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Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.

OMB No 1545-0052

2014

OBER TO PUBLIC INSPECTION

F	or ca	tien	idar year 2014 of tax year degini	ning			, and e	101119	_				
Ī			foundation						A Emp	loyer identification	number		
			HAN SOCIETY OF						٫ ا	0440620			
_			CENTRAL BANK &					D		L-0449629			
,			nd street (or PO box number if mail is		(address)			Room/suite		ohone number 59 – 253 – 81	0.6		
_			WEST VINE STRE			·							
,	•		own, state or province, country, a INGTON, KY 405	- ,	ostai code				U If exer	mption application is p	ending, chec	k here	
-	_	_	all that apply: Initial		l le	itial return of a fo	ormer public c	harity	n 1 Fo	reign organizations	chack ha	7 0	
u	UII	ELK	Final r			mended return	Jillier public c	ilailty	1.10	reign organizations	, CHECK HE	, 6	
				ss change		ame change			2. Fo	reign organizations me eck here and attach co	eting the 859	√s test,	
н	Ch	eck		ection 501(c)(3) ex					i		•		
Ϊ	ٽ		ction 4947(a)(1) nonexempt char			ole private found	ation			vate foundation sta ir section 507(b)(1)			"▶┌──
1	Fair		rket value of all assets at end of v				Accr	ual	ĺ	foundation is in a			tion.
•			Part II, col (c), line 16)	· -	ther (specif					r section 507(b)(1)			
	▶\$		3,240,09	3 . (Part I, colu	ımn (d) mu	ist be on cash	basis)				(-//		•
Π	Par	_	Analysis of Revenue and Expe	nses		evenue and		vestment	(c) Adjusted net	(d) D	isburser	nents
٦			(The total of amounts in columns (b) necessarily equal the amounts in coli	(c), and (d) may not umn (a))		ses per books	ìnco	me	,	income		itable pu h basis d	
_	Т	1	Contributions, gifts, grants, etc.,	received		35,507.				N/A			
		2	Check I d the foundation is not rec	quired to attach Sch. B									
		3	Interest on savings and temporary cash investments			4.		4.			STATE		
		4	Dividends and interest from secu	urities		58,245.	5	8,245.			STATE	MEN	1T 3
		5a	Gross rents										
	ı	b	Net rental income or (loss)							· · · · · · · · · · · · · · · · · · ·			
	اي	6a	Net gain or (loss) from sale of assets n		1	33,235.					STATE	MEN	VT 1
	립	b		85,864.			4.	2			<u> </u>		
	Revenue	7	Capital gain net income (from Part IV, I	line 2)			13	3,523.		RECEIV	FED.		
	٦	8	Net short-term capital gain						—			70	
		9	Income modifications Gross sales less returns				,		100	0000000	0.045	100	
			and allowances		<u> </u>				100	MAR 23	2015	187	
)			Less Cost of goods sold		<u> </u>	u				<u> </u>		<u>18</u>	1
	١.		Gross profit or (loss) Other income							-OGDEI	1. UT		[
		12			2	26,991.	19	1,772.	-				,
_	-	13	Compensation of officers, directors, tri	ustage atc	 	0.		0.	 				0.
		14	Other employee salaries and wag						<u> </u>				
			Pension plans, employee benefit		 				<u> </u>				
			Legal fees				,		<u> </u>	-			
	Expenses		Accounting fees	STMT 4		2,550.		1,275.				1,	,275.
	Š.	C	Other professional fees										
	. اٍ ق	17	Interest			•							
	<u>. ja</u>	18	Taxes	STMT 5		92.		46.					46.
	<u>.</u>	19	Depreciation and depletion										
,	֡֞֞֞֞֟֞֞֟֞֝֟֞֓֓֓֓֞֟֞֓֓֓֓֓֟֟֡֓֡֟֞֓֓֓֓֓֓֓֓֓֓		Occupancy		<u> </u>					·			
	<u>ĕ</u> 2		Travel, conferences, and meeting	gs									
	Ĕ Z		Printing and publications			40.000							4.0.0
	₽ 2		Other expenses	STMT 6		19,378.	<u>+</u>	4,275.				<u>5,</u>	,103.
ì	Operating and Administrative	4	Total operating and administrat			22 020	1	E E0 <i>e</i>	ł		1	_	404
	اق	16	expenses. Add lines 13 through	23		22,020.	<u></u>	5,596.	 			<u> 5</u> 2	424. 680.
	- 4		Contributions, gifts, grants paid	n n ta					 		 	, د د .	, 000.
	- 4	20	Total expenses and disburseme Add lines 24 and 25	ciită.	1	75,700.	1	5,596.			1	60	,104.
_	-+,	7	Subtract line 26 from line 12:	 -	 	. , , , , , , , ,	<u>_</u>	<u> </u>	 			<u>. 00</u> ,	
	1		Excess of revenue over expenses and	dishureamente		51,291.					1		
	- [Net investment income (if negative			~-,	17	6,176.	 				
			Adjusted net income (if negative,					· · · · · · · · · · · · · · · · · · ·	<u> </u>	N/A	<u> </u>		
_									-				

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

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ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO 61-0449629 Form 990-PF (2014) Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 6,553. 6,553 1 Cash - non-interest-bearing 7,934. 54,156. 39,304. 39,304. 2 Savings and temporary cash investments 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 7 Other notes and loans receivable 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 STMT 7 2,216,940. 2,350,927. 2,885,818. **b** Investments - corporate stock STMT 8 369,230. 308,508. 308,418. c Investments - corporate bonds 11 Investments land, buildings and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 3,240,093. 2,648,260. 2,705,292. instructions. Also, see page 1, item I) 5,741. 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 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 5,741. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 2,648,260 2,699,551 27 Capital stock, trust principal, or current funds 0 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund Ô. 29 Retained earnings, accumulated income, endowment, or other funds 2,648,260. 2,699,551 30 Total net assets or fund balances 2,648,260. 2,705,292 31 Total liabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances** Part III

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	2,648,260.
2 Enter amount from Part I, line 27a	2	51,291.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	2,699,551.
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	2,699,551.

Form **990-PF** (2014)

ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO 61-0449629 Form 990-PF (2014) Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr) (d) Date sold (mo., day, yr.) (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.) 18 SEE ATTACHED STATEMENT Ρ b SEE ATTACHED STATEMENT P c CLASS ACTION LITIGATION SETTLEMENTS P CAPITAL GAINS DIVIDENDS е (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -10,264.356,898. 346,634. 702,561. 595,443 107,118. b 737. $\overline{737}$. C 35,932. 35,932. d 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 (j) Adjusted basis (k) Excess of col (i) (i) F.M.V. as of 12/31/69 Losses (from col. (h)) as of 12/31/69 over col. (j), if any -10,264. 107,118. b 737. 35,932. d е If gain, also enter in Part I, line 7 2 133,523. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 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). If (loss), enter -0- in Part I, line 8 N/A 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. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 129,021. .044440 2,903,248. 2,642,022. .024959 2012 65,943. 162,933. 2,695,569. .060445 2011 .049742 127,201. 2,557,229. 2010 167,902 2,392,547. .070177 2009 .249763 2 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .049953 the foundation has been in existence if less than 5 years 3

Form **990-PF** (2014)

3,159,677.

157,835.

159,597.

160,104.

1,762.

4

5

6

7

8

5 Multiply line 4 by line 3

See the Part VI instructions.

7 Add lines 5 and 6

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5

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.

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

ORPHAN SOCIETY OF LEXINGTON

Form 990-PF (2014) C/O CENTRAL BANK & TRUST CO	/-\` 40.40/L\` 40.40'\	61-044			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940		or 4948 - see	ınstrı	ictio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and ent					
Date of ruling or determination letter: (attach copy of letter if nece					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1		1,7	62.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%					•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ers enter -0-)	2		4 =	0.
3 Add lines 1 and 2		3		1,7	62.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)	4		-	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1,7	62.
6 Credits/Payments:		_			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 2,4	80.			
b Exempt foreign organizations - tax withheld at source	6b	i			
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		2,4	80.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack	hed	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ 10		7	18.
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax	718 . Refunde	d▶ 11			0.
Part VII-A Statements Regarding Activities		 		13.4	T
1a During the tax year, did the foundation attempt to influence any national, state, or local legisla	ition or did it participate or inti	ervene in	<u> </u>	Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpose			1b		X
If the answer is "Yes" to $_{1a}$ or $_{1b}$, attach a detailed description of the activities and	l copies of any materials pu	blished or			
distributed by the foundation in connection with the activities					l
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y		_		i	1
(1) On the foundation. > \$ (2) On foundation managers.		0.			1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ure tax imposed on foundation				}
managers. ► \$0 .					1
2 Has the foundation engaged in any activities that have not previously been reported to the IRS	S?		2		X
If "Yes," attach a detailed description of the activities			1]
3 Has the foundation made any changes, not previously reported to the IRS, in its governing in		tion, or	ł		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	<u> </u>	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	7	37 / 3	4a	<u></u>	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	ļ <u>.</u>	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If "Yes," attach the statement required by General Instruction T			1		1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ner:				
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 th	e state law	1	١	
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," comp	plete Part II, col (c), and P	art XV	7	X	<u> </u>
	_				
8a Enter the states to which the foundation reports or with which it is registered (see instruction	s) >				
KY					
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					
9 Is the foundation claiming status as a private operating foundation within the meaning of section		or calendar -	-		-
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," co			9		X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	listing their names and addresses		10	l	X

ORPHAN SOCIETY OF LEXINGTON

orm	1990-PF (2014) C/O CENTRAL BANK & TRUST CO 61-044	<u> 19629</u>		Page 5
	art 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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► CENTRAL BANK & TRUST COMPANY Telephone no. ►859-	253-8	106	
	Located at ► 300 WEST VINE STREET, LEXINGTON, KY ZIP+4 ►	10507		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1). If "Yes," enter the name of the			
	foreign country			
Pε	art 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
18	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	Ì		1
t	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)?	, <u>1b</u>		X
	Organizations relying on a current notice regarding disaster assistance check here	}		
(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		1	١.,
	before the first day of the tax year beginning in 2014?	1c	ļ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		ļ	1
	defined in section 4942(j)(3) or 4942(j)(5)):			
ε	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	- 1	l	
	before 2014? Yes X No		İ	ŀ
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
ł	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	ام		
	statement - see instructions.) N/A	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.			
	<u> </u>	i	İ	
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
t	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) N/A	3b		
4.	Form 4720, to determine if the foundation had excess business holdings in 2014) a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	┼	X
	b Did the foundation invest ouring 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		 	-
ı	a Did the loanidation make any investment in a prior year (but after becomber 5 1, 1303) that could jeoparaize its charitable purpose that	ı	1	1

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO 61-0449629 Form 990-PF (2014) Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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)? N/A 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 Yes No expenditure responsibility for the grant? N/A 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 Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances 18,347. SEE STATEMENT 9 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation hours per week devoted to position allowances NONE

Form **990-PF** (2014)

Total number of other employees paid over \$50,000

ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO

Form 990-PF (2014) C/O CENTRAL BANK & TRUST CO	61-	0449629 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "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 statis number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferenc	tical information such as the duced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	—	0.
		Form 990-PF (2014)

Form 990-PF (2014)

P	art'X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	is, see instructions)
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	3,175,936.
	Average of monthly cash balances	1b	3,175,936.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,207,794.
е	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	3,207,794.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,117.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,159,677.
6	Minimum investment return. Enter 5% of line 5	6	157,984.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certai	
1	Minimum investment return from Part X, line 6	1	157,984.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,762.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	156,222.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	156,222.
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	156,222.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		160 104
8		18	160,104.
b	· · · · · · · · · · · · · · · · · · ·	1b	<u></u>
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:	.	
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	160 104
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	160,104.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	1 760
_	income. Enter 1% of Part I, line 27b	5	1,762. 158,342.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	Jualities	tor the section

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Form 990-PF (2014)

ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO

:	(9)	(b)	(c)	(d)
	(a) Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI,		,		
line 7				156,222.
2 Undistributed income, if any, as of the end of 2014	· · · · · · · · · · · · · · · · · · ·			
a Enter amount for 2013 only		1	125,542.	
b Total for prior years:				-
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010		1		
c From 2011		1		
d From 2012		1		
e From 2013	_			
f Total of lines 3a through e	0.	,		
4 Qualifying distributions for 2014 from		1		
Part XII, line 4: ►\$ 160,104.		1		
a Applied to 2013, but not more than line 2a			125,542.	
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				34,562.
e Remaining amount distributed out of corpus	0.			
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:				
	0.			
a Corpus Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract		`		
line 4b from line 2b		0.	1	
c Enter the amount of prior years'		 		
undistributed income for which a notice of				
deficiency has been issued, or on which		İ		
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line		 		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015			ĺ	121,660.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			ļ	
may be required - see instructions)	0.	.		
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.	,[-	/
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0 .	.	İ	
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012			ĺ	
d Excess from 2013				
e Excess from 2014				
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ORPHAN SOCIETY OF LEXINGTON

	TRAL BANK &		<u></u>		.49629 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
' foundation, and the ruling is effective fo		=	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	(4) 0044	
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
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]		j	J
exempt activities			<u> </u>	ļ	
e Qualifying distributions made directly					
for active conduct of exempt activities.				ł	!
Subtract line 2d from line 2c			<u></u>		5
3 Complete 3a, b, or c for the			1		
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,		ĺ	1	1	1
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)		Į			
(2) Support from general public					1
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 XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see insti	ructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n	iore than \$5,000). (See s	section 507(0)(2).)			
NONE					
b List any managers of the foundation who ther entity) of which the foundation has	o own 10% or more of th	e stock of a corporation	(or an equally large port	ion of the ownership of a p	artnership or
••	a 10% of greater interes	5L			
NONE			 		
2 Information Regarding Contributi		•			
Check here if the foundation of the foundation makes gifts, grants, etc.				not accept unsolicited requ	
					
a The name, address, and telephone num	per or e-mail address of t	ne person to wnom app	lications should be addre	essea:	
SEE STATEMENT 10					
b The form in which applications should b	e submitted and informa	tion and materials they s	should include		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	, kinds of institutions, or	other factors:	
					

Part'XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or Foundation **Amount** status of contribution Name and address (home or business) recipient a Paid during the year SUBSIDY PUBLIC ASHLAND MEMORIAL FOUNDATION NONE 120 SYCAMORE RD 1,500. LEXINGTON, KY 40502 PUBLIC SUBSIDY NONE BABY HEALTH SERVICES 1590 HARRODSBURG RD LEXINGTON, KY 40504 7,500. BIG BROTHERS BIG SISTERS OF THE NONE PUBLIC SUBSIDY BLUEGRASS 436 GEORGETOWN ST LEXINGTON, KY 40508 5,500. NONE PUBLIC SUBSIDY CARNEGIE CENTER FOR LITERACY & LEARNING 251 WEST SECOND STREET 7,300. LEXINGTON, KY 40507 PUBLIC SUBSIDY CENTER FOR WOMEN, CHILDREN & FAMILIES 530 NORTH LIMESTONE 10,000. LEXINGTON, KY 40508 SEE CONTINUATION SHEET(S) **▶** 3a 153,680. b Approved for future payment NONE Total **▶** 3b 0. Part XVI-A Analysis of Income-Producing Activities

Enter arass	amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512 513, or 514	(e)
_		(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a Program	n service revenue:	Code		+		
		•		+		
· -	· · · · · · · · · · · · · · · · · · ·	·		1		
d		·				
e —						- · · · · · · · · · · ·
, —		1				· · · · · · · · · · · · · · · · · · ·
g Fees	and contracts from government agencies					
-	ship dues and assessments					
3 Interest	on savings and temporary cash					•
investm	ents			14	4.	
4 Dividend	ds and interest from securities			14	58,245.	· - · · · · · · · · · · · · · · · · · ·
5 Net rent	al income or (loss) from real estate.			ļ		
	-financed property			ļ		
	debt-financed property	ļ		 		
6 Net rent	al income or (loss) from personal					
property				┼		
	vestment income					
	(loss) from sales of assets other			18	122 225	
than inv	· ·	-		10	133,235.	
	me or (loss) from special events		-	1		
•	rofit or (loss) from sales of inventory		·	╁─┤		
11 Other re	venue:					
a b		·		╂──┤		
_		·	 	1		
d		·	· · · · · · · · · · · · · · · · · · ·	1		
·		-		11		
12 Subtotal	. Add columns (b), (d), and (e)	·	0.	,	191,484.	0.
	dd line 12, columns (b), (d), and (e)				13	191,484.
	heet in line 13 instructions to verify calculations.)					
Part X\	/I-B Relationship of Activities	to the Acco	omplishment of E	xemp	t Purposes	
Line No. ▼	Explain below how each activity for which inci the foundation's exempt purposes (other than	ome is reported i	n column (e) of Part XVI-A	\ contrib	uted importantly to the accom	plishment of
<u>v</u>						
		- 14-1				·····
					· · · · · · · · · · · · · · · · · · ·	****
						
					· · · · · · · · · · · · · · · · · ·	
·			· ·· · · · · ·			
423621 11-24-14						Form 990-PF (2014

	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable						
1 5 40	Exempt Organ					T 17.	
		rectly engage in any of the following	•		on 501(c) of		es No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of:							
(1) Cast	• =	anon to a noncharitable exempt of	rgamzation of.			1a(1)	x
(2) Othe						1a(2)	$\frac{1}{x}$
b Other tra						1-1-1	
(1) Sale		1b(1)	x				
(2) Purchases of assets from a noncharitable exempt organization							X
(3) Rental of facilities, equipment, or other assets							X
(4) Reimbursement arrangements							X
(5) Loar	is or loan guarantees					1b(5)	X
(6) Perf	ormance of services or me	embership or fundraising solicitation	ons			1b(6)	X
-		ailing lists, other assets, or paid en				10	X
	•	s "Yes," complete the following sch		•			•
		foundation. If the foundation receiv		e in any transaction	or sharing arrangement, sh	10W IN	
	(b) Amount involved	other assets, or services received. (c) Name of noncharitable		(4) 5		 	
(a)Line no	(D) Amount myorved	N/A	e exempt organization	(U) Description	of transfers, transactions and s	naring arrang	ements
		N/A		-			
							
		· · · · · · · · · · · · · · · · · · ·		†	•		
			·· · · · · · · · · · · · · · · · · · ·		·		
	· · · · · · · · · · · · · · · · · · ·						
	<u> </u>						
							
				 			
					· · · · · · · · · · · · · · · · · · ·		
			· · · · · · · · · · · · · · · · · · ·				
					·		
2a Is the four	indation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organi	zations described			
	•	er than section 501(c)(3)) or in sec		ations accorded		Yes	X No
	omplete the following sch						1,0
	(a) Name of org		(b) Type of organization		(c) Description of relationsh	ip	
	N/A						
		·····					
10.0	NAMES AND SEC.						
and b	r penaltie Coff pan (A) be Bayer elief, it is true correct, and cor	implete Declaration during arer (other tha	ng accompanying schedules and an taxpayer) is based on all inform	statements, and to the ation of which preparer	has any knowledge May	the IRS disci	
Sign \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					shov	vn below (see	nstr)?
	nature of other or trustee	TWOMEN GOSSO	Date	Truste	EE LX	∟ Yes	L No
	Print Type preparers in	ALT & TRUST UFFICIENTS S		Date	Check if PTIN		
		t	J	3/10/10	self- employed		
Paid	PAULA C. H	ianson PCA.	mon	76/15		1615	75
Preparer		N DORTON ALLEN	FORD, PLLC		Firm's EIN ► 27 - 38		
Use Only							
	Firm's address ▶ 10						
	LE	XINGTON, KY 405		Phone no. (859)2	255-23	341	

Form **990-PF** (2014)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO Employer identification number

61-0449629

Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	s 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							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections 509(a)(1) any one contributo	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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							
year, contributions is checked, enter h purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seculusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization ORPHAN SOCIETY OF LEXINGTON C/O CENTRAL BANK & TRUST CO Employer identification number

61-0449629

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

	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANNA LATHAM TRUST C/O CENTRAL BANK & TRUST CO; 300 WEST VINE STREET LEXINGTON, KY 40507	\$ <u>24,535</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ETHEL O HILL T/U/W C/O JP MORGAN CHASE BANK, NA; PO BOX 3038 MILWAUKEE, WI 53201	\$6,302.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JAMES KENNING CHARITABLE T/W C/O JP MORGAN CHASE BANK, NA; PO BOX 8708 WILMINGTON, DE 19899	\$3,109.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	FRANCES K ROSS TRUST C/O JP MORGAN CHASE BANK, NA; PO BOX 8708 WILMINGTON, DE 19899	s1,560.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-0		\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014

Name of organization
ORPHAN SOCIETY OF LEXINGTON
C/O CENTRAL BANK & TRUST CO

Employer identification number

61-0449629

Part II	Noncash Property (see instructions) Use duplicate copies of P	art 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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		,,	
		 \$	
453 11-05-	14		990, 990-EZ, or 990-PF) (

Employer identification number

ORPHAN SOCIETY OF LEXINGTON

c	completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 ring line entry. For organizations less for the year (Enter this info once) \$
	Jse duplicate copies of Part III if addition	al space is needed	
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
No. m -t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- =			
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CENTRAL MUSIC ACADEMY	NONE	PUBLIC	SUBSIDY	
219 EAST SHORT ST				
LEXINGTON, KY 40507				8,000
CHILDREN'S ADVOCACY CENTER	NONE	PUBLIC	SUBSIDY	
162 N ASHLAND AVE				E 50/
LEXINGTON, KY 40502			 	5,500
	YOUT	DUDI TO	CIBCING	
CHRYSALIS HOUSE	NONE	PUBLIC	SUBSIDY	
1589 HILL RISE DRIVE LEXINGTON, KY 40504				3,000
COMMON GOOD	NONE	PUBLIC	SUBSIDY	:
1015 N LIMESTONE				
LEXINGTON, KY 40505				5,065
				•
CROSS MINISTRIES	NONE	PUBLIC	SUBSIDY	
166 MARKET STREET				
LEXINGTON, RY 40507				10,000
GOD'S PANTRY	NONE	PUBLIC	SUBSIDY	
1685 JAGGIE FOX WAY				8 100
LEXINGTON, KY 40511				8,100
	NO.	DIEL TC	SUBSIDY	
HARRISON ELEMENTARY SCHOOL 161 BRUCE STREET	NONE	PUBLIC	SUBSIDI	
LEXINGTON, KY 40507				7,000
HIGH STREET NEIGHBORHOOD ASSOCIATION	NONE	PUBLIC	SUBSIDY	
228 SOUTH LIMESTONE				
LEXINGTON, KY 40508				10,000
LEXINGTON HEARING AND SPEECH CENTER	NONE	PUBLIC	SUBSIDY	
350 HENRY CLAY AVE LEXINGTON, KY 40502				7,500
	 			1
LEXINGTON WOMEN'S CLUB	NONE	PUBLIC	SUBSIDY	
1341 CORONA DRIVE				
LEXINGTON, RY 40514		1		8,000
Total from continuation sheets			· · · · · · · · · · · · · · · · · · ·	121,880

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	- Commission	
MCDOWELL-BRECKINRIDGE FOUNDATION	NONE	PUBLIC	SUBSIDY	
120 PRESTON AVE				4,50
LEXINGTON, KY 40502				1,30
OPEN DOOR CHURCH	NONE	PUBLIC	SUBSIDY	
749 ADDISON AVENUE				
LEXINGTON, KY 40504				3,00
READING CAMP/DIOCESE OF LEXINGTON	NONE	PUBLIC	SUBSIDY	
PO BOX 610 LEXINGTON, KY 40588				6,90
SALVATION ARMY	NONE	PUBLIC	SUBSIDY	
736 WEST MAIN ST				15.00
LEXINGTON, KY 40508				15,00
VISUALLY IMPAIRED PRESCHOOL SERVICES	NONE	PUBLIC	SUBSIDY	
(VIPS) 161 BURT ROAD #4				
LEXINGTON, KY 40503				3,75
LIVING ARTS & SCIENCE CENTER	NONE	PUBLIC	SUBSIDY	
362 N MARTIN LUTHER KING BLVD				
LEXINGTON, KY 40508		<u> </u>		7,56
LEXINGTON LEADERSHIP/READ TO SUCCEED PO BOX 4654	NONE	PUBLIC	SUBSIDY	
LEXINGTON, KY 40544				1,00
FRIENDS OF THE ARBORETUM	NONE	PUBLIC	SUBSIDY	
500 ALUMNI DRIVE LEXINGTON, KY 40503		İ	ı	3,00
JUNIOR ACHIEVEMENT	NONE	PUBLIC	SUBSIDY	
1092 DUVAL STREET				
LEXINGTON, KY 40515		<u> </u>		5,00
Total from continuation sheets				
Total nom ventingation shots				4

FORM 990-PF	GAIN OR (LOSS)	FROM SALE	OF F	ASSETS		STA	TEMENT	1
(A) DESCRIPTION OF PROPER	TY			MANNER CQUIRED	DA ACQU	TE IRED	DATE	SOLD
SEE ATTACHED STATEMEN	T		PUF	RCHASED				
(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
SALES PRICE	OTHER BASIS	SALE		DEPRE	· .	GAIN	OR LO	oss
346,634	. 356,898.		0.		0.		-10	264.
(A) DESCRIPTION OF PROPER	ТY			MANNER CQUIRED	DA ACQU	TE IRED	DATE	SOLD
SEE ATTACHED STATEMEN	T		PUF	RCHASED				
(B)	(C)	(D)		(E)			(F)	
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	С.	GAIN	OR LO	oss
702,561	. 595,731.		0.		0.		106	,830.
(A) DESCRIPTION OF PROPER	ТY			MANNER CQUIRED		TE IRED	DATE	SOLE
CLASS ACTION LITIGATI	ON SETTLEMENTS		PUE	RCHASED				_
(B)	(C)	(D)		(E)			(F)	
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE		DEPRE	c.	GAIN	OR LO	oss
737	. 0.		0.		0.			737.
CAPITAL GAINS DIVIDEN	DS FROM PART IV						35	,932.

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH IN	IVESTMENTS S	TATEMENT 2
SOURCE	(A REVE PER B	NUE NET IN	(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
CENTRAL BANK		4.	4.	
TOTAL TO PART I, LINE 3		4.	4.	
FORM 990-PF DIVIDEN	DS AND INTER	EST FROM SECUE	RITIES S	TATEMENT 3
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
CENTRAL BANK 94,17	7. 35,93	2. 58,245	58,245.	
TO PART I, LINE 4 94,17	7. 35,93	2. 58,245	58,245.	
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	2,550.	1,275.		1,275.
TO FORM 990-PF, PG 1, LN 16B	2,550.	1,275.		1,275.
FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
				+ —
FEDERAL EXCISE TAXES	92.	46.		46.

FORM 990-PF	OTHER EXPENSES				STATEMENT	6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC						
MISC ADMINISTRATIVE EXPENSES FIDUCIARY FEES	1,031. 18,347.							16. 87.
TO FORM 990-PF, PG 1, LN 23	19,378.	14,	275.		5,10	03.		
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7		
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	r		
CORPORATE STOCKS		•		2,350,927.	2,885,81	18.		
TOTAL TO FORM 990-PF, PART II	, LINE 10B		-	2,350,927.	2,885,81	18.		
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	8		
DESCRIPTION			вос	OK VALUE	FAIR MARKET	r		
CORPORATE BONDS				308,508.	308,41	18.		
TOTAL TO FORM 990-PF, PART II	LINE 10C		- ·-·	308,508.	308,41	18.		

9

STATEMENT

FORM 990-PF

JOYCE OCKERMAN PO BOX 21825

LEXINGTON, KY 40522

TRUSTEES	AND FOUNDATION MANA	GERS		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CENTRAL BANK & TRUST COMPANY	TRUSTEE		 	
300 WEST VINE STREET LEXINGTON, KY 40507	2.00	0.	0.	18,347.
MARTINA OCKERMAN	PRESIDENT/DIRE			
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
GENEVA DONALDSON	SECRETARY/DIRE		_	_
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
JEAN BREWER	TREASURER/DIRE			_
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
KATHERINE BREWER	DIRECTOR	_		
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
FRANCES COX	DIRECTOR	_		
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
LUCY CRAMER COX	DIRECTOR			
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
SARA HOWELL	VICE PRESIDENT	DIRECTOR		
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
AMY KESSINGER	DIRECTOR	_	_	_
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.
MADELYN MILLARD	DIRECTOR		_	_
PO BOX 21825 LEXINGTON, KY 40522	1.00	0.	0.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS

DIRECTOR

1.00

0.

0.

0.

ORPHAN SOCIETY OF LEXINGTO	N C/O CENTRAL		61	-0449629
CATHY RUPP PO BOX 21825 LEXINGTON, KY 40522	DIRECTOR 1.00	0.	0.	0.
SALLY STEVENS PO BOX 21825 LEXINGTON, KY 40522	DIRECTOR 1.00	0.	0.	0.
KASSIE KESSINGER PO BOX 21825 LEXINGTON, KY 40522	DIRECTOR 1.00	0.	0.	0.
ANNE L. SWINFORD PO BOX 21825 LEXINGTON, KY 40522	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, P	AGE 6, PART VIII	0.	0.	18,347.

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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JEAN BREWER PO BOX 21825 LEXINGTON, KY 40522

TELEPHONE NUMBER

859-269-2209

FORM AND CONTENT OF APPLICATIONS

A REQUEST FOR A SPECIFIC AMOUNT AND THE INTENDED USE OF THE FUNDS. APLLICATIONS WILL BE PROVIDED TO THE REQUESTOR.

ANY SUBMISSION DEADLINES

MARCH 15 & SEPTEMBER 15

RESTRICTIONS AND LIMITATIONS ON AWARDS

APPLICANT MUST BE AN IRC SECTION 501(C)(3) ORGANIZATION ONLY.

0023 PREPARED FOR ACCOUNT # 20 00 3751 0 0G - DRPHAN SOCIETY OF LEXINGTON TRUST PAGE ACCOUNT SITUS = KY
TAX ID# = 610449629
STATE TAX ID# = PROCESS DATE 01/13/2015 FOR TAX YEAR ENDED 12/31/2014 SECTION A - CAPITAL GAINS & LOSSES SHORT TERM SALES & MATURITIES
DATE
REG ACQUIRED SOLD
S INC 12000/11 12/30/14** CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH 26324.97 SHORT TERM WASH GAIN OR LOSS SALE -5740.62 N SHARES/PAR SECURITY REG
227.0000 ALLIANT TECHSYSTEMS INC 1
367.0000 CBS CORP CLASS B COMMON NEW 1
(126857202)
804.0750 CAUSEWAY INTERNATIONAL VALUE 4
FUND INSTITUTIONAL (14949P201)
100.0000 EBAY INC COM (278642103) COST BASIS -32065.59 04/21/14 12/30/14*
01/08/14 06/04/14
COVERED=Y
02/27/14 12/23/14
COVERED=Y
07/25/13 06/20/14
COVERED=Y
05/09/13 01/08/14
COVERED=Y
01/08/14 02/18/14
COVERED=Y
10/24/13 02/18/14
COVERED=Y
01/16/14 02/18/14
COVERED=Y
01/16/14 02/18/14
COVERED=Y
01/16/14 02/18/14
COVERED=Y
01/16/13 02/18/14
COVERED=Y
01/16/13 02/18/14
COVERED=Y
01/16/13 02/18/14
COVERED=Y
01/16/13 08/15/14 21951.47 -23152.01 -1200.54 N 12077.21 -13114.46 -1037.25 N 4897.99 -5149.00 -251.01 N (278642103) 469.0000 GENERAL MILLS INC 22963.34 -23352.03 -388.69 N (370334104) 394.0000 HOME DEPOT INC 29828.98 -27289.86 2539.12 N (437076102) 543.0000 ETF I-SHARES TRUST 36359.03 -36011.98 347.05 N (464287465) 1500.0000 ETF I-SHARES TRUST 100439.29 -99988.05 451.24 N (464287465) 149.0000 ETF 1-SHARES TRUST 9976.97 -9966.03 10.94 N (464287465) 175.0000 ETF 1-SHARES TRUST -11225.92 11717.92 492.00 N (464287465) 588.0000 SALESFORCE.COM 31260.92 -32455.72 -1194.80 (79466L302) 202,0000 THOR INDS INC 04/21/14 09/09/14 -12550.50 00 THOR INDS INC (885160101)
00 TOLL BROTHERS INC (889476103)
TOTAL SHORT TERM SALES & MATURITIES 10865.66 -1684.84 N 02/06/14 09/09/14 COVERED=Y 828.0000 TOLL BROTHERS INC 27970.13 -30576.96 -2606.83 N 346633.88 356898.11 -10264.23

OCESS DATE 01/13/2015		FOR TAX YEAR ENDER	12/31/2014	TAX ID# STATE TAX ID	= 610449629 # =	
CTION A - CAPITAL GAIR	S & LOSSES					
	LONG TERM SAL	ES & MATURITIES				
ARES/PAR SECURITY 157.0000 AT&T INC	RE 1	DATE G ACQUIRED SOLD 03/21/12 12/23/14	CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH 5350.91	COST BASIS -5020.86	LONG TERM GAIN OR LOSS 330.05	SAL
	(00206R102		1363.29	-1244.26	110.03	
40.0000 AT&T IRC	(00206R102) COVERED=Y			•	
43.0000 AT&T INC	1 00206R102	07/11/11 12/23/14 COVERED=Y	1465.54	-1324.91	140.63	N
15.0000 AT&T INC	(00206R102	01/06/11 12/23/14	511.23	-436.20	75.03	N
115.0000 AT&T INC	1	11/04/09 12/23/14	3919.46	-2940.55	978.91	N
30000.0000 ABBEY NAT		03/28/12 04/25/14	30000.00	30000 00	0.00	
04-25-20 428.0000 AETNA INC) 07/10/13 12/23/14	38139.09	-27319.37	10819.72	N
335.0000 AMERICAN	EXPRESS CO (00817Y108	OS/23/12 10/27/14	28837.50	-19188.13	9649.37	N
275.0000 BECTON D	(025816109		32105.29	-21153.00	10952.29	N
32.0000 COMCAST ((075887109		1598.45	-541.48	1056.97	
	(20030N101) COVERED=Y				
50.0000 COMCAST ((20030N101		2497.58	-1071.23	1426.35	
10.0000 COMCAST (ORP NEW CL A 20030N101	01/06/11 04/01/14) COVERED=Y	499.52	-223.30	271.22	N
30000.0000 CREDIT St	JISSE 2.20% 01-14-14 1 (22546QAH0	07/27/12 01/14/14	30000.00	-30434.40	-434.40	H
130.0000 DOMINION	RES INC VA 1	03/21/12 10/27/14	9174.41	-6583.20	2591.21	N
70.0000 DOMINION		10/14/11 10/27/14	4940.07	-3527.73	1412.34	N
102.0000 DOMINO'S		03/07/13 06/04/14	· 7437.94	-5094.89	2343.05	N
112.0000 E I DUPON	(25754A201 T DE NEMOURS & CO 1) COVERED=Y 03/21/12 12/23/14	8476.64	-5913.59	2563.05	N
	(263534109 T DE NEMOURS & CO 1) COVERED=Y	3632.85	-1947.51	1685.34	н
	(263534109 (T DE NEMOURS & CO 1) COVERED=Y	4162.64	-2129.12	2033.52	
	(263534109) COVERED=Y				
	IT DE NEMOURS & CO 1 (263534109		1892.11	-929.90	962.21	
25.0000 E I DUPO;	T DE NEMOURS & CO 1 (263534109		1892.11	-906.47	985.64	
25.0000 E I DUPON	T DE NEMOURS & CO 1 (263534109	05/24/10 12/23/14	1892.11	-897.11	995.00	N
50.0000 E I DUPO	T DE NEMOURS & CO 1 (263534109	06/02/10 12/23/14	3784.21	-1778.06	2006.15	N

OG23 PREPARED FOR ACCOUNT # 20 00 3751 0 0G - ORP	TAX LEDGER PHAN SOCIETY OF LEXI	NGTON TRUST	ACCOUNT SITU	= 610449629
PROCESS DATE 01/13/2015	FOR TAX YEAR ENDED	12/31/2014	STATE TAX ID	9 =
,	7 57 777 12777 247525			
SECTION A - CAPITAL GAINS & LOSSES				
LONG TERM SALES &	MATURITIES			
SHARES/PAR SECURITY REG	DATE ACQUIRED SOLD	CAPITAL PROCEEDS TO INCOME CASH PRINCIPAL CASH	COST BASIS	LONG TERM WASH GAIN OR LOSS SALE
342.0000 EBAY INC COM 1	10/09/12 06/20/14	16751.13	-15999.92	751.21 N
15.0000 EMERSON ELEC CO COM (278642103) 1 (291011104)	COVERED=Y 07/28/11 04/21/14 COVERED=Y	1028.14	-746.87	281.27 N
5.0000 EMERSON ELEC CO COM (291011104)	07/29/11 04/21/14 COVERED=Y	342.71	-246.86	95.85 N
3.0000 EMERSON ELEC CO COM 1	07/27/11 04/21/14	205.63	-151.20	54.43 N
35.0000 EMERSON ELEC CO COM 1	COVERED=Y 07/13/11 04/21/14	2398.99	-1982.88	416.11 N
30.0000 EMERSON ELEC CO COM (291011104)	COVERED=Y 05/18/11 04/21/14	2056.28	-1625.07	431.21 N
375.0000 EMERSON ELEC CO COM (291011104)	COVERED=Y 03/21/12 04/21/14	25703.52	-19571.21	6132.31 N
300.0000 EXELON CORP (291011104)	COVERED=Y 03/21/12 09/09/14	9917.81	-11636.97	-1719.16 N
(30161N101) 372.0000 FIRST SOLAR INC	COVERED=Y 05/24/13 11/21/14	18623.95	-19763.55	-1139.60 N
(336433107)	COVERED=Y 06/20/13 12/23/14	31580.28	-42029.64	-10449.36 N
FUND (38143H38T)	COVERED=Y 03/27/13 06/04/14	10235.61	-5335.12	4900.49 N
(410345102)	COVERED=Y 08/07/12 09/09/14	24015.57	-18906.60	5108.97 N
(427866108)	COVERED=Y			
510.0000 INTERNATIONAL PAPER CO COM 1 (460146103)	03/21/12 09/09/14 COVERED=Y	24795.04	-18012.30	6782.74 N
	03/21/12 02/14/14 COVERED=Y	22932.56	-20942.88	1989.68 N
	03/21/12 04/01/14	12685.54	-9404.39	3281.15 N
20.0000 NIKE INC CL B 1	COVERED=Y 03/31/11 04/21/14	1471.78	-763.49	708.29 N
	COVERED=Y 11/04/09 04/21/14	5887.11	-2486.00	3401.11 N
	COVERED=Y 01/06/11 04/21/14	1471.78	-840.40	631.38 N
	COVERED=Y 03/21/12 04/21/14	3679.44	-2766.00	913.44 N
	COVERED=Y 06/21/12 11/14/14	18934.33	-14293.62	4640.71 N
	COVERED=Y 03/21/12 02/06/14	23767.33	-19674.00	4093.33 N
(713448108) 58.0000 PRECISION CASTPARTS CORP CO 1	COVERED=Y 06/10/13 10/01/14	13549.17	-12737.19	811.98 N
(740189105)	COVERED=Y 03/27/13 10/01/14 COVERED=Y	22893.43	-18596.03	4297.40 N
(740105103)	-01FVFD-1			

PREPAREI	FOR ACCOUNT # 20 0	0 3751 0 0G - DR	TAX LEDGER PHAN SOCIETY OF LEXIN	IGTON TRUST	ACCOUNT SITU	= 610449629
ROCESS DATE 01.	/13/2015		FOR TAX YEAR ENDED	12/31/2014	STATE TAX ID	* =
ECTION A - CA	PITAL GAINS & LOSSES	i				
		LONG TERM SALES	8 MATURITIES DATE	CAPITAL PROCEEDS TO		LONG TERM WASH
HARES/PAR	SECURITY	REG	ACQUIRED SOLD	INCOME CASH PRINCIPAL CASH	COST BASIS	GAIN OR LOSS SALE
	T ROWE PRICE MID CA		03/21/12 01/16/14	25000.00	-20212.63	4787.37 N
	FUND #64	(77955610T)	COVERED=Y			
2608.4530	SCHRODER EMERGING N		10/16/12 01/08/14	33701.21	-33988.14	-286.93 N
	EQUITY FUND	(80809075T)	COVERED=Y	2772 27	4704 05	12.00 41
184.0610	SCHRODER EMERGING M		03/21/12 01/08/14	2378.07	-2390.95	-12.88 N
7257 0770	EQUITY FUND SCHRODER EMERGING M	(80809075T) ARKET 4	COVERED=Y 03/21/12 02/21/14	41506.07	-42320.55	-814.48 N
3657.7330	EQUITY FUND	(80809075T)	COVERED=Y	41,00.07	46564.33	014.40 11
135.0000	SEMPRA ENERGY	i	03/21/12 07/28/14	13893.44	-7959.20	5934.24 N
		(816851109)	COVERED=Y			
40.0000	SEMPRA ENERGY	1	12/28/10 07/28/14	4116.57	-2089.43	2027.14 N
		(816851109)	COVERED=Y		252 55	055 00 11
5.0000	SEMPRA ENERGY	(01/05330)	01/06/11 07/28/14	514.57	- 259.55	255.02 N
700 0000	CTATE CIRECT CORD	(816851109)	COVERED=Y	19493.36	-17571.00	1922.36 N
300.0000	STATE STREET CORP	(857477103)	03/07/13 04/21/14 COVERED=Y	17473.30	-1/5/1.00	1922.30 N
175 0000	VANGUARD INDEX FDS		07/25/13 10/27/14	13517.05	-12410.75	1106.30 N
175.0000	VANOCARD THEEX 1 DO	(922908553)	COVEREDEY	.5321.103		2220.22
382.0000	VANGUARD INDEX FDS		03/07/13 10/27/14	29505.78	~26868.01	2637.77 N
		(922908553)	COVERED=Y			
9.7512	VERITIV COPR	1	03/21/12 08/26/14	434.50	-250.75	183.75 N
	1000 TCDH	(923454102)	COVERED=Y	702560.70		
10	STAL LONG TERM SALES	& MAIUKIIIES		/02560./0	595443 42	107117 28