option transactions

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WEATHERFORD INTERNATIONAL LTD		CUSIP: H27013103	Symbol (Box 1d):					
	89,000	04/01/09	04/30/14	\$1,869.17	\$1,019.43	\$0.00	\$849.74	\$0.00
	53,000	12/30/09	04/30/14	\$1,113.10	\$957.24	\$0.00	\$155.86	\$0.00
	53,000	01/28/10	04/30/14	\$1,113.10	\$850.52	\$0.00	\$262.58	\$0.00
Security Subtotal	195,000			\$4,095.37	\$2,827.19	\$0.00	\$1,268.18	\$0.00
WPP PLC SPON NEW ADR		CUSIP: 92937A102	Symbol (Box 1d): WPPGY					
	5,000	02/10/11	04/30/14	\$538.43	\$331.46	\$0.00	\$206.97	\$0.00
Total Long Term Noncovered Securities				\$134,228.50	\$74,764.82	\$0.00	\$58,422.66	\$0.00
Total Long Term Covered and Noncovered Securities				\$155,272.52	\$91,697.65	\$0.00	\$62,533.85	\$0.00
Total Short and Long Term, Covered and Noncovered Securities				\$172,842.05	\$106,024.87	\$0.00	\$65,776.16	\$0.00
Form 1099-B Total Reportable Amounts - Does not include cost basis or adjustment amounts for noncovered securities								
Total IRS Reportable Proceeds (Box 1d)				\$172,842.05				
Total IRS Reportable Cost or Other Basis for Covered Securities (Box 1e)					\$31,111.38			
Total IRS Reportable Adjustments (Box 1g)					\$0.00			
Total Fed Tax Withheld (Box 4)								\$0.00

Noncovered securities are not subject to the IRS cost basis reporting regulations, therefore their date of acquisition, cost basis, short or long term designation and any adjustments resulting from a wash sale or market discount will not be reported to the IRS. The cost basis is provided for informational purposes only and may not reflect required adjustments under the applicable tax regulations. Please consult your tax advisor regarding any adjustments to your original cost basis.



UBS FINANCIAL SERVICES INC.
121 S Whittier St
Wichita KS 67207-1064

2014 Consolidated Form 1099

Account Number: WT 01142

Your Financial Advisor:
NICHOLS INVESTMENT GROUP

Phone: 316-612-6500/866-311-9752

Reporting for:
THE PLYMOUTH ENDOWMENT FDN

THE PLYMOUTH ENDOWMENT FDN
6015 N BROADWAY
WICHITA KS 67219-2013

What's new this year:

Our 1099 Guide at www.ubs.com/1099 information provides access to supplemental tax information you may find useful when filing your income tax return.

UBS FINANCIAL SERVICES INC. 1000 HARBOR BLVD. WEEHAWKEN, NJ 07086	Tax Information Account WT 01142 THE PLYMOUTH ENDOWMENT FDN 6015 N BROADWAY WICHITA, KS 67219-2013	Statement Date: 02/26/2015 Document ID: 1QH4TX73G07 Your Financial Advisor NICHOLS INVESTMENT GROUP 316-612-6500 Office Code: WT Rep Code: WTNI
PAYER'S Federal ID No. 13-2638166		RECIPIENT'S ID No. XX-XXX4180

Summary Information

DIVIDENDS AND DISTRIBUTIONS	2014 1099-DIV*	OMB No. 1545-0110	MISCELLANEOUS INCOME	2014 1099-MISC*	OMB No. 1545-0115
1a- Total ordinary dividends (includes line 1b)		2,651.81	2- Royalties		0.00
1b- Qualified dividends		2,651.81	3- Other income		0.00
2a- Total capital gain distributions (includes lines 2b, 2c, 2d)		0.00	4- Federal income tax withheld		0.00
2b- Unrecaptured Section 1250 gain		0.00	8- Substitute payments in lieu of dividends or interest		0.00
2c- Section 1202 gain		0.00			
2d- Collectibles (28%) gain		0.00			
3- Nondividend distributions		0.00			
4- Federal income tax withheld		0.00			
5- Investment expenses		0.00			
7- Foreign country or US possession: Various		528.53			
8- Cash liquidation distributions		0.00			
9- Noncash liquidation distributions		0.00			
10- Exempt-interest dividends (includes line 11)		0.00			
11- Specified private activity bond interest dividends (AMT)		0.00			

REGULATED FUTURES CONTRACTS 2014 1099-B*

REGULATED FUTURES CONTRACTS 2014 1099-B*	OMB No. 1545-0715
8- Profit or (loss) realized in 2014 on closed contracts	0.00
9- Unrealized profit or (loss) on open contracts-12/31/2013	0.00
10- Unrealized profit or (loss) on open contracts-12/31/2014	0.00
11- Aggregate profit or (loss) on contracts	0.00

If applicable, summaries and details of proceeds from sale transactions appear in subsequent sections of this document.

* This is Important tax Information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

SALES TRANSACTIONS

Proceeds, gains, losses and adjustments

Refer to the 1099-B and Proceeds not reported to the IRS pages to ensure that you consider all relevant items and to determine the correct gains and losses. The amounts shown below are for informational purposes

Term	Form 9949 type	Proceeds	Cost basis	Market discount	Wash sale loss disallowed	Net gain or loss(-)
Short	A (basis reported to the IRS)	0.00	0.00	0.00	0.00	0.00
Short	B (basis not reported to the IRS)	0.00	0.00	0.00	0.00	0.00
Short	C (Form 1099-B not received)	0.00	0.00	0.00	0.00	0.00
	Total Short-term	0.00	0.00	0.00	0.00	0.00
Long	D (basis reported to the IRS)	0.00	0.00	0.00	0.00	0.00
Long	E (basis not reported to the IRS)	0.00	0.00	0.00	0.00	0.00
Long	F (Form 1099-B not received)	0.00	0.00	0.00	0.00	0.00
	Total Long-term	0.00	0.00	0.00	0.00	0.00
Undetermined	B or E (basis not reported to the IRS)	0.00	0.00	0.00	0.00	0.00
Undetermined	C or F (Form 1099-B not received)	0.00	0.00	0.00	0.00	0.00
	Total Undetermined-term	0.00	0.00	0.00	0.00	0.00
	Grand total	0.00	0.00	0.00	0.00	0.00

Withholding from Proceeds

Federal income tax withheld	0.00
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Changes to dividend tax classifications processed after your original tax form is issued for 2014 may require an amended tax form

Select Account (WT 01142) PEF MM-Stock Year 2014

2014 Realized Gain/Loss Summary for (WT 01142) PEF MM-Stock

Short Term	Gain	Loss
Long Term	\$40,355.23	\$-32,800.82
Term Not Applicable	\$96,404.56	\$-33,079.46
Portfolio Total:	\$0.00	\$0.00
	\$136,759.79	\$-65,880.28
		\$70,

2014 Realized Gain/Loss Summary for (WT 01142) PEF MM-Stock

Description	Quantity	Purchase Amount	Sale Amount	Realized Gain/Loss	More Info
AMGEN INC	150.000	\$17,538.00	\$18,253.06	\$715.06	4.08% Cost Bas
CALAMOS STRATEGIC TOTAL	1,226.000	\$4,659.01	\$14,225.97	\$9,568.96	205.34% Cost Bas
ARCHER DANIELS MIDLAND	500.000	\$21,783.84	\$22,100.89	\$317.05	1.46% Cost Bas
BANK OF AMER CORP	1,625.000	\$25,882.66	\$24,525.18	\$-1,357.48	-5.24% Cost Bas
BIAGEN INC	53.000	\$18,299.43	\$16,271.75	\$-2,027.68	-11.08% Cost Bas
BLACKSTONE GROUP LP/THE	870.000	\$27,404.02	\$28,453.59	\$1,049.57	3.83% Cost Bas
COGNIZANT TECH SOLUTIONS	850.000	\$41,991.97	\$40,159.11	\$-1,832.86	-4.36% Cost Bas
AMBEV SA SPON ADR	3,000.000	\$13,184.77	\$20,172.20	\$6,987.43	53.00% Cost Bas
CHICAGO BRIDGE & IRON CO	649.000	\$45,696.95	\$41,512.45	\$-4,184.50	-9.16% Cost Bas
COCA COLA CO COM	788.000	\$25,724.67	\$33,180.58	\$7,455.89	28.98% Cost Bas
DIAGEO PLC NEW GB SPON	130.000	\$13,581.40	\$15,877.88	\$2,296.46	16.91% Cost Bas
CUBIST PHARMACEUTICALS	250.000	\$15,879.98	\$25,227.28	\$9,347.30	58.86% Cost Bas
EOG RESOURCES INC	230.000	\$33,800.04	\$43,001.72	\$9,201.68	27.22% Cost Bas
FOSTER WHEELER AG	400.000	\$12,214.65	\$12,799.78	\$585.13	4.79% Cost Bas
DOW CHEMICAL	520.000	\$27,287.57	\$23,543.14	\$-3,744.43	-13.72% Cost Bas
EXXON MOBIL CORP	50.000	\$3,052.90	\$5,010.89	\$1,957.99	64.14% Cost Bas
FREEMPORT-MCMORAN INC	600.000	\$23,124.00	\$21,295.26	\$-1,828.74	-7.91% Cost Bas
GILEAD SCIENCES INC	345.000	\$21,783.03	\$37,076.12	\$15,293.09	70.21% Cost Bas
INGERSOLL-RAND PLC	365.000	\$18,772.71	\$20,260.70	\$1,487.99	7.93% Cost Bas
JOHNSON CONTROLS INC	300.000	\$15,665.70	\$14,552.46	\$-1,113.24	-7.11% Cost Bas
KINDER MORGAN INC	900.000	\$33,225.54	\$38,315.96	\$5,090.42	15.32% Cost Bas
LAS VEGAS SANDS CORP	555.000	\$41,677.89	\$41,454.33	\$-223.56	-0.54% Cost Bas
LIBERTY GLOBAL PLC SER C	300.000	\$12,722.22	\$12,008.78	\$-713.46	-5.61% Cost Bas
LEVEL 3 COMMUNICATIONS	800.000	\$13,521.88	\$38,752.72	\$26,230.84	193.99% Cost Bas
MICROSOFT CORP	455.000	\$15,280.66	\$16,641.73	\$1,361.07	8.91% Cost Bas

MONDELEZ INTL INC	MDLZ	400,000	\$15,492.06	\$14,055.98	\$-1,436.08	-9.27%	<u>Cost Base</u>
METLIFE INC	MET	670,000	\$31,834.08	\$34,699.78	\$2,865.72	9.00%	<u>Cost Base</u>
NIKE INC CL B	NIKE	200,000	\$13,415.22	\$15,021.68	\$1,606.46	11.97%	<u>Cost Base</u>
ON ASSIGNMENT INC	ASGN	351,000	\$9,023.57	\$10,338.39	\$1,314.82	14.57%	<u>Cost Base</u>
PENTAIR PLC	PNR	200,000	\$15,218.58	\$14,283.70	\$-934.88	-6.14%	<u>Cost Base</u>
PFIZER INC	PFE	1,000,000	\$22,417.62	\$29,159.36	\$6,741.74	30.07%	<u>Cost Base</u>
PLAINS GP HOLDINGS LP	PAGP	900,000	\$27,962.22	\$24,690.28	\$-3,271.94	-11.70%	<u>Cost Base</u>
PROCTER & GAMBLE CO	PG	50,000	\$4,287.00	\$4,646.63	\$359.63	8.39%	<u>Cost Base</u>
PRAXAIR INC	PX	119,000	\$10,961.16	\$15,176.96	\$4,215.80	38.46%	<u>Cost Base</u>
QUALCOMM INC	QCOM	150,000	\$12,248.61	\$11,449.86	\$-798.75	-6.52%	<u>Cost Base</u>
SCHLUMBERGER LTD	SLB	350,000	\$29,169.24	\$33,326.71	\$4,157.47	14.25%	<u>Cost Base</u>
SKYWORKS SOLUTIONS INC	SWKS	410,000	\$16,440.18	\$19,282.45	\$2,842.27	17.29%	<u>Cost Base</u>
TUPPERWARE BRANDS CORP	TUP	100,000	\$9,226.94	\$9,348.91	\$121.97	1.32%	<u>Cost Base</u>
TJX COS INC NEW	TJX	295,000	\$12,070.52	\$17,852.77	\$5,782.25	47.90%	<u>Cost Base</u>
US BANCORP DEL (NEW)	USB	580,000	\$19,492.82	\$24,551.70	\$5,058.88	25.95%	<u>Cost Base</u>
VOC ENERGY TRUST SBI	VOC	3,400,000	\$57,596.07	\$32,984.53	\$-24,611.54	-42.73%	<u>Cost Base</u>
VERIZON COMMUNICATIONS	VZ	315,601	\$15,185.15	\$14,950.28	\$-234.87	-1.55%	<u>Cost Base</u>
VODAFONE GROUP PLC SPON	VOD	654,546	\$36,212.18	\$21,394.76	\$-14,817.42	-40.92%	<u>Cost Base</u>
Portfolio Totals*:			\$902,008.69	\$972,888.20	\$70,879.51	7.86%	

*Total realized gain/loss does not include positions without a cost basis

Please Note: Cost Basis details for equities include intraday transactions. All other products are not adjusted for intraday activities.

Please Note: The "Realized Gain/Loss" information may include calculations based upon non-UBS Financial Services Inc. cost basis information. The Firm does not independently verify or guarantee the accuracy or validity of any information provided by sources other than UBS Financial Services Inc. In addition, if this report contains positions with unavailable cost basis, the realized gain/loss for these positions are in the calculation for the Total Realized Gain/Loss. As a result, these figures may not be accurate and are provided for informational purposes only. Clients should not rely on this information in making purchase or sell decisions, for tax purposes or otherwise. Rely only on year-end tax forms when preparing your tax return.

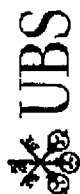
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For assistance, contact UBS Client Services USA at 1-888-278-3343 from within the U.S., from outside the U.S. call collect at 1-201-352-5257, or send an e-mail to online.services@ubs.com.



Business Services Account

Account name: THE PLYMOUTH ENDOWMENT FDN

Friendly account name: PEF Alt Strat

Account number: WT 37278 NI

Your Financial Advisor:
NICHOLS INVESTMENT GROUP

316-612-6500/866-311-9752

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Realized gains and losses

Estimated 2014 gains and losses for transactions with trade dates through 12/31/14 have been incorporated into this statement. Please note that gain or loss recognized on the sale or redemption of certain Structured Products, like Contingent Debt Securities, may be ordinary, and not capital, gain or loss. Please check with your tax adviser. To calculate gains and losses, we liquidate the oldest security lot first. This is known as the first-in, first-out or FIFO accounting method. We use this method unless you specified which tax lot to close when you placed your order. This is known as a versus purchases or VSP order.

See important information about your statement on the last page of this statement for more information. We may not adjust gains and losses for all capital changes. Cost basis for coupon tax-exempt municipal securities, include securities subject to AMT, has been adjusted for mandatory amortization of bond premium. Estimates in the Unclassified section can not be classified as short term or long term because information is missing, or the product is one in which the gain/loss calculation is not provided.

Short-term capital gains and losses

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
PIMCO UNCONSTRAINED BOND FUND CLASS C	FIFO	8,660	Dec 11, 13	Sep 26, 14	97.08	95.63			1.45
	FIFO	2,252	Dec 11, 13	Sep 26, 14	25.42	25.04			0.38
Total					\$122.50	\$120.67			\$1.83
Net short-term capital gains and losses									
									\$1.83

Long-term capital gains and losses

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
HSBC FIN CAPITAL TRUST 05 911% 113035 DTD112905 FC053006 IX NTS R/E	FIFO	15,000,000	Dec 06, 12	Sep 26, 14	15,369.75	15,003.15			366.60
JEFFERIES GROUP INC B/E 03 875% 110915 DTD110910 FC050911									
Original cost basis \$10,203.95	FIFO	10,000,000	Sep 26, 12	Dec 01, 14	10,214.75	10,063.47			151.28
LINCOLN NATL CORP IND 04 750% 021514 DTD020204 FC081504 NTS									
Original cost basis \$9,093.38	FIFO	9,000,000	Oct 13, 09	Feb 15, 14	9,000.00	9,000.00			
PIMCO UNCONSTRAINED BOND FUND CLASS C	FIFO	2,736,747	Oct 31, 11	Sep 26, 14	30,892.80	30,000.00			892.80
	FIFO	1,148	Nov 30, 11	Sep 26, 14	12.96	12.52			0.44
	FIFO	20,506	Dec 28, 11	Sep 26, 14	231.48	223.11			8.37
	FIFO	0,192	Dec 30, 11	Sep 26, 14	2.16	2.09			0.07
	FIFO	0,083	Jan 31, 12	Sep 26, 14	0.94	0.91			0.03
	FIFO	1,453	Feb 29, 12	Sep 26, 14	16.40	16.03			0.37
	FIFO	3,340	Mar 30, 12	Sep 26, 14	37.70	36.87			0.83

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Business Services Account

Account name: THE PLYMOUTH ENDOWMENT FDN

Friendly account name: PEF Alt Strat

Account number: WT 37278 NI

Your Financial Advisor:
NICHOLS INVESTMENT GROUP
316-612-6500/866-311-9752

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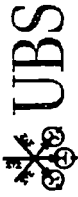
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Realized gains and losses (continued)

Long-term capital gains and losses (continued)

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
	FIFO	3 018	Apr 30, 12	Sep 26, 14	34 07	33 68			0 39
	FIFO	3 150	May 31, 12	Sep 26, 14	35 56	35 63		-0 07	
	FIFO	1 964	Jun 29, 12	Sep 26, 14	22 17	22 33		-0 16	
	FIFO	0 163	Jul 31, 12	Sep 26, 14	1 84	1 87		-0 03	
	FIFO	0 012	Aug 31, 12	Sep 26, 14	0 14	0 14			
	FIFO	0 080	Sep 28, 12	Sep 26, 14	0 90	0 93		-0 03	
	FIFO	0 123	Oct 31, 12	Sep 26, 14	1 39	1 44		-0 05	
	FIFO	0 324	Nov 30, 12	Sep 26, 14	3 65	3 78		-0 13	
	FIFO	3 258	Dec 12, 12	Sep 26, 14	36 78	37 95		-1 17	
	FIFO	47 690	Dec 27, 12	Sep 26, 14	538 33	547 48		-9 15	
	FIFO	0 117	Dec 31, 12	Sep 26, 14	1 32	1 34		-0 02	
	FIFO	0 029	Jun 28, 13	Sep 26, 14	0 33	0 33			
Total					\$66,455.42	\$65,045.05		-\$10.87	\$1,421.18
Net long-term capital gains or losses									\$1,410.37
Net capital gains/losses:									\$1,412.20



Business Services Account

Account name: THE PLYMOUTH ENDOWMENT FDN

Friendly account name: PEF AIL Strat

Account number: WT 37278 NI

Your Financial Advisor:
NICHOLS INVESTMENT GROUP
316-612-6500/866-311-9752

Realized gains and losses

Estimated 2014 gains and losses for transactions with trade dates through 12/31/14 have been incorporated into this statement. Please note that gain or loss recognized on the sale or redemption of certain Structured Products, like Contingent Debt Securities, may be ordinary, and not capital, gain or loss. Please check with your tax advisor. To calculate gains and losses, we liquidate the oldest security lot first. This is known as the first-in, first-out or FIFO accounting method. We use this method unless you specified which tax lot to close when you placed your order. This is known as a versus purchases or VSP order.

See Important information about your statement on the last page of this statement for more information. We may not adjust gains and losses for all capital changes. Cost basis for coupon tax-exempt municipal securities, include securities subject to AMT, has been adjusted for mandatory amortization of bond premium. Estimates in the Unclassified Section can not be classified as short term or long term because information is missing, or the product is one in which the gain/loss calculation is not provided.

Short-term capital gains and losses

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
PIMCO UNCONSTRAINED BOND FUND CLASS C	FIFO	8 600	Dec 11, 13	Sep 26, 14	97 08	95 63			1 45
	FIFO	2 252	Dec 11, 13	Sep 26, 14	25 42	25 04			0 38
Total					\$122.50	\$120.67			\$1.83

Net short-term capital gains and losses

Long-term capital gains and losses

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
HSBC FIN CAPITAL TRUST 05 911% 113035 DTD112905 FC053006 IX NTS B/E	FIFO	15,000 000	Dec 06, 12	Sep 26, 14	15,369 75	15,003 15			366 60
JEFFERIES GROUP INC B/E 03 875% 110915 DTD11 10910 FC050911									
Original cost basis \$10,203 95	FIFO	10,000 000	Sep 26, 12	Dec 01, 14	10,214 75	10,063 47			151 28
LINCOLN NATL CORP IND 04 750% 021514 DTD020204 FC081504 NTS									
Original cost basis \$9,093 38	FIFO	9,000 000	Oct 13, 09	Feb 15, 14	9,000 00	9,000 00			
PIMCO UNCONSTRAINED BOND FUND CLASS C	FIFO	2,736 747	Oct 31, 11	Sep 26, 14	30,892 80	30,000 00			892 80
	FIFO	1 148	Nov 30, 11	Sep 26, 14	12 96	12 52			0 44
	FIFO	20 506	Dec 28, 11	Sep 26, 14	231 48	223 11			8 37
	FIFO	0 192	Dec 30, 11	Sep 26, 14	2 16	2 09			0 07
	FIFO	0 083	Jan 31, 12	Sep 26, 14	0 94	0 91			0 03
	FIFO	1 453	Feb 29, 12	Sep 26, 14	16 40	16 03			0 37
	FIFO	3 340	Mar 30, 12	Sep 26, 14	37 70	36 87			0 83

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Business Services Account

Account name: THE PLYMOUTH ENDOWMENT FDN
Friendly account name: PEF All Strat
Account number: WT 37278 NI

Your Financial Advisor:
NICHOLS INVESTMENT GROUP
316-612-6500/866-311-9752

Realized gains and losses (continued)

Long-term capital gains and losses (continued)

Security description	Method	Quantity or face value	Purchase date	Sale date	Sale amount (\$)	Cost basis (\$)	Wash sale cost basis adjustment (\$)	Loss (\$)	Gain (\$)
	FIFO	3 018	Apr 30, 12	Sep 26, 14	34 07	33 68			0 39
	FIFO	3 150	May 31, 12	Sep 26, 14	35 56	35 63		-0 07	
	FIFO	1 964	Jun 29, 12	Sep 26, 14	22 17	22 33		-0 16	
	FIFO	0 163	Jul 31, 12	Sep 26, 14	1 84	1 87		-0 03	
	FIFO	0 012	Aug 31, 12	Sep 26, 14	0 14	0 14			
	FIFO	0 080	Sep 28, 12	Sep 26, 14	0 90	0 93		-0 03	
	FIFO	0 123	Oct 31, 12	Sep 26, 14	1 39	1 44		-0 05	
	FIFO	0 324	Nov 30, 12	Sep 26, 14	3 65	3 78		-0 13	
	FIFO	3 258	Dec 12, 12	Sep 26, 14	36 78	37 95		-1 17	
	FIFO	47 690	Dec 27, 12	Sep 26, 14	538 33	547 48		-9 15	
	FIFO	0 117	Dec 31, 12	Sep 26, 14	1 32	1 34		-0 02	
	FIFO	0 029	Jun 28, 13	Sep 26, 14	0 33	0 33			

Total

\$66,455.42

\$65,045.05

-\$10.81

\$1,421.18

Net long-term capital gains or losses

\$1,410.37

Net capital gains/losses:

\$1,412.20

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

PLYMOUTH ENDOWMENT FOUNDATION

Employer identification number
48-6124180

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREAKTHROUGH CLUB 1005 E 2ND WICHITA, KS 67214			0.	1,000.			
HABITAT FOR HUMANITY 420 E ENGLISH WICHITA, KS 67202			0.	1,000.			
MEDICAL SERVICE BUREAU 1148 S HILLSIDE WICHITA, KS 67211			0.	1,000.			
NATIONAL ASSOC CONGREGATIONAL CHURCHES - PO BOX 228 - OAK CREEK, WI 53154			0.	4,300.			
QUIVIRA COUNCIL BOY SCOUTS OF AMERICA - PO BOX 48166 - WICHITA, KS 67201			0.	1,000.			
RAINBOWS UNITED 340 S BROADWAY WICHITA, KS 67202			0.	1,000.			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SENIOR SERVICES INC OF WICHITA 200 S WALNUT WICHITA, KS 67213			0.	1,000.			
UNITED METHODIST URBAN MISSION 228 S ELLIS WICHITA, KS 67212			0.	1,000.			
YMCA WOMEN'S CRISIS CENTER 355 N WACO WICHITA, KS 67202			0.	1,000.			
GRACE MED 1122 N TOPEKA ST WICHITA, KS 67214			0.	1,000.			
KS ACTION FOR CHILDREN 720 SW JACKSON STE 201 TOPEKA, KS 66603			0.	1,000.			
UNION RESCUE MISSION 2800 N HILLSIDE WICHITA, KS 67220			0.	1,000.			
WICHITA CHILDRENS HOME 810 N HOLYOKE ST WICHITA, KS 67208			0.	1,000.			
PLYMOUTH CONGREGATIONAL CHURCH 202 N CLIFTON AVE WICHITA, KS 67208			0.	88,158.			
ROTARY CLUB OF WICHITA 106 W DOUGLAS, SUITE 909 WICHITA, KS 67202			0.	590.			

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIEDMONT COLLEGE 165 CENTRAL AVENUE DEMOREST, GA 30535			0.	1,000.			
SALVATION ARMY 350 N MARKET WICHITA, KS 67202			0.	1,000.			
PAN AMERICAN INSTITUTE MAR HUDSON 5204 TIJUANA, TX 78574			0.	1,000.			
GIRL SCOUTS OF AMERICA HEARTLAND 360 LEXINGTON WICHITA, KS 67218			0.	1,000.			
ENBER HOPE 4505 E 47TH ST WICHITA, KS 67210			0.	1,000.			
HEART SPRING 8700 E 29TH ST N WICHITA, KS 67226			0.	1,000.			
INTERFAITH MINISTRIES 829 N MAIN ST WICHITA, KS 67214			0.	1,000.			

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	5	14,000.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

PART I, LINE 2:

THE MISSION BOARD APPROVES AN ALLOTMENT OF GRANT MONEY TO BE DISTRIBUTED IN

THE CURRENT YEAR. APPLICATIONS ARE RECEIVED THROUGHOUT THE YEAR AND

GOVERNORS APPROVE THE GRANTS.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Electronic filing (e-file)** . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number
	PLYMOUTH ENDOWMENT FOUNDATION	Employer identification number (EIN) or 48-6124180
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P O box, see instructions. 202 N CLIFTON	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WICHITA, KS 67208	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

GRANT STANNARD

- The books are in the care of ► **6015 N. BROADWAY - WICHITA, KS 67219**
Telephone No ► **(316) 744-0433** Fax No ► **(316) 744-0436**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
► ☒ calendar year **2014** or
► ☐ tax year beginning _____, and ending _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.