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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2014

Open to Public Inspection

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

Name of foundation GRAEBER FOUNDATION		A Employer identification number 64-6023660	
Number and street (or P O box number if mail is not delivered to street address) P O BOX 40		B Telephone number (see instructions) (662) 326-2481	
City or town, state or province, country, and ZIP or foreign postal code MARKS, MS 38646		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 7,925,831		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	282,794			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	26	26		
	4 Dividends and interest from securities.	148,413	148,413		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	395,310			
	b Gross sales price for all assets on line 6a 4,507,252				
	7 Capital gain net income (from Part IV, line 2) . . .		395,310		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
Operating and Administrative Expenses	11 Other income (attach schedule)	 344,532	344,532		
	12 Total. Add lines 1 through 11	1,171,075	888,281		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	 22,500	0		22,500
	c Other professional fees (attach schedule)	 48,179	48,179		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	 15,881	0		0
	19 Depreciation (attach schedule) and depletion	 5,034	0		
	20 Occupancy	3,573	0		3,573
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	 4,840	0		4,840
	24 Total operating and administrative expenses. Add lines 13 through 23	100,007	48,179		30,913
	25 Contributions, gifts, grants paid	371,769			371,769
	26 Total expenses and disbursements. Add lines 24 and 25	471,776	48,179		402,682
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	699,299			
	b Net investment income (if negative, enter -0-)		840,102		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	79,492	34,144	34,144
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	5,984,437	6,315,729	6,680,144
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	636,105	1,054,494	1,144,688
	14	Land, buildings, and equipment basis ▶ _____ 114,024 Less accumulated depreciation (attach schedule) ▶ 47,169	71,889	66,855	66,855
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	6,771,923	7,471,222	7,925,831	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
	Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24		Unrestricted			
25		Temporarily restricted			
26		Permanently restricted			
Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
27		Capital stock, trust principal, or current funds	6,771,923	7,471,222	
28		Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29		Retained earnings, accumulated income, endowment, or other funds	0	0	
30		Total net assets or fund balances (see instructions)	6,771,923	7,471,222	
31	Total liabilities and net assets/fund balances (see instructions) . . .	6,771,923	7,471,222		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 6,771,923
2	Enter amount from Part I, line 27a	2 699,299
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 7,471,222
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 7,471,222

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	GOLDMAN SACHS GAINS/LOSSES	P		
b	Capital Gains Dividends	P		
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 4,458,873		4,111,942	346,931
b 48,379			48,379
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			346,931
b			48,379
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	395,310
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	353,108	7,630,596	0 046275
2012	355,853	7,135,400	0 049871
2011	337,209	7,241,648	0 046565
2010	293,255	6,993,960	0 041930
2009	347,861	5,930,486	0 058656

2	Total of line 1, column (d).	2	0 243297
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 048659
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	7,981,014
5	Multiply line 4 by line 3.	5	388,348
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	8,401
7	Add lines 5 and 6.	7	396,749
8	Enter qualifying distributions from Part XII, line 4.	8	402,682

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

Part VI

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

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		18,401	
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3		Add lines 1 and 2.		8,401	
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		8,401	
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014		6a	9,800
b		Exempt foreign organizations—tax withheld at source		6b	
c		Tax paid with application for extension of time to file (Form 8868)		6c	
d		Backup withholding erroneously withheld		6d	
7		Total credits and payments. Add lines 6a through 6d.		9,800	
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		1,399	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax <input checked="" type="checkbox"/> 1,399 Refunded <input type="checkbox"/>		0	

Part VII-A

Statements Regarding Activities

1a		During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		No
b		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?		1b		No
		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c		Did the foundation file Form 1120-POL for this year?		1c		No
d		Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input checked="" type="checkbox"/> \$ 0 (2) On foundation managers <input checked="" type="checkbox"/> \$ 0				
e		Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0				
2		Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		No
		If "Yes," attach a detailed description of the activities.				
3		Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		No
4a		Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
b		If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5		Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No
		If "Yes," attach the statement required by General Instruction T.				
6		Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
		• By language in the governing instrument, or				
		• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	Yes	
7		Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.		7	Yes	
8a		Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> MS				
b		If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes	
9		Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		No
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of WILLIAM M GRAEBER Telephone no (662) 326-2481 Located at PO BOX 40 MARKS MS ZIP+4 38646			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. If "Yes," list the years 20 , 20 , 20 , 20 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

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

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

Part VIII

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN C GRAEBER	TRUSTEE	0	0	0
P O BOX 40	0 00			
MARKS, MS 38646				
WILLIAM M GRAEBER	TRUSTEE	0	0	0
P O BOX 40	0 00			
MARKS, MS 38646				
JAMES P GRAEBER JR	TRUSTEE	0	0	0
240 WESTOVER DRIVE	0 00			
CLARKSDALE, MS 38614				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	0
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

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

Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	8,052,137
b	Average of monthly cash balances.	1b	50,415
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	8,102,552
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	8,102,552
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	121,538
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,981,014
6	Minimum investment return. Enter 5% of line 5.	6	399,051

Part XI

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

1	Minimum investment return from Part X, line 6.	1	399,051
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	8,401
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	8,401
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	390,650
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	390,650
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	390,650

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	402,682
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	402,682
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	8,401
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	394,281

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				390,650
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			371,769	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010.				
c From 2011.				
d From 2012.				
e From 2013.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 402,682				
a Applied to 2013, but not more than line 2a			371,769	
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.				30,913
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				359,737
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .				

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

1a

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

b

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

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

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

1

Information Regarding Foundation Managers:

a

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

b

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

2

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

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

a

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

b

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

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical 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


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	371,769
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated


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

Form **990-PF** (2014)


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ALZHEIMER'S ASSOCIATION 225 N MICHIGAN AVENUE CHICAGO,IL 60601	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
AMERICAN PARKINSON DISEASE ASSOC 135 PARKINSON AVENUE STATEN ISLAND,NY 10305	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
BADDOUR CENTER 626 BADDOUR BLVD SENATOBIA,MS 38668	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,000
BAPTIST MEMORIAL HOSPITAL 2301 SOUTH LAMAR OXFORD,MS 38655	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
BELÉN CEMETERY ASSOCIATION 1 CEMETERY ROAD MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
BELHAVEN COLLEGE 1500 PEACHTREE STREET JACKSON,MS 39202	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	10,000
BETHANY CHRISTIAN CENTER 1255 LYNNFIELD ROAD MEMPHIS,TN 38119	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,500
BOY SCOUTS OF AMERICA 1325 WEST WALNUT HILL LANE IRVING,TX 75015	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
CARE STATION P O BOX 1041 CLARKSDALE,MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
CHRISTIAN RECORD BRAILLE FOUNDATION P O BOX 6097 LINCOLN,NE 68506	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
COMMUNITY FOUNDATION 525 E CAPITOL STREET JACKSON,MS 39201	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
CONCORD PRESBYTERIAN 338 COVINGTON DRIVE WATERLOO,IL 62298	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
CYSTIC FIBROSIS FOUNDATION 1907 DUNBARTON DRIVE JACKSON,MS 39216	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
DELTA CHRISTIAN COUNSELING CENTER 421 1ST STREET MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	7,000
DELTA STATE UNIVERSITY FOUNDATION HWY 8 WEST CLEVELAND,MS 38733	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	25,000
Total  3a				371,769


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAIRLAND CORP 13400 OLD COLUMBIA PIKE SILVER SPRING,MD 20904	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	750
FIRST MARKS CEMERTARY SEVENTH STREET MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	750
FIRST UNITED METHODIST 202 CATCHINGS AVENUE INDIANOLA,MS 38751	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	5,000
FRENCH CAMP ACADEMY 1 FINE PLACE FRENCH CAMP,MS 38655	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	16,500
GIDEONS INTL P O BOX 140800 NASHVILLE,TN 37214	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
HERITAGE FOUNDATION 214 MASSACHUSETTS AVE WASHINGTON,DC 20002	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
HOPE MINISTRIES P O BOX 862 DES MOINES,IA 50304	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
KIPP DELTA SCHOOL 415 OHIO STREET WEST HELENA,AR 72342	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
LAUDERDALE CEMETERY HWY 45 N LAUDERDALE,MS 39335	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
LULA RICH EDUCATIONAL FOUNDATION 415 LEE DRIVE CLARKSDALE,MS 38614	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,000
MARKS PRESBYTERIAN CHURCH 511 LOCUST STREET MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	96,444
MARKS VOLUNTEER FIRE DEPT 501 POPLAR ST MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	750
MCCALLIE SCHOOL 500 DODDS AVENUE CHATTANOOGA,TN 37404	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,000
MD ANDERSON CANCER CENTER 1515 HOLCOMBE AVE HOUSTON,TX 77030	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
MISSION TO THE WORLD P O BOX 2589 SUWANEE,GA 30024	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
Total  3a				371,769

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MISSISSIPPI CHILDRENS HOMES P O BOX 1078 JACKSON,MS 39215	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	3,000
MISSISSIPPI PUBLIC BROADCASTING 3825 RIDGEWOOD ROAD JACKSON,MS 39211	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	250
MS CENTER 201 W CAPITOL STREET JACKSON,MS 39201	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
MS STATE TROOPERS P O BOX 22871 JACKSON,MS 39225	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	100
MULTIPLE SCLEROSIS OF MS 813 SHADES CREEK PARKWAY BIRMINGHAM,AL 35209	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
NORTHWEST MS COMMUNITY COLLEGE SCHL FD 1310 BELK BLVD OXFORD,MS 38655	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	22,000
ORGAN LUTEHRAN CHURCH 1333 S KIRKWOOD ROAD ST LOUIS,MO 63122	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
PALMER HOME FOR CHILDREN 422 MS 12 STARKVILLE,MS 39759	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	3,000
PCA MINISTERIAL RELIEF FUND 1700 NORTH BROWN ROAD LAWRENCEVILLE,GA 30043	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	2,500
QUITMAN CO EDUCATIONAL FOUNDATION 310 PECAN STREET MARKS,MS 38646	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	70,725
REFORMED UNIVERSITY MINISTRIES 5422 CLINTON BLVD JACKSON,MS 39209	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	3,000
ROTARY INTERNATIONAL FOUNDATION ONE ROTARY CENTER EVANSTON,IL 60201	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	1,000
SMILE 60-43 MASPETH AVENUE NEW YORK,NY 11378	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	25,500
ST MARYS SCHOOL 816 BLACK OAK DRIVE MEDFORD,OR 97504	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	12,000
Total  3a				371,769

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEACH FOR AMERICA 104 FRONT AVENUE INDIANOLA,MS 38751	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	4,000
THE NATURE CONSERVATORY 4245 FAIRFAX DRIVE ARLINGTON,VA 22203	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	500
THE SALVATION ARMY 2649 W OXFORD LOOP OXFORD,MS 38655	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	15,000
UNIVERSITY OF MS P O BOX 1848 UNIVERSITY,MS 38677	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONS	25,500
WOUNDED WARRIOR PROJECT 4899 BELFORD ROAD JACKSONVILLE,FL 32256	N/A	PUBLIC	SUPPORT OF CHARITABLE OPERATIONSSUPPORT OF CHARITABLE OPERATIONS	1,000
Total  3a				371,769

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div>	<div>OMB No 1545-0047</div>
		<div>2014</div>

<div>Name of the organization</div> <div>GRAEBER FOUNDATION</div>	<div>Employer identification number</div> <div>64-6023660</div>
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Organization type (check one)

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

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

General Rule

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

Special Rules

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

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

Part I Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_____	See Additional Data Table _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization GRAEBER FOUNDATION	Employer identification number 64-6023660
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Part II	Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	See Additional Data Table	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____

Name of organization GRAEBER FOUNDATION	Employer identification number 64-6023660
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Part III

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

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

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

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

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

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

Additional Data

Software ID:
Software Version:
EIN: 64-6023660
Name: GRAEBER FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<div>WILLIAM M GRAEBER</div> <div>P O BOX 40</div> <div>MARKS, MS 38646</div>	\$ 19,858	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>2</u>	<div>JOHN CLARK GRAEBER</div> <div>P O BOX 40</div> <div>MARKS, MS 38646</div>	\$ 14,104	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>3</u>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	\$ 109,420	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>4</u>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	\$ 29,779	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>5</u>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	\$ 39,970	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>6</u>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	\$ 28,186	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>7</div>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	<div>\$ 14,851</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input checked="" type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>8</div>	<div>JAMES P GRAEBER TRUST</div> <div>240 WESTOVER DRIVE</div> <div>CLARKSDALE, MS 38614</div>	<div>\$ 6,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	435 SHARES ORACLE STOCK @ \$45 65	\$ <u>19,858</u>	<u>2014-12-22</u>
<u>2</u>	460 SHARES LONGLEAF PARTNERS STOCK @ \$30 66	\$ <u>14,104</u>	<u>2014-12-23</u>
<u>3</u>	1,607 518 SHARES LONGLEAF LLSCX @ \$30 7999, 1,880 955 SHARES LONGLEAF LLPFX @ \$31 8499	\$ <u>109,420</u>	<u>2014-12-26</u>
<u>4</u>	GOLDMANS SACHS LARGE CAP 1,876 43 @ \$15 87	\$ <u>29,779</u>	<u>2014-03-31</u>
<u>5</u>	GS FOCUSED 1,968 00 @ \$20 31	\$ <u>39,970</u>	<u>2014-03-31</u>
<u>6</u>	GS U S EQUITY DIV 2,505 41 @ \$11 25	\$ <u>28,186</u>	<u>2014-03-31</u>
<u>7</u>	MOTOROLA SOLUTIONS INC 231 @ \$64 29	\$ <u>14,851</u>	<u>2014-03-31</u>

TY 2014 Accounting Fees Schedule**Name:** GRAEBER FOUNDATION**EIN:** 64-6023660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & TAX PREP FEES	22,500	0		22,500

**TY 2014 All Other Program
Related Investments Schedule**

Name: GRAEBER FOUNDATION
EIN: 64-6023660

Category	Amount
NONE	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2014 Depreciation Schedule

Name: GRAEBER FOUNDATION

EIN: 64-6023660

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING AND IMPROVEMENTS	2005-12-01	17,732	7,170	SL	20 0000000000000	887	0		
LAND	2005-12-01	1,000		L		0	0		
BUILDING IMPROVEMENTS	2006-07-01	51,839	19,440	SL	20 0000000000000	2,592	0		
FURNITURE & FIXTURES	2006-08-10	7,903	7,903	SL	7 0000000000000	0	0		
OFFICE EQUIPMENT	2006-07-01	4,444	4,444	SL	5 0000000000000	0	0		
BUILDING AND IMPROVEMENTS	2011-07-01	16,900	2,113	SL	20 0000000000000	845	0		
BUILDING AND IMPROVEMENTS	2012-07-01	14,206	1,065	SL	20 0000000000000	710	0		

**TY 2014 Investments Corporate
Stock Schedule**

Name: GRAEBER FOUNDATION
EIN: 64-6023660

Name of Stock	End of Year Book Value	End of Year Fair Market Value
GOLDMAN SACHS 3 SECURITIES	6,315,729	6,680,144

TY 2014 Investments - Other Schedule

Name: GRAEBER FOUNDATION

EIN: 64-6023660

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LONGLEAF PARTNERS FUND	AT COST	475,108	543,517
GOLDMAN SACHS 8 SECURITIES	AT COST	579,386	601,171

TY 2014 Land, Etc. Schedule**Name:** GRAEBER FOUNDATION**EIN:** 64-6023660

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDING AND IMPROVEMENTS	17,732	8,057	9,675	
LAND	1,000	0	1,000	
BUILDING IMPROVEMENTS	51,839	22,032	29,807	
FURNITURE & FIXTURES	7,903	7,903	0	
OFFICE EQUIPMENT	4,444	4,444	0	
BUILDING AND IMPROVEMENTS	16,900	2,958	13,942	
BUILDING AND IMPROVEMENTS	14,206	1,775	12,431	

TY 2014 Other Expenses Schedule

Name: GRAEBER FOUNDATION

EIN: 64-6023660

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	4,480	0		4,480
INSURANCE	360	0		360

TY 2014 Other Income Schedule

Name: GRAEBER FOUNDATION

EIN: 64-6023660

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GOLDMAN SACHS LP INVESTMENTS	344,532	344,532	344,532

TY 2014 Other Professional Fees Schedule

Name: GRAEBER FOUNDATION

EIN: 64-6023660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	48,179	48,179		0

TY 2014 Taxes Schedule**Name:** GRAEBER FOUNDATION**EIN:** 64-6023660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ESTIMATED TAX	9,800	0		0
EXCISE TAX	6,081	0		0