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For calendar year 2014, or tax year beginning 01-01-2014

Department of the Treasury

Internal Revenue Service

DLN: 93491161007015

OMB No 1545-0052

2014

2014Open to Public

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Inspection

, and ending 12-31-2014

A Employer identification number Name of foundation E LAFAYETTE & ETIENNETTE A QUIRIN 65-0746310 FOUNDATION INC. **B** Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 14454 CALOOSA BLVD (772) 231-6902 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code PALM BEACH GARDENS, FL 33418 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% Address change Name change test, check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J** Accounting method **F** If the foundation is in a 60-month termination I Fair market value of all assets at end **►** [under section 507(b)(1)(B), check here of year (from Part II, col. (c), Other (specify) line 16) \$\bigs\square\$ 1,403,911 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see for charitable expenses per books (cash basis only) Contributions, gifts, grants, etc , received (attach Check ► ✓ if the foundation is **not** required to attach 5.250 5.250 Interest on savings and temporary cash investments 32,524 32,524 Dividends and interest from securities. . . Gross rents Net rental income or (loss)_ 2 24,149 Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 209,681 Capital gain net income (from Part IV, line 2) . 6,457 Net short-term capital gain . . Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 12 Total. Add lines 1 through 11 . . 61.923 44.231 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . Operating and Administrative Expenses 15 Pension plans, employee benefits . . 93 3,500 Legal fees (attach schedule). . . . 16a 匆 2.844 Accounting fees (attach schedule). 图 12,996 Other professional fees (attach schedule) **17** 囫 611 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion . 19 20 Travel, conferences, and meetings. 21 22 Printing and publications Other expenses (attach schedule) . . . Total operating and administrative expenses. 24 Add lines 13 through 23 19.951 0 0 25 Contributions, gifts, grants paid. . . . 83,000 83,000 26 Total expenses and disbursements. Add lines 24 and 102,951 83,000 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -41.02844,231 Net investment income (if negative, enter -0-) Adjusted net income (If negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	4,669	4,383	· ·
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	′	Less allowance for doubtful accounts			
_		Inventories for sale or use			
sets	8	-			
w.	9	Prepaid expenses and deferred charges			
⋖	10a	Investments—U S and state government obligations (attach schedule)	1,060,278	1,019,095	1,291,383
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)	101,859	101,859	108,145
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the			
		Instructions Also, see page 1, item I)	1,166,806	1,125,337	1,403,911
	17	Accounts payable and accrued expenses			
,n	18	Grants payable			
₽	19	Deferred revenue			
abilities	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	
ø		Foundations that follow SFAS 117, check here			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.			
횰	24	Unrestricted			
œ	25	Temporarily restricted			
Ξ	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ŏ		and complete lines 27 through 31.			
왍	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	1,166,806	1,125,337	
₹	30	Total net assets or fund balances (see instructions)	1,166,806	1,125,337	
	31	Total liabilities and net assets/fund balances (see instructions)	1,166,806	1,125,337	
Pa	rt II				
1		Total net assets or fund balances at beginning of year—Part II, column (a			
_		, , , , , , , , , , , , , , , , , , , ,		-	1,166,806
2		Enter amount from Part I, line 27a		 	-41,028
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3			1,125,778
5		Decreases not included in line 2 (itemize)		_ 5	441
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	rt 11, column (b), lir	ne 30 . 6	1,125,337

the Part VI instructions

	90-PF (2014)					Page 3
Part 1	Capital Gains	and Losses for Tax on Inv	<u>estment Incom</u>	(b) How acquired	, [<u> </u>
		e the kınd(s) of property sold (e g , nouse, or common stock, 200 shs	P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	` '	
1a						
(e) Gross sales price	(f) Depreciation allow	107	st or other basis		In or (loss)
a		(or allowable)	pius e	xpense of sale	(e) plus	(f) minus (g)
b						
d						
<u>u</u>						
	mnlete only for assets	showing gain in column (h) and owi	ned by the foundation	on on 12/31/69	(I) Counc (C	ol (h) gain minus
		(i) Adjusted basis		cess of col (i)	_ ``	ot less than -0-) or
(i)	FM V as of 12/31/69	as of 12/31/69		col (j), if any		(from col (h))
а						
b						
С						
d						
е						
2	Capital gain not inco	ome or (net capital loss)	If gain, also enter			
2	Capital galli liet liico	me or (net capital loss)	If (loss), enter -0	- In Part I, line /	2	6 ,4 5 7
3	Net short-term capit	tal gain or (loss) as defined in secti	ons 1222(5) and (6	5)		
		Part I, line 8, column (c) (see insti		enter - 0 -	3	
Part	-	Under Section 4940(e) for		n Net Investme	1 - 1	
		private foundations subject to the				
fsection	on 4940(d)(2) applies,	leave this part blank				
Was the	foundation liable for th	ne section 4942 tax on the distribu	itable amount of any	y year in the base p	eriod?	┌ Yes No
f"Yes,	" the foundation does n	not qualify under section 4940(e) I	Oo not complete this	s part		
1 En	ter the appropriate amo	ount in each column for each year,	see instructions be	fore makıng any ent	ries	
B	(a)	(b)	(c	:)		d)
	penod years Calendar or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha			cion ratio ed by col (c))
	2013	84,559		1,369,759		0 061733
	2012	54,901		1,299,512		0 042247
	2011	80,627	+	1,319,433		0 061107
	2010	68,000		1,345,436		0 050541
	Z009	75,622 nn (d)		1,259,963	2	0 060019
2 3	•	ratio for the 5-year base period—c		<u> </u>	2	0 275647
3		the foundation has been in existen			3	0 055129
4	Enter the net value o	of noncharitable-use assets for 20:	14 from Part X, line	5	4	1,409,590
5	Multiply line 4 by line	e 3		[5	77,709
6	Enter 1% of net inve	estment income (1% of Part I, line	27b)	[6	442
7	Add lines 5 and 6.			[7	78,151
8	Enter qualifying distr	ributions from Part XII, line 4		[8	83,000
	If line 8 is equal to o	r greater than line 7, check the box	, and complete that	part using a 1% t	ax rate See	

	990-PF (2014) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age 4
1a		Tuctio	115)	
Id	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			442
	here 🕨 🔽 and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
-	enter -0-) Add lines 1 and 3			442
3 4	Add lines 1 and 2			442
4	enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			442
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 441			
b	Exempt foreign organizations—tax withheld at source 6b			
с	Tax paid with application for extension of time to file (Form 8868) 6c 443			
d -	Backup withholding erroneously withheld			0.04
7 8	Total credits and payments Add lines 6a through 6d			884
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ► 10			442
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 442 Refunded 11			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt 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.			NI-
	Did the foundation file Form 1120-POL for this year?	1c		No
u	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers 🕨 \$			
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	, ,	. I	
	 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)			
	▶ <u>FL</u>			
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)?			Na
10	If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	. 9		No
	and addresses.	. 10		No

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 ►A J BRACKINS CPA Telephone no ►(772)	231-	6902	
	Located at ►2800 OCEAN DRIVE VERO BEACH FL ZIP+4 ►32963			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			
13	and enter the amount of tax-exempt interest received or accrued during the year			- 1
	- · · · · · · · · · · · · · · · · · · ·			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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	1		
Pai	TE 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	 (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes ✓ No (5) Transfer any income or assets to a disqualified person (or make any of either available 			
	for the benefit or use of a disqualified person)?			
	(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)			
ь	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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
•	that were not corrected before the first day of the tax year beginning in 2014?	1c		
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(1)(3) or 4942(1)(5))			
а	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			
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		
С	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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			
	ıf 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	l T	T	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

5a	During the year did the foundation	pay	or incurany amoun	t to							
	(1) Carry on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e	(a)))?	No			
	(2) Influence the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	carı	ry				
	on, directly or indirectly, any	vote	registration drive?.				⊤ Yes ▽	No			
	(3) Provide a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes ☐	No			
	(4) Provide a grant to an organiza	tion	other than a charita	ble,	etc , organization des	scrib	ped				
	ın section 4945(d)(4)(A)? (se	e in	structions)				⊤ Yes ▽	No			
	(5) Provide for any purpose other	thar	religious, charitable	e, sc	ientific, literary, or						
	educational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.			No			
b	If any answer is "Yes" to 5a(1)-(5), d	ıd any of the transac								
	Regulations section 53 4945 or i	n a c	urrent notice regard	ıng d	disaster assistance (see	ınstructions)?		5b		
	Organizations relying on a curren	t not	ice regarding disast	eras	ssistance check here	· .	▶ [_			
C	If the answer is "Yes" to question	5a(4), does the foundat	ion c	laım exemption from	the					
	tax because it maintained expend	liture	responsibility for th	ne gr	ant?		T Yes 「	No			
	If "Yes," attach the statement requ	ired l	y Regulations section	n 53.	4945-5(d).						
6a	Did the foundation, during the yea	r, re	ceive any funds, dire	ectly	or indirectly, to pay	prer	miums on				
	a personal benefit contract?							No			
b	Did the foundation, during the yea	r, pa	y premiums, directly	orı	ndırectly, on a perso	nal l	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, w	as tl	ne foundation a party	/ to a	a prohibited tax shelf	ter tı	ransaction? TYes 🔽	No			
b	If yes, did the foundation receive	any	proceeds or have an	y ne	t income attributable	to t	the transaction?		7b		
Dai		t Of	ficers, Directors	s, Tı	rustees, Founda	tio	n Managers, Highly	Paid	Emp	loye	es,
	and Contractors										
	List all officers, directors, trustees										
	(a) Name and address		Title, and average hours per week evoted to position		c) Compensation If not paid, enter -0-)	e	(d) Contributions to mployee benefit plans I deferred compensation		xpens her all		
A J BI	RACKINS		ASURER/DI		0		0				0
280	O OCEAN DRIVE	0 25	5								
	O OCEAN DRIVE										
	O BEACH, FL 32963 REEQUIRIN	DID	ECTOR		0		0				
	O OCEAN DRIVE	0 00			0		O				U
	O OCEAN DRIVE										
VER	O BEACH,FL 32963										
CLAR	K D BENNETT	4	SIDENT/DI		0		0				0
	54 CALOOSA BLVVD	0 00)								
	54 CALOOSA BLVD M BEACH GARDENS,FL 33418										
	Compensation of five highest-paid	emr	lovees (other than t	thos	e included on line 1—	see	instructions). If none, er	nter "N	NONE."		
							(d) Contributions to				
(a)	Name and address of each employ	/ee	(b) Title, and avera		(c) Compensatio	n	employee benefit		xpens		
	paid more than \$50,000		devoted to position				plans and deferred compensation	ot	her all	owanc	es
NON	lF						compensation				
	· <u>-</u>										
Tota	I number of other employees paid of	ver	\$50,000				🟲				

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, H	ighly Paid Employees,
3 Five highest-paid independent contractors for professional services	s (see instructions). If none, enter "NO	NE".
(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	S	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include it		er of Expenses
organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation durin	g the tax year on lines 1 and 2	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
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. 1 purposes 1a 1,420,250 1h 10.556 1c 250 1d 1.431.056 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 1.431.056 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 21.466 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 1.409.590 5 70.480 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 70.480 1 Tax on investment income for 2014 from Part VI, line 5. 442 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 442 2c 3 3 70.038 4 4 5 5 70.038 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 70.038 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 83.000 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 83,000 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 442 82,558 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

<u> </u>	Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
	Distributable and control of the Con	Corpus	Years prior to 2013	2013	2014
	Distributable amount for 2014 from Part XI, line 7				70,036
	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2014 From 2009				
	From 2009				
	From 2011				
	From 2012				
	From 2013 16,953				
	Total of lines 3a through e	47,180			
	Qualifying distributions for 2014 from Part	,			
•	XII, line 4 > \$ 83,000				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election			<u> </u>	
	required—see instructions)				
	Applied to 2014 distributable amount				70,038
	Remaining amount distributed out of corpus	12,962			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
-	same amount must be shown in column (a).) Enter the net total of each column as				
O	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	60,142			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
_	Instructions				
T	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
Q	be required - see instructions)				
0	applied on line 5 or line 7 (see instructions)	13,380			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	46,762			
10	Analysis of line 9				
а	Excess from 2010 1,446				
Ь	Excess from 2011				
C	Excess from 2012				
d	Excess from 2013 16,953				
е	Excess from 2014 12,962				1

P	art XIV Private Operating Four	ndations (see 11	nstructions and F	<u>Part VII-A, questi</u>	on 9)			
1a	If the foundation has received a ruling or of foundation, and the ruling is effective for 2	determination lette	r that it is a private	operating				
L	·	•	=		on C 4043(-)(3)	T 4043/5/(5)		
	Enter the lesser of the adjusted net		rivate operating foundation described in section 4942(j)(3) or ear Prior 3 years					
Za	income from Part I or the minimum	Tax year	(1) 2012	<u> </u>	(1) 2044	(e) Total		
	investment return from Part X for each	(a) 2014	(b) 2013	(c) 2012	(d) 2011			
	year listed							
	85% of line 2a							
C	line 4 for each year listed							
d	Amounts included in line 2c not used							
	directly for active conduct of exempt							
	activities							
е	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							
а	"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							
Рa	rt XV Supplementary Information	on (Complete t	his part only if	the organizati	on had \$5 000	or more in		
	assets at any time during			o. g	45,000			
1	Information Regarding Foundation Manag							
а	List any managers of the foundation who he before the close of any tax year (but only i					idation		
	belove the close of any tax year (but only i	i they have continu	outed more than \$5	,000) (See Section	307(u)(2))			
b	List any managers of the foundation who o				lly large portion of t	he		
	ownership of a partnership or other entity)	of which the found	ation has a 10% o	r greater interest				
2	Information Regarding Contribution, Gran	t. Gift. Loan. Schol	arshin, etc., Progra	ms:				
	Check here If the foundation only ma					- -		
	unsolicited requests for funds. If the found	dation makes gifts.	arants, etc. (see ir	nstructions) to indiv	iduals or organization	ρι ons under		
	other conditions, complete items 2a, b, c,		, ,	,	J			
а	The name, address, and telephone numbe	r or e-mail address	s of the person to w	hom applications s	hould be addressed			
	CLARK BENNETT							
	14454 CALOOSA BLVD							
	PALM BEACH GARDENS, FL 33418							
	(561) 346-6081 CDB@SPECTMUNICIPAL COM							
_	The form in which applications should be s	cubmitted and info	rmation and materi	ale they chould incl	ude			
D				*				
	APPLICATION SHOULD INCLUDE COP	1 OF 301(C)3 EXE	-MELION LELIER	, NO OTHER KEST	KIC LION2			
С	Any submission deadlines	I.E.C.						
	THERE ARE NO SUBMISSION DEADLIN							
d	Any restrictions or limitations on awards, factors				•			
	THERE ARE NO RESTRICTIONS OR LIMORGANIZATION	IITATIONS ON AV	WARDS, EXCEPT T	HAT THE ORGANI	ZATION MUST BE	A 501(C)3		

3 Grants and Contributions Paid		proved for F	uture Payment	1
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total				83,00

	I-A Analysis of Income-Produci	na Activitie	<u> </u>			Page 12
	s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						, , , , , , , , , , , , , , , , , , , ,
с						
е						
g Fees	and contracts from government agencies ership dues and assessments					
3 Intere	st on savings and temporary cash					5,250
	nds and interest from securities ntal income or (loss) from real estate					32,524
a Debt	-financed property lebt-financed property					
6 Netre	ntal income or (loss) from personal					
	Investment Income r (loss) from sales of assets other than					
ınvent	cory					24,149
10 Gross	profit or (loss) from sales of inventory revenue a					
b						
d						
12 Subtot	al Add columns (b), (d), and (e).					61,923
(See v	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify call Relationship of Activities to	alculations)			.3	61,923
Line No. ▼	Explain below how each activity for whice the accomplishment of the foundation's instructions)	h income is re	ported ın column (e) of Part XVI-A co	ontributed import	

Form 99		<u> </u>										Pa	ge 1 3
Part)	(VII	Information Re Noncharitable					sactio	ns and I	Relationships	s With			
		ganization directly or in D1(c) of the Code (other	ndırectly e	engage	ın any of	the following wi						Yes	No
orgai	nızatı	ons?											
		from the reporting four				• •							
											1a(1)		No
		rassets									1a(2)		No
		nsactions									41.44		
		of assets to a noncha											No
		nases of assets from a nl of facilities, equipme											No No
		bursement arrangemer									1b(4)		No
		s or loan guarantees.									1b(5)		No
		mance of services or n									1b(6)		No
		facilities, equipment, i		•	-						1c		No
d If the	e ansv e goo	wer to any of the above ds, other assets, or se nsaction or sharing arr	: is "Yes," rvices giv angement	comple en by t , show i	ete the fo he reporti In column	llowing schedul ing foundation (d) the value o	e Colun If the fo	nn (b) sho undation r	ould always show eceived less tha	the fair ma in fair mark	et value		
(a) Line N	10	(b) Amount involved	(c) Name	of nonch	arıtable exe	empt organization	(d)	Description	of transfers, transac	ctions, and sha	arıng arra	ngemer	nts
	_												
	+												
desc	rıbed	ndation directly or indi in section 501(c) of the complete the following of (a) Name of organization	ne Code (d schedule		an sectio		ın secti			 iption of relati	.FY€ onship	es F	No
Sign	the l	er penalties of perjury, pest of my knowledge a mation of which prepar	ınd belief,	ıt ıs tru	ie, correc					an taxpaye	r) is bas	sed on	
Here	*	*****				2015-05-29	k	*****		return	IRS disc		
	,	Signature of officer or t	rustee			Date		Title		below	tr)? 🔽 🕽		
		Print/Type preparer's AURELIUS J BRACKINS CPA	name	Prepa	rer's Sıgr	nature	Date 201	5-05-29	Check if self- employed ▶	PTIN	002883	375	
Paid Prepa Use	rer	Firm's name ► KMETZ NUTTALL ELV	WELL GRA	НАМ Р	LLC		1		Firm's EIN ► 2	7-123892	1		
Only		Firm's address ► 2800 OCEAN DRIVE 329632064	VERO B	RO BEACH, FL					Phone no (77	2)231-690	02		

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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MEDICAL MISSIONARIES OF MARY 4425 W 63RD STREET SUITE 100 CHICAGO,IL 60629	NONE	PUBLIC	OPERATING	5,000
CUMBERLAND COLLEGE 6191 COLLEGE STATION DRIV WILLIAMSBURG,KY 40769	NONE	PUBLIC	OPERATING	5,000
NOVA SE UNIVERSITY 3301 COLLEGE AVENUE FT LAUDERDALE,FL 33314	NONE	PUBLIC	OPERATING	5,000
HILLSDALE COLLEGE 33 E COLLEGE STREET HILLSDALE,MI 49242	NONE	PUBLIC	OPERATING	1,000
UNITED NEGRO COLLEGE FUND 1222 SOUTH ANDREWS AVE SUITE 502A FT LAUDERDALE,FL 33316	NONE	PUBLIC	OPERATING	2,000
NEW ENGLAND SHELTER FOR HOMELESS VE 17 COURT STREET BOSTON,MA 02108	NONE	PUBLIC	OPERATING	3,000
GREATER BOSTON FOOD BANK 99 ATKINSON STREET BOSTON,MA 02118	NONE	PUBLIC	OPERATING	3,000
ALHEIMERS COMMUNITY CARE 800 NORTHPOINT PARKWAY WEST PALM BEACH,FL 33407	NONE	PUBLIC	OPERATING	5,000
SAMARITAN CENTER 3650 41ST VERO BEACH,FL 32967	NONE	PUBLIC	OPERATING	2,500
CHARLES RIVER ARC 59 EAST MILITIA HEIGHTS R NEEDHAM,MA 02492	NONE	PUBLIC	OPERATING	3,000
NAMI CUMBERLAND PLAUTEAU PO BOX 772 CROSSVILLE,TN 38557	NONE	PUBLIC	OPERATING	3,000
INDIAN RIVER ARC 1375 16TH AVE VERO BEACH,FL 32960	NONE	PUBLIC	OPERATING	7,500
BABSON COLLEGE 231 FOREST ST BABSON PARK, MA 02457	NONE	PUBIC	OPERATING	3,000
HABITAT FOR HUMANITY-PALM BEACH CO 6758 N MILITARY TRAIL RIVERA BEACH,FL 33407	NONE	PUBLIC	OPERATING	5,000
CHILDREN'S SURGICAL CENTER KIEN KHLEANGE NATIONAL REHAB CNTR P O BOX 2545 SANGKAT CHROY CHANGVAR KODIAK,AK 99615	NONE	PUBLIC	OPERATING	5,000
Total				83,000

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
KULA HOSPITAL AUXILIARY 100 KEOKEA PLACE 3RD FLO KULA,HI 96790	NONE	PUBLIC	OPERATING	5,000
CREX MEADOWS ENDOWMENT FUND 1012 E CREX AVE GRANTSBURG, WI 54840	NONE	PUBLIC	OPERATING	3,000
ST FRANCIS MANOR 1750 20TH AVENUE VERO BEACH,FL 32960	NONE	PUBLIC	OPERATING	2,500
211PALM BEACHTREASURE COAST PO BOX 3588 PO BOX 3588 LANTANA,FL 33465	NONE	PUBLIC	OPERATING	1,500
CHRISTIAN SERVICE CENTER OF CEN FL 808 W CENTRAL BOULEVARD ORLANDO,FL 32805	NONE	PUBLIC	OPERATING	5,000
JUPITER MEDICAL CENTER FORSHAY CANCER CENTER 1210 S OLD DIXIE HIGHWAY BUILDING EAST 102 JUPITER,FL 33458	NONE	PUBLIC	OPERATING	5,000
CLARA WHITE MISSION 613 WEST ASHLEY STREET JACKSONVILLE,FL 32202	NONE	PUBLIC	OPERATING	3,000
Total				83,000

TY 2014 Accounting Fees Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,700			
OTHER FEES	144			

DLN: 93491161007015

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

TY 2014 Gain/Loss from Sale of Other Assets Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
SCHEDULE ATTACHED	2013-12	PURCHASE	2014-12		7,812	8,542			-730	
SCHEDULE ATTACHED	2013-06	PURCHASE	2014-12		48,892	50,382			-1,490	
SCHEDULE ATTACHED	2013-06	PURCHASE	2014-12		24	24				
SCHEDULE ATTACHED	2013-06	PURCHASE	2014-12		146,496	126,584			19,912	

TY 2014 Investments Corporate Bonds Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
WILMINGTON TRUSTBONDS & NOTES	101,859	108,145

TY 2014 Investments Corporate Stock Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SEE STATEMENT/WILMINGTON-STOCK	794,639	1,070,297
SEE STATEMENT-WILMINGTON-MMK	66,392	66,392
SEE STATEMENT-WILMINGTON-MUTUAL FDS	98,783	96,485
SEE STATEMENT-WILMINGTON-PREFERRED S	59,281	58,209

TY 2014 Legal Fees Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT LEGAL FEES	3,500			

TY 2014 Other Professional Fees Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WILMINGTON TRUST FEES	12,721			
WILMINGTON TAX PREP FEE	275			

TY 2014 Taxes Schedule

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID WILMINGTON	467			
ANNUAL REPORT FILING	144			

TY 2014 IRSESPayment

Name: E LAFAYETTE & ETIENNETTE A QUIRIN

FOUNDATION INC

EIN: 65-0746310

Routing Transit Number: 052173464

Bank Account Number: 80026973112

Type of Account: Checking

Payment Amount in Dollars and 1

Cents:

Requested Payment Date: 2015-12-15

Taxpayer's Daytime Phone (772) 231-6902

Number:

Payer's Name and Address:

WILMINGTON TRUST COMPANY TRUST TAX SERVICES DE3-C070 1100 NORTH MARKET STREET WILMINGTON, DE 19890-0001 Account Number:

Recipient's Tax ID Number: Payer's Federal ID Number:

Payer's State ID Number: State:

Questions?

Corrected

041960-000 65-0746310

51-0055023

FL (302)651-1040

2nd TIN notice

Page 8 of 26 Ref: 124

Recipient's Name and Address:

QUIRIN FOUNDATION-AJ BRACKINS C/O KEMETZ,NUTTALL,ELWELL,GRAHAM,PLLC

2800 OCEAN DRIVE

VERO BEACH, FL 32963

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description o	f property (Box 1	a).	, 4 .c.	, ', '	r	,	÷ .	***		
Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain	Federal Income Tax Withheld	State Tax Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
Short Term Sal 48.0	es Reported on 10 ANADARKO PETI									
032511107	12/08/2014	05/16/2014	. A	3,679 63	4,769 54		0 00	-1,089 91	0 00	0.00
11.0	LOCKHEED MAR	TIN CORPORATIO	N COM							
539830109	01/14/2014	06/28/2013	Α	1,660.19	1,192.03		0 00	468 16	0 00	0 00
24.649	MFS EMERGING	MARKETS DEBT F	UND - I							
55273E640	11/12/2014	12/10/2013	Α	368 50	357.90		0 00	10.60	0 00	0 00
74 2142	ZOETIS INC									
98978V103	04/11/2014	07/05/2013	Α	2,103 43	2,222 86			-119 43	0 00	0 00
Total Short Ter	m Sales Reported	on 1099-B		7,811.75	8,542.33		0.00	-730 58	0.00	0.00
Report on Fo	rm 8949, Part I, wi	th Box A checked								
Long Term Sale 28 0	es Reported on 109 CALIFORNIA RES									
13057Q107	12/08/2014	Various	Ď	166 53	212.99		0 00	46.46	0 00	0 00
7 0	DANAHER CORP	сом								
235851102	10/10/2014	06/28/2013	Ď	502 18	444 94		0.00	57 24	o òò	0 00

Payer's Name and Address:
WILMINGTON TRUST COMPANY
TRUST TAX SERVICES DE3-C070
1100 NORTH MARKET STREET
WILMINGTON, DE 19890-0001

Account Number: 041960-000
Recipient's Tax ID Number: 65-0746310
Payer's Federal ID Number: 51-0055023
Payer's State ID Number:

State:

Questions? (302)651-1040

| Corrected | 2nd TIN notice

Page 9 of 26
Recipient's Name and Address: Ref: 124

QUIRIN FOUNDATION-AJ BRACKINS C/O KEMETZ,NUTTALL,ELWELL,GRAHAM,PLLC

2800 OCEAN DRIVE VERO BEACH, FL 32963

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description o	of property (Box 1	a) '	•	, A	· - ' . '	,	•	3		
Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
48 0	(Box 1c) EMERSON ELECT	(Box 1b) TRIC CO		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
291011104	09/26/2014	12/19/2012	D .	3,014 31	2,563 35		0 00	450 96	0 00	0 00 🐒
84 0	GENERAL ELECT	RIC COMPANY								0 00.
369604103	10/10/2014	Various	D	2,040 27	2,032 46		0.00	781	0.00	
2659 309	MFS EMERGING	MARKETS DEBT F	FUND - I							
55273E640	11/12/2014	Various	. D	39,756 67	42,501 99		0.00	-2,745.32	0 00	0 00
10 0	SCHLUMBERGER	RLTD								
806857108	10/31/2014	12/19/2012	D	977 76	717 33		0 00	260 43	0 00	0 00
9 0	SCHLUMBERGER	RLTD								
806857108	12/08/2014	12/19/2012	ĹD	758 24	645 59		0 00	112 65	0 00	0 00
5 0	THE TRAVELERS	COMPANIES INC								
89417E109	08/22/2014	12/19/2012	D .	469 38	37266		0 00	96 72	0.00	0 00
6 0	UNION PACIFIC C	CORP COM								
907818108	10/10/2014	12/19/2012	D	617 52	382 75		0 00	234 77	0 00	0 00
20.7858	ZOETIS INC									
98978V103	04/11/2014	11/13/2012	D	589 12	508 20	•	0 00	80 92	0.00	0 00
Total Long Ter	m Sales Reported o	n 1099-B		48,891.98	50,382.26		0.00	-1,490.28	0.00	0.00

Report on Form 8949, Part II, with Box D checked

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return

Account Number: Recipient's Tax ID Number: 041960-000 65-0746310 51-0055023 Recipient's Name and Address:

Page 10 of 26 Ref: 124

QUIRIN FOUNDATION-AJ BRACKINS

C/O KEMETZ, NUTTALL, ELWELL, GRAHAM, PLLC

2800 OCEAN DRIVE VERO BEACH, FL 32963

Payer's Name and Address: WILMINGTON TRUST COMPANY TRUST TAX SERVICES DE3-C070 1100 NORTH MARKET STREET

WILMINGTON, DE 19890-0001

Payer's Federal ID Number: Payer's State ID Number: State: Questions?

FL (302)651-1040

Corrected 2nd TIN notice

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated

, Description o	Description of property (Box 1a)									
CUSIP Number	Date Sold	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code , if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
Short Term Sal 0.5051	les Reported on 10 VERIZON COMM	99-B UNICATIONS COM	1							0.00
92343V104	03/04/2014	02/24/2014	В	24 32	23.60		0.00	0 72	0 00	0.00
Total Short Ter	m Sales Reported	on 1099-B		24.32	23.60		0 00	0.72	0.00	0.00
Report on Fo	rm 8949, Part I, wi	th Box B checked								
Long Term Sale	es Reported on 109 CARDINAL HEAL									
1 <u>4</u> 149Y108	01/14/2014	Various	E	1,225 50	735 76		0.00	489,75	0.00	0.00
320	CARDINAL HEAL	TH INC								
14149Y108	08/22/2014	Variouș .	E .	2,341 02	1,259 80	*	0 00	1,081 22	0.00	0.00
63 0	CONOCOPHILLIP	S								
20825C104	05/16/2014	Various _.	. E	4,894 27	3,665 43		0 00	1,228 84	0 00	. 0 00
1509 573	CRM SMALL-MID	CAP VALUE FUNI	D-INST							
92934R116	01/08/2014	03/26/2008	. E	26,870 40	19,911 27		0.00	6,959 13	0 00	0 00
1250	DEVON ENERGY	CORP								
25179M103	12/22/2014	06/11/2010	. E	7,563 27	8,470.08		0 00	-906 81	0 00	. 0 00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return.

Account Number:

041960-000 65-0746310 51-0055023

Ref: 124 Recipient's Name and Address: QUIRIN FOUNDATION-AJ BRACKINS C/O KEMETZ, NUTTALL, ELWELL, GRAHAM, PLLC

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2800 OCEAN DRIVE VERO BEACH, FL 32963

Payer's Name and Address: WILMINGTON TRUST COMPANY TRUST TAX SERVICES DE3-C070 1100 NORTH MARKET STREET WILMINGTON, DE 19890-0001

Recipient's Tax ID Number: Paver's Federal ID Number: Payer's State ID Number: State: Questions?

FL

(302)651-1040

Corrected 2nd TIN notice

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description o	f property (Box 1a) -		1	1						
CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	- Federal Income Tax Withheld	State Tax Withheld	
270.0	(Box 1c) FASTENAL CO	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)	
311900104	01/16/2014	04/19/2010	Ę	12,411,00	7,336 01		0 00	5,074 99	0 00	0 00	72
179.0	INTEL CORP COM									0 00 0 00	4
458140100	08/14/2014	Various	E	6,065.23	3,606 10	-	0 00	2,459.13	0 00	0 00	Į.
2643 754	MFS EMERGING N	MARKETS DEBT F	UND - I								
55273E640	11/12/2014	04/18/2012	E	39,524.12	40,000 00		0 00	-475 88	0 00	0.00	
1000 0	MORGAN STANLE	EY CAP TR III PFD	6.25%								
617460209	01/16/2014	10/17/2006	E	24,262 07	24,670 00		0.00	-407 93	0 00	0 00	
8 0	SCHLUMBERGER	LTD									
806857108	10/31/2014	04/13/2011	E	782 20	68,7 5,8		0 00	94 62	0.00	. 0 00	
57 0	SCHLUMBERGER	LTD									
806857108	12/08/2014	Variou s	_ E	4,802.19	3,599 37		. 0 00	1,202 82	0.00	0.00	
94 0	TARGET CORP CO	M									
87612E106	04/11/2014	Various	.E .	5,520.87	3,693.13		0 00	1,827.74	0 00	0 00	
27.0	THE TRAVELERS (COMPANIES INC									
89417E109	08/22/2014	Various	E	2,534.64	1,604 07	-	0 00	930 58	0 00	0 00	
33 0	UNITED PARCEL S	SERVICE CL B									
911312106	09/16/2014	Various	Ε .	3,234.82	2,244.90		_ 0 00	989 92	0 00	0 .00.	

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return

Account Number: Recipient's Tax ID Number:

041960-000 65-0746310 51-0055023

FL

Recipient's Name and Address:

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QUIRIN FOUNDATION-AJ BRACKINS C/O KEMETZ.NUTTALL.ELWELL.GRAHAM.PLLC

2800 OCEAN DRIVE

VERO BEACH, FL 32963

Payer's Name and Address: WILMINGTON TRUST COMPANY TRUST TAX SERVICES DE3-C070 1100 NORTH MARKET STREET WILMINGTON, DE 19890-0001

Paver's Federal ID Number: Payer's State ID Number: State: Questions?

(302)651-1040 Corrected 2nd TIN notice

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated

Description of proper	ty <i>(Box 1a)</i>	- ", 1			-				-	٠,
	ate Sold Da Disposed Acc	te quired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code If any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
•	lox 1c) (Bo ED PARCEL SER)	ox 1b) VICE CL B		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
	9/17/2014 03 FONE GROUP S		Е	2,080 63	1,350 35		0 00	730 28	0 00	0 00
	3/04/2014 04 FONE GROUP S		E .	26 30	33 62		0.00	-7 32	0.00	. 0,00
92857W308 10	0/02/201 <u>4</u> Va	rıoüs	. <u></u>	2,357 03	3,716 70		o ōo	-1,359 67	0 00	0 00
Total Long Term Sales Reported on 1099-B				146,495.56	126,584 17		0 00	19,911 41	0 00	0.00

Report on Form 8949, Part II, with Box E checked