

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

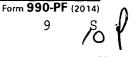
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

For calendar year 2014 or tax year beginning , 2014, and ending A Employer identification number Name of foundation THE ELAINE AND EUGENE CHISMER FAMILY FOUNDATION 54-1880826 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 757-625-9852 P O BOX 40200, FL9-100-10-19 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here JACKSONVILLE, FL 32203-0200 G Check all that apply: Initial return Initial return of a former public charity 1 Foreign organizations, check here 0 Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II. col. (c), line Other (specify) under section 507(b)(1)(B), check here . 16) ▶ \$ 198,997 (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) ... Check ► if the Tourndation is not set attach Sch B if the foundation is not required to 2 3 Interest on savings and temporary cash investments-5,124 5,244 STMT 4 Dividends and interest from securities b Net rental income or (loss) 16,508 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 99,065 5 600 assets on line 6a 16,508 Capital gain net income (from Part IV, line 2) . 7 N 8 Net short-term capital gain. S Š Income modifications -10a Gross sales less returns and allowances • • • ш **b** Less Cost of goods sold . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 12 Total. Add lines 1 through 11 752 21,632 13 Compensation of officers, directors, trustees, etc . . . NONE NONE 14 Other employee salaries and wages SCANNED MAY 1 NONE NONE 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) STMT 2 1,250 NONE NONE 1,250 ь 1,205 1,205 Other professional fees (attach schedule: 3. C 17 104 18 Taxes (attach schedule) (see instructions, 4. 19 Depreciation (attach schedule) and depletion. 20 NONE NONE 21 Travel, conferences, and meetings Due 21 NONE NONE Printing and publications 923 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Operat 2,559 1,205 NONE 1,250 Add lines 13 through 23. 35,000 35,000 Contributions, gifts, grants paid 37,559 205 NONE 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: -15,807a Excess of revenue over expenses and disbursements . b Net investment income (if negative, enter -0-) 20,427

JSA For Paperwork Reduction Act Notice, see instructions.

4E1410 1 0000 FU2789 L775 04/14/2015 15:56:14

c Adjusted net income (if negative, enter -0-). .



	- II	Attached schedules and amounts in the	Beginning of year	End o	of year
ľ	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments		18,914	18,914
	3	Accounts receivable ▶	~	,	
		Less: allowance for doubtful accounts ▶		VA.VA. (1) (100VV	
	4	Pledges receivable			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		wom/W	
	7	Other notes and loans receivable (attach schedule)	8 Jaka Carl Pa	i ki ' . ??k	in all the second
		Less: allowance for doubtful accounts NONE			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
4	10 a	Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) . STMT .5.		136,423.	180,083
		Investments - corporate bonds (attach schedule)		×	00V 11/ X P 6X /
		Investments - land, buildings, and equipment basis		********	. I I I I I I I I I I I I I I I I I I I
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule) Land, buildings, and equipment basis	P # 20 50 1 6 20	\$ 4% 3%-	, , , , , , , , , , , , , , , , , , ,
	14	equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the		455 225	100.00
		instructions. Also, see page 1, item I)	1/1,324.	155,337.	198,997
		Accounts payable and accrued expenses			
		Grants payable			{}·
Liabilities		Deferred revenue			
≝		Loans from officers, directors, trustees, and other disqualified persons	1		
ᆵ		Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)		NONE	
_		Foundations that follow SFAS 117, check here		INOINI	
		and complete lines 24 through 26 and lines 30 and 31.			
ès		•			
and	24	Unrestricted			
Ba	25	Temporarily restricted			
Net Assets or Fund Balance	26	Foundations that do not follow SFAS 117,			
2		check here and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	171,324.	155,337.	
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	1/1/321.	200/00/	
LSS	29	Retained earnings, accumulated income, endowment, or other funds			
et /	30	Total net assets or fund balances (see instructions)	171,324.	155,337.	
ž	31	Total liabilities and net assets/fund balances (see		200/00/	
		instructions)	171,324.	155,337.	
Р		Analysis of Changes in Net Assets or Fund Bala		233/03/.	
_		I net assets or fund balances at beginning of year - Part		must agree with	
		of-year figure reported on prior year's return)		-	171,324.
2					-15,807.
		er increases not included in line 2 (itemize)			
4	Add	lines 1, 2, and 3		4	155,517.
5	Decr	lines 1, 2, and 3	TEMENT 6	5_	180.
6	Tota	I net assets or fund balances at end of year (line 4 minus l	line 5) - Part II, column (b	o), line 30 6	155,337.

Form **990-PF** (2014)

Pa	rt IV Capital Gains	s and Losses for Tax on Inve	estment Income			
	(a) List an	(b) How acquired	(c) Date acquired	(d) Date sold		
	2-story b	P - Purchase D - Donation	(mo , day, yr.)	(mo , day, yr.)		
<u>1a</u>	PUBLICLY TRADED	SECURITIES	•			ļ
b						
_ <u>C</u> _	<u>-</u> ,					
<u>d</u>						
<u>e</u>					<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a	99,065.		82,557.			16,508.
<u>b</u>						
_ <u>C</u>			, , , , , , , , , , , , , , , , , , , ,		·····	
<u>d</u>						
<u>e</u>	Complete only for courts	abassas asia a asis as (b) and assaud	h the ferrodetion on 12/21/60			
	Complete only for assets	showing gain in column (h) and owned	·		Gains (Col. (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	
<u>a</u>						16,508.
<u>b</u>						
<u> </u>						
<u>_d</u>						
<u>e</u>				- 1		
2	Capital gain net income	or (net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		16 500
3	Not chart-term conital as	ain or (loss) as defined in sections 1.		-		16,508.
3		art I, line 8, column (c) (see inst	.			
	_		4	2		
Pa		Jnder Section 4940(e) for Redu		ncome		
Was		leave this part blank. the section 4942 tax on the distrib not qualify under section 4940(e). I		ase period	رر	Yes X No
1		nount in each column for each year;		any entr	ies	
÷	(a)	(b)	(c)	g drift Cita	(d)	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2013	11,250.	207,559.			0.054201
	2012	11,250.	194,129.			0.057951
	2011	36,195.	210,859.			0.171655
	2010	35,727.	230,487.			0.155007
	2009	35,828.	255,562.			0.140193
2		d)		2		0.579007
3	=	o for the 5-year base period - divide				0 115001
	number of years the four	ndation has been in existence if less	s than 5 years	3		0.115801
	Franciska makanakan af ma		Don't V. line 5	4		218,481.
4	Enter the net value of no	oncharitable-use assets for 2014 fro	m Part X, line 5	-		210,401.
E	Multiply line 4 by line 2			5		25,300.
5	wuitiply line 4 by line 3			<u> </u>		25,500.
6	Enter 1% of net investme		6		204.	
_				_		25 524
7	Add lines 5 and 6			7		25,504.
8		tions from Part XII, line 4 greater than line 7, check the box		8 hat part	using a 1% tax	36,250. crate See the

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	204.
	here ► X and enter 1% of Part I, line 27b	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J	
	Part I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2	
3	Add lines 1 and 2	204.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4	NONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	204.
6	Credits/Payments:	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	
b	Exempt foreign organizations - tax withheld at source	
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE	
d	Backup withholding erroneously withheld	láss
7	Total credits and payments. Add lines 6a through 6d	NONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	204
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	204.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax NONE Refunded 11	
	t VII-A Statements Regarding Activities	Yes No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a Yes No
	participate or intervene in any political campaign?	14 1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1b X
	Instructions for the definition)?	. 3 6000 200 7 0
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	
	published or distributed by the foundation in connection with the activities.	1c X
ر د	Did the foundation file Form 1120-POL for this year?	P 3 4 3 100
a	(1) On the foundation \blacktriangleright \$	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	
-	foundation managers > \$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
~	If "Yes," attach a detailed description of the activities.	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	If "Yes," attach the statement required by General Instruction T	1 1 1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
	By language in the governing instrument, or	* * * * * * * * * * * * * * * * * * * *
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	برخند
	conflict with the state law remain in the governing instrument?	6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7 X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	
	VA	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8P X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	200 EV. 200 EV. 2
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	
	complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
	names and addresses	10 PE (004)
	-	

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? | 4b | X

Form 990-PF (2014)

4a

	VII-B Statements Regarding Activities f	or Which Form 4		uired (cont	inued)		
5a	During the year did the foundation pay or incur any amount					8.	3
	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	. Yes	X No		\$
	(2) Influence the outcome of any specific public ele					19 3	
	directly or indirectly, any voter registration drive?		·		X No	i e	
	(3) Provide a grant to an individual for travel, study, or o			1 1	X No		
	(4) Provide a grant to an organization other than a					***	
	section 4945(d)(4)(A)? (see instructions)			1 - 2	X No	; 🐉	
	(5) Provide for any purpose other than religious, ch					³ '≽	· 3 · 3,
	purposes, or for the prevention of cruelty to children			1 1	X No	. 248	
b	If any answer is "Yes" to 5a(1)-(5), did any of the			• 📖		(- ² / ₂ / ₂ / ₂	3.74
U	Regulations section 53.4945 or in a current notice regar					5b	
	Organizations relying on a current notice regarding disas	<u> </u>					a
	, ,						\$15.88 N
С	If the answer is "Yes" to question 5a(4), does the			1 1 .	No		ag al. 1
	because it maintained expenditure responsibility for the					N Y	3.99 %;
_	If "Yes," attach the statement required by Regulations sec					· 渝 · 。	. x
6a	Did the foundation, during the year, receive any fur				X No	** *	
	on a personal benefit contract?			•		· .	x (
b	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personai benefit contra	ct/		6b	
	If "Yes" to 6b, file Form 8870				X No		
7a	At any time during the tax year, was the foundation a pa						. XX 2.Xx1
ь						7b	
Par	Information About Officers, Director and Contractors	13, 11ustees, 10u	indation ivianage	s, mgmy i	aid Eilip	ioyees,	
1	List all officers, directors, trustees, foundation ma						·
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributi employee bene and deferred com	fit plans	(e) Expens other all	e account, owances
ELAIN	E M. CHISMER	PRESIDENT					
4736	DOVEDALE, WILLIAMSBURG, VA 23188	5	-0-		-0-		-0-
WILLI	AM_M. BALAVAGE, CPA	DIRECTOR					
14 MA	IN ST., LUZERNE, PA 18709-1212	5	-0-		-0-		-0-
		1					
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	e 1 - see i	nstruction	ns). If no	one, enter
	No	(b) Title, and average	(a) Came	(d) Contribut employee b		(e) Expens	se account,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and de compensa		other all	owances
				оотгропос			••••
NON			NONE	NON	E	N	ONE
11011			HONE	1,02,			01112
							<u> </u>
		1					
		1			+		ONE
rotal	number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·					ONE (2014)

Part VIII	Information About Officers, Directors, Trustees, Foundation Mand Contractors (continued)	anagers, Highly Paid Emplo	yees,
3 Five high	hest-paid independent contractors for professional services (see instr	uctions). If none, enter "NONE	"
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
	~		
Total number	of others receiving over \$50,000 for professional services		NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistics and other beneficiaries served, conferences convened, research papers produced, etc	al information such as the number of	Expenses
1NONE_			
2			
	·		
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1NONE_			
2			
All other prog	ram-related investments. See instructions		
3NONE			
Total. Add Irr	nes 1 through 3	>	

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn found	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	\$	
а	Average monthly fair market value of securities	1a	208,822.
b	Average of monthly cash balances	1b	12,986.
С	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	221,808.
е	Reduction claimed for blockage or other factors reported on lines 1a and	• •	
	1c (attach detailed explanation)	يدة ا	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	221,808.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	3,327.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	218,481.
6	Minimum investment return. Enter 5% of line 5	6	10,924.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part.)	dations	•
1	Minimum investment return from Part X, line 6	1	10,924.
2a	Tax on investment income for 2014 from Part VI, line 5		
b		1	
C	Add lines 2a and 2b	2c	204.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,720.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	10,720.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	10,720.
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	36,250.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	·-	
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:	-	
а		3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	36,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	· · · · · · · · · · · · · · · · · · ·	30,230.
3	Enter 1% of Part I, line 27b (see instructions)	5	204.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	36,046.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when or		
	qualifies for the section 4940(e) reduction of tax in those years.	aroulduring	michiel the louiluation

Form **990-PF** (2014)

Page 9

	1990-PF (2014)	untin nol			Page 9
Pa	rt XIII Undistributed Income (see instru	· ·	4.1		
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				10,720.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only		17017	NONE	
b	Total for prior years: 20_12_,20,20		NONE		`
3	Excess distributions carryover, if any, to 2014				1
а	From 2009				
b	From 2010	× *			t 5
C	From 2011				! !
d	From 2012	*	`		1
е	From 2013	The same according to the same set of the same			'
f	Total of lines 3a through e	75,865.	······································		
4	Qualifying distributions for 2014 from Part XII,			, ,	1
	line 4: ▶ \$36,250.				
а	Applied to 2013, but not more than line 2a			NONE	
ь	Applied to undistributed income of prior years				!
-	(Election required - see instructions)		NONE	<u> </u>	ķ
	Treated as distributions out of corpus (Election				
٠	required - see instructions)	NONE	ı L	,	
d	Applied to 2014 distributable amount				10,720.
	Remaining amount distributed out of corpus	25,530.			
5	Excess distributions carryover applied to 2014	NONE	,		NONE
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:	101,395			
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	101,393.			
b	Prior years' undistributed income. Subtract		NONE	, ,	
	line 4b from line 2b Enter the amount of prior years' undistributed		IVOIVE		
·	income for which a notice of deficiency has	` , ,		, ,	
	been issued, or on which the section 4942(a)		NONE	,	1
	tax has been previously assessed		NONE		· · · · · · · · · · · · · · · · · · ·
d	Subtract line 6c from line 6b. Taxable		NONE		
_	amount - see instructions		NONE		T
e	4a from line 2a Taxable amount - see			NONE	
	instructions			NONE	*****
f	Undistributed income for 2014. Subtract lines	*	,		
	4d and 5 from line 1 This amount must be				17017
	distributed in 2015				NONE
7	Amounts treated as distributions out of corpus				:
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				1
	required - see instructions)	NONE		-	
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	23,084.			
9	Excess distributions carryover to 2015.				•
	Subtract lines 7 and 8 from line 6a	78,311.			
10	Analysis of line 9:	į			ŧ
а	Excess from 2010 24,349.				1
b	Excess from 2011 25, 762.		:		
C	Excess from 2012 1,679.				
d	Excess from 2013 991.				
_e	Excess from 2014 25,530.				
					Form 990-PF (2014)

54-1880826

Par	t XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	letermination letter that	t it is a private opera	ating	
	foundation, and the ruling	g is effective for 2014, en	ter the date of the ruling		▶	
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years	,	(e) Total
	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(0, 10.2)
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
c	Qualifying distributions from Part				•	
لد	XII, line 4 for each year listed .					<u> </u>
a	Amounts included in line 2c not used directly for active conduct					
	of exempt activities				. ,	
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c					
_	alternative test relied upon					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying	,				
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test - enter	4				
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt					
	organization (4) Gross investment income .					
Par		ntary Information (Complete this part	only if the found	ation had \$5.000	or more in assets
		during the year - s				
1	Information Regarding	Foundation Manager	rs:			
а	List any managers of					ed by the foundation
	before the close of any	tax year (but only if the	ney have contributed r	nore than \$5,000). (So	ee section 507(d)(2).)	
	ELAINE M.					
b	List any managers of					/ large portion of the
	ownership of a partner	snip or other entity) of	rwnich the foundation	i nas a 10% or greater	interest.	
	27/2					
2	N/A Information Regarding	Contribution Grant	Gift Loan Scholarshi	n etc Programs		· · · · ·
_	Check here ▶ if t				table organizations	and door not secont
	unsolicited requests f					
	other conditions, comp		• • •	, ,	·	J
a	The name, address, an	d telephone number o	or e-mail address of the	person to whom app	lications should be ad	dressed:
	SEE STATEMENT	7				
b	The form in which app		bmitted and information	on and materials they	should include:	
	SEE ATTACHED S'	TATEMENT FOR L	INE 2			
C	Any submission deadli					
	SEE ATTACHED S'	FATEMENT FOR L	INE 2			
	Any restrictions or !	mitations on awards	such as by assert	phical areas showes	hia fialds kinds of :	netitutions or other
a	Any restrictions or li factors:	imiauons on awards,	, such as by geogra	pilicai aleas, chafita	vie lielus, kinus of l	namonons, or other
	SEE ATTACHED S'	יז מ∧ם ייואם אם ייאי	INE 2			
JSA		TWITHING TOW TO	LINE Z			Form 990-PF (2014)
1490 1 (JUU					

Part XV Supplementary Information (continued)				
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	g the Year or Appr	oved for F	uture Payment	·-
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
CHILDREN'S HOSP KING'S DAUGHTERS			HAYES CLONINGER END FD	
601 CHILDREN'S LN NORFOLK VA 23507	N/A	PC	CHILDHOOD CANCER	35,000.
		İ		
		1		
Total		· · · · · ·	▶ 3a	35,000.
b Approved for future payment				
т. , , , , , , , , , , , , , , , , , , ,]			
	1	İ		
		}		
	1	L	.	
Total		<u></u>		- 000 05

Form **990-PF** (2014)

gross amounts unless otherwise indicated.	(a)	(b)	(c)	(d)	(e) Related or exempt function income
rogram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions)
					
Fees and contracts from government agencies					
Nembership dues and assessments					
nterest on savings and temporary cash investments					
Dividends and interest from securities			14	5,244.	
let rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
Other investment income	<u></u> ,		18	16,508.	
Gain or (loss) from sales of assets other than inventory			18	16,508.	
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue: a			-		
ubtotal Add columns (b), (d), and (e)	,			21,752.	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities EXILED REPORTS TO THE PROPERTY OF T	ilations) to the Ac	complishment of E	xempt Purp	oses	
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcu	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations) to the Ac	complishment of E h income is reported it purposes (other than	xempt Purp in column (e by providing	oses of Part XVI-A contribu	ted importantly to

_	XVI		Information R	egarding Tra	nsfers To an	d Transaction		ationships V	With None	chari		16 10
			Exempt Organ									
1	Did t	he o	rganization direct	y or indirectly	engage in any o	of the following	with any other	er organization	described	13%	Yes	No
	in sec	ction	501(c) of the Co	de (other than	section 501(c)(3	3) organizations	s) or in section	527, relating t	to political		\$ ·	,
	orgar	nizati	ons?							, ,		3
а	-		from the reporting	foundation to	a noncharitable	exempt organia	zation of:			iska .	á. Šta	Â.
										1a(1)		X
			assets							1a(2)		Х
b			sactions:							78 Vb ~	St 2.438	` &_
-			of assets to a none	charitable exem	int organization					16(1)		X
			ases of assets from									X
			of facilities, equip									X
												X
			oursement arrange									X
			or loan guarantee									X
			mance of services		_						-	
		-	f facilities, equipm									X
d			wer to any of th									
			he goods, other									
		$\overline{}$	iny transaction or									
(a) L	ne no	(t) Amount involved	(c) Name of n	oncharitable exempt	organization	(d) Description	of transfers, transac	tions, and shar	ing arra	ngeme	nts
		<u> </u>										
		<u> </u>										
			·									
	-											
		<u> </u>										
		 	·									
		╁										
		-										
		-						· · · · · · · · · · · · · · · · · · ·				
		┢										
		<u> </u>				l		·····				
2a			indation directly of							_		.
			in section 501(c)			1 501(c)(3)) or i	n section 527	'	L	Ye	es X	.J No
<u>b</u> _	If "Ye		omplete the follow	l l								
		(1	a) Name of organization	n	(b) Type	of organization		(c) Descript	tion of relations	hip		
			nalties of perjury, I decla id complete Declaration of						of my knowledg	e and b	elief, it	s true
Sigr		T.	01 /4 //	preparer (other than a	sxpayer, is based on air i	· ·	-		Mary Alta 100	4	- 45	
		IN	MEAULA	VE 2	4-21	1-15	Aure	lary	May the IRS with the pre	eparer :		below
ler	3	gnatu	re of officer or trustee	7	Date		Title	-4	(see instruction	· [Yes	No
	-			\)		•		ν				
		Pt	int/Type preparer's nai	me	Preparer's signa	ature	Daty	Ch	eck If P	TIN		
Paid	l	F	ELAINE R. JA	RRETT	/X///	UNIN	\sim 14.	/// //	. – I.	P000	2236	6
rer	oarer	· -	, <u>D</u> 7	MV OF AMED	TCA NI A		-\	/ [5 . 5.1	> 04	1607	66E	<u> </u>

32203-0200

877-446-1410

Use Only Firm's address ► PO BOX 40200, FL9-100-10-19 JACKSONVILLE, FL

. . . ,

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	132. 3,045. 6. 1,941. 5,124.
REVENUE AND EXPENSES PER BOOKS	132. 120. 3,045. 6. 1,941. 5,244.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS OTHER INTEREST NONQUALIFIED DOMESTIC DIVIDENDS

STATEMENT

FEES	
CCOUNTING	11 11 11 11 11 11 11
₹ -	
	ij
Н	Ш
PART	} } } } }
990PF,	
PORM	

CHARITABLE PURPOSES	1,250.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	========= =NON
REVENUE AND EXPENSES PER BOOKS	1,250.
DESCRIPTION	TAX PREPARATION FEE - BOA TOTALS

 α

STATEMENT

 \sim

STATEMENT

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	1,205.	
REVENUE AND EXPENSES PER BOOKS	1,205.	
DESCRIPTION	INVESTMENT MGMT FEES - BOA	TOTALS

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

EXCISE TAX - PRIOR YEAR

104.

TOTALS

104.

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV 	17,303. 115,519. 23,478. 23,783.	180,083.
ENDING BOOK VALUE	15,090. 73,945. 23,692. 23,696.	136,423.
BEGINNING BOOK VALUE	17,950. 88,444. 56,507.	162,901.
		TOTALS
DESCRIPTION	19765H727 COLUMBIA CONVERTIBLE 19765N245 COLUMBIA DIVIDEND IN 693390700 PIMCO TOTAL RETURN F 258620103 DOUBLELINE TOTAL RET 592905509 METRO WEST T/R BD CL	

വ

FORM 990PF, PART III - OTHER	DECREASES	IN NET	WORTH OR	FUND BALANCES
	=======	======	======	
DESCRIPTION				AMOUNT
TAX EFFECTIVE INCOME ADJUSTME	ENT			58.
SALES ADJUSTMENT			•	119.
ROUNDING				3.
	TOTA	ΑL		180.
				===========

THE ELAINE AND EUGENE CHISMER FAMILY FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:
JOSEPH LIPSCOMB

ADDRESS:

BANK OF AMERICA, 1 COMMERCIAL PL NORFOLK, VA 23510-2101

RECIPIENT'S PHONE NUMBER: 757-625-9852

FORM, INFORMATION AND MATERIALS: LETTER

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS: NONE