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DLN: 93493161008166

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A F	or the	2014 ca	alendar year, or tax year beginnin	g 07-01-2014 , and ending 06-30-20	15			
B Cl	neck if a	pplicable	C Name of organization WOODLAWN FOUNDATION INC			D Emplo	yer ider	itification number
☐ Ac	ldress ch	nange	Woode with Condition and			13-3	055729)
Гиа	ame cha	inge	Doing business as			_		
┌ In	ıtıal retu	ım				E Teleph	one num	oer
T re		mınated	Number and street (or P O box if n 56 Harrison Street - Suite 401	nail is not delivered to street address) Room/	suite		632-3	
_	nended plication	return n pending	New Rochelle, NY 108016560	ntry, and ZIP or foreign postal code		G Gross	receipts \$	37,471,318
			F Name and address of pro	ncıpal officer	H(a) Is	 this a group	return	for
			Timothy C Hogan 139 East 34th Street		sub	ordinates?		┌ Yes 🗸 No
			New York, NY 100164704		H(b) Are	all subord	ınates	┌ Yes ┌ No
_						luded?		, ,
I T	ax-exen	npt statu	s 501(c)(3) 501(c)() • ((insert no) 4947(a)(1) or 527		No," attacr	n a list	(see instructions)
J M	/ebsite	e: ► w	oodlawnfoundation org		H(c) Gr	oup exemp	tion nun	nber 🟲
K Fo	m of or	ganızatıo	on 🔽 Corporation 🗌 Trust 🦳 Association	on	L Year of	formation 19	979 M	State of legal domicile NY
Pä	art I	Sur	mmary					
ance	1	Woodla	describe the organization's mission iwn Foundation Inc solicits contr ic Prelature of Opus Dei	on or most significant activities ibutions and provides grants to nonpro	ofit organizati	ons that re	ceive p	astoral care from the
Governance	2	Check	this box দ if the organization di	scontinued its operations or disposed	l of more thar	125% of its	net as	sets
بن 186	3	Numbe	r of voting members of the govern	ning body (Part VI, line 1a)			3	13
Activities &				of the governing body (Part VI, line 1			4	10
Ĭ				calendar year 2014 (Part V, line 2a)			5	7
Ā	6	Total n	umber of volunteers (estimate if r	necessary)			6	0
				art VIII, column (C), line 12			7a	0
	b	Net uni	related business taxable income f	from Form 990-T, line 34			7b	0
				413		rior Year	676	Current Year
ā	8			ne 1h)		10,387,		29,552,151
Rayenue	10	_		n (A), lines 3, 4, and 7d)		1,406,		1,858,257
æ	11			lines 5, 6d, 8c, 9c, 10c, and 11e)	`		0	2,542
	12			(must equal Part VIII, column (A), lı	ne	11010	407	
	13					11,913,		31,495,312
	14			IX, column (A), line 4)		17,123,	0	13,336,112
	15			ee benefits (Part IX, column (A), lines		210		
\$		5-10	0)			310,		309,162
Expenses	16a			, column (A), line 11e)	•	13,	048	12,515
ਡੋ	b	Total	fundraising expenses (Part IX, column (D	o), line 25) • 114,748				
	17			lines 11a-11d, 11f-24e)		885,		1,301,788
	18		·	st equal Part IX, column (A), line 25)		18,333,		14,959,577
<u>_ qr</u>	19	Reve	enue less expenses. Subtract line	18 from line 12		-6,419, ing of Curre		16,535,735
19 <u>19</u>					beginin	Year	:	End of Year
Net Assets or Fund Balances	20	Tota	lassets (Part X, line 16)			23,544,	600	43,450,032
# B	21					1,927,		4,323,864
	22 rt		assets or fund balances Subtract nature Block	line 21 from line 20		21,616,	684	39,126,168
Unde my k	er pena knowled arer ha	alties o dge and as any	f perjury, I declare that I have ex	amined this return, including accompa nplete Declaration of preparer (other				
			pe or print name and title					
			Print/Type preparer's name	Preparer's signature		heck I if	PTIN	
Pai			Firm's name 🕨	1		elf-employed ım's EIN 🟲		_
	pare		Firm's address ►			hone no		
US	e On	ıv l	•		Ι'			

May the IRS discuss this return with the preparer shown above? (see instructions) . .

. . TYes No

4d Other program services (Describe in Schedule O) (Expenses \$

0 including grants of \$

14,080,192

0)(Revenue\$

0)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 😼	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	No.
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		. 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
h	If "Yes," enter the name of the foreign country 🛌			
•	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	1		
_	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
	during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
.0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2~	Section 4947(a)(1) non-everynt charitable truete. Is the organization filing Form 0.00 in liquid Form 1.0413	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	124		
ט	year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.]		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	_	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	<u> </u>		
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O	contains a response or note to an	line in this Part VI						$\overline{\mathbf{v}}$
Check ii Schedule O	contains a response of note to an	y lille ill tills rait vi 🔹						-l *

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Arthur Kim C Rivera

56 Harrison Street

Suite 401

New Rochelle, NY 108016560 (914)632-3778

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ♦ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	offic	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) Timothy C Hogan	10	x		×				0	0	0
President	2									
(2) Michael A Coan Executive Director and Vice President	20 4	х		х				16,920	0	13,500
(3) Charles Cushnie Vice President	10	х		х				0	0	0
(4) Anthony McCarthy Vice President	10	Х		х				0	0	0
(5) Edwin S Tecarro Vice President	10	х		х				0	0	0
(6) Gregory A Byrnes Secretary	20	Х		х				65,000	0	0
(7) Arthur Kım C Rıvera Treasurer	20	х		х				16,920	0	13,500
(8) George Sim Johnston III Board Member	2	Х						0	0	0
(9) Patricia Keefe Board Member	1	х						0	0	0
(10) Mary Ellen Kranzlın Board Member	1	×						0	0	0
(11) Edythe F Merritt	1	х						0	0	0
Board Member	0	_^_								
(12) James M O'Kane Board Member	0	х						0	0	0
(13) Jacqueline Y Taylor	1	Х						0	0	0
Board Member	0									

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is l	ne l both	box, an	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	Þ			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	98,840	0	27,000

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee					
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo		
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such					
	ındıvıdual	4		Νo		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for					
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo		

Coction	D	Tada		Contractors
Section	В.	Tuae	penaent	Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)			
Name and business address	Description of services	Compensation			
Total words of the state of the					

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Serwce Revenue	2a b c d e f g
Revenue	3 4 5 6 6 6 b C d d 8 8 8 8
Other	b c 9a b c 10a b
	11a b c d

/ ###	Statement o	ale O contains a respo	nse or note to any lu	ne in this Part VIII			
	Check if Schedu	are o contains a respo	ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated camp	paigns 1a	0				
ь	Membership du	es 1b	0				
c	Fundraising eve	ents 1c	0				
_	Related organiz						
d							
e	Government grants	s (contributions) 1e					
f	All other contributions similar amounts no	ons, gifts, grants, and 1f ot included above	14,113,587				
g	Noncash contribution 1a-1f \$	ons included in lines	15,669,645				
h	Total. Add lines	s 1a-1f	🛌	29,552,151			
			Business Code				
2a	Health insurance re	eimbursement	524292	66,312	66,312	0	0
b	Interest on prograr	n related loans	900004	16,050	16,050	0	0
С							
d							
e							
f	All other progra	im service revenue		0	0	0	0
g	Total. Add lines	s 2a – 2f	▶	82,362			
3	Investment inc	ome (ıncludıng dıvıden	ds, interest,	425.602	0	0	425 (02
		ar amounts)		425,603	0	0	425,603
4		tment of tax-exempt bond	·	0	0	0	0
5	Royalties	(ı) Real	(II) Personal	J	,	Ü	0
6a	Gross rents	(I) Keal	(II) F el solidi				
ь	Less rental						
l c	expenses Rental income	0	0				
d	or (loss)	me or (loss)					
"	Net rental incol	(i) Securities	(II) Other				
7a	Gross amount		(ii) o thei				
	from sales of assets other	7,408,660	0				
ь	than inventory Less cost or						
	other basis and sales expenses	5,976,006	0				
c	Gain or (loss)	1,432,654	0				
d	Net gain or (los	s)	· · · · •	1,432,654	0	0	1,432,654
8a	Gross income fi events (not inc	=					
	\$	0					
	of contributions See Part IV, lin	reported on line 1c)					
		a					
ь	Less direct ex	penses b					
С	Net income or ((loss) from fundraising	events 🛌				
9a	Gross income fi See Part IV, lin	rom gaming activities					
	See Fure IV, IIII	a a					
ь	Less direct ex	penses b					
С	Net income or ((loss) from gamıng actı	vities				
10a	Gross sales of returns and allo	owances .					
h	loce cost of m	a a					
b c		oods sold b (loss) from sales of inv	entory 🛌				
	Miscellaneous		Business Code				
11a							
ь							
С							
d	All other revenu	ue		2,542	0	0	2,542
e	Total. Add lines	s 11a-11d	🕨	2,542			
12	Total revenue.	See Instructions .	🕨				
			• •	31,495,312	82,362	0	1,860,799

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colu

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	11,585,234	11,585,234		
2	Grants and other assistance to domestic individuals See Part IV, line 22	33,909	33,909		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	1,716,969	1,716,969		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	73,840	3,098	61,578	9,164
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	208,481	8,748	173,859	25,874
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	5,243	220	4,372	651
10	Payroll taxes	21,598	906	18,012	2,680
11	Fees for services (non-employees)				
а	Management	203,009	0	201,584	1,425
b	Legal	3,723	0	3,723	0
- C	Accounting	49,162		 	3,662
d	Lobbying	13,102	Ĭ	13,300	3,002
e	Professional fundraising services See Part IV, line 17	12,515			12,515
f	Investment management fees	130,963	0	130,963	0
g g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	130,903		130,703	<u> </u>
12	Advertising and promotion				
13	Office expenses	26,468	1,041	20,691	4,736
14	Information technology	16,820	706	14,027	2,087
15	Royalties	,		,	·
16	Occupancy	59,986	2,517	50,024	7,445
17	Travel	33,300	2,317	30,021	7,113
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,646	6	112	38,528
20	Interest	30,687	1,288	25,591	3,808
21	Payments to affiliates				<u> </u>
22	Depreciation, depletion, and amortization	13,842	6,442	6,441	959
23	Insurance	2,726	115	2,273	338
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	,		,	
а	Health insurance benefits	678,850	678,850	0	0
b	Charitable gift annuity expense	39,847	39,847	0	0
С					
d					
e	All other expenses	7,059	296	5,887	876
25	Total functional expenses. Add lines 1 through 24e	14,959,577	14,080,192	764,637	114,748
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)		. ,		

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	653,551	1	2,356,327
	2	Savings and temporary cash investments	2,125,403	2	4,328,503
	3	Pledges and grants receivable, net	1,774,104	3	1,724,021
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
×	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		_	
Assets	l _		277 272	6	252.542
∀	7	Notes and loans receivable, net	375,078	7	358,546
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	10,021	9	10,175
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 99,802			
	b	Less accumulated depreciation	21,887	10c	69,225
	11	Investments—publicly traded securities	12,250,761	11	24,752,965
	12	Investments—other securities See Part IV, line 11	1,865,553	12	5,153,646
	13	Investments—program-related See Part IV, line 11	2,517,230	13	2,423,473
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,951,012	15	2,273,151
	16	Total assets. Add lines 1 through 15 (must equal line 34)	23,544,600	16	43,450,032
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
gej		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	2,550,000
	24	Unsecured notes and loans payable to unrelated third parties	697,346	24	697,346
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	1,230,570	25	1,076,518
	26	Total liabilities. Add lines 17 through 25	1,927,916	26	4,323,864
ري دان		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete			
ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	6,943,544	27	24,676,557
or Fund Balance	28	Temporarily restricted net assets	14,673,140	28	14,449,611
<u> </u>	29	Permanently restricted net assets	14,073,140	29	0
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and		29	
正		complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
455	32	Retained earnings, endowment, accumulated income, or other funds		32	
Šet	33	Total net assets or fund balances	21,616,684	33	39,126,168
Z	34	Total liabilities and net assets/fund balances	23,544,600	34	43,450,032
		•	I		

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Total revenue (much agual Borth VIII. agluma (A.) lung 13.)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		31,4	195,312
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,9	959,577
3	Revenue less expenses Subtract line 2 from line 1	3			535,735
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
_	<u>.</u>	4		21,6	16,684
5	Net unrealized gains (losses) on investments	5		-1,0	24,366
6	Donated services and use of facilities	6			0
7	Investment expenses				
_	<u> </u>	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,9	998,115
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			26,168
Par	t XII Financial Statements and Reporting			,-	
	Check if Schedule O contains a response or note to any line in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or	ן ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	J			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	į	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

TY 2014 Reasonable Cause Explanation

Name: WOODLAWN FOUNDATION INC

EIN: 13-3055729

Software ID: 14000267

Software Version: v1.00

Explanation: We delayed the filing of Form 990 (2014) in order to submit a

return that best reflects the result of audits carried out by an independent accounting firm of the consolidated financial records of Woodlawn Foundation and its related parties for the two fiscal years ending June 30, 2013 and June 30, 2014. We deemed it highly important to provide readers of Form 990 the most accurate

information on a reasonably timely basis.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493161008166

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Name of the organization
WOODLAWN FOUNDATION INC

13-3055729 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s)

organization	(1) 211	organization (described on lines 1 - 9 above or IRC section (see instructions))	listed in your docume	governing	monetary support (see instructions)	other support (see instructions)
		instructions))	Yes	No		
Total						

(iv) Is the organization

(iii) Type of

(v) A mount of

(ii) FIN

(i)Name of supported

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 12,143,228 9,800,108 12,148,627 10,387,676 29,552,151 74,031,790 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 12,143,228 9,800,108 12,148,627 10,387,676 29,552,151 74,031,790 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 3,307,762 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 70,724,028 from line 4 Section B. Total Support Calendar year (or fiscal year (e) 2014 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (f) Total beginning in) 🟲 12,143,228 9,800,108 10,387,676 74,031,790 Amounts from line 4 12,148,627 29,552,151 Gross income from interest, dividends, payments received on securities loans, rents, royalties 237,211 187,887 141,283 203,226 425,604 1,195,211 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of 183 102 715 2,542 3,542 capital assets (Explain in Part VI) 11 **Total support** Add lines 7 75,230,543 through 10 12 Gross receipts from related activities, etc (see instructions) 12 657,061 13 14 15 16

13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a se			
	organization, check this box and stop here	<u></u>	<u> </u>	<u>- </u>
S	ection C. Computation of Public Support Percentage			
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	94 01	0 %
15	Public support percentage for 2013 Schedule A, Part II, line 14	15	86 46	1 %
Ь	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% of and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1 box and stop here. The organization qualifies as a publicly supported organization	/3% or	more, check this ►/	_
	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and sto in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or	p here. public	.Explain ly supported ▶	-
18	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualified organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this binstructions.	fies as	a publicly	·F

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
	For 2010unexpected, unidentified receipt of \$183, for 2011unexpected, unidentified receipt of \$102, for 2012write-off of un-cashed checks drawn prior to 6-30-2011 totaling \$515, and a bank promotional credit of \$200, and for 2014 unexpected, unidentified receipt of \$2,542 from the United States Treasury

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493161008166

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	ne of the organization DLAWN FOUNDATION INC		Emp	oloyer identific	cation numbe	er
•	DEWIN FOODEN AND INC		13-	3055729		
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Account	s. Comple	te if the
	<u> </u>	(a) Donor advised funds		(b) Funds and	d other accou	ınts
	Total number at end of year	1				
	Aggregate value of contributions to (during year)	0				
	Aggregate value of grants from (during year)	20,836				
	Aggregate value at end of year	0				
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or adv	ısed	✓ Yes	┌ No
	Did the organization inform all grantees, donors, and d used only for charitable purposes and not for the bene conferring impermissible private benefit?				✓ Yes	┌ No
ſ	t II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part I	IV, line 7.	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of an Preservation of a c	certifie	d historic stru	ıcture	
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in t	ne forr	1		
	Total number of conservation easements		2-	Held at th	e End of the	Year
		•	2a			
	Total acreage restricted by conservation easements Number of conservation easements on a certified history	oric structure included in (a)	2b			
	Number of conservation easements on a certified insta	` '	2c			
	historic structure listed in the National Register	quired after 8/17/00, and not on a	2d			
	Number of conservation easements modified, transfer the tax year -	red, released, extinguished, or terminate	d by th	he organizatio	n durıng	
	Number of states where property subject to conservat	ion easement is located ►				
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of	f violations, ar	nd Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easen	nents o	during the yea	r	
	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	s durın	g the year		
	Does each conservation easement reported on line 2(and section $170(h)(4)(B)(ii)$?	d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı)	☐ Yes	┌ No
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financial				
3	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similaı	Assets.	
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote is	.16 (ASC 958), not to report in its rever	or rese	earch in furthe		
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	ets held for public exhibition, education,				lıc
	(i) Revenue included in Form 990, Part VIII, line 1			► \$		0
	(ii) Assets included in Form 990, Part X			► \$	1	07,503
	If the organization received or held works of art, historfollowing amounts required to be reported under SFAS		or finan	· ·		
	Revenue included in Form 990, Part VIII, line 1			▶ \$		0
				- ۳ <u></u>		

b Assets included in Form 990, Part X

Par	Organizations Maintaining Coll	lections of Art,	His	<u>tori</u>	<u>cal Tı</u>	<u>reasur</u>	<u>es, or Oth</u>	<u>er Sim</u>	<u>ilar Asse</u>	ets (co	ontinued)
3	Using the organization's acquisition, accession collection items (check all that apply)	on, and other record	ls, ch	ecka	any of	the follo	wing that are	a signifi	cant use of	its	
а	Public exhibition		d	Γ	Loan	or excha	ange prograr	ns			
b	Scholarly research		е	<u>~</u>	Othe	r Instal	latıon ın futu	re chape	ls		
c	Preservation for future generations										
4	Provide a description of the organization's col Part XIII	lections and explaii	n hov	v the	y furthe	er the or	ganızatıon's	exempt p	ourpose in		
5	During the year, did the organization solicit or							ımılar	_	Yes	√ No
Da	assets to be sold to raise funds rather than to t IV Escrow and Custodial Arrange							"Ves" to			NO NO
	Part IV, line 9, or reported an amo						answered	163 (0	101111 990	,	
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	an or other intermed	diary	for c	ontrıbı	itions or	other asset	s not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	follow	ıng t	able						
									Amou	unt	
С	Beginning balance						10				
d	Additions during the year						10	-			
e	Distributions during the year						16	-			
f	Ending balance						11				
2a	Did the organization include an amount on For								I	Yes	□ No
b	If "Yes," explain the arrangement in Part XIII										<u> </u>
Pa	rt V Endowment Funds. Complete if	the organization (a)Current year		were Prior			orm 990, P			N EOUR W	oars back
1a	Beginning of year balance	(a)current year	(5)	FIIOI	year	D (C) W	years back (d)Tillee ye	als back (e	syr our y	cars back
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balance	e (lın	e 1g,	colum	nn (a)) he	eld as				
a	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
С	Temporarily restricted endowment	d 1000/									
2-	The percentages in lines 2a, 2b, and 2c shoul		t t	·ha+ -	ra hal	4 2 2 4 2 4	ministered f	or +b o			
За	Are there endowment funds not in the possess organization by	Sion of the organiza	tion t	.iidt d	ire nei	u anu au	ministered i	or the		Yes	No
	(i) unrelated organizations								. 3a(i)		
	(ii) related organizations								. 3a(ii)	<u> </u>	<u> </u>
	If "Yes" to 3a(II), are the related organizations. Describe in Part XIII the intended uses of the	•							. 3b		<u> </u>
4 Pat	t VI Land, Buildings, and Equipmen					n answe	ered 'Yes' i	o Form	990 Part	TV lu	ne
	11a. See Form 990, Part X, line 10		10 01	gan	12400	11 4115			, rare	14,	
	Description of property					or other estment)	(b) Cost or otl basis (other		ccumulated preciation	(d) B	ook value
1a	Land					0		0			0
b	Buildings					0		0	0		0
c	Leasehold improvements					0	38,6	22	24,459		14,163
d	Equipment		•			0	61,1	80	6,118		55,062
	Other		•	<u> </u>	<u> </u>	0		0	0	<u> </u>	0
Tota	I. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X,	, colu	mn (l	B), line	10(c).)				<u> </u>	69,225
								Sc	hedule D (I	Form 9	90) 2014

Part VII Investments—Other Securities. Comp	olete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests	2,630,664	C F
(3)Other	2,630,664	<u> </u>
(A) Abdiel Qualified Offshore Partners Ltd	735,148	F
(B) Linx Partners limited partnership	1,787,834	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	5,153,646	
Part VIII Investments—Program Related. Con See Form 990, Part X, line 13.	nplete if the organization	answered 'Yes' to Form 990, Part IV, line 11
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Operating loan to a 501(c)(3) organization	1,911,000	C C
(2) Construction loan to four 501(c)(3) organizations	512,473	C
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	2,423,473	
Part IX Other Assets. Complete if the organization a	answered 'Yes' to Form 990,	, Part IV, line 11d See Form 990, Part X, line 15
(a) Descript	tion	(b) Book value
(1) Assets held in trust (2) Religious art		2,163,69
(3) Jewelry		1,95
		,
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.,)	
Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value	
Federal income taxes Liability under trust agreements	662,098	
Liability on charitable gift annuities	414,420	
and the second s	, ,	

Par		n of Revenue per Audited Financial Statements n answered 'Yes' to Form 990, Part IV, line 12a.	With Revenue p	er Retui	r n Complete if
1		nd other support per audited financial statements		1	
2	Amounts included on l	ne 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (l	osses) on investments 2a			
b	Donated services and	use of facilities			
c	Recoveries of prior yea	r grants			
d	Other (Describe in Par	t XIII)			
e	Add lines 2a through 2	d 		2e	
3	Subtract line 2e from li	ne 1	[3	
4	Amounts included on F	orm 990, Part VIII, line 12, but not on line 1			
а	Investment expenses	not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Par	t XIII)			
C	Add lines 4a and 4b .			4c	
5		es 3 and 4c. (This must equal Form 990, Part I, line 12).		5	
Part		n of Expenses per Audited Financial Statements ion answered 'Yes' to Form 990, Part IV, line 12a.	With Expenses	per Ret	:urn. Complete
1		ses per audited financial statements		1	
2	Amounts included on li	ne 1 but not on Form 990, Part IX, line 25			
а	Donated services and	use of facilities			
b	Prior year adjustments				
C	Otherlosses				
d	Other (Describe in Par	t XIII)			
e	Add lines 2a through 2	d		2e	
3	Subtract line 2e from li	ne 1		3	
4	Amounts included on F	orm 990, Part IX, line 25, but not on line 1:			
а	Investment expenses	not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Par	t XIII)			
C	Add lines 4a and 4b .			4c	
5		nes 3 and 4c. (This must equal Form 990, Part I, line 18).		5	
Part	t XIIII Supplement	al Information			
Part		ired for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also c			ıy addıtıonal
	Return Reference	Explanation			
Sched	dule D, Part III, Line 4	Paintings, sculptures, stained glass windows, and arc The Woodlawn Foundation purchased these artifacts to being demolished. These acquisitions directly further religious art available for installation in future chapels	from church buildings our exempt purpose	that were function b	e closed and were by making works of

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493161008166

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990.

2014

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

WOODLAWN FOUNDATION INC

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

				13-3055729	
Part I General Information "Yes" to Form 990, Page 1990, Page 1990			ne United States. Co	omplete if the organiz	ation answered
1 For grantmakers. Does the and other assistance, the gr used to award the grants or	antees' eligibili	ty for the grar	nts or assistance, and	the selection criteria	┌ Yes ┌ No
2 For grantmakers. Describe assistance outside the Unite		ganızatıon's p	rocedures for monitori	ng the use of its grant	s and other
3 Activites per Region (The follo	wing Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)		.og.e	,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see	the Instructions	for Form 990	Cat	 No 50082W Sched u	 le F (Form 990) 2014

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Europe (including Iceland and Greenland)	O peration of four nonprofit organizations who have missions similar to that of Woodlawn Foundation	1,441,701	wire transfer	0		
(2)		South America	Construction of a conference center in Peru to house spiritual retreats and similar formational activities	167,912	wire transfer	0		
(3)		South America	Construction of a rural farm school in Peru	79,287	wire transfer	0		
(4)		South America	Scholarship for students attending a rural farm school in Colombia	26,950	wire transfer	O		

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
				I.	I .					

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	[~	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	▽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	~	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	V	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	্ন	Νo

Schedule F (Form 990) 2014

Additional Data

Software ID: 14000267

Software Version: v1.00

EIN: 13-3055729

Name: WOODLAWN FOUNDATION INC

Schedule F (Form 990) 2014

Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

(Form 990)

DLN: 93493161008166

2014

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

	Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.						4	
Department of the Treasury Internal Revenue Service			pen to Public Inspection					
Name of the organization			,	·	ions is at <u>www.irs.gov/</u>		Employer identificati	on number
WOODLAWN FOUNDAT	TION INC						13-3055729	
Part I General	Information o	on Grants and	Assistance					
the selection crite	eria used to award	I the grants or ass	sistance?	•	e grantees' eligibility for • • • • • • • • • • • • • • • • • • •	-	•	✓ Yes
					Governments. Com rt II can be duplicate			s" to
(a) Name and addre organization or government	ss of	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data	Table							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	>	51
3	Enter total number of other organizations listed in the line 1 table		

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Direct cash assistance to indigent families	2	29,784	0		
(2) Student loan assistance to clergy of the Opus Dei Prelature	1	4,125	0		

Part IV Supplemental Ir	iformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
, ,	The Woodlawn Foundation monitors the use of grant funds in the U S by means of direct, first-hand knowledge of the character and activities of its grantees, and by means of regular, detailed accounts they provide to the Foundation Furthermore, Woodlawn frequently arranges to have one or more of its own directors or officers serve on the Boards of Directors of nonprofit organizations that receive grants from Woodlawn

Schedule I (Form 990) 2014

Additional Data

Software ID: 14000267

Software Version: v1.00

EIN: 13-3055729

Name: WOODLAWN FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Murray Hill Place Inc139 East 34th Street New York, NY 100164704	13-3542148	501(c)(3)	1,300,660	0			operations
Association for Cultural Interchange Inc420 Lexington Avenue - Suite 300 New York, NY 101700300	52-6054124	501(c)(3)	1,101,000	0			construction of Saxum Conference Center in Israel
Shellbourne Inc359 West 200 North Valparaiso,IN 463857728	35-1266330	501(c)(3)	1,000,000	0			operations

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Chestnut Hill Foundation Inc 481 Hammond Street Chestnut Hill, MA 024671714	04-3141919	501(c)(3)	638,400	0			\$375,000 for expansion of physical plant, and \$263,400 for operations		
Peninsula Foundation Inc770 South Windsor Boulevard Los Angeles, CA 900053786	94-2943240	501(c)(3)	496,000	0			operations		
Layton Study Center Inc 12900 West North Avenue Brookfield, WI 530055217	39-1692100	501(c)(3)	495,850	0			operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Crawford Foundation Inc99 Overlook Circle New Rochelle, NY 108044501	13-3552064	501(c)(3)	451,700	0			operations			
Roseaire Retreat Inc14281 Gallagher Road Delray Beach, FL 334453280	65-0649421	501(c)(3)	330,799	86,932		ı' -	expansion of physical plant			
The Heights Foundation Inc 56 Harrison Street Suite 401 New Rochelle, NY 108016560	52-6062426	501(c)(3)	412,626	0			renovation and improvement to physical plant in Washington, DC			

Form 990,Schedule I, Par	<u>rt II, Grants a</u> r	<u>nd Other Assistanc</u>	e to Domestic Org	anizations and Do	<u>mestic Governme</u> r	nts.	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance									
Castlewood Foundation Inc 5800 North Keating Avenue Chicago, IL 606466615	36-3309592	501(c)(3)	394,200	0			operations									
Prelature of the Holy Cross and Opus Dei139 East 34th Street New York, NY 100164704	13-3598550	501(c)(3)	350,200				operations									
Southmore Foundation Inc 2011 Sheridan Street Houston,TX 770302105	76-0120857	501(c)(3)	335,000	0			construction of physical plant									

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Chaucer Drive Study Center Inc5505 Chaucer Drive Houston,TX 770052631	76-0353042	501(c)(3)	284,100	0			operations			
Tilden Study Center Inc655 Levering Avenue Los Angeles, CA 900242308	95-4301168	501(c)(3)	275,000	0			operations			
Euclid Foundation Inc7800 Cass Avenue Darien,IL 605615008	36-4295675	501(c)(3)	262,894	0			operations			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Oakton Foundation Inc5505 Chaucer Drive Houston,TX 770052631	45-2196605	501(c)(3)	240,000	0			construction of physical plant		
Tenley Study Center Inc 4300 Garrison Street Northwest Washington, DC 200164099	52-1545933	501(c)(3)	236,858	0			operations		
Elmbrook Inc25 Follen Street Cambridge, MA 021383502		501(c)(3)	230,240	0			operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Arnold Hall IncRandall Street PO Box 528 North Pembroke, MA 02358	22-2936068	501(c)(3)	212,400	0			operatons		
Reston Study Center Inc 1810 Old Reston Avenue Reston, VA 201903304	54-1826300	501(c)(3)	177,207	32,493		construction loan	\$177,207 for operations, and \$32,493 for construction of physical plant		
Midtown Cultural Center Inc 1825 North Wood Street Chicago, IL 606221130	36-4093991	501(c)(3)	201,300	0			operatons		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Longlea Conference Center Inc4101 Yuma Street Northwest Washington, DC 200162109	02-0665083	501(c)(3)	186,000	0			operations		
Wyoming House Inc2301 Wyoming Avenue Northwest Washington, DC 200081642	52-1760051	501(c)(3)	179,400	0			operations		
Wespine Study Center Inc 100 East Essex Avenue Kirkwood, MO 631224402	43-1651179	501(c)(3)	151,630	0			operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Berkland Foundation Inc 1827 Oxford Street Berkeley,CA 947091800	94-3207717	501(c)(3)	139,000	0			operations		
Association for Educational Development5800 North Keating Avenue Chicago, IL 606466615	36-2649305	501(c)(3)	136,800	0			operations		
Menlough Study Center Inc 1160 Santa Cruz Avenue Menlo Park, CA 940255003	77-0438157	501(c)(3)	135,000	0			operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Kingsland Foundation Inc 4451 Southwest 88th Avenue Miami,FL 331655976	65-0299587	501(c)(3)	133,403	0			operations			
Rosemoor Foundation Inc Post Office Box 1541 Murray Hill Station New York, NY 101561541	13-3281516	501(c)(3)	132,500	0			operations			
Windmoor Foundation Inc 1121 North Notre Dame Avenue South Bend, IN 466171342	01-0788484	501(c)(3)	131,408	0			operations			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Warwick Foundation Inc5090 Warwick Terrace Pittsburgh,PA 152133836	25-1603855	501(c)(3)	128,400	0			operations		
Wingren Foundation Inc3610 Wingren Avenue Irving,TX 750624512	75-2405572	501(c)(3)	118,200	0			operations		
The Nassau Foundation Inc 34 Mercer Street Princeton, NJ 085406808	13-3534894	501(c)(3)	104,400	0			operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Riverside Study Center Inc 330 Riverside Drive New York, NY 100253421	13-3547523	501(c)(3)	98,400	0			operations		
Lincoln Green Foundation Inc 715 West Michigan Avenue Urbana,IL 618014841	36-4145777	501(c)(3)	63,300	0			operations		
Oakcrest School850 Balls Hill Road McLean,VA 221011546	52-1182755	501(c)(3)	29,836	0			\$20,836 for construction of facilities, and \$9,000 for operations		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Trimount Foundation Inc 56 Harrison Street Suite 401 New Rochelle, NY 108016560	04-6141144	501(c)(3)	28,500	0			operations			
Romana Bulletin Inc56 Harrison Street Suite 401 New Rochelle, NY 108016560	13-4013243	501(c)(3)	24,000	0			operations			
Montevista Foundation Inc 345 East Summit Avenue San Antonio, TX 782123028	74-2618410	501(c)(3)	20,000	0			operations			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Heights Inc d/b/a The Heights School 10400 Seven Locks Road Potomac,MD 208544085	52-1128002	501(c)(3)	20,000	0			operations			
International Family Development Foundation Inc in care of Coti and Sugrue 120 East 61st Street New York, NY 100658102	38-3887212	501(c)(3)	18,000	0			operations			
The Mathewson Foundation Inc224 Bowen Street Providence, RI 029061542	05-0450077	501(c)(3)	15,600	0			operations			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Trumbull Manor Inc50 Rica Vista Novato,CA 949472021	68-0235497	501(c)(3)	15,000	0			operations						
Church of the Good Shepherd 504 North Roxbury Drive Beverly Hills, CA 902103227	95-1647817	501(c)(3)	11,050	0			operations						
Youth Service International Inc5815 North Cicero Avenue Chicago, IL 606466609	36-3926031	501(c)(3)	11,000	0			operations						

DLN: 93493161008166

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization	
WOODLAWN FOUNDATION INC	

Employer identification number 13-3055729 Part I Types of Property (a) (b) (c) (d)

		Check If applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contril			nts
1	Art—Works of art			1110				
	Art—Historical treasures .							
_	Art—Fractional interests							
	Books and publications							
	Clothing and household			61 180	Appraisal			
,	goods	X		01,100	A ppraisar			
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	314	12,104,867	Fair value			
	Securities—Closely held stock .			, ,				
	Securities—Partnership, LLC, or trust interests	Х	2	3,464,505	Fair value			
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
14	structures							
16	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts			20.003	F			
	Other ► (ritable gift annuity)	X	1	39,093	Fair value			
	Other ►()	-						
	Other • ()							
	Other ()							
	Number of Forms 8283 received by th	0.000000000	lon during the tay year for	contributions				
29	for which the organization completed F				9			1
							Yes	No
30a	During the year, did the organization	receive by	contribution any property r	eported in Part I, lines 1	through 28, that 「			
	it must hold for at least three years fi							
	for exempt purposes for the entire ho			, and		30a		No
_						30a		No_
D	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc Does the organization hire or use thir					31		No
	contributions?		· · · · · · · ·			32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
For F	aperwork Reduction Act Notice, see the I	nstructions	for Form 990.	Cat No 51227J	Schedule M	(Form	990)	(2014)

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

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DLN: 93493161008166

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization woodlawn Foundation inc

Employer identification number

13-3055729

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	The Treasurer prepares Form 990 and e-mails a completed draft to all Board Members and officers for review and comment. The Treasurer makes corrections and adjustments based on comments and suggestions of Board Members and officers. Finally, he or she signs and files Form 990 electronically.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	Board Members and officers of the Woodlawn Foundation revisit the conflict of interest policy during the Board of Directors annual meeting in November Each Board Member and officer discloses whether or not he or she has a conflict of interest by means of a signed statement listing conflicts, if any

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	Any position whose reportable and non-reportable compensation exceed \$80,000 is subject to the Woodlaw'n Foundation's Executive Compensation Policy including, but not limited to, the President, Executive Director, financial officers, management officers, and key employees. When applicable, the Executive Committee shall make its recommendation annually to the Board regarding the reasonableness of those positions. It shall rely upon appropriate data as to comparability in making its determination. Furthermore, it shall place such data and other reasons for its recommendation in the Minutes. Only those who are free of conflicts of interest may be involved in the evaluation of Executive compensation.

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	The Foundation's governing documents, conflict of interest policy, and financial statements are available for review in person during regular business hours at the Treasurer's office located at 56 Harrison Street, Suite 401, New Rochelle, New York 10801-6560 No appointment is necessary. The Foundation will also send paper copies of these documents via U.S. Postal Service, or an electronic copy via e-mail, upon request and without charge. Furthermore, the Articles of Incorporation, By-Laws, and the three most current Form 990's are available for review on the internet at woodlawnfoundation org.

Return Reference	Explanation
Form 990, Part XI, Line 9	As a consequence of audits by an independent accounting firm of the consolidated financial records of the Woodlaw n Foundation and its related parties for fiscal years ending June 30, 2013 and June 30, 2014, we adjust Woodlaw n's net assets at the beginning of the year as follows (a) increase of \$50 for understatement of non-interest bearing cash accounts, (b) decrease of \$50,083 in net balance of pledges receivable due to payments made against pledges, (c) increase of \$275,875 to bring book value of investment in a limited partnership to fair value, (d) increase of \$1,224,384 to bring book value of investment in a closely-held corporation to fair value, (e) increase of \$43,128 in book value of program-related investments to remove prior year reserve for uncollectability of investment, (f) increase of \$322,139 in value of assets under trust, (g) increase of \$294,274 due to reduction of liability under trust agreements, and (h) decrease of \$111,652 due to augmentation of liability under charitable gift annuity agreements

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493161008166OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization WOODLAWN FOUNDATION INC

Employer identification number

13-3055729

It I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.										
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity					

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co	(g) on 512(b) controlled entity?	
						Yes	No	
(1) Rockside Foundation 56 Harrison Street Suite 401 New Rochelle, NY 108016560 31-1538837	supporting organization	ОН	501(c)(3)	11 Type I	N/A		No	
(2) Sauganash Foundation 56 Harrison Street Suite 401 New Rochelle, NY 108016560 31-1538838	supporting organization	ОН	501(c)(3)	11 Type I	N/A		No	

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	
									ı			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

s Other transfer of cash or property from related organization(s)

hedule	e R (Form 990) 2014		Pag	ge 3
Part \	Transactions With Related Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
L Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Re	eceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gr	ft, grant, or capital contribution to related organization(s)	1b		No
c Gif	ft, grant, or capital contribution from related organization(s)	1 c	Yes	
d Lo	ans or loan guarantees to or for related organization(s)	1d		No
e Lo	ans or loan guarantees by related organization(s)	1e		No
f Div	vidends from related organization(s)	1f		No
g Sa	ale of assets to related organization(s)	1 g		No
h Pu	urchase of assets from related organization(s)	1h		No
i Exc	change of assets with related organization(s)	1i		No
j Lea	ase of facilities, equipment, or other assets to related organization(s)	1j		No
k Le	rase of facilities, equipment, or other assets from related organization(s)	1k		No
I Per	rformance of services or membership or fundraising solicitations for related organization(s)	11		No
m Per	rformance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sha	arıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sh	naring of paid employees with related organization(s)	10		No
p Re	eimbursement paid to related organization(s) for expenses	1p		No
q Re	eimbursement paid by related organization(s) for expenses	1 q		No
r Ot	her transfer of cash or property to related organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	<u> </u>	•	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Rockside Foundation	С		\$7,648,028 at fair value of one hundred ninety-four separate publicly-traded securities, \$1,897,138 at fair value of interest in Linx Partners II, \$1,567,367 at fair value of interest in Linx Partners III, and \$461,000 for cash
(2) Sauganash Foundation	С	3,865,031	\$3,729,031 at fair value of ninety-seven separate publicly-traded securities, and \$136,000 of cash

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

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