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

OMB No 1545-0052

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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.

For cale	endar year 2014, or tax year beginning	<u>6/01, 2014, </u>	and ending 5	<u>/3:</u>		
m	IDD AND ENTLY GUIDDIOOD EANTIS	.,		Α	Employer identification num	nber
	NED AND EMILY SHERWOOD FAMILY DATION	ľ		В	36-4273196 Telephone number (see insti	uctions)
	INDIANA SQUARE #1200		j		(317) 269-345	
	ANAPOLIS, IN 46204				•	
INDI				С	If exemption application is	pending, check here 🕨 🔲
G Chec	ck all that apply Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	k hore
-	Final return	Amended return			1 Toreign organizations, chec	K lief C
	Address change	Name change			2 Foreign organizations meet	
H Che	ck type of organization. X Section 501	(c)(3) exempt private for	oundation		here and attach computation	n
· · · · ·	Section 4947(a)(1) nonexempt charitable tr		rivate foundation	E	If private foundation status	was terminated
1 Fair r		ounting method X Ca	· · · · · · · · · · · · · · · · · · ·		under section 507(b)(1)(A)	
		Other (specify)	Ш	F	If the foundation is in a 60-	month termination
► \$		column (d) must be on	i cash basis)	•	under section 507(b)(1)(B)	
Part I	* Analysis of Revenue and		(b) Net investmen	\	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	(a) Revenue and expenses per books	income	п	income	for charitable
	columns (b), (c), and (d) may not neces-					purposes
	sarily equal the amounts in column (a) (see instructions))					(cash basis only)
· 5 T	1 Contributions, gifts, grants, etc, received (attach schedule)	1,243,476.	3		. , "	,
2102	2 Ck ► If the founds is not required to attach Sch B				\$ x,x **	,
	and realization for required to distant out to					
9	3 Interest on savings and temporary cash investments	10.		0.	10.	DECEIVED
- 4	4 Dividends and interest from securities	210,667.	210,66	57 <u>.</u>	210,667	KEULIT
2	5 a Gross rents b Net rental income		 ,			2035
	or (loss)	, ` ; ; ;				\$1 NOV 1 3 (UI)
⊃ <u>P</u>	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 1 602 004	1,693,894.	· · · · · · · · · · · · · · · · · · ·		4	4
및 F	assets on line 6a	* * * *	1 600 00			OGDEN, U
E	7 Capital gain net income (from Part IV, line 2)		1,693,89		** **	UGDE:
SCANNED NOV	Net short-term capital gain Income modifications	, , , , , , , , , , , , , , , , , , ,	*	" ()	1,466,824.	3 -1
SE	10 a Gross sales less	124		· ×	No.	2"
g)	returns and allowances	, ** , ** , * , *	nd d	3	j i	
	b Less Cost of	*, : : ::::::::::::::::::::::::::::::::		6. 4). \$		·
	goods sold C Gross profit or (loss) (attach schedule).		*		*	,
	11 Other income (attach schedule)		*			
	12 Total. Add lines 1 through 11	3,148,047.	1,904,57	71.	1,677,501.	
-	13 Compensation of officers, directors, trustees, etc	0.				
	14 Other employee salaries and wages					
	15 Pension plans, employee benefits		·			
A	16a Legal fees (attach schedule)					
D M	b Accounting fees (attach sch) SEE ST 1	6,000.	6,00	00.		
i N	c Other prof fees (attach sch)					
O I	17 Interest	12,655.	12,65	55.		
P S	18 Taxes (attach schedule)(see instrs)					
RRAA	19 Depreciation (attach					*
TT	sch) and depletion					12 . 3 . 4
N V G E	20 Occupancy 21 Travel, conferences, and meetings	·				
_	22 Printing and publications.				-	
A E N X D P	23 Other expenses (attach schedule)					
E	SEE STATEMENT 2	495.	49	95.		
N S	24 Total operating and administrative					
E S	expenses Add lines 13 through 23	19,150.	19,15	<u>50.</u>		
	25 Contributions, gifts, grants paid PART XV	558,866.	* ' * '		1	558,866.
	26 Total expenses and disbursements.	E70 01C	10.15	- ^	_	FE0 000
	Add lines 24 and 25	578,016.	19,15	oU.	0.	558,866.
	27 Subtract line 26 from line 12. 2 Excess of revenue over expenses				2 %	* * *
	and disbursements	2,570,031.			* * *	
	b Net investment income (if negative, enter -0-)	`	1,885,42	21.		
	C Adjusted net income (if negative, enter -0-)				1,677,501.	

Part II Balance Sheets		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	[E	ind o	of year	
Part	<u> </u>	Balance Sneets	(See instructions)	(a) Book Value	(b) Book Value	9	(c) Fair Market Value	
- 1	1	Cash - non-interest	-bearing		-			
			ary cash investments					
		Accounts receivable	▶	**,>	1100 1000	33	* * * * * * * * * * * * * * * * * * *	
	•	Less allowance for	doubtful accounts				transferie Allande, Schwerkschausschaufber Krobe entschungschaften dem er sober er	
	4	Pledges receivable			And in York Some have a reserve		(y ,	
	7	Less allowance for	doubtful accounts >		Tanon In The American in the second	* Z.	men night of degree of the many of the same	
	5	Grants receivable				-		
	_		nore directors trustees and other					
	6	disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)					
	7	Other notes and loans rec			10 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	170		
Α	•	Less allowance for	`				<u> </u>	
ASSET	8	Inventories for sale				-		
E	_	Prepaid expenses a						
Ī	9	· ·	•					
S		obligations (attach s		5 055 150	0.555.1		7 660 050	
			stock (attach schedule) STATEMENT 3	5,875,152.	8,555,1	92.	7,669,058.	
		: Investments — corporate		3.8	2 00 2 2		, , , , , , , , , , , , , , , , , , ,	
	11	Investments – land, equipment basis.	buildings, and					
		Less accumulated depred (attach schedule)	elation •		,			
	12	Investments - mort	gage loans.					
	13	Investments - other	r (attach schedule)	331,377.				
	14	Land, buildings, and	l equipment basis ►		and a sex sextension and the last	* * .		
		Less accumulated depred (attach schedule)	cration		<u> </u>			
	15	Other assets (descri	ibe ►)				
	16	Total assets (to be see the instructions	completed by all filers — Also, see page 1, item I).	6,206,529.	8,555,1	92.	7,669,058.	
Ļ	17	Accounts payable a	nd accrued expenses					
1 A	18	Grants payable						
B	19	Deferred revenue						
ŀ	20	Loans from officers, direct	ctors, trustees, & other disqualified persons					
ī	21	Mortgages and other note	s payable (attach schedule)					
Ţ	22	Other liabilities (des	scribe ► SEE STATEMENT 4) 1,928,416.	1,707,0	48.		
É					1 707 0	40		
<u> </u>	23		I lines 17 through 22)	1,928,416.	1,707,0	48.		
			ollow SFAS 117, check here 24 through 26 and lines 30 and 31.	X				
NF	24	Unrestricted		4,278,113.	6,848,1	44.		
E U T N	25	Temporarily restrict	ed					
D	26	Permanently restric	ted					
A B S A L T A		Foundations that dand complete lines	o not follow SFAS 117, check here 27 through 31.					
ĔĹ	27	Canital stock trust	principal, or current funds					
TA	28	•	s, or land, bldg., and equipment fund		 	-		
С	1	•	nulated income, endowment, or other funds					
O E R S	29	- ·		4 279 112	6,848,1	11		
ĸэ	30		fund balances (see instructions) net assets/fund balances	4,278,113.	0,040,1			
	"	(see instructions)	net assetshalla balances	6,206,529.	8,555,1	92.		
Par	t III	Analysis of Char	nges in Net Assets or Fund Bala					
1	Tota	I net assets or fund b	palances at beginning of year — Part II, o		agree with	1	4,278,113.	
2		er amount from Part I				2	2,570,031.	
2						3	2,310,031.	
3		increases not included in l				4	6,848,144.	
4		lines 1, 2, and 3	(Itamiza)			5	0,040,144.	
5		ases not included in line 2	palances at end of year (line 4 minus line	a 5) = Part II column (b)	Ine 30	6	6,848,144.	
D	LOTA	II NEL ASSELS DI TUNO [zalances at enu oi year (IIIIe 4 IIIIIIus IIII	o oj i urcii, colullii (D),	10 00		I U.040,144.	

ran	(a) List and describe	the kind(s) of property sold (e.g., re; or common stock, 200 shares ML	real estate.	b) How acquir P — Purchase D — Donatior	(month, day, year)	(d) Date sold (month, day, year)
1a SHORT TERM CAPITAL GAINS - VARIOUS P						VARIOUS
	LONG TERM CAPITAL G			P	VARIOUS VARIOUS	VARIOUS
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) n	
а						1,466,824.
b			·····			227,070.
С						
d e						
	<u>.</u>	Ing gain in column (h) and owned b	by the foundation on 12/31/6	<u> </u>	40.0	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an	(1)	(I) Gains (Col gain minus column (than -0-) or Losses (f	k), but not less
a					.	1,466,824.
b			· 			227,070.
С						
d						
е						
2	Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	_ 2	2	1,693,894.
3	Net short-term capital gain or ((loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions) It	f (loss), enter -0-		3	1,466,824.
Par	t V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	nt Incom	ie	
Was If 'Ye	s,' the foundation does not qua	ction 4942 tax on the distributable a lilfy under section 4940(e) Do not c	complete this part.	· 	Yes	X No
		each column for each year, see the ins	structions before making any e	entries.	(4)	
,	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets (c	(d) Distribution olumn (b) divided	n ratio by column (c))
	2013	387,753.	4,452	,623.		0.087084
	2012	280,949.	4,426			0.063470
	2011	412,328.	4,458			0.092490
	2010	118,262.	4,553			0.025969
	2009	92,130.	4,291	<u>,256.</u>		0.021469
2	Total of line 1, column (d)			_	2	0.290482
3	Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the f n has been in existence if less than	total on line 2 by 5, or by the 5 years		3	0.058096
4	Enter the net value of nonchar	itable-use assets for 2014 from Par	t X, line 5	4		5,351,578.
5	Multiply line 4 by line 3				5	310,905.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b).		_	5	18,854.
7	Add lines 5 and 6			-	7	329,759.
_				1	1	
8	Enter qualifying distributions fr	om Part XII, line 4 In line 7, check the box in Part VI, line		_ 8		558,866.

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and addresses

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Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

	t VII-A Statements Regarding Activities (continued)	36-4	427319	6	Р	age
	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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified persadvisory privileges? If 'Yes,' attach statement (see instructions)	on had		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	n applicat	ion?	13	Х	
14	The books are in care of ► PILE CPAS, LLC Telephone		(317)	269	_3 <u>4</u> 5	4
15	Located at ONE INDIANA SQUARE, SUITE 1200 INDIANAPOLIS ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year		5	N/Ā		∏ N/F
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 enter the name of the foreign country	2.1) If 'Ye	·s,'	, ° , , , , , , , , , , , , , , , , , ,	fa are	٤ , '
Par	t*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
1 a	During the year did the foundation (either directly or indirectly)		Ī	e gu	* 23.7	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo		~1* <u>"</u> "	· } ,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			**
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes Yes	X No X 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)?	Yes	XNo			
	(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)	Yes	ΧNο			
t	olf 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)	17	_	<u>دَّ دَّ .</u> 1 b	N.	/A
	Organizations relying on a current notice regarding disaster assistance check here	•		,		*
•	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?			-: 1 c		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))			.,ş		
ā	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?	Yes	X No	Ž		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20			3.4		
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see instructions).			2 b	N	/ <u>A</u>
	c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here			, , ;;	37
	► 20 , 20 , 20 , 20					, .
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
	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 approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	ed		3 b	N.	/A
4 :	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		X
			ł	- - a		<u></u>
ı	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?			4 b	z	X

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Part VII-B Statements Regarding Activiti		4/20 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	-	n (section 4945(e))?	Yes X	No 3	
(2) Influence the outcome of any specific public	lic election (see section	,		NO I I	
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,	ition drive?		Yes X	No No	,
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charıtable, etc, or	ganızatıon described	☐ Yes [X]	No Single	
(5) Provide for any purpose other than religion educational purposes, or for the preventio	us, charitable, scientific	, literary, or or animals?	☐ Yes X		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in	-				
(see instructions)? Organizations relying on a current notice rega	rding disaster assistanc	e check here	► [5b N/A	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim exe sibility for the grant?	emption from the	N/A Yes	No No	
If 'Yes,' attach the statement required by Regi		, ,		J	manife ma
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premi			Yes _X]No 6b X	•
If 'Yes' to 6b, file Form 8870	-		r		<u>. </u>
7a At any time during the tax year, was the found				No i	æ
b If 'Yes,' did the foundation receive any procee	<u>-</u>			N/A 7b	_
Part VIII Information About Officers, Dand Contractors	irectors, irustees,	roundation Manag	gers, Hignly Paid E	impioyees,	
					_
1 List all officers, directors, trustees, foundation				T (a) F	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances	Ι,
NED L. SHERWOOD	PRES/ DIRECT	0.	0.	(0
151 TERRAPIN PT	0				
VERO BEACH, FL 32963					_
EMILY LAYZER SHERWOOD	VP/ DIRECTOR	0.	0.		0
151 TERRAPIN PT	2.00				
VERO BEACH, FL 32963	mpnac / prpnc			 	
RICHARD I. SHERWOOD	TREAS/ DIREC	0.	0.		0
29 SOUTH STATE ROAD, APT 5F	0				
BOSTON, MA 02215	SEC'Y/ DIREC	0.			_
MATTHEW F. SHERWOOD 55 WOODBINE AVE	1 _ '	0.	0.		0
LARCHMONT, NY 10538	0				
2 Compensation of five highest-paid employees (of	ther than those included (n line 1 — see instructio	nc) If none, enter 'NONE	<u> </u>	-
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account	-
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances	••
NONE			·		_
				 	_
					_
			<u> </u>	<u> </u>	_
Total number of other employees paid over \$50,000	ı		•	1	n

Part VIII Information About Officers, Directors, Trustees, Foundate and Contractors (continued)	tion Managers, Highly Paid Er	nployees,
3 Five highest-paid independent contractors for professional services (see instr	ructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		-
		
Total number of others receiving over \$50,000 for professional services	F	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inforganizations and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1 THE FOUNDATION DOES NOT DIRECTLY PARTICIPATE IN C	HARITABLE ACTIVITIES.	
THE ACTIVITIES OF THE DIRECTORS ARE LIMITED TO TH	E ADMINISTRATION OF	
GRANTS TO QUALIFIED 501(C)(3) CHARITABLE ORGANIZA	TIONS.	
2		
3		
4		
		
Part IX-B Summary of Program-Related Investments (see instruction	ons)	
Describe the two largest program-related investments made by the foundation during the ta	ex year on lines 1 and 2	Amount
1		
N/A		
2		······································
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	_	0.
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1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	558,866.
ŀ	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the suitability test (prior IRS approval required)	3 a	
ı	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	558,866.
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	18,854.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	540,012.

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

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Part.XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7		\$ > \$ \$ \$ *		248,725.
2 Undistributed income, if any, as of the end of 2014:	;	* * * * * *	- 1 d	240,723.
a Enter amount for 2013 only	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	\$ 39	0.	
b Total for prior years. 20, 20, 20	3, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	0.		*
3 Excess distributions carryover, if any, to 2014		ş ,	*	<u> </u>
a From 2009	· •	· •	į ' * '	** , ;
b From 2010), * '			32 , , }
c From 2011 194, 768.			,	«« «
d From 2012 65, 570.		,	**	· · · · · · · · · · · · · · · · · · ·
e From 2013 171, 322.		, ,	- ;	
f Total of lines 3a through e	431,660.		,	
4 Qualifying distributions for 2014 from Part	, ,	* * * * *		, <u>(</u> '
XII, line 4 ► \$ 558, 866.	,			, , , ,
a Applied to 2013, but not more than line 2a		* ;	0.	` *4
b Applied to undistributed income of prior years		_	* *	, ,
(Election required – see instructions)		0.		*
c Treated as distributions out of corpus	•	**- v.	* **	
(Election required – see instructions)	0.		<u> </u>	040 705
d Applied to 2014 distributable amount	210 141			248,725.
e Remaining amount distributed out of corpus Excess distributions carryover applied to 2014	310,141.	*** *	ž ^	<u> </u>
(If an amount appears in column (d), the	<u>0.</u>	* :		
same amount must be shown in column (a))		4		y I
	, ,, ,, ,,	* 4	, ;	* * * *
6 Enter the net total of each column as indicated below:		<u> </u>	4	*
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	741,801.	 *	* :}	\$
	741,001.		* * *	
b Prior years' undistributed income. Subtract line 4b from line 2b	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ο.		· · · · · · · · · · · · · · · · · · ·
c Enter the amount of prior years' undistributed		Ŭ.		
income for which a notice of deficiency has	٠			·
been issued, or on which the section 4942(a) tax has been previously assessed		0.		*
d Subtract line 6c from line 6b Taxable			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
amount — see instructions	\$4 , * \$\$ //6 < .	0.	, × % 2	* *
e Undistributed income for 2013 Subtract line 4a from				8
line 2a. Taxable amount — see instructions	,		0.	* * * ***. ~
f 1	1	,, ,, ,,	1, , , ,	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be	, ,	, ,,,,		
distributed in 2015		\$ \	·.j · ′ *	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		* * * * * * * * * * * * * * * * * * * *	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
may be required - see instructions)	0.	. · · · · ·	, , , , , , , , , , , , , , , , , , ,	× × \$
8 Excess distributions carryover from 2009 not		~	* * * *	`
applied on line 5 or line 7 (see instructions)	0.			·
9 Excess distributions carryover to 2015.		, , ,		
Subtract lines 7 and 8 from line 6a	741,801.	, , , , ,	``	* * 4
10 Analysis of line 9		, , ,	× *	* ×
a Excess from 2010			,	
b Excess from 2011 194, 768.		, ,		
c Excess from 2012 65, 570.		,		, ,
d Excess from 2013 171, 322.				*
e Excess from 2014 310,141.	<u> </u>	<u> </u>	<u> </u>	

Part XIV Private Operating Foundat			t VII-A guestion	30-42/319	N/A
1 a ff the foundation has received a ruling or dete is effective for 2014, enter the date of the	rmination letter that				N/A
b Check box to indicate whether the foundat	ion is a private ope	erating foundation o	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a.					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities			ļ		
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
 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			-	<u> </u>	
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th	è year – see in	structions.)		• •	
Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 5	e contributed more t e contributed more	than \$5,000) (See	e section 507(d)(2).)		
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	e stock of a corporation 10% or greater inter	on (or an equally large rest	e portion of the owner	rship of
2 Information Regarding Contribution, Gran Check here X if the foundation only ma requests for funds If the foundation make complete items 2a, b, c, and d	ikes contributions to	preselected charitat	ole organizations and o		
a The name, address, and telephone number o	r e-mail address of t	the person to whom a	applications should be	addressed	
b The form in which applications should be	submitted and info	rmation and materi	als they should inclu	de.	
c Any submission deadlines.		· · · · · ·			
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors

	tistes out production to the state of the				
3	Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	t	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	substantial contributor	recipient	os. and anoth	
а	Paid during the year				
	STATEMENT 6				
			ĺ		
			ļ		
			İ		
				 	550.066
	Total			► 3a	558,866
1	Approved for future payment				
				i	
					ļ
				1	
			1		•
				1	
	Total		1	► 3b	
	10(4)			<u></u>	5 000 PF (001 A)

Part XVI-A. Analysis of Income-Producing Activities

Enter pross	amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
-	am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
_		+		code		
						
		+				
		+	*	+ +		
_				+		
f				 		
a Fees	and contracts from government agencies					
-	pership dues and assessments					
	t on savings and temporary cash investments			14	10.	
4 Divide	ends and interest from securities			14	210,667.	
5 Net re	ental income or (loss) from real estate	* * * *		•	1	, , , * * *
a Debt-	financed property	_				
b Not de	ebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other	Investment income					
	r (loss) from sales of assets other than inventory		**	18	1,693,894.	
	ncome or (loss) from special events.					
	s profit or (loss) from sales of inventory					
11 Other	revenue	\$ 10 K;			·	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
a						
ь						
·.—		-				
d						
12 Cubic	atal Add columns (b) (d) and (a)	 			1 004 571	
	otal Add columns (b), (d), and (e) 1. Add line 12, columns (b), (d), and (e)			1 1	1,904,571.	1,904,571.
72 Talal					13	1,904,5/1.
		ions)				
(See works	sheet in line 13 instructions to verify calculat					
(See works			shment of Exem	pt Purpos	es	
(See works	sheet in line 13 instructions to verify calculat	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the instructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the instructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the nstructions)
Part XVI	-B Relationship of Activities to the	e Accompli				ly to the instructions)

Form 990-PI			Y SHERWOOD FAMILY		D. L. C. Santa	36-4273196	Page 13
Part XVII	∐Information Reg Exempt Organiz	arding Tran ations	sfers To and Transaction	is and	Relationships wit	in Noncharitable	
descrit relatin	ped in section 501(c) o g to political organizat	of the Code (oth ions?	ngage in any of the following with than section 501(c)(3) organ	nizations)	her organization) or in section 527,		Yes No
(1) Ca	ish	foundation to a	a noncharitable exempt organiz	ation of.		1 a (1)	X
b Other	her assets transactions					1 a (2)	X ANAMA
(2) Pu		n a noncharital	ble exempt organization			1 b (1) 1 b (2)	X
(4) Re	ental of facilities, equipermbursement arrange	ments	assets			1 b (3) 1 b (4)	X
(6) Pe		or membershi	p or fundraising solicitations ts, other assets, or paid employ			1 b (5) 1 b (6)	X X X
d If the a the god any tra	answer to any of the a ods, other assets, or ser ansaction or sharing a	bove is 'Yes,' ovices given by trrangement, sh	complete the following schedule he reporting foundation. If the foundow in column (d) the value of t	Column ndation re he goods	n (b) should always sheceived less than fair m s, other assets, or serv	now the fair market val arket value in vices received	ue of
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organization	(d)	Description of transfers, tra	ansactions, and sharing arra	ngements
N/A		-					
						••	
				1		· · · · · · · · · · · · · · · · · · ·	
descri	ibed in section 501(c)	of the Code (of	d with, or related to, one or more ther than section 501(c)(3)) or	ax-exemp	ot organizations i 527?	Ye	s X No
	s,' complete the follow (a) Name of organizat		(b) Type of organization	า	(c) Desc	ription of relationship	

N/A Under penalties of perjury reclare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. De lastion of preparer (other than taxoxyer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer or trustee Print/Type preparer's name 's signature

PRES/ DIRECTOR Title

May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No

Date Check ROBERT E. PECK, CPA self-employed P00263149 Paid Firm's EIN - 35-0865680 Preparer PILE CPAS ONE INDIANA SQ, SUITE 1200 **Use Only** Firm's address INDIANAPOLIS, IN 46204-2066 (317) 269-3454 Phone no BAA

Form 990-PF (2014)

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THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

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STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A)	(B) NET	(C)	(D)
			NVESTMENT	ADJUSTED	CHARITABLE
	<u>PER</u>	BOOKS	INCOME	NET INCOME	<u>PURPOSES</u>
ACCOUNTING FEES	TOTAL \$	6,000. \$ 6,000. \$	6,000. 6,000.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS EXPENSES	TOTAL	\$ 495. \$ 495.	\$ 495. \$ 495.	\$ 0.	<u>\$</u> 0.

STATEMENT 3 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BERKSHIRE HATHAWAY APPLE INC. FREEPORT MCMORAN COPPER & GOLD NATIONAL OILWELL VARCO NAVIOS MARITIME PARTNERS NORTHWEST PIPE CO. VIACOM CALL APPLE INC JUNE 19 2015 CALL NATIONAL OILWELL JUNE 19 2015 CALL BERKSHIRE HATHAWAY JUNE 19 2015	COST COST COST COST COST COST COST COST	\$ 1,019,740. 1,389,958. 582,103. 749,828. 1,459,034. 341,594. 3,039,609. -12,532. -2,016. -12,126.	\$ 1,379,950. 1,553,521. 312,063. 500,158. 1,032,122. 207,700. 2,693,252. -7,854. -606. -1,248.
	TOTAL	\$ 8,555,192.	\$ 7,669,058.

STATEMENT 4 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

MARGIN ACCOUNT BALANCE

\$ 1,707,048.

TOTAL \$ 1,707,048.

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THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

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STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

NED L. SHERWOOD EMILY LAYZER SHERWOOD

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMC	OUNT
COLUMBIA UNIVERSITY 161 FORT WASHINGTON AVE. NEW YORK, NY 10032	NONE	501 (C) (3)	UNRESTRICTED	\$	70,000.
DANA-FARBER CANCER INSTITUTE 375 LONGWOOD AVENUE BOSTON, MA 02215	NONE	501(C)(3)	UNRESTRICTED	;	37,500.
DUKE UNIVERSITY PO BOX 90001 DURHAM, NC 27708	NONE	501 (C) (3)	UNRESTRICTED	:	26,000.
STANFORD UNIVERSITY BUILDING 310 STANFORD, CA 94305	NONE	501 (C) (3)	UNRESTRICTED	:	30,000.
UNIVERSITY OF PENNSYLVANIA OFFICE OF THE COMPTROLLER 3451 PHILADELPHIA, PA 19104	NONE	501 (C) (3)	UNRESTRICTED	!	50,000.
CITY SQUASH PO BOX 619 BRONX, NY 10458	NONE	501 (C) (3)	UNRESTRICTED		6,092.
SCARSDALE FOUNDATION 22 SAGE TERRACE SCARSDALE, NY,	NONE	501(C)(3)	UNRESTRICTED		5,000.
ALZHEIMER'S ASSOCIATION 225 N. MICHIGAN AVE, FL. 17 CHICAGO, IL 60601	NONE	501 (C) (3)	UNRESTRICTED		200.
MENTAL HEALTH ASSOCIATION 2000 N BEAUREGARD STREET, 6TH FLOOR ALEXANDRIA, VA 22311	NONE	501 (C) (3)	UNRESTRICTED		3,000.
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY, OK 73123	NONE	501 (C) (3)	UNRESTRICTED		200.

FEDERAL STATEMENTS

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THE NED AND EMILY SHERWOOD FAMILY CLIENT 1329 FOUNDATION

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT	
WGA CADDIE SCHOLARSHIP FUND 49 KNOLLWOOD ROAD, SUITE 220 ELMSFORD, NY 10523	NONE	501 (C) (3)	UNRESTRICTED	\$ 25	50.
LYMPHOMA RESEARCH FOUNDATION 115 BROADWAY, SUITE 1301 NEW YORK, NY 10006	NONE	501 (C) (3)	UNRESTRICTED	50	00.
PARTNERSHIP FOR CHILDREN'S RIGHTS 271 MADISON AVE. NEW YORK, NY 10016	NONE	501 (C) (3)	UNRESTRICTED	10,00	00.
SQUASHBUSTERS 795 COLUMBUS AVENUE ROXBURY CROSSING, MA 02120	NONE	501(C)(3)	UNRESTRICTED	4,00	00.
JOHN'S ISLAND COMMUNITY SERVICE LEAGUE 6001 NORTH A-1-A, STE. 8133 INDIAN RIVER SHORES, FL 32963	NONE	501 (C) (3)	UNRESTRICTED	3,70	00.
GEORGETOWN UNIVERSITY 37TH AND O STREETS, N.W. WASHINGTON, DC 20057	NONE	501 (C) (3)	UNRESTRICTED	1,00	00.
PLANNED PARENTHOOD OF SOUTH FLORIDA 2300 N. FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409	NONE	501 (C) (3)	UNRESTRICTED	75	50.
RIVERSIDE THEATER 3250 RIVERSIDE PARK DRIVE VERO BEACH, FL 32963	NONE	501 (C) (3)	UNRESTRICTED	38,00	00.
SCARSDALE ADULT SCHOOL PO BOX 205 SCARSDALE, NY 10583	NONE	501 (C) (3)	UNRESTRICTED	25	50.
EAST MEETS WEST FOUNDATION 1611 TELEGRAPH AVENUE OAKLAND, CA 94612	NONE	501 (C) (3)	UNRESTRICTED	1,00	00.
ISRAEL TENNIS CENTERS FOUNDATION 3275 W. HILLS BLVD. DEERFIELD BEACH, FL 33442	NONE	501 (C) (3)	UNRESTRICTED	1,80	00.

FEDERAL STATEMENTS

THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
VNA HOSPICE OF INDIAN RIVER COUNTY 1110 35TH LANE VERO BEACH, FL 32960	NONE	501 (C) (3)	UNRESTRICTED	\$	11,750.
VERO BEACH MUSEUM OF ART 3001 RIVERSIDE PARK DRIVE VERO BEACH, FL 32963	NONE	501 (C) (3)	UNRESTRICTED		3,750.
METROPOLITAN OPERA GUILD 70 LINCOLN CENTER PLAZA NEW YORK, NY 10023	NONE	501 (C) (3)	UNRESTRICTED		1,000.
INDIAN RIVER LAND TRUST 1904 12TH COURT VERO BEACH, FL 32960	NONE	501(C)(3)	UNRESTRICTED		15,000.
INDIAN RIVER COMMUNITY FOUNDATION PO BOX 643968 VERO BEACH, FL 32964	NONE	501 (C) (3)	UNRESTRICTED		1,000.
THE ACCELERATION PROJECT PO BOX 335 SCARSDALE, NY 10583	NONE	501 (C) (3)	UNRESTRICTED		250.
ALZHEIMER/PARKINSON ASS. OF INDIAN RIVER 5490 E. HARBOR VILLAGE DRIVE VERO BEACH, FL 32967	NONE	501 (C) (3)	UNRESTRICTED		370.
INDIAN RIVER MEDICAL CENTER FOUNDATION 1000 36TH STREET VERO BEACH, FL 32960	NONE	501 (C) (3)	UNRESTRICTED		26,704.
ALS ASSOCIATION 1275 K STREET NW WASHINGTON, DC 20005	NONE	501 (C) (3)	UNRESTRICTED		250.
ARAVIND EYE FOUNDATION 247 THIRD AVENUE, SUITE 202 NEW YORK, NY 10010	NONE	501 (C) (3)	UNRESTRICTED		250.
BOYS AND GIRLS CLUB OF INDIAN RIVER COUN 1729 17TH AVE. VERO BEACH, FL 32960	NONE	501 (C) (3)	UNRESTRICTED		11,000.

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FEDERAL STATEMENTS

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THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

36-4273196

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS_	PURPOSE OF GRANT	AMOUNT
BRIGHAM AND WOMEN'S HOSPITAL 116 HUNTINGTON AVENUE, THIRD FLOOR BOSTON, MA 02116	NONE	501 (C) (3)	UNRESTRICTED	\$ 125,00
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	NONE	501 (C) (3)	UNRESTRICTED	50
EDITH SANFORD BREAST CANCER FOUNDATION 101 SOUTH REID STREET, SUITE 202 SIOUX FALLS, SD 57103	NONE	501 (C) (3)	UNRESTRICTED	10
ENVIRONMENTAL LEARNING CENTER 255 LIVE OAK DRIVE VERO BEACH, FL 32963	NONE	501 (C) (3)	UNRESTRICTED	1,25
WESTCHESTER JEWISH COMMUNITY SERVICES 845 N BROADWAY WHITE PLAINS, NY 10603	NONE	501 (C) (3)	UNRESTRICTED	25
GIFFORD MIDDLE SCHOOL 4530 28TH CT. VERO BEACH , FL 32967	NONE	501 (C) (3)	UNRESTRICTED	25
INDIAN RIVER GOLF FOUNDATION 3 JOHN'S ISLAND DRIVE VERO BEACH, FL 32963	NONE	501 (C) (3)	UNRESTRICTED	5,00
QUAIL VALLEY CHARITIES 1110 35TH LANE VERO BEACH, FL 32963	NONE	501 (C) (3)	UNRESTRICTED	20
AMERICAN FRIENDS OF SHALVA 315 FIFTH AVENUE, 6TH FL. NEW YORK, NY 10016	NONE	501 (C) (3)	UNRESTRICTED	25
POLYPHONY FOUNDATION 99 RIVER ROAD COS COB, CT 06807	NONE	501 (C) (3)	UNRESTRICTED	25
TUFTS UNIVERSITY 80 GEORGE STREET, SUITE 200-4 MEDFORD, MA 02155	NONE	501 (C) (3)	UNRESTRICTED	5,00

FEDERAL STATEMENTS

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THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

36-4273196

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT
UNITED WAY OF INDIAN RIVER COUNTY P.O. BOX 1960 VERO BEACH , FL 32961	NONE	501 (C) (3)	UNRESTRICTED	\$	5,000.
THE GREEN POND FIRST AID SQUAD 1 DUMP ROAD NEW FOUNDLAND, NJ 07435	NONE	501 (C) (3)	UNRESTRICTED		250.
THE ROYAL AFRICAN FOUNDATION 358 SOUTH 500 EAST, STE #1 SALT LAKE CITY, UT 84102	NONE	501 (C) (3)	UNRESTRICTED		5,000.
			TOTA	L \$	558,866.

2014 '

FEDERAL SUPPORTING DETAIL

PAGE 1

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THE NED AND EMILY SHERWOOD FAMILY FOUNDATION

36-4273196

CONTRIBUTIONS, GIFTS, AND GRANTS OTHER CONTRIBUTIONS, GIFTS, GRANTS, ETC.

COST BASIS OF 13,944.005 SHARES APPLE COMMON STOCK

TOTAL \$ 1,243,476.

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 THE NED AND EMILY	SHERWOOD FAMILY	Employer identification number
FOUNDATION		36-4273196
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 priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the G	eneral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organization	anization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule		
For an organization filing Form 990, 990-Exproperty) from any one contributor Complete	Z, or 990-PF that received, during the year, contributions totalete Parts I and II See instructions for determining a contribution	aling \$5,000 or more (in money or itor's total contributions.
Special Rules		
L. J. and an appliance E00(a)(1) and 170(b)(1)(0)(u)	01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supported that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, the year, total contributions of the greater of (1) \$5,000 or (2) 00-EZ, line 1. Complete Parts I and II	16a or 16b and that
during the year, total contributions of more	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lib children or animals. Complete Parts I, II, and III	from any one contributor, iterary, or educational
during the year, contributions exclusively for \$1,000. If this box is checked, enter here to charitable, etc., purpose. Do not complete	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contribution that were received during the year for any of the parts unless the General Rule applies to this orgable, etc., contributions totaling \$5,000 or more during the year	ions totaled more than an <i>exclusively</i> religious, anization bec <u>a</u> use
Caution: An organization that is not covered by 990-PF), but it must answer 'No' on Part IV, Ir Part I, line 2, to certify that it does not meet the	y the General Rule and/or the Special Rules does not file Sc ne 2, of its Form 990, or check the box on line H of its Form ne filing requirements of Schedule B (Form 990, 990-EZ, or 9	:hedule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule B	(Form 990)	, 990-EZ,	or 990-PF)	(2014)

1 of

1 of **Part 1**

Name of organization
THE NED AND EMILY SHERWOOD FAMILY

Employer identification number 36-4273196

7117 HT	D THO BITTET CHEEKOOD TIETEET		···
_ Part[/]	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NED L. SHERWOOD & EMILY LAYZER 151 TERRAPIN POINT VERO BEACH, FL 32963	\$ <u>1,682,932.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

1 to

of **Part II**

Name of organization

THE NED AND EMILY SHERWOOD FAMILY

Employer identification number 36-4273196

Pait:II.緣 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b)
Description of noncash property given (a) No. from Part i (c) FMV (or estimate) (d) Date received (see instructions) SHARES OF APPLE COMMON 1,682,932. **VARIOUS** (a) No. from (b) (c) FMV (or estimate) (d) Date received Description of noncash property given Part I (see instructions) (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (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 (a) No. from Part I (c) FMV (or estimate) (see instructions) (d) Date received BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

to

of Part III

Name of organization

THE NED AND EMILY SHERWOOD FAMILY

Employer identification number 36-4273196

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.)

See instructions.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
İ	(e) Transfer of gift			
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
:				
(a)	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
(a) No. from Part I	Purpose of gift	Use of gift		Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere			ionship of transferor to transferee
		·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	(e)			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
		·		
				