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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014, and ending 12-31-2014

Name of foundation HAMILTON FAMILY FOUNDATION CHARITABLE TRUST		A Employer identification number 54-6402636	
Number and street (or P O box number if mail is not delivered to street address) 1802 BAYBERRY COURT NO 401		B Telephone number (see instructions) (804) 285-7700	
City or town, state or province, country, and ZIP or foreign postal code RICHMOND, VA 23226		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 1,618,824		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	100,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities.	39,334	39,334		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	26,817			
	b Gross sales price for all assets on line 6a 91,972				
	7 Capital gain net income (from Part IV, line 2) . . .		26,817		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	1,484	0		
	12 Total. Add lines 1 through 11	167,635	66,151		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,884	0		188
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	600	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	2,484	0		188
	25 Contributions, gifts, grants paid	65,547			65,547
	26 Total expenses and disbursements. Add lines 24 and 25	68,031	0		65,735
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	99,604			
	b Net investment income (if negative, enter -0-)		66,151		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	9,717	8,370	8,370
	2	Savings and temporary cash investments	81,541	129,820	129,820
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	543,460	596,332	1,480,634
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	634,718	734,522	1,618,824	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	634,718	734,522	
	30	Total net assets or fund balances (see instructions)	634,718	734,522	
31	Total liabilities and net assets/fund balances (see instructions) . . .	634,718	734,522		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 634,718
2	Enter amount from Part I, line 27a	2 99,604
3	Other increases not included in line 2 (itemize) ▶	3 200
4	Add lines 1, 2, and 3	4 734,522
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 734,522

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	76 SHARES PERRIGO COMPANY PLC	P	2013-12-19	2014-01-17
b	2785 SHARES PFIZER INCORPORATED	P	1997-06-23	2014-05-09
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 11,786		11,806	-20
b 80,186		53,349	26,837
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			-20
b			26,837
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	26,817
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	54,091	1,337,033	0 040456
2012	45,975	1,115,746	0 041206
2011	38,681	931,954	0 041505
2010	36,849	806,697	0 045679
2009	39,988	733,650	0 054506

2	Total of line 1, column (d).	2	0 223352
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 044670
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	1,502,997
5	Multiply line 4 by line 3.	5	67,139
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	662
7	Add lines 5 and 6.	7	67,801
8	Enter qualifying distributions from Part XII, line 4.	8	65,735

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	1,323
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3		Add lines 1 and 2.		3	1,323
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,323
6		Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	600		
b	Exempt foreign organizations—tax withheld at source	6b			
c	Tax paid with application for extension of time to file (Form 8868)	6c			
d	Backup withholding erroneously withheld	6d			
7		Total credits and payments. Add lines 6a through 6d.		7	600
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	723
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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.	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		No
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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> 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	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	10		No

Part VII-A

Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of BRYAN BROTHERS INC Telephone no (804) 285-7700 Located at 1802 BAYBERRY CT SUITE 401 RICHMOND VA ZIP +4 23226			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). Yes No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? Yes No If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b		
Organizations relying on a current notice regarding disaster assistance check here.				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If "Yes," attach the statement required by Regulations section 53.4945–5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b		No
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMES C HAMILTON	TRUSTEE	0	0	0
5 JOHN CHRISTOPHER COURT	0 00			
RICHMOND,VA 23226				
HELEN H HORSLEY	TRUSTEE	0	0	0
210 GUN CLUB ROAD	0 00			
RICHMOND,VA 23221				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,379,523
b	Average of monthly cash balances.	1b	146,362
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,525,885
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,525,885
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	22,888
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,502,997
6	Minimum investment return. Enter 5% of line 5.	6	75,150

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	75,150
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	1,323
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,323
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	73,827
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	73,827
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	73,827

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	65,735
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	65,735
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	65,735
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				73,827
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			65,561	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010.				
c From 2011.				
d From 2012.				
e From 2013.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 65,735				
a Applied to 2013, but not more than line 2a			65,561	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2014 distributable amount.				174
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				73,653
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .				

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

See Additional Data Table

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

JAMES C HAMILTON
1802 BAYBERRY COURT STE 401
RICHMOND, VA 23226
(804) 285-7700

b

The form in which applications should be submitted and information and materials they should include

NO SPECIAL FORM

c

Any submission deadlines

NONE

d

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

TAX EXEMPT ENTITIES ONLY

Part XV

Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	65,547
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Part XVII


1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?				Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of					
(1) Cash.			1a(1)		No
(2) Other assets.			1a(2)		No
b Other transactions					
(1) Sales of assets to a noncharitable exempt organization.			1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.			1b(2)		No
(3) Rental of facilities, equipment, or other assets.			1b(3)		No
(4) Reimbursement arrangements.			1b(4)		No
(5) Loans or loan guarantees.			1b(5)		No
(6) Performance of services or membership or fundraising solicitations.			1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.			1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received					

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.		
	***** _____ Signature of officer or trustee	2015-05-11 _____ Date	***** _____ Title


May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name BRYAN BROTHERS INC	Preparer's Signature	Date 2015-05-11	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00294400
	Firm's name <input checked="" type="checkbox"/> BRYAN BROTHERS INC			Firm's EIN <input checked="" type="checkbox"/> 54-0721706	
	Firm's address <input checked="" type="checkbox"/> 1802 BAYBERRY CT SUITE 401 RICHMOND, VA 232263773			Phone no (804) 285-7700	


Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JAMES C HAMILTON
HELEN H HORSLEY


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN RED CROSS 420 E CARY STREET RICHMOND,VA 23219	NONE		GENERAL OPERATIONS	1,000
ANNA JULIA COOPER EPISCOPAL SCHOOL 2124 N 29TH STREET RICHMOND,VA 23223	NONE		GENERAL OPERATIONS	2,500
ART 180 114 W MARSHALL STREET RICHMOND,VA 23220	NONE		GENERAL OPERATIONS	1,000
BETTER HOUSING COALITION PO BOX 12117 RICHMOND,VA 23241	NONE		GENERAL OPERATIONS	1,000
BLUE SKY FUND PO BOX 8108 RICHMOND,VA 23223	NONE		GENERAL PURPOSES	1,000
BON SECOURS HOSPICE 7229 FOREST AVENUE STE 200 RICHMOND,VA 23226	NONE		GENERAL PURPOSES	2,000
CAMP MERRIE-WOODE 100 MERRIE-WOODE ROAD SAPPHIRE,NC 28774	NONE		GENERAL PURPOSES	1,000
CARITAS PO BOX 25790 RICHMOND,VA 23260	NONE		GENERAL PURPOSES	1,000
CHILD FUND PO BOX 26507 RICHMOND,VA 23261	NONE		GENERAL PURPOSES	447
CHILDREN'S HOSPITAL FOUNDATION 2924 BROOK ROAD RICHMOND,VA 23220	NONE		GENERAL PURPOSES	1,000
CRC RECOVERY FOUNDATION 309 NE 1ST STREET DELRAY BEACH,FL 33483	NONE		GENERAL PURPOSES	400
CROSS OVER HEALTHCARE MINISTRY 8600 QUIOCCASIN ROAD STE 102 RICHMOND,VA 23229	NONE		GENERAL PURPOSES	1,000
CURE ALZHEIMER'S FUND 34 WASHINGTON STREET STE 200 WELLESLEY HILLS,MA 02481	NONE		GENERAL PURPOSES	1,000
FEEDMORE 1415 RHOADMILLER STREET RICHMOND,VA 23220	NONE		GENERAL PURPOSES	1,000
FISHERS ISLAND FIRE DEPARTMENT PO BOX 123 FISHERS ISLAND,NY 06390	NONE		GENERAL PURPOSES	1,000
Total  3a				65,547


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FLORIDA WILDLIFE FEDERATION 2545 BLAIRSTONE PINES DRIVE TALLAHASSEE,FL 32301	NONE		GENERAL PURPOSES	200
FRIENDS OF BRYAN PARK 4308 HERMITAGE ROAD RICHMOND,VA 23227	NONE		GENERAL PURPOSES	1,000
FRIENDS OF HOLLYWOOD CEMETERY 412 S CHERRY STREET RICHMOND,VA 23220	NONE		GENERAL PURPOSES	1,000
HELP SAVE THE NEXT GIRL PO BOX 8062 ROANOKE,VA 24014	NONE		GENERAL PURPOSES	1,000
HENRY L FERGUSON MUSEUM PO BOX 554 FISHERS ISLAND,NY 06390	NONE		GENERAL PURPOSES	600
HISTORIC RICHMOND FOUNDATION 4 E MAIN STREET STE 1C RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
HOSPITAL HOSPITALITY HOUSE 612 E MARSHALL STREET RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
INSTRUCTIVE VISITING NURSE ASSOCIATION (INVA) 5008 MONUMENT AVE RICHMOND,VA 23230	NONE		GENERAL PURPOSES	750
ISLAND HEALTH PROJECT PO BOX 344 FISHERS ISLAND,NY 06390	NONE		GENERAL PURPOSES	1,000
LAKE DELAWARE BOY'S CAMP 500 LAKE DELWARE DRIVE DELHI,NY 13753	NONE		GENERAL PURPOSES	1,000
LAWRENCE AND MEMORIAL HOSPITAL 365 MONTAUK AVENUE NEW LONDON,CT 06320	NONE		GENERAL PURPOSES	1,000
LEWIS GINTER BOTANICAL GARDEN 1800 LAKESIDE AVENUE RICHMOND,VA 23228	NONE		GENERAL PURPOSES	1,500
MAYMONT FOUNDATION 1700 HAMPTON STREET RICHMOND,VA 23220	NONE		GENERAL PURPOSES	2,000
PETER PAUL DEVELOPMENT CENTER 1708 N 22ND STREET RICHMOND,VA 23223	NONE		GENERAL PURPOSES`	1,000
RICHMOND BALLET 407 E CANAL STREET RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,500
Total  3a				65,547

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RICHMOND CHRISTMAS MOTHER FUND 300 E FRANKLIN STREET RICHMOND,VA 23219	NONE		GENERAL PURPOSES	500
RICHMOND FORUM 6968 FOREST HILL AVENUE RICHMOND,VA 23225	NONE		KRUEGER FUND	1,000
RICHMOND PUBLIC LIBRARY FOUNDATION 101 E FRANKLIN STREET RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
RICHMOND SYMPHONY 612 E GRACE STREET STE 401 RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
ROBERT E LEE MEMORIAL FOUNDATIONSTRATFORD HALL 483 GREAT HOUSE ROAD STRATFORD,VA 22558	NONE		GENERAL PURPOSES	2,500
SALVATION ARMY PO BOX 388 NORFOLK,VA 23501	NONE		GENERAL PURPOSES	50
SCENIC VIRGINIA 4 E MAIN STREET STE 2A RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
SCIENCE MUSEUM OF VIRGINIA FOUNDATION PO BOX 11624 RICHMOND,VA 23230	NONE		GENERAL PURPOSES	1,000
SHELTERING ARMS PHYSICAL REHABILITATION HOSPITAL 8254 ATLEE ROAD MECHANICSVILLE,VA 23116	NONE		GENERAL PURPOSES	1,000
SMITH COLLEGE 33 ELM STREET NORTHAMPTON,MA 01063	NONE		GENERAL PURPOSES	1,000
ST CATHERINE'S SCHOOL 6001 GROVE AVENUE RICHMOND,VA 23226	NONE		GENERAL PURPOSES	2,000
ST JOHN'S CHURCH PO BOX 505 FISHERS ISLAND,NY 06390	NONE		GENERAL OPERATIONS	200
ST JOSEPH'S VILLA 8000 BROOK ROAD RICHMOND,VA 23227	NONE		GENERAL PURPOSES	1,000
ST MARY'S EPISCOPAL CHURCH 12291 RIVER ROAD RICHMOND,VA 23238	NONE		GENERAL PURPOSES	2,550
ST PAUL'S EPISCOPAL CHURCH 188 S SWINTON AVENUE DELRAY BEACH,FL 33444	NONE		PAUL'S PLACE SCHOLARSHIP FUND	500
Total  3a				65,547

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ST TIMOTHY'S SCHOOL 8400 GREENSPRING AVENUE STEVENSON,MD 21153	NONE		GENERAL PURPOSES	2,500
UNITED WAY GREATER RICHMOND 2001 MAYWILL STREET RICHMOND,VA 23230	NONE		GENERAL PURPOSES	1,000
VALENTINE RICHMOND HISTORY CENTER 1015 E CLAY STREET RICHMOND,VA 23219	NONE		GENERAL PURPOSES	1,000
VCU MASSEY CANCER CENTER PO BOX 843042 RICHMOND,VA 23284	NONE		GENERAL PURPOSES	2,000
VIRGINIA HISTORICAL SOCIETY 428 N BOULEVARD RICHMOND,VA 23221	NONE		GENERAL PURPOSES	2,500
VIRGINIA HOME FOR BOYS AND GIRLS 8716 WBROAD STREET HENRICO,VA 23294	NONE		GENERAL PURPOSES	1,000
VIRGINIA HOME 1101 HAMPTON STREET RICHMOND,VA 23220	NONE		GENERAL PURPOSES	2,050
VIRGINIA MUSEUM OF FINE ARTS FOUNDATION 200 N BOULEVARD RICHMOND,VA 23220	NONE		GENERAL PURPOSES	2,500
WAYSIDE HOUSE 378 NE 6TH AVENUE DELRAY BEACH,FL 33483	NONE		GENERAL PURPOSES	250
WESTOVER SCHOOL 1237 WHITEMORE ROAD MIDDLEBURY,CT 06762	NONE		GENERAL PURPOSES	50
WILLIAM BYRD COMMUNITY HOUSE 224 S CHERRY STREET RICHMOND,VA 23220	NONE		GENERAL PURPOSES	2,500
Total  3a				65,547

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization	Employer identification number
HAMILTON FAMILY FOUNDATION CHARITABLE TRUST	54-6402636

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Employer identification number
54-6402636

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<div>HELEN HAYES HAMILTON</div> <div>5 JOHN CHRISTOPHER COURT</div> <div>RICHMOND, VA 23226</div>	\$ 100,000	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<div> <div>Person</div> <div>Payroll</div> <div>Noncash</div> </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div>(Complete Part II for noncash contributions)</div>

Name of organization HAMILTON FAMILY FOUNDATION CHARITABLE TRUST	Employer identification number 54-6402636
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Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	_____ \$	_____

Name of organization HAMILTON FAMILY FOUNDATION CHARITABLE TRUST	Employer identification number 54-6402636
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	

TY 2014 Accounting Fees Schedule**Name:** HAMILTON FAMILY FOUNDATION CHARITABLE TRUST**EIN:** 54-6402636

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX AND ACCOUNTING FEES	1,884	0		188

TY 2014 Investments Corporate Stock Schedule

Name: HAMILTON FAMILY FOUNDATION CHARITABLE TRUST

EIN: 54-6402636

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESTMENTS - CORPORATE STOCK	596,332	1,480,634

TY 2014 Other Income Schedule

Name: HAMILTON FAMILY FOUNDATION CHARITABLE TRUST

EIN: 54-6402636

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
2013 FORM 990-PF REFUND	1,484		1,484

TY 2014 Other Increases Schedule**Name:** HAMILTON FAMILY FOUNDATION CHARITABLE TRUST**EIN:** 54-6402636

Description	Amount
2013 CONTRIBUTION APPLIED TO 2014-CHECK OUTSTANDING @12/31/13	200

TY 2014 Taxes Schedule

Name: HAMILTON FAMILY FOUNDATION CHARITABLE TRUST

EIN: 54-6402636

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2014 990-PF ESTIMATED TAXES	600	0		0