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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public

For calendar year 2014 or tax year beginning SEI	P 1, 2014	, and ending	AUG 31, 201	Open to Public Inspection
	2011	, and onling	A Employer identification	
Name of foundation THE DAVID R. AND PATRICIA	D. ATKINSON			
FOUNDATION	D. HILKINGON		22-375368	5
Number and street (or P O box number if mail is not delivered to street	et address)	Room/suite	B Telephone number	
100 OVERLOOK CENTER, 2ND I				-2076
City or town, state or province, country, and ZIP or foreign			C If exemption application is	pending, check here
PRINCETON, NJ 08540	postaroud			
G Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organization	ns, check here
Final return	Amended return			
Address change	Name change		Foreign organizations in check here and attach or check here are check at a check here and attach or check here are check at a check here. Output Output Description of the check here are check at a check here are check at a check here. In the check here are check at a check here are check at a check here are check at a check here. In the check here are check at a check here. In the check here are check at a check here are check at a check here are check at a check here. In the check here are check at a check here are check at a check here are check at a check here. In the check here are check at a check at a check here. In the check here are check at a ch	neeting the 85% test, computation
	exempt private foundation	-	E If private foundation st	atus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(
	iting method X Cash	Accrual	F If the foundation is in a	60-month termination
	Other (specify)		under section 507(b)(
(from Part II, col. (c), line 16) \$\Bigsim \Bigsim \B	lumn (d) must be on cash b	oasis)		
Diagraph Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable purposes
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	2,000,000.		N/A	
1 Contributions, gifts, grants, etc , received 2 Check				
3 Interest on savings and temporary cash investments	80.	80		STATEMENT 1
4 Dividends and interest from securities	1,025,743.	1,025,743	•	STATEMENT 2
5a Gross rents				
Net rental income or (loss)	1 000 050		, , , , , , , , , , , , , , , , , , , ,	
6a Net gain or (loss) from sale of assets not on line 10	1,206,356.			
b Gross sales price for all 8,812,451.		1,206,356	ļ	
b Gross sales price for all 8,812,451. 7 Capital gain net income (from Part IV, line 2)		1,200,330	•	
8 Net short-term capital gain		,, 44,,,,	~~	
9 Income modifications Gross sales less returns				
1 U2 and allowances				
D Less Cost of goods sold				
c Gross profit or (loss)			-	
11 Other income 12 Total Add lines 1 through 11	4,232,179.	2,232,179	•	
13 Compensation of officers, directors, trustees, etc	30,000.	17,500		0.
14 Other employee salaries and wages	<u> </u>	<u> </u>		
15 Pension plans, employee benefits				
b Accounting teesOSTMT 3	2,205.	2,205	•	0.
integrated 1 1 2016			<u> </u>	
Interest 1 1 2016 G				
E R Taxes 1 FTMT 4	63,008.	15,023	•	0.
19 Depreciation and depleton				
E 20 Occupanty Cly,				
21 Travel, conferences, and meetings				
22 Printing and publications	2 005	2 005		0.
23 Other expenses STMT 5	3,005.	3,005	•	-
24 Total operating and administrative	00 210	27 722		0.
b Recounting fees b Recounting fees c Other professional fees literated 1 1 2016 Taxes 19 Depreciation, and depleton 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23	98,218. 1,763,500.	37,733	•	1,763,500
25 Contributions, girts, grants paid	1,703,300.			1,,00,500
26 Total expenses and disbursements	1,861,718.	37,733		1,763,500
Add lines 24 and 25 27 Subtract line 26 from line 12		0.,,5	-	
Subtract line 20 from line 12 Excess of revenue over expenses and disbursements	2,370,461.	,		
b Net investment income (if negative, enter -0-)		2,194,446	•	
c Adjusted net income (it negative, enter -0-)			N/A	
422504				5 OOO DE (004

FOUNDATION

22-3753685

Page 2

		Attached schedules and amounts in the description	Beginning of year	End of	
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	7,697,045.	3,598,354.	3,598,354.
ļ		Accounts receivable			
		Less allowance for doubtful accounts		,	
	4	Piedges receivable ►			
		Less allowance for doubtful accounts			
1	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	-	disqualified persons			·····
	7	Other notes and loans receivable			
	-	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U S and state government obligations			
		Investments - corporate stock STMT 6	21,744,669.	28,193,790.	32,024,307.
	C	Investments - corporate bonds			
	11	ir vestments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		W.,	· ——————
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			25 600 661
		instructions. Also, see page 1, item I)	29,441,714.	31,792,144.	35,622,661.
	17	Accounts payable and accrued expenses			•
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iak	21	Mortgages and other notes payable			
_	22	Other liabilities (describe		<u></u>	
	00	Total liabilities (add lines 17 through 22)	0.	0.	
	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
anc	24 25	Temporarily restricted			
3ak	26	Permanently restricted			
덜	-	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.		In	
٥	27	Capital stock, trust principal, or current funds	3,569,538.	3,569,538.	
ets	28	Paid-in or capital surplus, or land, bidg, and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	25,872,176.	28,222,606.]
Net Assets or Fund Balance	30	Total net assets or fund balances	29,441,714.	31,792,144.	
_					
	31	Total liabilities and net assets/fund balances	29,441,714.	31,792,144.	
ΓE)ari	Analysis of Changes in Net Assets or Fund E	Balances		
_					T
1		at net assets or fund balances at beginning of year - Part II, column (a), line	9 30	1	29,441,714.
	•	ist agree with end-of-year figure reported on prior year's return)		2	2,370,461.
		er amount from Part I, line 27a		$\frac{2}{3}$	
3		er increases not included in line 2 (itemize)		4	01 010 175
4		l lines 1, 2, and 3 reases not included in line 2 (itemize) ► RECLAIMABLE FC	REIGN TAX	5	0.0.001
S R		al net assets or fund balances at end of year (line 4 minus line 5) - Part II,		6	
<u> </u>	100	and account of the organization of one of Jack fillion a military and of further			Form 990-PF (2014)

Form 990-PF (2014) FOUN	DATION _						22	<u>2–375</u>	<u> 3685</u>	Page 3
Part IV Capital Gains a	nd Losses for Tax on	Investment	Income							
	be the kind(s) of property sold (e ehouse, or common stock, 200 s			P	How ac - Purc - Dona	nase	c) Date ac (mo , da		(d) Dat (mo , d	
1a SEE SCHEDULE AT	a SEE SCHEDULE ATTACHED P			P						
b										
C										
d				<u> </u>						
e				<u>L</u> ,						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					ın or (loss) (f) mınus (
a 8,812,451.			7,606,09	5.					1,206	,356.
b										·
С										
d										
e										
Complete only for assets showing	gain in column (h) and owned by	y the foundation	on 12/31/69			(1)	Gains (Co	ol (h) gain	minus	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i)				(k), but no	ot less than from col (l	n - 0-) or	
a		- 	***						1,206	,356.
b		+							<u>, v</u>	
C	 	 	· · · · · · · · · · · · · · · · · · ·			-		-		
d										
е		- -								
	()6			`						
2 Capital gain net income or (net cap	ital loss) If (loss), enter-	er in Part I, line î 0- în Part I, line	7 7	}	2_				1,206	,356.
3 Net short-term capital gain or (loss		and (6)		٦						
If gain, also enter in Part I, line 8, c	olumn (c)			 				NT / 70		
If (loss), enter -0- in Part I, line 8	-day Castian 4040(a) 4-	- D-dusad	Tow on Not		3			N/A		
Part V Qualification Ur						Herit IIIC	JIIIE			
(For optional use by domestic private t	foundations subject to the section	1 4940(a) tax on	net investment in	come	e)					
If section 4940(d)(2) applies, leave thi	s part blank									
Was the foundation liable for the section			•	riod?					L Yes	X No
If "Yes," the foundation does not qualif										
1 Enter the appropriate amount in ea	ich column for each year, see the	instructions bet	ore making any e				-1		/d\	
(a) Base period years	(b)	laterbutions	Not volve of pa	(c)		uaa aaaata		Distrit	(d) oution ratio	
Calendar year (or tax year beginnin	g in) Adjusted qualifying d	_	Net value of no				(0) (0)		(c))	
2013		24,642.				0,372				47255
2012		98,373.				7,292				46679
2011		74,980.				7,662				45634
2010		94,249.				6,201				45506
2009	9	84,117.		22	,54	8,911	•			43644
							1		_	
2 Total of line 1, column (d)							2		2	28718
3 Average distribution ratio for the 5	-year base period - divide the tota	al on line 2 by 5,	or by the number	r of ye	ears				_	
the foundation has been in existen	ce if less than 5 years						3		.0	45744
4 Enter the net value of noncharitable	e-use assets for 2014 from Part)	K, line 5					4	3	7,004	,748
5 Multiply line 4 by line 3							5		1,692	,745
6 Enter 1% of net investment income	e (1% of Part I, line 27b)						6		21	,944.
	•									
7 Add lines 5 and 6							7		1,714	,689
										-
8 Enter qualifying distributions from	Part XII, line 4						8		1,763	500.
If line 8 is equal to or greater than	line 7, check the box in Part VI, li	ne 1b, and comp	olete that part usi	ng a 1	l% tax	rate				

THE DAVID R. AND PATRICIA D. ATKINSON 22-3753685 Page 4 FOUNDATION Form 990-PF (2014) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1 (attach copy of letter if necessary-see instructions) Date of ruling or determination letter 21,944. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 4 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments 38,000. a 2014 estimated tax payments and 2013 overpayment credited to 2014 6b b Exempt foreign organizations - tax withheld at source 60 c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 38,000. 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 16,056. 10 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 16,056. Refunded ▶ 11 Enter the amount of line 10 to be Credited to 2015 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a any political campaign? Х 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities Х 10 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation 🕨 💲 ____ 0 • (2) On foundation managers > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers 🕨 🕏 Х 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? Х 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law Х 6 remain in the governing instrument? Х 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) Х 8b of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

Form 990-PF (2014)

b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2014)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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X

Yes X No

Yes X No

N/A

N/A

2b

3b

4a

before 2014?

during the year?

If "Yes," list the years

statement - see instructions)

Page 6

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?					
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly,					
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described i	n Regulations	.		
section 53 4945 or in a current notice regarding disaster assistance (see inst	ructions)?		N/A t	ib	
Organizations relying on a current notice regarding disaster assistance check	here		▶ []		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —			
expenditure responsibility for the grant?	N	「/A	s L No		
If "Yes," attach the statement required by Regulations section 53 49	45-5(d).		Į.		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	ib X	
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attri				7b	
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highly	<i>'</i>		
Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and thei	roompossation				
List all officers, directors, trustees, foundation managers and ther	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnanca	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other	
DAVID R. ATKINSON	TRUSTEE	enter -0-)	compensation	allowances	
100 OVERLOOK CENTER, 2ND FL.	TROBIED				
PRINCETON, NJ 08540	1.00	0.	0.	0.	
PATRICIA D. ATKINSON	TRUSTEE				
100 OVERLOOK CENTER, 2ND FL.					
PRINCETON, NJ 08540	1.00	0.	0.	0.	
STEVEN R. ATKINSON	TRUSTEE			<u>= -</u>	
100 OVERLOOK CENTER, 2ND FL.	7	i i			
PRINCETON, NJ 08540		1			
	3.00	20,000.	0.	0 -	
	3.00 TRUSTEE	20,000.	0.	0.	
PAUL D. ATKINSON	3.00 TRUSTEE	20,000.	0.	0.	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL.	TRUSTEE				
PAUL D. ATKINSON	TRUSTEE 1.00	10,000.	0.	0.	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000.	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in	TRUSTEE 1.00 cluded on line 1). If none, (b) Title, and average	10,000. enter "NONE."	O .	O .	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
PAUL D. ATKINSON 100 OVERLOOK CENTER, 2ND FL. PRINCETON, NJ 08540 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	TRUSTEE 1.00 Included on line 1). If none, (b) Title, and average hours per week	10,000. enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	

Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	, go y
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	·····	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the	Expenses
1 N/A		
2		
3		
4	·	
•	1	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		Amount
		· · · · · · · · · · · · · · · · · · ·
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		0.
Total, Add miles 1 tillough o		Form 990-PF (2014

	THE DAVID R. AND PATRICIA D. ATKINSON	3	2752605	, Dans 0
	n 990-PF (2014) FOUNDATION		2-3753685	Page 8
	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	ns, see Instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes			
a	Average monthly fair market value of securities	1a	34,459 3,108	<u>,407.</u>
b	Average of monthly cash balances	1b	3,108	<u>,865.</u>
C	Fair market value of all other assets	10		
d	Total (add lines 1a, b, and c)	1d	37,568	<u>,272.</u>
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0 •			
2	Acquisition indebtedness applicable to line 1 assets	2_		0.
3	Subtract line 2 from line 1d	3	37,568	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	563	,524.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	37,004	748.
6	Minimum investment return Enter 5% of line 5	6	1,850	,237.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	d certa	in	
$\overline{}$	foreign organizations check here and do not complete this part)			
1	Minimum investment return from Part X, line 6	1	1,850	,237.
2a	Tax on investment income for 2014 from Part VI, line 5 21, 944.			·
b	Income tax for 2014 (This does not include the tax from Part VI) 2b			
	Add lines 2a and 2b	2c	21	,944.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	21 1,828	,293.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	1,828	,293.
6	Deduction from distributable amount (see instructions)	6		0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,828	,293.
P	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes			
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,763	,500.
b	Program-related investments - total from Part IX-B	1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,763	,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income Enter 1% of Part I, line 27b	5	21 1,741	,944.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,741	,556.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifie	s for the section	
	4940(a) reduction of tay in those years			

Form **990-PF** (2014)

Page 9

FOUNDATION

22-3753685

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	· .			
line 7				1,828,293.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			1,332,729.	
b Total for prior years		<u></u>		
		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 \triangleright \$ 1,763,500.				
a Applied to 2013, but not more than line 2a			1,332,729.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				430,771.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				······································
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				······································
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract		***************************************		
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				1,397,522.
7 Amounts treated as distributions out of		***	., .	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			,
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.	.,		
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581				Form QQN_DE (2014)

Form 990-PF (2014) FOUNDAT	ION				753685 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶ L		
b Check box to indicate whether the found		•	ın section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year]	Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					1
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,		····			
line 4 for each year listed		}			
d Amounts included in line 2c not			 	 	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c			1		
3 Complete 3a, b, or c for the			 	· 	
alternative test relied upon	t I				
 a "Assets" alternative test - enter (1) Value of all assets 					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on	ļ		}		İ
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization	1	}		1	
(4) Gross investment income			<u> </u>	 	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t				•	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	=	than 2% of the total con	tributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed r	nore than \$5,000) (See s	section 507(d)(2))	•		•
SEE STATEMENT 7					
b List any managers of the foundation wh			(or an equally large port	tion of the ownership of a	partnership or
other entity) of which the foundation have ${\tt NONE}$	s a 10% of greater intere	51			
	ion Cross City I con	Cabalamakia ata D			
2 Information Regarding Contribut Check here ► X if the foundation of				not accept uncollected rec	Juacto for fundo. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	`				
ם יווס וומוווס, מסטופסס, מווט נכופטווטוופ ווטוו	ioor or e mail address Of	nie heison in minni ahh	Modulotto Stroute de Buut		
b The form in which applications should	be submitted and informa	ition and materials they s	should include		
c Any submission deadlines					
d Any restrictions or limitations on award	s such as hy decorachio	al areas charitable fields	kinds of institutions of	r other factors	
a Any restrictions of inflications on award	s, such as by geographic	arareas, chantable helds	, amas or montutions, 0	. Caron ruotora	

FOUNDATION

3 Grants and Contributions Paid During		Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
				1
FEE SCHEDULE ATTACHED	NONE	501(C)(3)	GENERAL	
				1,763,500
			-	
				:
		-		<u> </u>
Total	·	1		1,763,500
b Approved for future payment				
NOVE				
NONE				
Total			▶ 3b	
	 			Form 990-PF (20

Form 990-PF (2014) FOUNDATION				22-3	753685 Page 12
Part XVI-A Analysis of Income-Produ	icing Activiti	es			
Enter gross amounts unless otherwise indicated	Unrelated business income (a) (b)		Excluded (C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a	9000		1		
b					
c	ſ				
d					
e	1 1				
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash] , ,	00	
investments			14	80.	
4 Dividends and interest from securities	\\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-		14	1,025,743.	, tan ,
5 Net rental income or (loss) from real estate	-				
a Debt-financed property			+		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal property			}		
7 Other investment income		· · · · · · · · · · · · · · · · · · ·	+		
8 Gain or (loss) from sales of assets other					
than inventory			18	1,206,356.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue		-			
a					
b			1		_ _
C	·				
d	-		 		
e	.		+ +	2 222 170	
12 Subtotal Add columns (b), (d), and (e)		0	•	2,232,179.	0. 2,232,179.
13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13	
Part XVI-B Relationship of Activities	to the Accor	nolishment of F	xempt	Purnoses	
Line No Explain below how each activity for which inc					lichmont of
the foundation's exempt purposes (other than				ed importantly to the accomp	misimient of
		 			
	-	······································			
					
	<u> </u>				
					
				· <u></u>	

423621 11-24-14

Form 00		DAVID R. A DATION	MD FAIR	CIA D. AIK	1110011	22-	3753685	Dogg 12
Part			oforo To one	d Transactions a	nd Polotions			Page 13
Fart.	Exempt Organ		siers to and	Transactions a	ind helations	unbs with ivoi	iciiaiitabie	
	the organization directly or ind Code (other than section 501(d	irectly engage in any	=	-		tion 501(c) of	Y	es No
	nsfers from the reporting found		-	• .	120(10113			
	Cash	Jation to a nonchanta	ible exempt organi	ization of			1a(1)	Х
	Other assets						1a(2)	X
	er transactions						10(2)	
		able averant averances	t.an				1b(1)	х
. ,	Sales of assets to a noncharit							$\frac{1}{X}$
	Purchases of assets from a no	·	organization				1b(2)	X
(3)							1b(3)	$\frac{x}{x}$
(4)	•	3					1b(4)	X
	Loans or loan guarantees						1b(5)	$\frac{X}{X}$
	Performance of services or m		-				1b(6)	$\frac{\lambda}{X}$
	aring of facilities, equipment, ma						<u> 1c </u>	
	ne answer to any of the above is		=					'•
	services given by the reporting			ess than fair market vaiu	ie in any transaction	n or snaring arrange	ment, snow in	
	umn (d) the value of the goods,			empt organization	/d\ o			
(a) Line n	o (b) Amount involved	(c) Name of		empt organization	(u) Description	n of transfers, transactio	ns, and snamg arrang	jements
		 	N/A					
		 						
								
		 			 			
		 						
	 		 -				-	
	 	 						
		 					-	
	 	 			- 			
		 						
		 		-				
		 						
							·····	
		 			 			
	 	 		<u> </u>				
								
	he foundation directly or indirect				zations described		<u></u>	₩
	section 501(c) of the Code (other)(3)) or in section	52/7			L Yes	X No
0 11	Yes," complete the following scl (a) Name of or		10) Type of organization		(c) Description of re	lationship	
	N/A	941112411011		17 Type of organization		(b) besomption of the	ilationship	
	11/11							
						·		
								
						-		 -
	Under penalties of penjury, I declare	e that I have examined the	is return, including ad	companying schedules and	statements, and to the	best of my knowledge		
Sign	and belief, it is true, correct, and co						May the IRS dis- return with the p	
Here	1 5/ R	///		04 JAN 201	5ECA	=7427	shown below (se	<u> </u>
	Signature of officer or truste	e /		Date	Title	- 171-1	_ LA Tes	∟ No
	Print/Type preparer's r	<u> </u>	Preparer's signa		Date	Check If	PTIN	
	WALTER E.			. ^		self- employed	, - · 	
Paid	JR.	101110117	W,OH	. Kumusl	191415		P000380	13
Prep		EIG, RAMIC	K & ASSO	OCTATES	1 1 1 1	Firm's EIN ▶ 2	3-199428	
Use	1	, imit	a 1300(I IIII S LIN F Z	- 200320	-

Phone no (215)333-8246

Firm's address ▶ 2320 FAUNCE ST.

PHILADELPHIA, PA 19152-4112

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

Department of the Treasury Internal Revenue Service

Name of the organization

FOUNDATION

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.irs.gov/form990

THE DAVID R. AND PATRICIA D. ATKINSON

OMB No 1545-0047

Employer identification number

22-3753685

Organization type (check one)					
Filers of	:	Section:			
Form 990	O or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 990)-PF	X 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
Note. Or General	nly a section 501(c)(Ruie For an organization property) from any	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions			
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.			
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.			
	year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year			
but it mi	ıst answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization
THE DAVID R. AND PATRICIA D. ATKINSON FOUNDATION

Employer identification number

22-3753685

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID R. ATKINSON 2111 NORTH CRESCENT BLVD. YARDLEY, PA 19067	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE DAVID R. AND PATRICIA D. ATKINSON FOUNDATION

22-3753685

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization

Employer identification number

THE	DAVID	R.	AND	PATRICIA	D.	ATKINSON
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22-3753685

Part III	Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious,	outions to organizations described lumns (a) through (e) and the follo	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations.		
	Use duplicate copies of Part III if additional	chantable, etc., contributions of \$1,000 of	riess for the year (cheriums thio orice)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
]					
-					
-		(e) Transfer of gif	4		
		(e) Transier of gir	·		
	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		
-					
-					
<u> </u>					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Рапп					
:					
] -					
		(e) Transfer of gif			
-	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		
-					
-					
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-					
		(e) Transfer of gi	ft		
	T	. 71D . 4			
-	Transferee's name, address, and	3 217 + 4	Relationship of transferor to transferee		
(a) No. from					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
·					
		(e) Transfer of gi	ft		
	Transferee's name, address, an	d 71P ± 4	Relationship of transferor to transferee		
<u> </u>	rionalcros a name, address, all	<u> </u>			

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE		(A) REVEI PER BO	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK OF AMERICA			80.	80.	
TOTAL TO PART I, LI	NE 3		80.	80.	
FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOK		
GOLDMAN SACHS - NOM	1,025,743.	, (0. 1,025,74	3. 1,025,74	13.
TO PART I, LINE 4	1,025,743.	, (1,025,74	3. 1,025,74	3.
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING	_	2,205.	2,205	•	0.
TO FORM 990-PF, PG	1, LN 16B	2,205.	2,205		0.
FORM 990-PF		TAX	ES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FEDERAL 990-PF EXCI		47,985. 15,023.			0.
TO FORM 990-PF, PG	1, LN 18	63,008.	15,023	3.	0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
OFFICE EXPENSE CUSTODY FEE	5. 3,000.	5. 3,000.			0.
TO FORM 990-PF, PG 1, LN 23	3,005.	3,005.			0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION		ВС	OOK VALUE	FAIR MARKET VALUE	ר
SECURITIES - SEE SCHEDULE ATT	TACHED	2	28,193,790.	32,024,30	7.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B	2	28,193,790.	32,024,30	7.

NAME OF MANAGER

DAVID R. ATKINSON PATRICIA D. ATKINSON

ATKINSON FOUNDATION Holdings

Period Ended August 31, 2015

PUBLIC EQUITY

	Quentity	Market Price	Market Value / Accrued Income	Unit Cost	Cost Basis
US EQUITY					
US STOCKS					
COCA-COLA COMPANY (THE) CMN (KO)	82,000 00	39 3200	3,224,240 00	27 9553	2,292,335 80
COLGATE-PALMOLIVE CO CMN (CL)	40,000 00	62 8100	2,512,400 00	37 7504	1,510,017 00
CSX CORPORATION CMN (CSX)	45,000 00	27 3800	1,232,100 00	28 3133	1,274,098 50
			8,100 00		
GENERAL ELECTRIC CO CMN (GE)	00 000'59	24 8200	1,613,300 00	19 6821	1,279,333 50
J M SMUCKER CO CMN (SJM)	100 00	117 7200	11,772 00		751,55
			00 /9		•
MCCORMICK & CO NON VTG SHRS CMN (MKC)	25,000 00	79 2800	1,982,000 00	39 9331	998,327 50
NEXTERA ENERGY, INC CMN (NEE)	25,000 00	98 4100	2,460,250 00	107 1456	2,678,640 00
			19,250 00		•
, NRG YIELD, INC CMN CLASS C (NYLD)	35,000 00	16 0600	562,100 00	19 5957	685,849 50
			7,350 00		1
PATTERN ENERGY GROUP INC CMN (PEGI)	30,000 00	22 6700	680,100 00	24 5776	737,328 00
PROCTER & GAMBLE COMPANY (THE) CMN (PG)	15,000 00	70 6700	1,060,050 00	25 5087	382,630 44
SYSCO CORPORATION CMIN (SYY)	75,000 00	39 8700	2,990,250 00	37 6199	2,821,490 00
TWITTER, INC CMN (TWTR)	250 00	27 7900	6,947 50	26 0000	6,500 00
UNITED PARCEL SERVICE, INC. CLASS B COMMON STOCK	28,000 00	97 6500	2,734,200 00	73 1764	2,048,937 80
(UPS)			20,440 00		
UNITED TECHNOLOGIES CORP CMN (UTX)	20,000 00	91 6100	1,832,200 00	105 3361	2,106,722 00
			12,800 00		
VERIZON COMMUNICATIONS INC CMN (VZ)	55,000 00	46 0100	2,530,550 00	50 1185	2,756,517 50

Trus represents a bank deposit of an affiliated bank reflected here for your convenience and is not cash held in your brokerage or Lustody account. Please see the enclosed Bank Statement page(s) for specific Not a Deposit Not FDIC insured May Lose Value (Excluding Goldman Sachs Bank Deposit Account, Term Deposits and Certificates of Depusit)

Brokerage and securities services provided by Goldman, Sachis & Co. Bank Deposit Account. Certificates of Deposit and Term Deposits offered by Goldman, Sachis & Bank USA. Member FDIC. Portfolio No. XXX-XX573-1

Goldman Sachs

ATKINSON FOUNDATION

Holdings (Continued)

Period Ended August 31, 2015

US EQUITY Market Volue / Unit Cost Basis Accured Income Unit Cost Basis Cost Basis US EQUITY US STOCKS VW GRAINGER INCORPORATED CMIN (GWW) 6,300 00 223 4400 1,407,872 00 253 7102 1,588,374 26 WW GRAINGER INCORPORATED CMIN (GWW) 6,300 00 223 4400 1,407,872 00 23,177,101 80 TOTAL US STOCKS 7,517 00 7,517 00 23,177,101 80 US REAL ESTATE SECURITIES (PUBLIC) 25,000 00 37,060 0 40 1594 1,003,984 08 HGT-INC CAIN (HCP) 16,000 00 63 3500 1,013,600 00 62 826 1,003,984 08 TOTAL US FALL ESTATE SECURITIES (PUBLIC) 16,000 00 63 3500 1,013,600 00 62 826 1,003,984 08 TOTAL US FALL ESTATE SECURITIES (PUBLIC) 16,000 00 63 3500 1,013,600 00 2,009,209 68 TOTAL US EQUITY 1,901,000 00 73 7290 3,244,076 00 2,5,18 7,045,02 NESTIE SA SPONSORED ADR (REP 1/20 CHF 10 REGD SHS) 13,2024,307 50 25,193,789,789 NESTIE SA POUR CAIR TO REGD SHS) 13,2024,307 50 25,193,789,789	PUBLIC EQUITY (Continued)		,			'
R INCORPORATED CMN (GWW) R INCORPORATED CMN		Quantily	Market Price	Market Value / Accrued Income	Unit Cost	Cost Basis
R INCORPORATED CMM (GWVV) R INCORPORATED CMM (GWVV) R INCORPORATED CMM (GWVV) ECURITIES (PUBLIC) TATE SECURITIES (PUBLIC) TATE STROOT OF	US EQUITY					
FINCORPORATED CMN (GWW) 6,300 00 223 4400 1,407,672 00 253 7102 7,371 00 7	US STOCKS					
ECURITIES (PUBLIC) ECURITIES (PUBLIC) EIT INC (DEL) CMN (HCN) TATE SECURITIES (PUBLIC) TATE STATE STATE SECURITIES (PUBLIC) TATE STATE STATE SECURITIES (PUBLIC) TATE STATE STATE STATE STATE STATE STATE STAT	W W GRAINGER INCORPORATED CMN (GWW)	6,300 00	223 4400	1,407,672 00 7,371 00	253 7102	1,598,374 26
(HCN)	TOTAL US STOCKS			26,840,131 50 75,378 00		23,177,101 80
(HCN) 15,000 00 37 0600 926,500 00 40 1594 (HCN) 16,000 00 63 3500 1,013,600 00 62 8266 (UBLIC) 28,780,231.50 75,378.00 73,729 3,244,076 00 68 3347 75,378.00 75,378.00	IIS BEAL ESTATE SECURITIES (PUBLIC)					
ATE SECURITIES (PUBLIC) ATE SECURITIES (PUBLIC) ATE SECURITIES (PUBLIC) ATE SECURITIES (PUBLIC) 1,940,100 00 78,780,231.50 75,378.00 NSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73,7240,076 00 68,3347 UITY 75,378.00	יייי איזי לואר ליון איזיי לואר איזיי לואר איזיי	25,000 00	37 0600	926,500 00	40 1594	1,003,984 08
ATE SECURITIES (PUBLIC) ATE SECURITIES (PUBLIC) 28,780,231.50 75,378.00 NSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73,7290 32,024,307.50 UITY 75,378.00	HUP, INC. CIVILA (TICK)	16.000 00	63 3500	1,013,600 00	62 8266	1,005,225 60
ATE SECONTILLS IT OBLISTS 75,378.00 75,378.00 NSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73,7290 32,024,307.50 UITY 75,378.00	HEALTH CARE HELL INC (DEL) CIVIN (FICIN)			1,940,100 00		2,009,209 68
75,378.00 NSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73,7290 3,244,076 00 68 3347 32,024,307.50 UITY 75,378.00	TOTAL US REAL ESTATE SECONTILES IT ODERS!			28,780,231.50		25,187,063,03
ONSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73 7290 3,244,076 00 68 3347 32,024,307 50 001TY 75,378.00	TOTAL US EUDITY			75,378.00		
32,024,076 00 68 3347 (REP 1/20 CHF 10 REGD SHS) 44,000 00 73 7290 3,244,076 00 68 3347 32,024,307.50 autry 75,378.00	איטא זוכ בטווודל					
ONSORED ADR (REP 1/20 CHF 10 REGD SHS) 44,000 00 73,7290 3,244,076 00 68 3347 32,014,016 00 68 32,014,016 00	MON-03 EROM					
32,024,307.50 75,378.00	NON-US STOCKS NESTLE SA SPONSORED ADR (REP 1/20 CHF 10 REGD SHS)	44,000 00	73 7290	3,244,076 00	68 3347	3,006,726 80
75,378.00	(NSRGY)			32,024,307.50		23,193,789.83
	TOTAL PUBLIC EQUITY			75,378.00		

6 Ordinal Cost is price paid by purchaser adjusted for annual original issue discount inclusions and/or return of capital adjustments. If applicable Adjusted Cost reflects adjustments to Original Cost for market discount arcretion and/or premium of capital date contributions minus inception to date distributions.

Portfolio No XXX-XX573-1

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Organization	Street	City	State	Zip	Contribution Amount
ALPHA House	701 Fifth Avenue North	St Petersburg	FL 33	33701	2,000
Alzheimer's Association	225 N Michigan Avenue - Floor 17	Chicago	IL 60	60601-7633	25,000
Anchor House	482 Centre Street	Trenton	N 08	08611	15,000
APAW	P O Box 162	Princeton Jct	N 08	08550	6,000
Bard Prison Initiative	P O Box 5000	Annandale-on-Huc	N ⊥	12504-5000	35,000
Boys and Girls Club of Trenton	212 Centre Street	Trenton	80 TN	08611	8,000
Bucks County Children's Museum	500 Union Square Drive	New Hope	PA 18	18938	25,000
Canine Partners for Life	P O Box 170	Cochranville	PA 19	19330-0170	2,000
Cape May City Volunteer Fire Dept	P O Box 375	Cape May	80 TN	08204	2,000
CARE	114 Forrest Avenue - Room 106	Narbeth	PA 19	19072	250,000
The Center for Discovery	P O Box 840	Harris	NY 12	12742	15,000
College Possible	540 Fairview Ave North - Suite 304	St Paul	MN 55	55104	30,000
Cornell University - AFAS	M101 McGraw Hall	Ithaca	NY 14	14853	20,000
Cornell University - ACSF PhD Program	200 Rice Hall	Ithaca	NY 14	14853	170,000
Doctors Without Borders	333 Seventh Avenue - Floor 2	New York	NY 10	10001-5004	170,000
Dogs for the Deaf	10175 Wheeler Road	Central Point	OR 97	97502	6,000
The Wild Foundation	717 Poplar Ave	Boulder	CO 80	80304	25,000
Elixir Fund	P.O Box 326	Princeton Jct	80 N	08550	15,000
Environmental Defense Fund	257 Park Avenue South	New York	NY 10	10010	175,000
Free Library Fdn of Philadelphia (George S Pepper Society)	1901 Vine Street Suite 111	Philadelphia	PA 19	19103-1189	2,000
Free Library Fdn of Philadelphia (LEAP After School Program)	1902 Vine Street Suite 111	Philadelphia	PA 19	19103-1190	25,000
Fresh Air Fund	633 Third Avenue	New York	NY 10	10017	5,000
Friends of Princeton Open Space	P O Box 374	Princeton	N 08	08542	20,000
Habitat for Humanity	601 N Clinton Avenue	Trenton	Ī	08638-3446	10,000
Herfer Project International	1 World Avenue	Little Rock	AR 72	72202	15,000
Homefront	1880 Princeton Avenue	Lawrenceville	N)	08648	155,000
Isles	10 Wood Street	Trenton	80 TN	08618	12,000
Learning Ally Inc	20 Roszel Road	Princeton	N 08	08540	2,000
Lymphoma Resarch Foundation	115 Broadway - Suite 1301	New York	NY 10	10006	8,000
Madison Valley Hospital Foundation	P O Box 993	Enis	MT 59	59729	3,000
Make-A-Wish Foundation	1 Valley Square - Suite 100	Blue Bell	PA 19	19422	000'9
Marine Mammal Stranding Center	P O Box 773	Brigantine		08203	4,000
McCarter Theater	91 University Place	Princeton	80 Tu	08540	7,500
Meals on Wheels c/o American Red Cross	707 Alexander Road - Suite 101	Princeton	N 08	08540	20,000
Memorial Sloan Kettering Cancer Center	633 Third Avenue - 28th Floor	New York	NY 10	10017	40,000
Wildlife Center Friends	P.O Box 161	Titusville	N 08	08560	5,000
Mid Atlantic Center for the Arts (MAC)	P O Box 340	Cape May	N 08	08204-0340	2,000
The Nature Conservancy	15 E Ridge Pike - Suite 100	Conshohocken	PA 19	19428	30,000

Organization	Street	City	State	Zip	Amount
New Fevort United Methodist Church Trustees' Fund	38 North Main Street	New Egypt	Z	08533	000'9
New Hope Arts Inc	2 Stockton Avenue	New Hope	ΡA	18938	2,000
The Free Library of New Hone and Solebury	93 West Ferry Street	New Hope	ΡΑ	18938-1332	20,000
New Hone Solebury School District	180 West Bridge Street	New Hope	PA	18938	000'09
New Torsey Audithon Society	9 Hardscrabble Road	Bernardsville	Z	07924	2,000
The New York Times Needlest	4 Chase Metrotech Center - 7th Floor East, Loc! Brooklyn	cł Brooklyn	×	11245	25,000
Princeton HealthCare System Foundation	3626 U S Route One	Princeton	Z	08540	20,000
Project Freedom at Hamilton	223 Hutchinson Road	Robbinsville	Z	08691	2,000
Rocky Mountain Institute	2317 Snowmass Creek Road	Snowmass	8	81654-9199	12,000
The Salvation Army	615 Slaters Lane - P O Box 269	Alexandria	Α>	22314	40,000
The Coping Eve	P O Box 375	Morristown	Z	07963-0375	10,000
C+ Mary Medical Center Foundation	One Summit Square -Suite 300	Langhorne	ΡA	19047	20,000
CTRIVE	240 East 123rd Street - 3rd Floor	New York	ž	10035-2038	15,000
Trenton Area Soun Kitchen	72 1/2 Escher Street	Trenton	Z	08605	25,000
Visitation Home	P.O. Box 11242	Hamilton	2	08620	10,000
WHAY TV 12	150 North Sixth Street	Philadelphia	ΡA	19106	30,000
World Wildlife Find	1250 24th Street N W	Washington	20	20037-1193	10,000
Vardlav-Makefield FMS	1140 Edgewood Road	Yardley	ΡA	19067	4,000
Yardley-Makefield Fire	P O Box 221	Yardley	PA	19067-8221	2,000

THE DAVID R. AND PATRICIA D. ATKINSON FOUNDATION

GOLDMAN SACHS

CAPITAL GAINS (LOSS) 09/01/14 - 8/31/15

		Date	Date	Sales	Cost	
Security	Shares	Acquired	Sold	Price	Basis	Gain or Loss
GE	65,000	/.12/19/2011(%-	5/13/2015	1,756,690,11	1,097,596.50 a	659,093.61
TFM	10,000	12/21/2012	5/18/2015	342,760.68	506,191.00	(163,430.32)
Some & any other designations and property						
JWN (1)	28,000	7//16/2013	5/24/2015	2,175,431.14.	1763,329.20	412,101.94
PNC	18,000	10/21/2014	1/9/2015	1,564,921.39	1,417,602.60	147,318.79
STOTE STATE OF THE BEST	erian energe a accesso					
GSK*	30,000	5/6/2012	10/21/2014	1,269,865.90	1,361,250:00	(91;384:10).
PG	22,000		7/31/2015	1,702,781.84		
	6,000	12/18/2006			383,344.80	
	8,000	10/19/2007			566,000 00	
	8,000	12/15/2010	_		510,780.80	
			_	1,702,781.84	1,460,125.60	242,656.24
			_	_ 		
		To	tals	8,812,451.06	7,606,094.90	1,206,356.16