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Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury

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

For calendar year 2014 or tax year beginning 04/01/14, and ending 03/31/15 Employer identification number DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite 847-420-4560 8916 CHAMPION HILLS DR. City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here 28411 NC WILMINGTON Initial return of a former public charity 1 Foreign organizations, check here G Check all that apply Initial return Amended return Final return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminated under section 507(b)(1)(A), check here Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust Cash X Accrual J Accounting method If the foundation is in a 60-month termination Fair market value of all assets at under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col (c), 530,214 line 16) ◆ (Part I, column (d) must be on cash basis.) (d) Disbursements Analysis of Revenue and Expenses (The total of Part I (a) Revenue and (b) Net investment (c) Adjusted net for chantable expenses per amounts in columns (b), (c), and (d) may not necessarily equal income income purposes books the amounts in column (a) (see instructions)) cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 I & JHU GANTAUS Revenue Check ◆ X if the foundation is **not** required to attach Sch B 2 644 644 3 Interest on savings and temporary cash investments Dividends and interest from securities 4 Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold Gross profit or (loss) (attach schedule) С 11 Other income (attach schedule) 644 0 644 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses Other employee salaries and wages 14 15 Pension plans, employee benefits Legal fees (attach schedule) STMT 1 2,275 Accounting fees (attach schedule) Other professional fees (attach schedule) Ō Interest 17 Taxes (attach schedule) (see instructions) 7 Depreciation (attach schedule) and depletion 19 20 Occupancy nad 21 Travel, conferences, and meetings 22 Printing and publications 173 STMT 2 23 Other expenses (att. sch.) Total operating and administrative expenses. 24 2,448 0 0 Add lines 13 through 23 66,100 66,100 25 Contributions, gifts, grants paid 68,548 0 0 66,100 Total expenses and disbursements. Add lines 24 and 25 26 27 Subtract line 26 from line 12 -67,904Excess of revenue over expenses and disbursements 644 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Fo	rm 990	-PF (2014) DOROTHY & KENNETH HEISLER FOUNDAT:	ION 36-36772	75	Page 2
		Attached schedules and amounts in the description column	Beginning of year	End of	year
i	Part I	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
٦	1	Cash – non-interest-bearing	596,959	529,528	529,528
Ì	2	Savings and temporary cash investments			
-	3	Accounts receivable ◆			
		Less, allowance for doubtful accounts ◆]		
	4	Pledges receivable ◆			
	-	Less allowance for doubtful accounts ◆	İ		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
ļ	•	disqualified persons (attach schedule) (see			
		• • • • • • • • • • • • • • • • • • • •			
	_	instructions)			
1	7	Other notes and loans receivable (att schedule) ◆ Less allowance for doubtful accounts ◆ 0			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
۷	10a	Investments – U S and state government obligations (attach schedule)			
	ь	Investments – corporate stock (attach schedule)			
į	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis ◆		}	
		Less accumulated depreciation (attach sch.) ◆			
	12	Investments – mortgage loans			
1	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ◆			
1		Less accumulated depreciation (attach sch.) ◆			
	15	Other assets (describe ◆ SEE STATEMENT 3)	1,159	686	686
	16	Total assets (to be completed by all filers – see the			
	L	ınstructions Also, see page 1, ıtem I)	598,118	530,214	530,214
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable (attach schedule)			
L	22	Other liabilities (describe ♦)			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here		-	
Ś		and complete lines 24 through 26 and lines 30 and 31.			
ž	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted		_	
Ö	26	Permanently restricted			
밀		Foundations that do not follow SFAS 117, check here			
ĭ		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	598,118	530,214	
ĭ	30	Total net assets or fund balances (see instructions)	598,118	530,214	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	598,118	530,214	
_	Part				
		net assets or fund balances at beginning of year – Part II, column (a), line 30 (must	agree with		
		of-year figure reported on prior year's return)	-	1	598,118
:		r amount from Part I, line 27a		2	-67,904
		ir increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	530,214
		eases not included in line 2 (itemize) ◆		5	· · · · · · · · · · · · · · · · · · ·
		I net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b)	, line 30	6	530,214

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income			
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acq (mo , day,	
1a N/A					
					
<u>c</u>					
<u>d</u>		· · · · · · · · · · · · · · · · · · ·			
<u>e</u>	(D Description allowed	(a) C	ost or other basis		(h) Gain or (loss)
(e) Gross sales pnce	(f) Deprecation allowed (or allowable)		expense of sale		(e) plus (f) minus (g)
<u>a</u>					
b c					
d					
е					
Complete only for assets showing	gain in column (h) and owned by the four	idation on 12/31.	/69	(I) G	Gains (Col. (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		Excess of col (i) er col (j), if any		x), but not less than -0-) or Losses (from col. (h))
b					
<u>c</u>					
d					
		20ml (from 7	7	1	
2 Capital gain net income or (net ca	ipital loss) If gain, also enter in finite life (loss), enter -0- in finite life (loss), enter -0- in finite life (loss).		} •	2	
	s) as defined in sections 1222(5) and (6)	_	_		
= :	column (c) (see instructions) If (loss), ent	er -0- ın	\$6		
Part V Qualification U	nder Section 4940(e) for Reduc	od Tay on N	ot Investment Incom	3	
If "Yes," the foundation does not quali	on 4942 tax on the distributable amount of under section 4940(e). Do not complete	this part	·		Yes X No
	each column for each year, see the instruc	tions before mak	king any entries		
(a) Base penod years Calendar year (or tax year beginning in			(c) t value of nonchantable-use assets		(d) Distribution ratio (col (b) divided by col (c))
2013		,150	603,		0.048305
2012		,639	640,		0.072809
2011		,000	654,		0.058031
2010		,400 ,209	607,: 522,		0.051720 0.034882
2009		,200			0.034002
2 Total of line 1, column (d)		2 h 5 h 4h	_	2	0.265747
J .	5-year base period – divide the total on line as been in existence if less than 5 years	e 2 by 5, or by til	e	3	0.053149
4 Enter the net value of noncharitat	ole-use assets for 2014 from Part X, line 5			4	555,471
5 Multiply line 4 by line 3				5	29,523
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	6
7 Add lines 5 and 6				7	29,529
8 Enter qualifying distributions from				8	66,100
If line 8 is equal to or greater than Part VI instructions	n line 7, check the box in Part VI, line 1b, a	nd complete tha	t part using a 1% tax rate	See the	

	990-PF (2014) DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)			<u>P</u>	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions) Exempt operating foundations described in section 4940(d)(2), check here ◆ □ and enter "N/A" on line 1	Γ.			
ıa	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				6
~	here • X and enter 1% of Part I, line 27b				
С	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				6 0 6
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-	<u> </u>			6
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a	ļ			
b	Exempt foreign organizations – tax withheld at source	}			
С	Tax paid with application for extension of time to file (Form 8868)	İ			
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here 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	ļ			<u>6</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ◆ Refunded ◆ 11				
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		1		
	Instructions for the definition)?		1b		X
	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				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ◆ \$ (2) On foundation managers ◆ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers • \$		_		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u> </u>
	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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	TA\ W	4b		x
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		
	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		6	x	
_	conflict with the state law remain in the governing instrument?		7	$\frac{\mathbf{x}}{\mathbf{x}}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ◆ IL				
_	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				1
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	N/A	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	. ,			
3	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
. •	names and addresses		10		x
		1	om 99	90-PI	(2014)

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_Pa	rt 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			ł		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement (see instructions)			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1		13	_X_	<u> </u>
	Website address ♦ NONE		045		4 - 4	_
14		ione no 🌩	847-4	20-	456	U
	8916 CHAMPION HILLS DR.	715	20411	1		
_	Located at ♦ WILMINGTON NC	ZIP+4 ◆	28411	L		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		ا ــ ا			◆ □
	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			مدا	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	ł	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If			Ï		1
- Dr	"Yes," enter the name of the foreign country ◆ Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L		L
	Int 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.			Τ	Yes	No
1a	·			├	163	NO
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		[1
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	}	}	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	1		
	(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)?	Yes	X 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			ĺ	ĺ	
	termination of government service, if terminating within 90 days)	Yes	X No		1	ļ
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	_		1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		◆			
С	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_		X
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))			l	ł	l
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	_	(च ₽)	ļ		
	6e, Part XIII) for tax year(s) beginning before 2014?	Yes	X No			
	If "Yes," list the years ◆ 20 , 20 , 20 , 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		N/A	26		
_	all years listed, answer "No" and attach statement – see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		N/A	2b		
С						
3a	♦ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
Ja	at any time during the year?	Yes	X No			-
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			1	1	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			1		
	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				Ì	
	foundation had excess business holdings in 2014)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	·		4b		X
				Form 9	90-PI	F (2014)

		NNETH HEISLER FOUNI					Pa	ige 6
			4720 Way be Re	equired (contin	iueu)		—-r	
	During the year did the foundation pay or in		045(-\\0		es 🗓 No		ł	
	1) Carry on propaganda, or otherwise atte			י נו	es X No			
(2) Influence the outcome of any specific p		o carry on,	_ ,				
	directly or indirectly, any voter registrat				es X No			
	3) Provide a grant to an individual for trav			Y	es 🗶 No			
(Provide a grant to an organization other		described in	┌ .	. 🖼 .			
	section 4945(d)(4)(A)? (see instruction			Y	'es 🗓 No	İ	- 1	
(Provide for any purpose other than religious	gious, charitable, scientific, literary, or	educational		-			
	purposes, or for the prevention of crue	Ity to children or animals?		Y	es 🔀 No	·	ŀ	
b	f any answer is "Yes" to 5a(1)–(5), did any	of the transactions fail to qualify unde	r the exceptions desc	cribed in	_			
	Regulations section 53 4945 or in a current	t notice regarding disaster assistance	(see instructions)?		N/A	5b		
	Organizations relying on a current notice re	egarding disaster assistance check he	re		◆ 🔲		j	
С	f the answer is "Yes" to question 5a(4), do	es the foundation claim exemption froi	m the tax			ľ	l	
	pecause it maintained expenditure respons	sibility for the grant?		N/A 🗌 Y	es No		[
	f "Yes," attach the statement required by F	Regulations section 53 4945–5(d)		_			ľ	
	Old the foundation, during the year, receive	• •	y premiums					
	on a personal benefit contract?				es 🗓 No		1	
	Did the foundation, during the year, pay pre	emiums, directly or indirectly, on a pers	sonal benefit contract	L		6ь		X
	f "Yes" to 6b, file Form 8870							
	At any time during the tax year, was the fol	undation a party to a prohibited tax she	elter transaction?		es 🗓 No			
	f "Yes." did the foundation receive any pro				N/A	7b		
		icers, Directors, Trustees, Fo						-
	and Contractors		···					
1 Li	st all officers, directors, trustees, found	dation managers and their compens	sation (see instructi	ons).				
	(a) Name and ad	Idress	(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		ense acc	
KEN	NETH M. HEISLER	WILMINGTON	TRUSTEE/MNGR		compensation			
891	6 CHAMPION HILLS DR.	NC 28411	0.00	o	0			0
			-		-			
								
2	Compensation of five highest-paid emp	oloyees (other than those included	on line 1 – see instr	uctions). If none,	enter	<u> </u>		
				I	(d) Contributions to	T		
	(a) Name and address of each employee pa	id more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		ense acc r allowan	
NON	E					<u> </u>		
				1				
				<u> </u>				
				1				
		·	- 	 		†		
				1		1		
				 		╁		
						-		
Total	number of other employees paid over \$50,	000			l	└	T -	0
					F	om 99	0-PF	

Part VIII Information About Officers, Directors, True and Contractors (continued) 3 Five highest-paid independent contractors for professional serv	stees, Foundation Managers, Highly Paid	Employees,
(a) Name and address of each person paid more than \$50,00	00 (b) Type of service	(c) Compensation
NONE		
		1
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 stations and other beneficianes served, conferences convened, research papers produced, (Expenses
1 N/A		
,		
2		
3		
4		
Part IX-B Summary of Program-Related Investmen	its (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		>

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Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n four	idations,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	1	
а	Average monthly fair market value of securities	1a	560 044
þ	Average of monthly cash balances	1b	563,244
С	Fair market value of all other assets (see instructions)	1c	686
d	Total (add lines 1a, b, and c)	1d	563,930
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	4	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	563,930
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see	1	_
	instructions)	4	8,459
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	<u>555,471</u>
6	Minimum investment return. Enter 5% of line 5	6	27,774
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	ound	ations
	and certain foreign organizations check here ◆ ☐ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	27,774
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	6
3	Distributable amount before adjustments Subtract line 2c from line 1	3	27,768
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	27,768
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	27,768
Pi	art XII Qualifying Distributions (see instructions)	-	
	Amounts and (makedure administrative everyone) to accomplish charitable ato, purposes	1	
1_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	10	66,100
a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	88,100
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	١.	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	66,100
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	6
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,094
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n	
	and the second of the second o		

<u>Pa</u>	rt XIII Undistributed Income	(see instructions)				
1	Distributable amount for 2014 from Part X	u,	(a) Corpus	(b) Years pnor to 2013	(c) 2013	(d) 2014
	line 7	<u> </u>				27,768
2	Undistributed income, if any, as of the end	d of 2014				
	Enter amount for 2013 only	<u> </u> _				
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to 2	014	•	İ		
а	From 2009					
b	From 2010	243				
С	From 2011	5,409	İ			
d	From 2012	14,663				
	From 2013					
f	Total of lines 3a through e	ļ_	20,315			
4	Qualifying distributions for 2014 from Part	XII,				
	line 4 ◆ \$66,100					
а	Applied to 2013, but not more than line 2a	·				
þ	Applied to undistributed income of prior ye	ears				
	(Election required – see instructions)	<u> </u> _				
С	Treated as distributions out of corpus (Ele	ection]		
	required - see instructions)	<u>_</u>				
d	Applied to 2014 distributable amount	-				27,768
е	Remaining amount distributed out of corp	us	38,332			
5	Excess distributions carryover applied to 2	2014				
	(If an amount appears in column (d), the s	same		1		
	amount must be shown in column (a))	1	1			
6	Enter the net total of each column as					
	indicated below:		ľ			
а	Corpus Add lines 3f, 4c, and 4e Subtract	t line 5	58,647			
b	Prior years' undistributed income Subtract	ot	1	1		
	line 4b from line 2b	ļ				
С	Enter the amount of prior years' undistribu	uted				
	income for which a notice of deficiency ha	as				
	been issued, or on which the section 4942	2(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable		1			
	amount – see instructions				-	
е	Undistributed income for 2013 Subtract li	ine				
	4a from line 2a Taxable amount - see					
	instructions	<u></u>				
f	Undistributed income for 2014 Subtract le	ines				
	4d and 5 from line 1 This amount must b	е				
	distributed in 2015	<u> </u> _				0
7	Amounts treated as distributions out of co	orpus	ļ			
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)	-				
8	Excess distributions carryover from 2009	not				
	applied on line 5 or line 7 (see instruction	s)				
9	Excess distributions carryover to 2019	5.				
	Subtract lines 7 and 8 from line 6a	L	58,647			ļ
10	Analysis of line 9	,				
а	Excess from 2010	243				
b	Excess from 2011	5,409				
С	Excess from 2012	14,663				
d	Excess from 2013					
e	Excess from 2014	38,332				<u>l</u>

	ERFOUN 990-PF (2014) DOROTHY & KE	MMBRU UETO	.ED EVINIUVE.	ION 36-36772	75	D 41
_	990-PF (2014) DOROTHY & KE rt XIV Private Operating Fou					Page 1
1a	If the foundation has received a ruling or d					
	foundation, and the ruling is effective for 2				<u> </u>	···
þ	Check box to indicate whether the foundat	ion is a private operat	ing foundation describe	d in section 49	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	ļ
	investment return from Part X for					
	each year listed					
b	85% of line 2a			 -		
С	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					
е	Qualifying distributions made directly			<u> </u>		
-	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					
С	"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			ļ		
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	art XV Supplementary Inform	nation (Complete	this part only if	he foundation ha	d \$5,000 or more	in assets at
	any time during the ye	<u>ear – see instruc</u>	tions.)			<u> </u>
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who I				the foundation	
	before the close of any tax year (but only			see section 507(d)(2))		
	KENNETH M. HEISLER,			- 4		
þ	List any managers of the foundation who				ortion of the	
	ownership of a partnership or other entity) N/A	of which the foundation	on has a 10% or greater	rinterest		
2	Information Regarding Contribution, G	rant Gift Loan Sch	olarship etc. Progra	me:		-
2	Check here ◆ X if the foundation only				es not accent	
	unsolicited requests for funds. If the found					
	other conditions, complete items 2a, b, c,		, (.,	<u>-</u>	
а	The name, address, and telephone number		f the person to whom a	oplications should be ac	ddressed	
	N/A					
b	The form in which applications should be : N/A	submitted and informa	tion and materials they	should include		
С	Any submission deadlines N/A				-	
	Any restrictions or limitations on awards, s	such as by geographic	al areas, charitable field	ds, kinds of institutions	or other	
-	factors	- , G g - - - - - - - - - -				
	N/A					

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year USO OF NORTH CAROLINA P.O. BOX 91536 PUBLIC ORG. SUPPORTING MILITARY PERSONNEL RALEIGH NC 27675 35,000 FIRST TEE OF BRUNSWICK COUNTY PUBLIC ORG. 445 TARKIN COURT SHALLOTTE NC 28470 EDUCATIONAL PROGRAMS TO YOUNG PEOPLE 2,500 PAWS PLACE DOG RESCUE PUBLIC ORG. 3701 E. BOILING SPRING R WINNABOW NC RESCUE & ADOPTION OF DOGS 1,000 STRASBURG-HEISLER LIBRARY PUBLIC ORG. 143 PRECISION AVE. STRASBURG PA 17579 EDUCATIONAL RESOURSES & LIBRARY SERV 16,600 NATIONAL ALLIANCE ON MENTAL ILLNES 1536 W. CHICAGO AVE. #1 PUBLIC ORG. CHICAGO IL 60642 TO PROVIDE AID TO THE MENTALLY ILL 5,000 STRASBURG FIRE DEPT 203 FRANKLIN STREET STARSBURG PA 17579 FIRE PROTECTION 1,000 STRASBURG JAYCEE PARK P.O. BOX 45 PROVIDE RECREATIONAL FACILITIES STRASBURG PA 17579 1,000 SOUTHPORT-OAK ISLAND FOOD PANTRY 249 W. BAILING SPRING RD PROVIDE FOOD FOR THE POOR & HUNGRY SOUTHPORT NC 28461 2,000 STRASBURG COMMUNITY PARK FOUNDATION P.O. BOX 222 STRASBURG PA 17579 PROVIDE RECREATIONAL FACILITIES 1,000 BOYS & GIRL CLUB OF LANCASTER 116 S. WATER ST. LANCASTER PA 17603 SOCIAL DEVELOPMENT OF CHILDREN 1,000 Total **♦** 3a 66,100 **b** Approved for future payment N/A **♦** 3b Total

Part XVI-			business income	Exclude	d by section 512, 513, or 514	· · · · · · · · · · · · · · · · · · ·
Enter gross a	mounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
	service revenue	 			<u> </u>	(occ instructions)
		_			<u> </u>	
						
, -		-				
"	and contracts from accomment agencies	-				
_	and contracts from government agencies thip dues and assessments					
	•	 		14	644	
	in savings and temporary cash investments s and interest from securities				044	
	I income or (loss) from real estate					
	-financed property					
	lebt-financed property			\neg		
	l income or (loss) from personal property	-		- 		
	estment income					····
	loss) from sales of assets other than inventory					
•	ne or (loss) from special events					
	ofit or (loss) from sales of inventory					
-	venue. a					
e						
12 Subtotal	Add columns (b), (d), and (e)			0	644	
	dd line 12, columns (b), (d), and (e)				13	
13 Total. Ad	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations)					
13 Total. Ad	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the				<u></u> S	
13 Total. Ad (See workshee Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshee Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
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13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshee Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshee Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
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13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
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13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshe Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644
13 Total. Ad (See workshee Part XVI Line No.	dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations) -B Relationship of Activities to the Explain below how each activity for which income	e is reported in colur	nn (e) of Part XVI-	A contribute	s ed importantly to the	644

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled	ige and belief, it is true
correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	
	May the IRS discuss to
	45.45

Sign Here

Print/Type preparer's name

X Yes (see instructions)? TRUSTEE/MANAGER

PTIN

Firm's EIN @

m. Haisler ure of officer or truste

Check If self-employed P00839669

Paid Preparer **Use Only**

ROBERT CLEMENT, CPA, MST

CLEMENT & ASSOCIATES, CPA'S Firm's name @ 1460 RENAISSANCE DR STE 312 Firm's address @ 60068-1464 PARK RIDGE, IL

847-827-8630 Phone no Form 990-PF (2014)

36-4203360

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

♦ Attach to Form 990, Form 990-EZ, or Form 990-PF.

♦ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number

36-3677275

Organization type (check one)				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See			
General Rule				
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a butions.			
Special Rules				
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one				
contributor, during the y	rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ourposes, 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.				
990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, : 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 ertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)			

Name of organization . DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number 36-3677275

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. NONE Person **Payroll** 0 \$ Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

PAGE 1 OF 1

Page 3

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number

36-3677275

Part II	Noncash Property (see instructions) Use duplic	ate copies of Part II if additional spa	ce is needed. (N/A
(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
		\$	

Employer identification number Name of organization DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

1-2

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 FYE: 3/31/2015

	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	orm 990-PF, P	art I, Line 16k	- Accoul	<u>ıting Fees</u>	
Description		Total	Net Investment	: nent	Adjusted Net	Charitable Purpose
INDIRECT ACCOUNTING FEES		2,275	w.		<i>«</i>	\$
TOTAL	ς. 	2,275	v.	0	S	\$
	Statement 2 -	- Form 990-PF, Part I, Line 23 - Other Expenses	Part I, Line 23	3 - Other	xpenses	
Description		Total	Net Investment	t nent	Adjusted Net	Charitable Purpose
	\ \ \		<u>ه</u>		\$	\$
EXPENSES BANK CHARGES	-	96				
POSTAGE TAXES		52 25				
TOTAL		173	\$	0	\$	\$

'HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION

36-3677275 FYE: 3/31/2015

Federal Statements

Statement 3 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	_	Fair Market Value
INTEREST RECEIVABLE	\$ 1,159	\$ 686	\$_	686
TOTAL	\$ 1,159	\$ 686	\$	686

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

N	lame of Manager	 Amount
KENNETH M. HEISLER,	TRUSTEE/MANAGER	\$ 0
TOTAL		\$ 0

THEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION
36-3677275 Federal Statements

FYE: 3/31/2015

Taxable Interest on investments

Description	 Amount	Unrelated Business Code	Exclusion Code	US Obs (\$ or %)
INTEREST INCOME	\$ 644		1.4	
TOTAL	\$ 644			