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Return of Private Foundation

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

OMB No 1545-0052

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De	partme	ent of the Treasury Revenue Service Do not enter so Information about Form	cial security numbers or		•	•	pen to Public Inspection
_		endar year 2014 or tax year beginning	1 330-11 and its separat		, and endi		, 20
		of foundation		, 2014	, una chan	A Employer identifi	
	FRAN	NK LITZ SMOOT CHARITABLE TRU	IST			55-	0717997
		er and street (or P O box number if mail is not delivere			Room/suit		
	P.O.	<u>. BOX</u> 950			<u> </u>	30	4-325-7151
	City or	town, state or province, country, and ZIP or foreign po	stal code				
						C If exemption applica pending, check here	tion is
		EFIELD, WV 24701			· • • • • • • • • • • • • • • • • • • •		
G	Chec	ck all that apply Initial return	Initial return	of a former p	oublic char	Ity D 1 Foreign organizat	ions, check here • • •
		Final return	Amended re	turn		2 Foreign organizat	
_		Address change	Name chang			85% test, check h	
H	\neg		(c)(3) exempt private			E If private foundation	status was terminated
1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b)(1)(A), check here .
ı			unting method X C	ash Acc	rual		n a 60-month termination
			ther (specify)			under section 507(b)(1)(B), check here .
		► \$ 1,012,125. (Part I, Analysis of Revenue and Expenses (The	column (d) must be on ca	ISII DASIS)			(d) Disbursements
	ait i	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))	books	incor	ne	income	purposes (cash basis only)
\neg	1	Contributions, gifts, grants, etc , received (attach schedule) .		 			
ŀ	2	Check if the foundation is not required to		 			
	3	attach Sch B					
	4	Dividends and interest from securities	20,548	. 2	20,472.		STMT 1
	5a	Gross rents					
	b	Net rental income or (loss)				DECENTED	
ě		Net gain or (loss) from sale of assets not on line 10	23,512			NEUCIVEU	
en	ь	Gross sales price for all assets on line 6a 154, 773		-	<u> អូ</u>		SC
Revenue	7	Capital gain net income (from Part IV, line 2) .			23,519	MAY 1 9 2015	
Œ	8	Net short-term capital gain			m		S
	9 10a	Income modifications	ļ	 		AGDEN 117	
		and allowances · · · ·		 		SOBEIGN OF	<u></u>
	,	Less Cost of goods sold .		 			
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)					
	12	Total. Add lines 1 through 11 · · · · · ·	44,060		13,984.		
_	13	Compensation of officers, directors, trustees, etc.	8,500		8,500.		
es	14	Other employee salaries and wages			NONE	NONE	
šuš	15	Pension plans, employee benefits			NONE	NONE	
άx	14 15 16a b c 17 18 19 20 21	Legal fees (attach schedule)					
E E	ь	Accounting fees (attach schedule) STMT. 2.	900		NONE	<u>NONE</u>	900
ξ	c	Other professional fees (attach schedule)					
tra	17	Interest		ļ	105		
nis	18	Taxes (attach schedule) (see instructions. 3.	588	•	105.		
Ξ	19	Depreciation (attach schedule) and depletion.					
A	20	Occupancy		 	NONE	NONE	
þ	21	Travel, conferences, and meetings		 	NONE	NONE	
a	22	Printing and publications		 	MOINE	NONE	
ij	23 24 25	Other expenses (attach schedule) Total operating and administrative expenses		 			
era		Add lines 13 through 23	9,988]	8,605.	NONE	900
ă	25	Contributions, gifts, grants paid	45,806		-, -, -,		45,806
_	26	Total expenses and disbursements Add lines 24 and 25	55,794		8,605.	NONE	
_	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-11,734				
	ь	Net investment income (if negative, enter -0-)			35,379.		
	c	Adjusted net income (if negative, enter -0-)			7		

Part II	Polones Charte	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of year			
Fait II	- Dalance Sneets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-beari	ng		-1,500			
2		cash investments	43,783.	13,706	<u>13,706</u> .		
3	Accounts receivable >						
	Less allowance for doub	otful accounts 🕨					
4	Pledges receivable ▶_						
	Less allowance for doub	otful accounts >					
5	Grants receivable						
6	Receivables due from	officers, directors, trustees, and other					
	disqualified persons (att	ach schedule) (see instructions)					
7	Other notes and loans re	eceivable (attach schedule)					
-	Less allowance for doub	otful accounts >NONE					
ह्य ह		se					
ssets 6 %		eferred charges					
		government obligations (attac & TMT ule	239,709.	174,689.	174,580		
		stock (attach schedule) STMT 5	352,248.	350,919			
c	·	bonds (attach schedule) STMT 7	109,869.	196,062			
11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	s,					
12		loans					
13 14	Investments - other (atta Land, buildings, and	ch schedule)					
	Less accumulated deprecia	ation					
15	Other assets (describe	>					
16		completed by all filers - see the					
	instructions Also, see p	age 1, item l)	<u>745,60</u> 9.	733,876	1,012,125		
17	Accounts payable and a	ccrued expenses					
18							
رم 19							
20		rs, trustees, and other disqualified persons]		
Liabilities 20 21 22		otes payable (attach schedule)					
ت 22		e ▶)					
	•	·					
23	Total liabilities (add line	es 17 through 22)		NON	\$		
es	Foundations that fol	low SFAS 117, check here . ► 24 through 26 and lines 30 and 31.					
ည္ 24	Unrestricted						
25	Temporarily restricted				_		
26	Permanently restricted						
š	Foundations that do	not follow SFAS 117, ▶ X					
<u> </u>	check here and com	plete lines 27 through 31.					
Assets or Fund Balance 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Capital stock, trust princ	cipal, or current funds	745,609.	733,876			
28	Paid-in or capital surplus, o	r land, bldg , and equipment fund					
8 29	Retained earnings, accumu	lated income, endowment, or other funds			<u> </u>		
30 30	Total net assets or fun	d balances (see instructions)	745,609.	733,876			
31	Total liabilities and	net assets/fund balances (see					
	instructions)	<u> </u>	745,609.	733,876	·		
		nges in Net Assets or Fund Balar					
		balances at beginning of year - Part I					
		d on prior year's return)			745,609.		
2 Ent	er amount from Part I,	line 27a		2	-11,734.		
3 Other increases not included in line 2 (itemize) ►ROUNDING							
4 Add lines 1, 2, and 3							
5 Dec	creases not included in	n line 2 (itemize) 🟲		5			
<u>6 Tot</u>	al net assets or fund b	alances at end of year (line 4 minus li	ne 5) - Part II, column (b), line 30 6	733,876.		

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			rage
	d describe the kind(s) of property sold ((b) How	(c) Date	(d) Date sold
2-story b	acquired P - Purchase D - Donation	acquired (mo., day, yr)	(mo , day, yr)		
1a PUBLICLY TRADED	SECURITIES		D - Donation		
b					
С					
d					
е					
(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 154,773.		131,261.			23,512.
b					
С					
d					
e					
Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
(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	col	(k), but not less t Losses (from co	
a					23,512.
b					
c					
d					
<u>e</u>					
2 Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		23,512.
3 Net short-term capital ga	in or (loss) as defined in sections 1	222(5) and (6)			
If gain, also enter in P	art I, line 8, column (c) (see ins	tructions). If (loss), enter -0- in $\}$	1 1		
Part I, line 8	<u> </u>	<u> </u>	3		
Part V Qualification U	Inder Section 4940(e) for Red	uced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	d?	Yes X No
	nount in each column for each year		g anv ent	ries.	-
(a)	(b)	(c)	3 011, 0111	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2013	47,900.	977,893.			0.048983
2012	45,200.	930,343.			0.048584
2011	45,350.	926,502.			0.048948
2010	44,000.				0.049055
2009	47,779.	875,224.			0.054591
2 Total of line 1, column (d)		2		0.250161
3 Average distribution ration	o for the 5-year base period - divide	e the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if les	s than 5 years	3		0.050032
			1		
4 Enter the net value of no	encharitable-use assets for 2014 fro	om Part X, line 5	4	1	<u>,003,881.</u>
			_		F0 006
5 Multiply line 4 by line 3			5		50,226.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	_	354.
7 Add lines 5 and 6			7		50,580.
If line 8 is equal to or g	tions from Part XII, line 4 greater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% ta	46,706. x rate See th
Part VI instructions.					

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	3)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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		7	08.
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		7	08.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			08.
6	Credits/Payments		_	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 444.			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		4	44.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2	<u>64.</u>
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			
Par	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		_ <u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			.,
	Instructions for the definition)?	1b		<u>X</u>
	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			7.7
	Did the foundation file Form 1120-POL for this year?	1c		<u> X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		ļ	
_	foundation managers. ► \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	İ	Х
2	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
h	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			-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	WV			
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			••
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			v
	names and addresses	10	O-PF	<u>X</u>
	En	rm 44		201A1

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4h

Χ

X

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)

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?

	NONE	
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3 Five highest-paid independent contractors for professional services (see instructions). If none, er	nter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of sen	
ONE	
	NONI
~	
~	
otal number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the organizations and other beneficiaries served, conferences convened, research papers produced, etc.	e number of Expenses
1NONE	
2	
3	
4	
9	
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 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
	ľ

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreige instructions.)	gn founda	tions,
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	1,000,126.
b	Average of monthly cash balances	1b	19,043.
С	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,019,169.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	1,019,169.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	15,288.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,003,881.
6	Minimum investment return. Enter 5% of line 5	6	50,194.
Part		dations	
1	Minimum investment return from Part X, line 6	1	50,194.
2 a	Tax on investment income for 2014 from Part VI, line 5 2a 708		
b	Income tax for 2014 (This does not include the tax from Part VI.) . 2b		
c	Add lines 2a and 2b	2c	708.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	49,486.
4	Recoveries of amounts treated as qualifying distributions	1	NONE
5	Add lines 3 and 4	5	49,486.
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	49,486.
Part	XII 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	46,706.
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	Suitability test (prior IRS approval required)	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		46,706.
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)	1 1	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	46,706.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.	calculating	whether the foundation

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Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (d) (a) (h) (c) Corpus Years prior to 2013 2013 2014 Distributable amount for 2014 from Part XI, 49,486. Undistributed income, if any, as of the end of 2014 45,806 a Enter amount for 2013 only Total for prior years 20_12_,20_____,20____ NONE Excess distributions carryover, if any, to 2014: From 2009 NONE From 2010 NONE c From 2011 NONE **d** From 2012 NONE NONE e From 2013 NONE Total of lines 3a through e Qualifying distributions for 2014 from Part XII, 46,706. line 4[.] ▶ \$ 45,806 a Applied to 2013, but not more than line 2a . . . Applied to undistributed income of prior years NONE (Election required - see instructions) c Treated as distributions out of corpus (Election NONE required - see instructions) 900 d Applied to 2014 distributable amount NONE Remaining amount distributed out of corpus . . NONE NONE Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: NONE Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract NONE line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) NONE tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions . . . NONE Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be 48,586. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be NONE required - see instructions) Excess distributions carryover from 2009 not NONE applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. NONE Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 NONE a Excess from 2010 . . . NONE b Excess from 2011 . . . NONE c Excess from 2012 . . . NONE

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d Excess from 2013 . . .

e Excess from 2014 . . .

NONE

Par	t XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE	
1 a	If the foundation has foundation, and the ruling				ating		
ь	Check box to indicate v				section	4942(j)(3) or 4942(j)(5)	
		Tax year	, , , , , , , , , , , , , , , , , , ,	Prior 3 years			
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total	
	I or the minimum investment						
	return from Part X for each year listed						
h	85% of line 2a	·- · · · · · · · · · · · · · · · · · ·					
٠	Qualifying distributions from Part XII, line 4 for each year listed .	j					
d	Amounts included in line 2c not						
	used directly for active conduct						
6	Oualifying distributions made						
Ī	directly for active conduct of						
	exempt activities Subtract line 2d from line 2c		,			1	
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					1	
ь	4942(j)(3)(B)(i) "Endowment" alternative test-						
·	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
c	"Support" alternative test - enter						
Ĭ	(1) Total support other than						
	gross investment income						
	(interest, dividends, rents, payments on securities						
	loans (section 512(a)(5)),	1					
	or royalties) (2) Support from general	}					
	public and 5 or more	1					
	exempt organizations as provided in section 4942						
	(j)(3)(B)(iii)		-				
	port from an exempt						
	organization (4) Gross investment income .						
Pa		ntary Information (Complete this par	t only if the found	dation had \$5	,000 or more in assets	
	at any time	e during the year - s	ee instructions.)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	Information Regarding						
a	List any managers of	the foundation who	have contributed mor	e than 2% of the tot	al contributions	received by the foundation	
	before the close of an	y tax year (but only if th	ney have contributed i	more than \$5,000) (S	See section 507(d	1)(2).)	
	NONE						
b		the foundation who	own 10% or more o	f the stock of a corp	ooration (or an	equally large portion of the	
	ownership of a partne	rship or other entity) o	f which the foundation	n has a 10% or greate	r interest		
	NONE						
_							
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:			
	Check here ► if	the foundation only	makes contributions	to preselected chai	ritable organizat	ions and does not accept	
				ants, etc. (see instruc	ctions) to individ	luals or organizations under	
		plete items 2a, b, c, an					
a	a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed						
	SEE STATEMENT		<u> </u>				
b	The form in which app	olications should be su	bmitted and informati	on and materials they	should include:		
	SEE ATTACHED S	TATEMENT FOR L	INE 2				
							
C	Any submission deadl						
	SEE ATTACHED S	TATEMENT FOR L	INE 2				
	L Any rootriotisss as 1	imitations on accept	auch as his assess	anhical arose charit	able fields bed	e of inctitutions or other	
d	l Any restrictions or I factors:	imitations on awards	, such as by geogra	apriicai areas, charita	avie lielas, kina	s of institutions, or other	
		mammarim Top T	TNE O				
JSA	SEE ATTACHED S	TATEMENT FOR L	TNE 7			Form 990-PF (2014)	
100 1	000					roim 330°FF (2014)	

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Durir	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 Purpose of grant or contribution Amount Am							
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount				
a Paid during the year								
SEE STATEMENT 18		1		45,806.				
		1						
		1						
]				
			1					
		1						
		ì						
Total			3a	45,806				
b Approved for future payment								
		ŀ						
		İ						
	1							
		<u> </u>						
Total			▶ 3b					

JSA 4E1491 1 000 Form 990-PF (2014)

Part XVI-A Analysis	of Income-Produ	cing Activ	rities			
Enter gross amounts unless o			ited business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
a				1		(See instructions)
b			· · · · · · · · · · · · · · · · · · ·			
С				<u> </u>		
d						·····
g Fees and contracts from	government agencies			ļ. <u>.</u> .		
2 Membership dues and as:	sessments			-		
3 Interest on savings and temporary				 	20 540	
4 Dividends and interest fro				14	20,548.	
5 Net rental income or (loss		<u>-</u>		 		
a Debt-financed propert				 		-
b Not debt-financed pro				+		
6 Net rental income or (loss) from7 Other investment income		 		 		
8 Gain or (loss) from sales of as				18	23,512.	
9 Net income or (loss) from				T		
10 Gross profit or (loss) from	•					
11 Other revenue a						
b						
c						
d						
e						
12 Subtotal Add columns (b), (d), and (e)	L			44,060.	
13 Total. Add line 12, colum	ns (b), (d), and (e)				13	44,060.
(See worksheet in line 13 ins			complishment of Ex			
					e) of Part XVI-A contrib g funds for such purpose	
	··· - -					
-		-				
						
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		·				······································
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 	<u> </u>					
				<u>-</u>		· · · · · · · · · · · · · · · · · · ·
Δ2L	-					Form 990-PF (2014

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

	ın sectio organiza	on 501(c) of the (ations?	Code (other than	engage in any of th section 501(c)(3) or	ganizations)	or in section 527,			Yes	No_
		·	-	a noncharitable exe	-					v
										<u>X</u>
								1a(2)		
		ansactions.						45/41		Y
				-						<u>X</u>
										X
										X
										X
										X
								1 1		X
							should always show		air m	arket
	value o	f the goods, othe	r assets, or servi	ces given by the re	porting four	ndation. If the foun	dation received less	than 1	fair m	arket
	value ir	n any transaction	or sharing arrang	gement, show in co	lumn (d) the	e value of the good	s, other assets, or s	ervices	rece	erved.
(a) Lı	ne no	(b) Amount involved	(c) Name of n	oncharitable exempt orga	nization	(d) Description of trans	fers, transactions, and sha	ring arra	ngeme	nts
							··			
							-			
					_				<u>-</u>	
										
			<u> </u>				 			
				· · · · · · · · · · · · · · · · · · ·						
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								_		
	describ		(c) of the Code (o	filiated with, or relation 50				Y	es 🔼	No No
		(a) Name of organiza	tion	(b) Type of o	rganization		(c) Description of relation	ship		
		1977								
					~					
								•		
Sigi	correc	penalties of perjury, I d	eclare that I have examined for the control of preparer (other than	taxpayer) is based on all infori	mation of which pr	reparer has any knowledge	to the best of my knowled	S discus	s this	return
Her	e Sign	rature of pricer of rust RST COMMUNI		Date		Title	(see instruction	ns)? X	Yes	No
n. •		Print/Type preparer's		Preparer's signature	, ,) Date	Check If	PTIN		
Paid		MICHELE L	DORE, EA	Michel	2 Z C	Dare 04/29	2015 self-employed	P006	374	10
							Firm's EIN ► 34 -	6565	596	
Use ——	Only			Y STREET, SUI VA	TE 201 232	23	Phone no 804 - 3	44-4	548	
							Fo	rm 99	U-PF	(2014)

SECURITIES	
ST FROM	
INTERE	
AND	
DIVIDENDS	
- Н	II II II
PART	
4 990PF,	
FOR	 }

NET INVESTMENT INCOME	20,472. 20,472. ==========
REVENUE AND EXPENSES PER BOOKS	20,548.
	TOTAL
DESCRIPTION	DIVIDENDS AND INTEREST

FEES
ACCOUNTING
1
\vdash
PART
990PF,
FORM

	CHARITABLE PURPOSES	900.
	ADJUSTED NET INCOME	NONE
	NET INVESTMENT INCOME	NONE
ij	REVENUE AND EXPENSES PER BOOKS	.006
		TOTALS
	DESCRIPTION	TAX PREPARATION

TAXES
1
Н
PART
990PF,
FORM

NET INVESTMENT INCOME	58. 47. 105.
REVENUE AND EXPENSES PER BOOKS	39. 444. 58. 47. 588.
DESCRIPTION	FEDERAL TAX LIABILITY FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOREIGN TAXES ON NONQUALIFIED TOTALS

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

ENDING FMV	40,038. 34,517. 30,054. 35,061. 34,910. 174,580.	
ENDING BOOK VALUE	39,880. 34,948. 30,105. 34,843. 34,913. 	
BEGINNING BOOK VALUE	34,942. 29,990. 39,880. 35,001. 34,948. 30,105. 34,843	
	TOTALS	
DESCRIPTION	35000 FHLMC .50% 09/19/14 30000 FNMA .875% 08/28/14 FHLMC .50% 04/17/15 FHLMC 1 1/4 03/28/17 FHLMC 1.25% 06/27/18 FNMA .50% 09/28/15 FFCB .875% 12/07/16 FHLB .70% 12/29/16	

FORM 990PF, PART II - CORPORATE STOCK

			•
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV .
TOGAC AMON	45	,45	66′
70M5 VEFO1 7880MT 1.888	2,154.	2,154.	8,77
ADDOLL MADO SENEDAL FLECTRALO	,72	,72	, 05
GENERAL BERCHITC	, 34	, 34	4,06
TELT TONOCODITIES TO SE	4,47	47	, 22
	66,	66′	2,46
CVVI AND TNC	2	25.	20.
14	0	ó	47,630.
DDICE MID-CAP	2,23	,23	0,08
I:NOWE FAICE HID CIT VIT	00	5,00	7,68
NEODERICELL & DESCRIENT	3,52	, 52	3,62
CANTED AT I. S. CORD	90	96,	66,
DEOCHER & CAMELE	, 67	, 67	, 38
RANK OF NEW YORK, INC	4,551.	4,551.	5,15
	96,	, 98	2,76
ALTRIA GROIIP	, 29	, 29	4,63
	, 11	, 11	, 29
PRICEDIA TINE SOUTH BEAUTION OF THE PROPERTY O	, 55	, 55	5,05
DATE OF THE TOTAL OF THE STATE	,34	, 34	7,86
COURTIONS OF THE REALTY	9,23	9,23	1,32
HARROR INTERNATIONAL, FD	,26	, 26	66′0
POVCE TOTAL RETIIN FIND	9,54	9,54	6,16
CHIIMBEDGED IMTED	, 76	, 76	8,54
SCHOOLS STATE THE STATE OF STA	, 22	, 22	, 28
MICEOCORT CORD	,34	,34	, 29
COLCAPTE DATAMOLITYE	90,	90′	19'
CO 61.07 P. CO 61.	, 25	, 25	8,44
COCII COLI CORP	,46	,46	ω
	,77	, 77	3,46

002830

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STATEMENT

9

STATEMENT

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	5,514. 25,848. 12,625. 9,822. 12,761. 628,799.
ENDING BOOK VALUE	3,752. 10,519. 10,017. 8,250. 2,335. 350,919.
BEGINNING BOOK VALUE	3,752. 10,519. 10,017. 8,250. 1,329. 2,335. 35. 352,248.
	TOTALS
DESCRIPTION	DUKE ENERGY CORP MASTERCARD INC PHILIP MORRIS INTL INC SOUTHERN CO PHILLIPS 66 ABBVIE INC

- CORPORATE BONDS

FORM 990PF, PART II

|| |} || ||

55-0717997

STATEMENT

ENDING FMV	25,112. 25,111. 30,468. 35,719. 35,012. 45,118.	
ENDING BOOK VALUE	25,000. 25,001. 29,868. 35,786. 35,176. 45,231.	
BEGINNING BOOK VALUE	20,000. 25,000. 10,000. 25,001. 29,868. 109,869.	
	TOTALS	
DESCRIPTION	GE CAP CORP 5.60% 07/15/14 GE CAP CORP 5.50% 02/15/15 HSBC FINANCE 4.25% 11/15/14 NATL RUTAL UTIL CORP MEDTRONIC INC 3.00% 03/15/15 BERKSHIRE HATHAWAY 3.00% AETNA INC NOTES 1.5% 11/15/17 DISNEY WALT CO 1.125% 2/15/17 JPMORGAN CHASE & CO 1.125% 2/2	

FRANK LITZ SMOOT CHARITABLE TRUST FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

JEFFREY L. FARMER

ADDRESS:

P. O. BOX 950

BLUEFIELD, WV 24701

FORM, INFORMATION AND MATERIALS:

APPLICANTS SHOULD SUBMIT WRITTEN REQUEST FOR FUNDS TO ABOVE

INDIVIDUAL, OUTLINING THEIR ORGANIZATION

AND ITS PURPOSE AND REASON FOR REQUEST

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GENERAL GEOGRAPHIC AREA OF SOUTHERN WEST VIRGINIA

AND SOUTHWESTERN VIRGINIA

RECIPIENT NAME:

PO BOX 473

RELATIONSHIP:

PURPOSE OF GRANT:

ADDRESS:

NONE

PC

TAZEWELL ATHLETIC FOUNDATION

FOUNDATION STATUS OF RECIPIENT:

NORTH TAZEWELL, VA 24630

TAZEWELL HIGH SCHOOL ATHLETIC FACILITIES

AMOUNT OF GRANT PAID

AMOUNT OF GRANT PAID

STATEMENT 10

ADDRESS:

NONE

RELATIONSHIP:

PURPOSE OF GRANT:

002830

SWVCC EDUCATIONAL FOUNDATION INC

724 COMMUNITY COLLEGE ROAD

FOUNDATION STATUS OF RECIPIENT:

CEDAR BLUFF, VA 24609

FESTIVAL OF THE ARTS

2,500.

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CITIZENS FOR THE ARTS, INC ADDRESS: 1413 FRONT ST RICHLANDS, VA 24641 RELATIONSHIP: NONE PURPOSE OF GRANT: MUSICAL CONCERTS FOUNDATION STATUS OF RECIPIENT: PC 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: TAZEWELL YOUNG LIFE ADDRESS: PO BOX 172 TAZEWELL, VA 24651-0172 RELATIONSHIP: NONE PURPOSE OF GRANT: YOUTH MINISTRY FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: BIBLE IN THE SCHOOLS ADDRESS: PO BOX 543 BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

EDUCATION

SO-DP

FOUNDATION STATUS OF RECIPIENT:

1,500.

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: BLUEFIELD UNION MISSION ADDRESS: 2203 BLUEFIELD AVE BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: MEETING SOCIAL, PHYSICAL AND SPIRITUAL NEEDS FOUNDATION STATUS OF RECIPIENT: PC 7,000. AMOUNT OF GRANT PAID RECIPIENT NAME: MERCER COUNTY HUMANE SOCIETY ADDRESS: 961 SHELTER RD PRINCETON, WV 24740 RELATIONSHIP: NONE PURPOSE OF GRANT: PET ADOPTION FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: SALVATION ARMY ADDRESS: 900 HIGHLAND AVE BLUEFIELD, WV 24701 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

STATEMENT 12

PURPOSE OF GRANT: HOMELESS SERVICES

FOUNDATION STATUS OF RECIPIENT:

1,806.

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: AMERICAN RED CROSS CENTRAL WV CHAPTER ADDRESS: 113 LAKEVIEW DRIVE CHARLESTON, WV 25313 RELATIONSHIP: NONE PURPOSE OF GRANT: DISASTER RELIEF FOUNDATION STATUS OF RECIPIENT: 3,000. AMOUNT OF GRANT PAID RECIPIENT NAME: APPALACHIAN TEEN CHALLENGE ADDRESS: 1651 UNITY RD ATHENS, WV 24712 RELATIONSHIP: NONE PURPOSE OF GRANT: RESIDENTIAL TRAINING PROGRAM FOUNDATION STATUS OF RECIPIENT: 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: CHILDREN'S HOME SOCIETY OF WV ADDRESS: 1422 KANAWHA BLVD EAST CHARLESTON, WV 25330 RELATIONSHIP: NONE PURPOSE OF GRANT: CHILD WELFARE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

31

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: WADE CENTER ADDRESS: 1400 HIGLAND AVE BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: CHILDREN'S PROGRAMMING AND MENTORING FOUNDATION STATUS OF RECIPIENT: PC 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: HISTORIC CRAB ORCHARD MUSEUM ADDRESS: 3663 CRAB ORCHARD RD TAZEWELL, VA 24651 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CULTURAL HERITAGE CENTER FOUNDATION STATUS OF RECIPIENT: PC 2,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CITY OF BLUEFIELD WV ADDRESS: 200 ROGERS ST BLUEFIELD, WV 24701 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

STATEMENT 1

PURPOSE OF GRANT: HOLIDAY OF LIGHTS

FOUNDATION STATUS OF RECIPIENT:

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: TENDER MERCIES MINISTRIES ADDRESS: 4001 WEST MAIN ST PRINCETON, WV 24740 RELATIONSHIP: NONE PURPOSE OF GRANT: FOOD PANTRY FOUNDATION STATUS OF RECIPIENT: PC 1,500. AMOUNT OF GRANT PAID RECIPIENT NAME: A CHILD SHALL LEAD THEM FOOD PANTRY ADDRESS: 623 TAZEWELL AVE TAZEWELL, VA 24651 **RELATIONSHIP:** NONE PURPOSE OF GRANT: FOOD PANTRY FOUNDATION STATUS OF RECIPIENT: PC 1,500. AMOUNT OF GRANT PAID RECIPIENT NAME: W.I.S.E WOMEN'S CENTER ADDRESS: 511 COMMERCE ST BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: JOB SERVICES FOR WOMEN FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: READ ALOUD WEST VIRGINIA ADDRESS: PO BOX 1784 CHARLESTON, WV 25326 RELATIONSHIP: NONE PURPOSE OF GRANT: MERCER COUNTY FOUNDATION STATUS OF RECIPIENT: PC 750. RECIPIENT NAME: BLUEFIELD HIGH SCHOOL ADDRESS: 535 W CUMBERLAND RD BLUEFIELD, WV 24701-4699 RELATIONSHIP: NONE PURPOSE OF GRANT: STUDENT TRIP TO SEE PHANTOM OF THE OPERA FOUNDATION STATUS OF RECIPIENT: PC500. AMOUNT OF GRANT PAID RECIPIENT NAME: BLUEWELL ELEMENTARY SCHOOL ADDRESS: 205 BLUEWELL SCHOOL RD BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

EDUCATION

FOUNDATION STATUS OF RECIPIENT:

1,500.

FRANK LITZ SMOOT CHARITABLE TRUST 55-0717997 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: BLUEFIELD COLLEGE ADDRESS: 3000 COLLEGE DR BLUEFIELD, VA 24605 RELATIONSHIP: NONE PURPOSE OF GRANT: NEW OPPORTUNITY SCHOOL FOR WOMEN FOUNDATION STATUS OF RECIPIENT: PC 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: BLUEFIELD COLLEGE ADDRESS: 3000 COLLEGE DR BLUEFIELD, VA 24605 RELATIONSHIP: NONE PURPOSE OF GRANT: EDUCATION FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: BLUEFIELD STATE COLLEGE FOUNDATION ADDRESS: 219 ROCK ST BLUEFIELD, WV 24701 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

STATEMENT 17

PURPOSE OF GRANT:

2014 BLUE & GOLD EXTRAVAGANZA FOUNDATION STATUS OF RECIPIENT:

55-0717997 FRANK LITZ SMOOT CHARITABLE TRUST FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: BLUEFIELD STATE COLLEGE FOUNDATION ADDRESS: 219 ROCK ST BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: ''GO FOR GRADUATION'' CAMPAIGN FOUNDATION STATUS OF RECIPIENT: PC 500. AMOUNT OF GRANT PAID RECIPIENT NAME: MEMORIAL PRIMARY SCHOOL ADDRESS: 319 MEMORIAL AVE BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: STUDENT ATTENDANCE REWARD PROGRAM FOUNDATION STATUS OF RECIPIENT: PC 500. AMOUNT OF GRANT PAID RECIPIENT NAME: MEMORIAL PRIMARY SCHOOL ADDRESS: 319 MEMORIAL AVE BLUEFIELD, WV 24701 RELATIONSHIP: NONE PURPOSE OF GRANT: IXL MATH PROGRAM FOUNDATION STATUS OF RECIPIENT: 750. AMOUNT OF GRANT PAID

STATEMENT 18

TOTAL GRANTS PAID:

45,806.

===========

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www irs gov/form1041

OMB No 1545-0092

Employer identification number

FRANK LITZ SMOOT CHARITABLE TRUST			55-0717	997	
Note: Form 5227 filers need to complete only Parts I and II					
Part I Short-Term Capital Gains and Losses - Asse	ts Held One Year	or Less			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fro Form(s) 8949, Par line 2, column (c	tl, 🗀	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on Form(s) 8949 with Box C checked					
4 Short-term capital gain or (loss) from Forms 4684, 625	52, 6781, and 8824			4	· · · · · · · · · · · · · · · · · · ·
 Net short-term gain or (loss) from partnerships, S corpo Short-term capital loss carryover Enter the amour Carryover Worksheet	nt, if any, from lin			5 6 ()
7 Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	<u> </u>	<u></u>		7	
Part II Long-Term Capital Gains and Losses - Asse	ts Held More Tha	n One Year			
See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fro Form(s) 8949, Par		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
to whole dollars	(Suited private)	(0) 0(1)(0)	line 2, column (ç		column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	137,905.	131,261.			6,644
11 Long-term capital gain or (loss) from Forms 2439, 468	34, 6252, 6781, and	18824		11	
12 Net long-term gain or (loss) from partnerships, S corpo	orations, and other e	states or trusts		12	-
13 Capital gain distributions				13	16,868
14 Gain from Form 4797, Part I15 Long-term capital loss carryover. Enter the amount	t, if any, from line	14 of the 2013	Capital Loss	14	
Carryover Worksheet	s 8a through 15 in	column (h) Enter	here and on	15	22 512
line 18a, column (3) on the back				16	23,512

	ule_D (Form 1041) 2014						Page 2
Part			(1) Beneficiar		(2) Esta		(3) Total
	Caution: Read the instructions before completing this pa	art.	(see instr)	or trus	t's	(3) Total
	Net short-term gain or (loss)	17					
	Net long-term gain or (loss):						00.510
	Total for year	18a					23,512.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b					102.
	28% rate gain	18c					22 512
	Total net gain or (loss). Combine lines 17 and 18a	19	and T. Book I	1,00 40	1 16 1:000 1	0	23,512.
gains, neces	: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 . go to Part V, and do not complete Part IV If line 19, column (3), is a n sary	et loss	c, complete Part	IV and	the Capital	Loss (Carryover Worksheet, a
Part	IV Capital Loss Limitation						
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P					,	,
a Note	The loss on line 19, column (3) or b \$3,000			 m aan	L	20 (es complete the Canita
Loss	Carryover Worksheet in the instructions to figure your capital loss carryover	paye	, iiie 22 01 1 01	111 330-	1, 1116 34),	15 8 10	ss, complete the Capita
Part	V Tax Computation Using Maximum Capital Gains Rate	es					
Form	1041 filers. Complete this part only if both lines 18a and 19 in col	lumn (2) are gains, o	r an an	nount is er	tered	in Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more						
	on: Skip this part and complete the Schedule D Tax Worksheet in the	ınstrud	tions if				
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.						
	1 990-T trusts . Complete this part only if both lines 18a and 19 a		ins or qualified	divid.	ends are i	nclude	d in income in Part
	irm 990-T, and Form 990-T, line 34, is more than zero. Skip this part						
	ner line 18b, col. (2) or line 18c, col. (2) is more than zero						
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	341	. 21				
22	Enter the smaller of line 18a or 19 in column (2)	, , ,	.				
	but not less than zero						
23	Enter the estate's or trust's qualified dividends				1		
	from Form 1041, line 2b(2) (or enter the qualified					1	
	dividends included in income in Part I of Form 990-T) 23		1		}		
24	Add lines 22 and 23						
25	If the estate or trust is filing Form 4952, enter the				1		
	amount from line 4g; otherwise, enter -0 > 25						
26	Subtract line 25 from line 24. If zero or less, enter -0		. 26				
27	Subtract line 26 from line 21. If zero or less, enter -0-						
28	Enter the smaller of the amount on line 21 or \$2,500						
29	Enter the smaller of the amount on line 27 or line 28		. 29				
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is		•			30	
31	Enter the smaller of line 21 or line 26		1 1				·
32	Subtract line 30 from line 26						
33	Enter the smaller of line 21 or \$12,150		·				
34	Add lines 27 and 30						
35	Subtract line 34 from line 33 If zero or less, enter -0		·				
36	Enter the smaller of line 32 or line 35		· 				
37	Multiply line 36 by 15%				•	37	
38	Enter the amount from line 31		1 1				
39	Add lines 30 and 36		· -				
40	Subtract line 39 from line 38. If zero or less, enter -0-		· -	-			
41	Multiply line 40 by 20%		•		🔰	41	
42	Figure the tax on the amount on line 27 Use the 2014 Tax Rate Schedule for		1 1	•			
₹=	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1				
43	Add lines 37, 41, and 42		·	-			
44	Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for		·				
~~	and Trusts (see the Schedule G instructions in the instructions for Form 1041		1 1				
A E	Tax on all taxable income. Enter the smaller of line 43 or line 44		· ——	041 \$	chedula	}	

G, line 1a (or Form 990-T, line 36)

Attachment Sequence No. 12A Page 2

Form 8949 (2014)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification number
FRANK LITZ SMOOT CHARITABLE TRUST	55-0717997

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
 - \rceil (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
	(Mo , day, γr)				(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
35000. FHLMC .50% 09/19/14	09/07/2011	09/19/2014	35,000.00	34,942 00			58.00
35000. FHLMC 1 1/4 03/28/1 03/28/14@100	03/01/2012	03/28/2014	35,000.00	35,001.00			-1.00
30000. FNMA .875% 08/28/14	03/01/2012	_ 03/20/2014	33,000.00	33,001.00			1.00
20000	07/19/2011	08/28/2014_	30,000.00	29,990.00			10.00
20000. GEN ELEC CAP CORP 5 07/15/2014	07/28/2008	07/15/2014	20,000.00	20,000.00			
10000. HSBC FINANCE CORPOR 11/15/2014	11/02/2009	11/15/2014	10,000.00	10,000.00			
1. PHILLIPS 66	07/11/2007	03/27/2014	77.00	39.00			38.00
102. PHILLIPS 66		03/27/2014	7,828.00	1,289.00			6,539.00
	04/00/2000	03/21/2014	7,020.00	1,205.00			0,333.00
2 Totals. Add the amounts in consideration (subtract negative amounts) include on your Schedule D, I checked), line 9 (if Box E about (if Box F above is checked) ▶	Enter each total line 8b (if Box D ve is checked),	here and above is	137,905.	131,261.			6,644.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2014)

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