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Form **990-PF**

EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Depart	ment	of the Treasury enue Service			social security numbers on m 990-PF and its senarate				ZU 14		
Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf . Open to Public Inspection For calendar year 2014 or tax year beginning and ending											
Name of foundation							A Employer identification number				
		RIMORA FO						61-1579580			
		nd street (or PO box num		elivered to street	address)		Room/suite	B Telephone number	6024		
		WOOD LAN						(434) 245-			
		wn, state or province RLOTTESVIL		22901	ostal code			C If exemption application is p	ending, check here		
G C	neck	all that apply:	Initial retur	'n	Initial return of a fo	ormer public o	charity	D 1. Foreign organization:	s, check here		
		Į	Final return		Amended return			2. Foreign organizations me	seting the 85% test.		
		L	Address ch		Name change			Foreign organizations me check here and attach co	omputation D		
HC	1	type of organization:			tempt private foundation Other taxable private founda	ation		E If private foundation sta	_		
L Fai		ction 4947(a)(1) none rket value of all assets			ng method: X Cash	Accr	nial .	under section 507(b)(1	• • •		
		Part II, col (c), line 1	-	1 —	ther (specify)		001	F If the foundation is in a under section 507(b)(1			
•					mn (d) must be on cash	basis)			/(D/, 01100K 11010		
	rt I	Analysis of Revenu (The total of amounts in necessarily equal the ar	columns (b), (c), ar	nd (d) may not	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
\neg	1	Contributions, gifts,		··	2,700,000.			N/A	(Cash basis only)		
			ndation is not required t								
		Interest on savings and t			26.		26.		STATEMENT 1		
	4	Dividends and interes		s					1		
	5a	Gross rents									
	þ	Net rental income or (los	s)								
힐	6a	Net gain or (loss) from sa Gross sales price for all	le of assets not on	line 10			. ,				
Revenue	b	assets on line 6a					0.	 			
윤	7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain					<u> </u>				
- 1	0	Income modification	•	•	H RE		-RF (FIVED			
	10a	Gross sales less returns and allowances	, 			u					
	_	Less Cost of goods sold	,			18	NOV	9 9 2015			
	C	Gross profit or (loss)				l î		4 0 ZUID 1001			
i	11	Other income					Ta-Carry March	1951	1		
\perp	12	Total. Add lines 1 th			2,700,026.	- 1 ->24		EN IIT			
	13	Compensation of officers		s, etc	0.		0.		0.		
	14	Other employee salar	•	•	<u> </u>						
es		Pension plans, empli Legal fees	Dyee Dellellis			<u> </u>					
Sue		Accounting fees	S	гит 2	2,000.		0.		0.		
Š		Other professional fe	-		,	<u> </u>			-		
Administrative Expens		Interest									
rati	18	Taxes									
nısı		Depreciation and dep	oletion								
<u>a</u>		• •				ļ					
ΥÞ		Travel, conferences,	_			<u> </u>					
and		Printing and publicate Other expenses		гмт 3	175.	 	150.	-	0.		
ting		Total operating and		IHI J					·		
Operating	-7	expenses. Add lines			2,175.		150.		0.		
ŏ	25	Contributions, gifts,			598,000.				597,850.		
		Total expenses and		•							
		Add lines 24 and 25			600,175.		150.		597,850.		
	27	Subtract line 26 from	n line 12:								
		Excess of revenue over	•		2,099,851.	<u> </u>					
		Net investment inco				 	0.	N/A			
	ıC	Adjusted net incom	៥ (if negative, enter	r -U-)	1	Ī		I 14/12	1		

c Adjusted net income (if negative, enter -0-) 423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

61-1579580 THE RIMORA FOUNDATION Form 990-PF (2014) Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 167,680. 17,531. 17,531. 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 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 4 10,000,000. 11,964,247 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 7,917,680. 10,017,531. 11,981,778. instructions. Also, see page 1, item I) 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) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here $\triangleright \overline{X}$ and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 7,917,680. 10,017,531 29 Retained earnings, accumulated income, endowment, or other funds 7,917,680. 10,017,531 30 Total net assets or fund balances 7,917,680. 10,017,531 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

_			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	11	7,917,680.
2	Enter amount from Part I, line 27a	2	2,099,851.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	10,017,531.
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	10,017,531.

423511 11-24-14

Part IV Capital Gains	and Lo	sses for Tax on li	nvestment	Income	,,	,				
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) D	low ac - Purc - Dona	quired hase ation		acquired day, yr.)	(d) Date sold (mo., day, yr.)		
1a										
b NC	ONE									
C				_						
<u>d</u>					_					ļ. <u>-</u> -
<u>e</u>	(0.5		() ()		<u> </u>			/h\ c		<u></u>
(e) Gross sales price	(1) L	epreciation allowed (or allowable)		t or other basis xpense of sale					Gain or (loss s (f) minus	
<u>a</u>			ļ							
<u>b</u>	ļ									
C	1		<u> </u>							
d										
Complete only for assets show	100 0310 10 0	column (h) and owned by	the foundation	on 12/21/60		_	_	//) Co.o.o. //	Oal (b) sour	
Complete only for assets show			·						Col. (h) gair not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				Losses	(from col.	(h))
a										
b	1									
<u>c</u>	<u>.</u>									
<u>d</u>	1		ļ	 						
<u>e</u>			L		_		ı			
2 Capital gain net income or (net c	capital loss)	If gain, also ente If (loss), enter -(r in Part I, line)- in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo	oss) as defii	ned in sections 1222(5) a	nd (6):							
If gain, also enter in Part I, line 8	3, cólumn (d	:).	, ,		N					
If (loss), enter -0- in Part I, line 8		11 4848/ \ 4		-		3	Щ.,			
Part V □ Qualification \							nent in	come		
(For optional use by domestic priva	te foundation	ons subject to the section	4940(a) tax on	net investment ir	ncome	€.)				
If section 4940(d)(2) applies, leave	this part bla	ınk.								
Was the foundation liable for the se				•	riod?					Yes X No
If "Yes," the foundation does not qual 1 Enter the appropriate amount in					ntrios	,				
(a)	l cacii colui		1130 0000113 00	iore making any e						(d)
Base periód years	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha		-use asset	ts	Distri	(d) bution ratio vided by col. (c))
Calendar year (or tax year beginn 2013	illig iii)		12,500.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			9,47		(601. (8) 0	• 04977
2013			75,880.				8,36			. 04546
2012			0.				$\frac{3,35}{3,75}$. 00000
2010				_		, , , ,		- 		
2009								- 1		_
								1		.
2 Total of line 1, column (d)								2	İ	. 09523
3 Average distribution ratio for the	e 5-year bas	se period - divide the total	on line 2 by 5,	or by the number	r of ye	ars				
the foundation has been in exist								3		.03174
		•								-
4 Enter the net value of noncharita	able-use as:	sets for 2014 from Part X	, line 5					4	1 1	L1,775,570
										<u> </u>
5 Multiply line 4 by line 3								5		373,827
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)						6		0
7 Add lines 5 and 6			••	•				7		373,827
8 Enter qualifying distributions fro	om Part XII,	line 4	-					8		597,850
If line 8 is equal to or greater that	an line 7, ch	eck the box in Part VI, lin	e 1b, and comp	olete that part usi	ng a 1	% tax	rate.			
See the Part VI instructions.										

Form 990-PF (2014) THE RIMORA FOUNDATION			1579580		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940	0(a), 4940(b), 4940(e), or	4948	- see instr	uction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and en	nter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if nec	essary-see instructions)			-	1
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1			0.
of Part I, line 27b				i w	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).			* *	1
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	• •	2			0.
3 Add lines 1 and 2		3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	4	-		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			0.
6 Credits/Payments;		•	7	16	 1
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	-	h,		
b Exempt foreign organizations - tax withheld at source	6b	┨┊┞			1
c Tax paid with application for extension of time to file (Form 8868)	6c	-		38.4	1
d Backup withholding erroneously withheld	6d	┥╵	ž . ';		;`}
·	L ou I	┥	*		0.
7 Total credits and payments. Add lines 6a through 6d		7			<u> </u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	cnea	8			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	?	9	<u> </u>		<u> </u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	l >	10	ļ ——		
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refunded ▶	· 11	<u> </u>		
Part VII-A Statements Regarding Activities			U. 18, 6480.	157	NI.
1a During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation or did it participate or interve	ne in	***	Yes	No
any political campaign?		_	1a	1 1	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpos			1b	<u> </u>	X
If the answer is "Yes" to 18 or 16, attach a detailed description of the activities and	d copies of any materials publis	hed or	1,3,4	1 " "	. ** *
distributed by the foundation in connection with the activities			ideals.	ice	£kk.
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			Na.	1 194	X94
(1) On the foundation. > \$ (2) On foundation managers.	. ▶ \$0	<u>•</u>	\$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on foundation		N P	'IMM'	* 7
managers. ► \$ 0 .			L ik.s	النسطة]
2 Has the foundation engaged in any activities that have not previously been reported to the IR	RS?		2	$\downarrow \downarrow \downarrow$	X
If "Yes," attach a detailed description of the activities			<u> </u>		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorporation	, or	1.2.5		, °,
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es .		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	L)		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	-	N	「/A 4b	\perp	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	<u></u>	Х
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 en	ther:			į*	
 By language in the governing instrument, or 					}
 By state legislation that effectively amends the governing instrument so that no mandatory 	y directions that conflict with the st	ate law			
remain in the governing instrument?			6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete Part II, col (c), and Part .	KV .	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨				.]
VA					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4942(j)(5) for c	alendar .		1 1	
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 schedul		STMT		х	_
			Form 99		2014)

423531

Form **990-PF** (2014)

X

3b

4a

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,

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

Form 4720, to determine if the foundation had excess business holdings in 2014)

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

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

423551 11-24-14

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 1a b Average of monthly cash balances 163,478. 1b 11,791,415. 1c c Fair market value of all other assets 11,954,893. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 775,570. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 588,779. Minimum investment return. Enter 5% of line 5 Part XI/ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain and do not complete this part.) foreign organizations check here 588,779. Minimum investment return from Part X, line 6 · Str 2a Tax on investment income for 2014 from Part VI, line 5 2a 2b b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 588, Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 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 3 Amounts set aside for specific charitable projects that satisfy the: 3a a Suitability test (prior IRS approval required) 3Ь **b** Cash distribution test (attach the required schedule) 597,850 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 597.850. Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII	Undistributed	Income	(see instructions)
-----------	---------------	--------	--------------------

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7				588,779.
2 Undistributed income, if any, as of the end of 2014		· , . , . ,		
a Enter amount for 2013 only			43,695.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:				· · · · · · · · · · · · · · · · · · ·
a From 2009				
b From 2010				
c From 2011				
dFrom 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from		. "		
Part XII, line 4: ▶\$ 597,850.	•			
a Applied to 2013, but not more than line 2a			43,695.	
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				554,155.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line		•		
4a from line 2a. Taxable amount - see instr.		•	0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must				24 624
be distributed in 2015		· · · · · · · · · · · · · · · · · · ·	· - · · · · · · · · · · · · · · · · · ·	34,624.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	:			
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	- 0 •			
8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7		·	<u> </u>	
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		· · · · · · · · · · · · · · · · · · ·		
a Excess from 2010				
b Excess from 2011	[<u> </u>	
c Excess from 2012				
d Excess from 2013				
e Excess from 2014]			
423581				Form 000- DE (2014)

	IORA FOUNDAT				L-157958 <u>0</u>	Page 10
Part XIV Private Operating F			-A, question 9)	N/A	<u>-</u>	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating				
foundation, and the ruling is effective fo	or 2014, enter the date of t	the ruling	▶			
b Check box to indicate whether the found	dation is a private operatii	ng foundation described i		4942(j)(3) or	4942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years			
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) To	otal
investment return from Part X for						
each year listed						
b 85% of line 2a				•		
c Qualifying distributions from Part XII.	 			<u> </u>		
line 4 for each year listed						
d Amounts included in line 2c not						
used directly for active conduct of						
exempt activities			!			
e Qualifying distributions made directly						
for active conduct of exempt activities.						
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon;						
a "Assets" alternative test - enter:						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
2/3 of minimum investment return						
shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter:				<u> </u>		
(1) Total support other than gross						
investment income (interest,						
dividends, rents, payments on						
securities loans (section						
512(a)(5)), or royalties)				ļ		
(2) Support from general public and 5 or more exempt		1				
organizations as provided in		,				
section 4942(j)(3)(B)(III)						
(3) Largest amount of support from						
an exempt organization						
(4) Gross investment income	<u> </u>					
Part XV Supplementary Info			if the foundation	n had \$5,000	or more in ass	sets
at any time during	the year-see inst	ructions.)				
1 Information Regarding Foundation	on Managers:			-		
a List any managers of the foundation wi			ributions received by the	e foundation before	the close of any tax	
year (but only if they have contributed i	more than \$5,000). (See s	section 507(d)(2).)				
RICHARD L. BOOTH, JE						·
b List any managers of the foundation when the entity) of which the foundation has			or an equally large port	on of the ownershi	p of a partnership or	
NONE						
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:			
Check here 🕨 🗶 If the foundation						s. If
the foundation makes gifts, grants, etc.	. (see instructions) to indi	viduals or organizations (inder other conditions, o	omplete items 2a,	b, c, and d.	
a The name, address, and telephone nun	nber or e-mail address of	the person to whom appl	ications should be addre	ssed:		
b The form in which applications should	be submitted and informa	ition and materials they s	hould include;			
c Any submission deadlines:						
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:		
-			,			

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year AHIP 501(C)(3) NON COMMUNITY HOUSING N/A 2127 BERKMAR DRIVE PROFIT ORG CHARLOTTESVILLE, VA 22901 5,000. BIG BROTHERS BIG SISTERS OF THE N/A 501(C)(3) NON GENERAL DONATION CENTRAL BLUE RIDGE PROFIT ORG 1001 E. MARKET ST., STE 100 CHARLOTTESVILLE, VA 22902 5,000. BISHOP KEARNEY HIGH SCHOOL N/A SCHOOL SCHOLARSHIP FUND 125 KINGS HIGHWAY SOUTH ROCHESTER, NY 14617 5,000. BRISTOL VALLEY THEATER N/A OPERATING GENERAL DONATION 151 S MAIN STREET FOUNDATION 5,000. NAPLES, NY 14512 BOYS AND GIRLS CLUB OF CENTRAL N/A 501(C)(3) NON GENERAL DONATION VIRGINIA PROFIT ORG PO BOX 707 CHARLOTTESVILLE, VA 22902 15,000. SEE CONTINUATION SHEET(S) **▶** 3a 598,000. b Approved for future payment NONE Total **▶** 3b

423611 11-24-14

** SEE PURPOSE OF GRANT CONTINUATIONS

Part XVI-A	Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
·	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d					
e					
f					***
g Fees and contracts from government agencies		_			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	26.	
4 Dividends and interest from securities					·
5 Net rental income or (loss) from real estate:	. 1 jan 182 v		· _ *	£	· · · · · · · · · · · · · · · · · · ·
a Debt-financed property		<u></u>	_		
b Not debt-financed property				<u>_</u>	
6 Net rental income or (loss) from personal			1		
property		<u> </u>			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			4		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			-		
b					· · · · · · · · · · · · · · · · · · ·
c					
d					
e		0	-	2.0	0
12 Subtotal. Add columns (b), (d), and (e)	<u>; - </u>	U	• .	26.	<u>0</u> 26
13 Total. Add line 12, columns (b), (d), and (e)				¹³ —	40
(See worksheet in line 13 instructions to verify calcula	tions.)				
Part XVI-B Relationship of Activ	ities to the Acco	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for wh			A contrib	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other	ner than by providing fund	is for such purposes).			

_ ▼	the foundation's exempt purposes (other than by providing funds for such purposes).
	
	
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423621	

11-24-14

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	Form 990-PF (2014) THE F	RIMORA FOU	NDATIO	N		61-15	79580	Pa	age 13
1 Del the organization directly or indirectly angle in any of the following with any other organization described as section 501(c) of the Code (other than section 501(c)) organizations? 2 Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other seasets 3 Define seasets 4 1 1 1	Part XVII			sfers To a	and Transactions a	and Relationsh	nips With Nonc	haritabl	е	
a Transfers from the reporting foundation to a noncharitable exempt organization of: 1) Cash	4 0.4%			of the fellows			- 501(-) -6		IV	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cashe (2) Other assets 5) Other transactions: (1) Sales of sales to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursament arrangements (5) Loans or found parameter (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) If the asset of consisting arrangements (8) Rental of two flag sparanteers (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (10) If the asset of any of the above in the solicitation or sharing arrangement, show in column (gl b) waiter to any in the above in the solicitation or sharing arrangement, show in column (gl b) waiter to any interest or services given by the reporting foundation. If the foundation developes is than fair market value in any transaction or sharing arrangement, show in column (gl b) waiter than the standard of the standard or the standard or sharing arrangement, show in column (gl b) waiter than the standard or sharing arrangement, show in column (gl b) waiter and the standard or sharing arrangements or sharing arrangement, show in column (gl b) waiter and the sharing arrangement or individual or sharing a) i 50 i(c) oi		162	140
(2) Other assets 14(1) X 12(2) 1										
22 Other assets				olo oxompt on	gumenton.			1a(1)		х
b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Prurchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimburgement arrangements (5) Loans or loan guaranties (6) Loans or loan guaranties (7) Example of the above is "Yes," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or sarvives received. (8) In the answer to any of the above is "Yes," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services received. (9) Amount involved (1) Amount involved (2) Amount involved (3) Amount involved (4) Remember of transfers, transactions, and always arrangement, show in section 501 (c) of the Code (other than section 501 (c)(3)) or in section 527? (3) In the foundation directly or indirectly affidated with, or related to, one or more tax-exempt organization (6) Description of transfers, transactions, and alwaying arrangements in section 501 (c) of the Code (other than section 501 (c)(3)) or in section 527? (3) If "Yes, "complete the following schedule. (3) Name of organization (6) Amount involved (7) Amount involved (8) Amount involved (9) Description of transfers, transactions, and alwaying arrangements. (9) If "Yes, "complete the following schedule. (9) If yes of organization (9) Type of organization (9) Type of organization (1) Description of relationships Mark T : NASH	. ,				1					
22 Purchases of assets from a noncharizable exempt organization 19(2) X	. ,								†	 -
(a) Rental of Sacities, equipment, or other assets (b) Leass or loan guarantees (c) Performance of services or membership or fundrasing solicitations (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Sharing of Sacities, equipment, making lists, other assets, or paid employees (e) Performance of services or membership or fundrasing solicitations (f) Ithe answer to any of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greated lists thin fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Amount involved (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transities, transactions, and sharing wrangements 1	(1) Sale	s of assets to a noncharita	able exempt organizat	tion				1b(1)		X
(4) Remburschend arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Example of Sacilities, equipment, making lists, other assets, or paid employees (8) The answer to any of the above is "est, complete the following schedule. Column (8) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services received. (a) Immin (9) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of nonchartibilitie exempt organization (d) Description of transfers, transactions, and sharing wrangements N / A 1 'Yes, "complete the following schedule. (a) Name of longuazation (b) Type of organization (c) Description of relationship N / A 1 'Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N / A 1 'Yes N / A 1 'Y							•	1b(2)		X
(5) Leans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1	(3) Ren	tal of facilities, equipment,	or other assets				••	1b(3)		
(e) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, maining lists, other assets, or pad employees d If the answer to any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, cher assets, or services given by the reporting foundation. If the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section \$01(c) of the Code (other than section \$01(c) of th	(4) Rein	nbursement arrangements	3				••	1b(4)		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "res," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services goes not be re-prompting foundation. If the foundation received less than that im market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. [a] Line to (b) Amount involved (c) Name of noncharitable exempt organization (d) pescription of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A		-					•••		_	
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services eyewing the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements in N/A. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship in the black of a N/A. (b) Type of organization (c) Description of relationship in the black of a N/A. (c) Description of relationship in the black of a N/A. (d) Description of relationship in the black of a N/A. (e) Description of relationship in the black of a N/A. (a) Name of organization (c) Description of relationship in the black of a N/A. (b) Type of organization (c) Description of relationship in the black of a N/A. (c) Description of relationship in the black of a N/A. (d) Description of relationship in the black of a N/A. (e) Description of relationship in the black of a N/A. (e) Description of relationship in the black of a N/A. (f) Type of organization (c) Description of relationship in the black of a N/A. (e) Description of relationship in the black of a N/A. (f) N/A. (g) N/A. (h) Type of organization (c) Description of relationship in the black of a N/A. (h) Type a N/A. (h) Type a N/A. (h) Type a N/A. (h) Type of organization (c) Description of relationship in the black of a N/A. (h) Type a	• •		· ·	•						1
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column (d) the value of the goods, other assets, or servoes received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjany, I declare that I have examined the return, including accompanying schedules and statements, and to the beast of my knowledge and belief, it is two, correct, and complete Declaration of prepare (pg or ghin tax player) is based and information of which preparer has any knowledge and penalty in the preparer of the preparer is signature. PrimyType preparer's name Preparer's signature Date Check									sets,	
(c) Name of noncharitable exempt organization N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perlay, I declare that I have examined the return, including accompanying schedules and statements, and to the beast of my knowledge and belief, it is true, correct, and complete Declaration of prepare (player lyin tax-payer) a based on all information of which prepare has any knowledge and belief, it is true, correct, and complete Declaration of prepare (player lyin tax-payer) a based on all information of which prepare has any knowledge and belief, it is true, correct, and complete Declaration of prepare (player lyin tax-payer) a based on all information of which prepare has any knowledge in the prepare of the control					eu 1655 tilali iali illaiket valt	ie ili aliy transaction	Or Sharing arrangemen	ic silow iii		
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No If Yes, complete the following schedule.					e exempt organization	(d) Description	of transfers, transactions,	and sharing ar	rangeme	ents
2a Is the foundation directly or indirectly affiniated with, or related to, one or more tax-exempt organizations described in section 501(c) the Code (other than section 501(c)(3)) or in section 527? □ If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A	``		`,'							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes					-					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes								•		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes								·		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes			_							
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									_	
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
Sign Print/Type preparer's name Preparer's signature Date Check X firm's name PRICEWATERHOUSECOOPERS LLP Firm's address 2001 ROSS AVE., SUITE 1800 Cc) Description of relationship Signature Cc) Description of relationship Cc) Description of relationship Cc) Description of relationship Cc) Description of relationship N/A	2a Is the for	undation directly or indirec	ctly affiliated with, or r	related to, one	or more tax-exempt organ	zations described				
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other pan taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other pan taxpayer) is based on all information of which preparer has any knowledge shown below (see instr)? No		• • •)(3)) or in sect	tion 527?			Yes	X	☐ No
N/A Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other han taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? No Signature of officer or trustee Date Check X if self- employed Print/Type preparer's name Preparer's signature Date Check X if self- employed Print/Type preparer Pr	b If "Yes,"	complete the following sch	nedule.		T 437				_	
Sign Here Under penalties of perlury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other han taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and to the best of my knowledge and select hands and the preparer has any knowledge and select hands and the preparer has any knowledge and select hands and the preparer has any knowledge and linformation of which preparer has any knowledge and linformation of which preparer has any knowledge an			ganization		(b) Type of organization		c) Description of relati	onsnip		
Sign Here A		N/A								
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Sign Here A		· · · · · · · · · · · · · · · · · · ·				-				
Print/Type preparer's name Preparer's signature Date Title								May the IHS	discuss	this
Paid Preparer Use Only Prim's address ▶ 2001 ROSS AVE., SUITE 1800 No Date Title Ti	Sign	belief, it is true, correct, and co	mplete Declaration of pr	eparer (other the	n taxpayer) is based on all inforr	nation of which preparer	has any knowledge	return with th	re prepa	rer
Paid Preparer Use Only Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Date 11/05/2015 Preparer's self- employed Print's elin ▶ 13-4008324 Firm's address ▶ 2001 ROSS AVE., SUITE 1800	Here	A		5/1	- 11/10/15	Directo	r			_
Paid Preparer Use Only MARK T. NASH Firm's name ► PRICEWATERHOUSECOOPERS LLP Firm's address ► 2001 ROSS AVE., SUITE 1800 self- employed P00396721 Firm's EIN ► 13-4008324	Sig		-	<u> </u>						_
Paid Preparer Use Only MARK T. NASH 11/05/2015 P00396721		Print/Type preparer's n	ame	Preparer's s	ignature	Date	ا سعب	IN		
Preparer Use Only Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's address ▶ 2001 ROSS AVE., SUITE 1800	D-:-1			 /		44/05/0045				
Use Only Firm's address ▶ 2001 ROSS AVE., SUITE 1800				L CECCO	DEDG III	11/05/2015				
Firm's address ▶ 2001 ROSS AVE., SUITE 1800			LCEWATERHO	OSECOC	LEK2 TTb		Firm's EIN ► 13-	40083	24	
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					JOILE TOOL		Phone no (214	1) 999	14	0.0

423622 11-24-14

Form **990-PF** (2014)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.irs.gov/form990 ·

OMB No 1545-0047

2014

Employer identification number

T	HE RIMORA FOUNDATION	61-1579580						
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							
• •	is covered by the General Rule or a Special Rule. ;)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.						
General Rule								
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II See instructions for determining a contributor	•						
Special Rules								
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supports) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II.	, or 16b, and that received from						
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•						

Name of organization

Employer identification number

ጥህਓ	D T M O R A	FOUNDATION
THE	KINOKA	LOONDWITON

61-1579580

	1110111 1 0 0 11 2 11 1 1 1 1		
Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD L. BOOTH, JR. 1065 WOOD LANE CHARLOTESVILLE, VA 22901	sss	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
			Person 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 Omnicash 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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE RIMORA FOUNDATION

61-1579580

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	of additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
423453 11-05		- \$	990, 990-EZ, or 990-PF) (2014

Name of orga	nization		Employer identification number
THE RT	MORA FOUNDATION		61-1579580
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	s, chantable, etc., contributions of \$1,000	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 to line entry. For organizations
	Use duplicate copies of Part III if addition	al space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·			
		(e) Transfer of gi	эп
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	gift
	Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
L			
		(e) Transfer of g	gift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
			

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	· ·
CAMP HOLIDAY TRAILS	N/A	501(C)(3) NON	CAMP FOR CHILDREN WITH	
400 HOLIDAY TRAILS LANE CHARLOTTESVILLE, VA 22903		PROFIT ORG	SPECIAL NEEDS	25,00
CHILDREN, YOUTH & FAMILY SERVICES	N/A	501(C)(3) NON	QUALITY, EARLY	
1000 E. HIGH ST. CHARLOTTESVILLE, VA 22902		PROFIT ORG	LEARNING EXPERIENCES FOR CHILDREN AND	
SMALOTING TIME, VA 22702			FAMILIES THAT PREPARE	
			THEM FOR SCHOOL AND	5,00
COMPUTERS4KIDS	n/A	501(C)(3) NON	GENERAL DONATION	
945 2ND ST SE		PROFIT ORG		
CHARLOTTESVILLE, VA 22902				5,00
CORNELL UNIVERSITY	N/A	UNIVERSITY	TOUCHDOWN BEAR STATUE	
130 E. SENECA STREET, SUITE 400			AND CORNELL ANNUAL	
ITHACA, NY 14850			FUND FOR THE LAB OF ORNITHOLOGY	6,0
				· · ·
FOCUSED ULTRASOUND FOUNDATION	N/A	OPERATING	GENERAL DONATION	
1230 CEDARS COURT, SUITE F		FOUNDATION		
CHARLOTTESVILLE, VA 22903	-			75,00
GERALD P. MURPHY CANCER FOUNDATION	N/A	OPERATING	CANCER RESEARCH	
3000 KENT AVENUE, SUITE E2-100	N/A	FOUNDATION	CANCER RESEARCH	
WEST LAPAYETTE, IN 47906				30,00
LIGHTHOUSE STUDIO INC	N/A	501(C)(3) NON	PROVIDE FILMMAKING	
121 E. WATER STREET	N/A	PROFIT ORG	WORKSHOPS TO YOUTH	
CHARLOTTESVILLE, VA 22902	-			1,00
TTUR ARMO		E01/G)/3) NOV	WELL D. COLOGRAVIEW CDEAMS	
LIVE ARTS 123 E. WATER ST	N/A	501(C)(3) NON PROFIT ORG	HELP COMMUNITY CREATE MEANINGFUL, UNIQUE	
CHARLOTTESVILLE, VA 22902			PERFORMATIVE WORKS	2,00
LOCAL FOOD HUB	N/A	501(C)(3) NON	FARM TO SCHOOL WEEK	
556 DETTOR RD		PROFIT ORG		
CHARLOTTESVILLE, VA 22903				4,00
MARTHA JEFFERSON HOSPITAL FOUNDATION	N/A	OPERATING	HOSPITAL	
500 MARTHA JEFFERSON DRIVE		FOUNDATION	NOT TIAL	
CHARLOTTESVILLE, VA 22911	1		<u> </u>	10,00
Total from continuation sheets	•			563,0

THE RIMORA FOUNDATION

3 Grants and Contributions Paid During the Y	ear (Continuation)			
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		
CAYUGA'S WATCHERS INC. PO BOX 6817	N/A	501(C)(3) NON	GENERAL DONATION	
ITHACA, NY 14851		PROFIT ORG		5,00
,				
CITY SCHOOLYARD GARDEN	N/A	501(C)(3) NON	GENERAL DONATION	
PO BOX 5282		PROFIT ORG		
CHARLOTTESVILLE, VA 22905				1,00
MUSIC RESOURCE CENTER	N/A	501(C)(3) NON	GENERAL DONATION	
105 RIDGE ST.		PROFIT ORG		2 50
CHARLOTTESVILLE, VA 22902				2,50
PIEDMONT CASA, INC.	N/A	CORPORATION	COURT APPOINTED	
818 EAST HIGH STREET			SPECIAL ADVOCATES FOR	
CHARLOTTESVILLE, VA 22902			CHILDREN	5,00
STEPHENS COLLEGE	N/A	UNIVERSITY	GENERAL DONATION	
1200 E. BROADWAY				
COLUMBIA, MO 65215 THE CENTER FOR NONPROFIT EXCELLENCE	N/A	501(C)(3) NON	LOCAL RESOURCE CENTER	5,00
PO BOX 5652		PROFIT ORG	DEDICATED TO	
CHARLOTTESVILLE, VA 22905			STRENGTHENING	
	,		NONPROFITS TO REALIZE	
			THE POTENTIAL OF THE	10,00
		E01 (G) (2) 2202		
THE CLARIDEN SCHOOL 100 CLARIDEN RANCH RD.	N/A	FOOT(C)(3) NON PROFIT ORG	GENERAL DONATION	
SOUTHLAKE, TX 76092				200,00
THE MONTPELIER FOUNDATION	N/A	OPERATING	SUPPORT MONTPELIER'S	
PO BOX 911		FOUNDATION	HOME AND GROUNDS	9 50
ORANGE, VA 22960				2,50
THE PARAMOUNT THEATER	N/A	501(C)(3) NON	GENERAL DONATION	
215 EAST MAIN STREET		PROFIT ORG		
CHARLOTTESVILLE, VA 22902			<u> </u>	25,00
THE THOMAS JEFFERSON FOUNDATION	N/A	501(C)(3) NON	MONTICELLO ANNUAL FUND	
IVY BUSINESS PARK, 556 DETTOR RD, STE		PROFIT ORG		.
107 CHARLOTTESVILLE, VA 22903	.l		<u> </u>	5,00

THE RIMORA FOUNDATION

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
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	Contabbilion	
TOUCHSTONE FARM INC	N/A	501(C)(3) NON	SUMMER DRIVE	
13 PONY FARM LANE		PROFIT ORG		
TEMPLE, NH 03084-4914			 	2,000
FARMINGTON PRESERVATION FOUNDATION	N/A	501(C)(3) NON	GENERAL DONATION	
1625 COUNTRY CLUB CIRCLE	W/ A	PROFIT ORG	DENERAL DONALION	
CHARLOTTESVILLE, VA 22901				5,000
HARVEY MUDD COLLEGE	N/A	COLLEGE	GENERAL DONATION	
301 PLATT BOULEVARD				
CLAREMONT, CA 91711				25,000
INTERNATIONAL RESCUE COMMITTEE	N/A	501(C)(3) NON	LEADING REFUGEES FROM	
609 EAST MARKET STREET, SUITE 104	N/ A	PROFIT ORG	HARM TO HOME IN	
CHARLOTTESVILLE, VA 22902			CHARLOTTESVILLE	2,000
PIEDMONT FAMILY YMCA	N/A	501(C)(3) NON	CAPITAL CAMPAIGN	
674 HILLSDALE DRIVE, SUITE 4		PROFIT ORG	1	
CHARLOTTESVILLE, VA 22901	-			25,000
SENIOR CENTER 1180 PEPSI PLACE	N/A	501(C)(3) NON PROFIT ORG	PROGRAMMING AND HEALTHY AGING	
CHARLOTTESVILLE, VA 22901		PROFII ORG	INITIATIVES	5,000
				<u>`</u>
ST. ANNE'S-BELFIELD SCHOOL	N/A	SCHOOL	AUCTION 2014	
2132 IVY ROAD				25 000
CHARLOTTESVILLE, VA 22903	-			25,000
THE BRACKETT REFUGEE EDUCATION FUND	N/A	501(C)(3) NON	SUPPORT REFUGEES FROM	
PO BOX 8	N/A	PROFIT ORG	BURMA	
HAMILTON, NY 13346-0008				5,000
THE CHARLOTTESVILLE AREA COMMUNITY	N/A	501(C)(3) NON	BUILDING GOODNESS	
FOUNDATION		PROFIT ORG	FOUNDATION	
114 4TH STREET S.E.				
CHARLOTTESVILLE, VA 22902		 	1	5,000
THE WESTMORELAND DAVIS MEMORIAL	N/A	501(C)(3) NON	MORVEN PARK	
FOUNDATION		PROFIT ORG		
PO BOX 6228 LEESBURG, VA 20178				5,000
Total from continuation sheets				,

3 Grants and Contributions Paid During the	Year (Continuation)				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount	
UNIVERSITY OF VIRGINIA	N/A	UNIVERSITY	PEDIATRIC NEUROLOGY		
400 RAY C. HUNT DRIVE	İ		GIFT		
CHARLOTTESVILLE, VA 22904				20,00	
UNIVERSITY OF VIRGINIA FUND	N/A	501(C)(3) NON	VIRGINIA POLO FARM		
PO BOX 400314 CHARLOTTESVILLE, VA 22904-4314		PROFIT ORG	UTILITY VEHICLE	7,50	
USEA AREA II NAJYRC TEAM FUND	N/A	501(C)(3) NON	EDUCATION OF MEMBERS		
525 OLD WATERFORD ROAD NW LEESBURG, VA 20176		PROFIT ORG		5,00	
WIDG AND DROG ING	N/A	501(C)(3) NON	YOUTH AND COACHES		
KIDS AND PROS INC PO BOX 2093	N/A	PROFIT ORG	CAMPS AND CLINICS		
PO BOX 2093 BUFORD, GA 30515		LIGHT ONG	CTATO WID CHIMICS	2,50	
BOFORD, GR 30313				·	
		-			
				- ·	
Total from continuation sheets		1	<u> </u>		

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY (CASH II	NVESTMENTS	STATEMENT	1
SOURCE	REVE	(A) REVENUE PER BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
MERRILL LYNCH		26.		26.	-	
TOTAL TO PART I, LINE 3		26.		26.		
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS		/EST-	(C) ADJUSTED NET INCOM		
TAX PREPARATION FEES	2,000.		0.			0.
TO FORM 990-PF, PG 1, LN 16B	2,000.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET IN MENT II	JEST-	(C) ADJUSTED NET INCOM		
LICENSE AND REGISTRATION BANK FEES	25. 150.		0. 150.			0.
TO FORM 990-PF, PG 1, LN 23	175.		150.			0.
FORM 990-PF	OTHER INV	ESTMENT	3		STATEMENT	4
DESCRIPTION		LUATION ETHOD	ВО	OK VALUE	FAIR MARKE	т
HBK MULTI-STRATEGY OFFSHORE I	FUND	COST	1	0,000,000.	11,964,2	47.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

RICHARD L. BOOTH, JR.

1065 WOOD LANE

CHARLOTTESVILLE, VA 22901