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Department of the Treasury

Internal Revenue Service

#### DLN: 93491040007086

OMB No 1545-0052

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

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

Open to Public

For	cale	ndar year 2014, or tax year beginning 10-	01-2014	, aı	nd ending 0	9-30-2015	
		Indation			A Employer id	entification numbe	er .
UE	EKMAYI	ER FOUNDATION INC			04-2711822		
Num	ber and	I street (or P O box number if mail is not delivered to street address	i) Room/suite		<b>B</b> Telephone nu	mber (see instruction	ıs)
		MAYER 15 GREY STONE PATH			(781) 234-2484	ļ	
Cıty	or town	n, state or province, country, and ZIP or foreign postal code			C If evenntion	application is pendin	a, check here ►
		A 02026			C ii exemption	аррисацоп із репапі	g, check here 📮 j
		<u> </u>					_
GCI	песк а	Il that apply Initial return Initial return of a Final return Amended return	former public charity	′	_	ganizations, check he	•
		Address change Name change				rganizations meeting k here and attach coi	
		ype of organization Section 501(c)(3) exempt priva				undation status was t n 507(b)(1)(A), chec	
Г <sub>s</sub>	ection	4947(a)(1) nonexempt charitable trust Other taxa				( - ) ( - ) ( . ) ,	
		ket value of all assets at end  J Accounting method	I Cash I ✓ Accı	rual		ation is in a 60-month n 507(b)(1)(B), chec	
		from Part II, col. (c),	be on cash basis.)		under section	11 307(b)(1)(b), clicc	K Hele . ,
Pa	rt I	Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books	(b) N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	148,289				
	2	Check ► ┌ If the foundation is <b>not</b> required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	1,458		1,458	1,458	
	4	Dividends and interest from securities	75,780		75,780	75,780	
	5a	Gross rents					
di	b	Net rental income or (loss)	198,795				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	198,795				
	Ь	Gross sales price for all assets on line 6a 296,068					
œ	7	Capital gain net income (from Part IV, line 2)			198,795		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other Income (attach schedule)	-				
	12	Total. Add lines 1 through 11	424,322		276,033	77,238	
	13	Compensation of officers, directors, trustees, etc	0		0	0	0
	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
¥	16a	Legal fees (attach schedule)	057				
Expenses	b	•	<b>95</b> 5,460 <b>95</b> 40,219		12,863	0	5,460 27,356
ş	17	Other professional fees (attach schedule)  Interest	40,219		12,003	0	27,330
rati	18	Taxes (attach schedule) (see instructions)	15,621		0	0	8,160
ξ	19	Depreciation (attach schedule) and depletion	,				•
Ē	20	Occupancy					
Ā	21	Travel, conferences, and meetings	18,513		0	0	18,513
P.	22	Printing and publications					
e ⊒:	23	Other expenses (attach schedule)	95,194		10,475	0	80,583
atır	24	Total operating and administrative expenses.					
Operating and Administrative		Add lines 13 through 23	175,007		23,338	0	140,072
õ	25	Contributions, gifts, grants paid	103,600				103,600
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	278,607		23,338	n	243,672
	27	Subtract line 26 from line 12	270,007		23,330	0	213,072
	a	Excess of revenue over expenses and disbursements	145,715				
	ь	Net investment income (if negative, enter -0 -)			252,695		
	c	Adjusted net income (If negative, enter -0-)				77,238	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	15,300	17,430	` '
	2	Savings and temporary cash investments	395,263	317,215	317,215
	3	Accounts receivable -	,		
	_	Less allowance for doubtful accounts			
	4	Pledges receivable			
	*	Less allowance for doubtful accounts			
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 25,000	05.000	25.000	35.000
		Less allowance for doubtful accounts   0	95,000	25,000	25,000
% €	8	Inventories for sale or use			
vA -	9	Prepaid expenses and deferred charges			
∢		Investments—U S and state government obligations (attach schedule)			
	Ь	Investments—corporate stock (attach schedule)			
	_	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	3,014,769	3,203,346	3,173,068
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	Other assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	3,520,332	3,562,991	3,532,713
	17	Accounts payable and accrued expenses			
	18	Grants payable			
φ Φ	19	Deferred revenue			
a 10 10 10	20	Loans from officers, directors, trustees, and other disqualified persons			
8	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Š.		and complete lines 24 through 26 and lines 30 and 31.			
Fund Balance	24	Unrestricted			
麗	25	Temporarily restricted			
핕	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	3,520,332	3,562,991	
ž	30	Total net assets or fund balances (see instructions)	3,520,332	3,562,991	
_	31	Total liabilities and net assets/fund balances (see instructions)	3,520,332	3,562,991	
Рa	rt II		, , ,	. ,	
1		Total net assets or fund balances at beginning of year—Part II, column (	(a), line 30 (must ad	ree	
_					3,520,332
2				<del></del>	145,715
3		Other increases not included in line 2 (itemize)		<u>45</u> 3	851
4		Add lines 1, 2, and 3		_	3,666,898
5		Decreases not included in line 2 (itemize)		% 5 5	103,907
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Po		⊢	3,562,991
_		. Stat dosets of faile suitables at the of year (line 4 minus file 5)—r	a ,		3,302,331

	00-PF (2014)	nd Loc	ses for Tax on Inve	stmont Income	•			Page <b>3</b>	
Parti	(a) List and describe t	the kınd(s	s) of property sold (e g , re common stock, 200 shs M	al estate,	( <b>b</b> ) How acquired P—Purchase	(c) Date	e acquired day, yr )	(d) Date sold (mo , day, yr )	
4-	See Additional Data T				D—Donation	(		( / 44 / / / /	
1a	See Additional Data 1	able							
b						-			
С						1			
d						<u> </u>			
е						<u> </u>			
(e) Gross sales price			(f) Deprectation allowed (or allowable)	1	t or other basis xpense of sale			or (loss) ) mınus (g)	
а	See Additional Data Table								
b									
С									
d									
e									
Cor	mplete only for assets sl	howing g	aın ın column (h) and owne	d by the foundatio	n on 12/31/69	(1)	Gains (Col	(h) gaın mınus	
(i)	FM V as of 12/31/69		<b>(j)</b> Adjusted basis as of 12/31/69		cess of col (ı) col (j), ıf any	col (	k), but not l Losses (fro	less than -0-) <b>or</b>	
	See Additional Data T	able	as 01 12/31/09	over	cor (j), ir arry	+	203363 (114	om cor (117)	
е			,	If gaın, also enter		<del> </del>			
2	Capital gain net incom	·	capital loss) { (loss) as defined in section	If (loss), enter -0- ns 1222(5) and (6	J	2	198,795		
	If gain, also enter in P in Part I, line 8 .	art I, line	e 8, column (c) (see ınstru	ctions) If (loss), e	enter -0 -	3		-1,203	
Part \	V Oualification U	nder S	ection 4940(e) for R	educed Tax or	n Net Investme	1 1		1,200	
			ındatıons subject to the se						
sectio	on 4940(d)(2) applies, le	eave this	part blank						
/as the	foundation liable for the	section	4942 tax on the distributa under section 4940(e) Do			eriod?		┌ Yes ┌ No	
<b>1</b> Ent	er the appropriate amou	ınt ın eac	h column for each year, se	e instructions bef	ore making any ent	ries			
	(a) period years Calendar or tax year beginning in)	Adjusto	(b) ed qualifying distributions	(c) Net value of noncha	) nritable-use assets	(co	(d) Distribution (b) divided		
7 (-	2013		305,516		4,044,908	<b>(</b>	. (-,	0 075531	
	2012		244,896		5,135,541			0 047687	
	2011		185,469		2,156,610			0 086000	
	2010		161,925		2,166,016			0 074757	
	2009		221,008		1,333,921			0 165683	
2	Total of line 1, column	n (d)				2		0 449658	
			he 5-year base period—div ition has been in existence			3		0 08993	
3		from Part X. line !	om Part X, line 5			3,781,645			
3 4	Enter the net value of	nonchari	table-use assets for 2014		· · · · ·		340,091		
			table-use assets for 2014	•	_	5			
4	Multiply line 4 by line	3			[	5 6		340,09	
4 5	Multiply line 4 by line Enter 1% of net inves	3 tment ind		7b)	[			340,091 2,527	
4 5 6	Multiply line 4 by line Enter 1% of net inves Add lines 5 and 6	3 tment ind	come (1% of Part I, line 27	7b)	  	6		340,091	

	990-PF (2014)			age <b>4</b>
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Frand enter "N/A"			
	on line 1			
	Date of ruling or determination letter(attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			5,054
_	here Fand enter 1% of Part I, line 27b			-,
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			0
3	enter - 0 - ) Add lines 1 and 2			5,054
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others		•	3,034
4	enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		!	5,054
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 <b>6a</b> 6,348			
ь	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) <b>6c</b>			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		(	5,348
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  ref Form 2220 is attached 8		•	7,5 10
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>			1,294
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 1,294 Refunded 11			0
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
Lu	It participate or intervene in any political campaign?	. 1a	103	No
		. <u> </u>		NO
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			N1 -
	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.	١.		
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$\bigs\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> 2</u>		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions		] .	
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
	and Part XV.	. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<b>▶</b> MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	. 10	Yes	

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶JUDITH H OBERMAYER Telephone no ▶(781)	234-	2484	
	Located at ►15 GREY STONE PATH DEDHAM MA ZIP+4 ►02026			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		-	<u> </u>
13	and enter the amount of tax-exempt interest received or accrued during the year			,
	- · · · · · · · · · · · · · · · · · · ·		I !	l
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	TT VII-B Statements Regarding Activities for Which Form 4720 May Be Required		T 1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	for the benefit or use of a disqualified person)?			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
•	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		$\vdash$	
_	operating foundation defined in section 4942(1)(3) or 4942(1)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years > 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>▶</b> 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	$oxed{oxed}$	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		[	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Form 990-PF (2014)									Page <b>6</b>		
Part VII-B Statements Rega		_		ich Form 4720	May	, Be Required <i>(cont</i>	inue	d)	<u> </u>		
<b>5a</b> During the year did the foundation											
(1) Carry on propaganda, or other	rwise	attempt to influence	e leg	ıslatıon (section 494	45(e	(a)))?	√ No				
(2) Influence the outcome of any	spec	ıfıc publıc electıon (	see	section 4955), or to	car	ry					
on, directly or indirectly, any	vote	registration drive?.				\ Yes \	✓ No				
(3) Provide a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		┌ Yes रि	√ No				
(4) Provide a grant to an organiza	tion	other than a charita	ble,	etc , organization des	scrib	ped					
ın section 4945(d)(4)(A)? (se	ee ins	structions)				\ Yes \	√ No				
(5) Provide for any purpose other	thar	religious, charitable	e, sc	ientific, literary, or							
educational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		Yes 🖟	√ No				
<b>b</b> If any answer is "Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transac	tion	s fail to qualify undei	r the	exceptions described in					
Regulations section 53 4945 or i	nac	urrent notice regard	ıng d	lısaster assıstance (	see	instructions)?		5b			
Organizations relying on a curren	t not	ice regarding disast	eras	ssistance check here	· .		_				
c If the answer is "Yes" to question	5a(-	4), does the foundat	ion c	laım exemption from	the						
tax because it maintained expend	-			·			- No				
If "Yes," attach the statement requ			_								
<b>6a</b> Did the foundation, during the yea					prer	miums on					
a personal benefit contract?							√ No				
<b>b</b> Did the foundation, during the year						, ,		6b	No		
If "Yes" to 6b, file Form 8870.	., pu	y premianis, anecen	, 01 1	nuncetry, on a perso	ilui i	benefit contract.	•		<del>-   110</del>		
	ua e ti	ao foundation a narts	, to :	nrobibited tay chelt	tar t	ransaction? <b>TYes</b> (	Z No				
			_					7b	<u> </u>		
Part VIII and Contractors	t Or	ncers, Directors	s, 11	rustees, rounda	τιοι	n Managers, Highly	Paid	Ешр	ioyees,		
1 List all officers, directors, trustees	s. for	ındation managers a	nd t	heir compensation (s	see i	nstructions).					
	1	Title, and average		c) Compensation		(d) Contributions to					
(a) Name and address		hours per week		If not paid, enter		mployee benefit plans	(e) Expense account, other allowances				
	_	devoted to position		-0-)		deferred compensation					
ARTHUR S OBERMAYER	-	RESIDENT		0		0			0		
15 GREY STONE PATH DEDHAM,MA 02026	20 (	70									
JUDITH H OBERMAYER	C. F	DIZ									
	C L E			0		0			0		
15 GREY STONE PATH DEDHAM,MA 02026	` `	. •									
2 Compensation of five highest-paid	l emr	lovees (other than i	thos	e included on line 1—	see	instructions). If none, e	nter"l	NONE."			
2 compensation of the ingliest paid	· C,					(d) Contributions to		101121			
(a) Name and address of each employ	/ee	(b) Title, and avera		(c) Compensatio	n	employee benefit			e account,		
paid more than \$50,000		devoted to position		(c) compensatio	"	plans and deferred	ot	her allo	owances		
NONE						compensation					
NONE											
		1									
Total number of other employees paid of		L		<u> </u>		<u> </u>					

and Contractors (continued)		
3 Five highest-paid independent contractors for professional serv	ices (see instructions). 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 servi	ces	0
	ices	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incluorganizations and other beneficiaries served, conferences convened, research papers	Expenses	
1 GENEALOGY PROGRAM RESEARCH AND DISSEMINATION ( OF GENEALOGICAL RESEARCH WORK WORK ON THE ESTATE	29,306	
2 GERMAN JEWISH COMMUNITY HISTORICAL COUNCIL AWA	ARDS PROGRAM ACKNOWLEDGING GERMAN	·
CITIZENS' PRESERVATION OF JEWISH HISTORY AND CULT	URE IN THEIR LOCAL COMMUNITIES	76,731
3		
4		
Part IX-B Summary of Program-Related Investmen	nts (see instructions)	
Describe the two largest program-related investments made by the foundation d	,	A mount
1		
2		
2		
All other program-related investments See instructions		
3 <mark>%</mark>		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 2,434,644 1h 295.716 1c 1.108.873 1d 3.839.233 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 3.839.233 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 57.588 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 3.781.645 5 189.082 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here **>**  $\overline{\lor}$  and do not complete this part.) 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 3 3 4 4 5 5 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 243.672 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 243,672 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 243,672 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

For	m 990-PF (2014)				Page <b>S</b>
Р	art XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
_		Corpus	Years prior to 2013	2013	2014
	Distributable amount for 2014 from Part XI, line 7				
	Undistributed income, if any, as of the end of 2014				
а	, , , , , , , , , , , , , , , , , , ,				
b					
	Excess distributions carryover, if any, to 2014				
а	From 2009				
Ь	From 2010				
	From 2011				
	From 2012				
	From 2013				
	<b>Total</b> of lines 3a through e				
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$				
	Applied to 2013, but not more than line 2a		<del></del>		
b	Applied to undistributed income of prior years (Election required—see instructions)				
_	Treated as distributions out of corpus (Election				
C	required—see instructions)				
d	Applied to 2014 distributable amount				
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2014				
,	(If an amount appears in column (d), the		+		
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
_	—see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				
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)				
8	Excess distributions carryover from 2009 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				

	m 990-PF (2014)					Page <b>10</b>
_	Part XIV Private Operating Foun				9)	
la	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			perating		1995-01-09
ь	Check box to indicate whether the organiza	•	=	escribed in section	<b>▼</b> 4942(j)(3) or	- <b>Г</b> 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	3,7,7,7,7	
	income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
	Investment return from Part X for each year listed	77,238	74,536	192,593	38,649	383,016
ь	85% of line 2a	65,652	63,356	163,704	32,852	325,564
c	Qualifying distributions from Part XII,	243,672	305,516	244,896	185,469	979,553
	line 4 for each year listed	2+3,072	303,310	244,030	103,409	
a	A mounts included in line 2c not used directly for active conduct of exempt activities	103,600	168,150	105,100	72,000	448,850
е	Q ualifying distributions made directly					· · ·
	for active conduct of exempt activities Subtract line 2d from line 2c	140,072	137,366	139,796	113,469	530,703
	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter  (1) Value of all assets	3,532,713	4,044,126	4,004,715	3,565,040	15,146,594
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	-,,-	.,,	,,		0
b	,,,					
	of minimum investment return shown in Part X, line 6 for each year listed	126,055	134,830	171,185	71,887	503,957
C	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments					
	on securities loans (section					0
	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)					0
	(3) Largest amount of support					0
	from an exempt organization  (4) Gross investment income		+		+	0
Рa	art XV Supplementary Informatio	n (Complete thi	is part only if t	he organization	n had \$5 000 o	
L	assets at any time during t	the year—see in	nstructions.)	ne organization	11 11au \$5,000 0	i illore ill
	Information Regarding Foundation Manage List any managers of the foundation who ha before the close of any tax year (but only if  ARTHUR S OBERMAYER	ve contributed more they have contribut	ed more than \$5,00	00) (See section 5	07(d)(2))	
b	List any managers of the foundation who ow ownership of a partnership or other entity) o		· ·		large portion of th	e
<del></del>	Information Regarding Contribution, Grant,	, Gift, Loan, Scholan	ship, etc Programs	 5:		
	Check here If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a	es contributions to ation makes gifts, gr	preselected charita	ible organizations a		
a	The name, address, and telephone number JUDITH H OBERMAYER 15 GREY STONE PATH DEDHAM,MA 02026 (781) 234-2484	or e-mail address o	f the person to who	m applications shoi	uld be addressed	
b	The form in which applications should be s	ubmitted and inform	ation and materials	they should includ	e	<del></del> _
	LETTER REQUEST WITH ANY RELEVANT	SUPPORTING DO	CUMENTATION			
c	: Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitah	ole fields, kinds of ir	stitutions or othe	r

factors NONE

Part XV Supplementary Inform 3 Grants and Contributions Paid	During the Year or Apr	proved for F	uture Pavment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total				103,60
<b>b</b> Approved for future payment	<u> </u>	<u></u>		103,60
	_		No. 26	

	-PF (2014)	A -4:i4:-				Page <b>12</b>					
	I-A Analysis of Income-Produci		usiness income	Excluded by section	1 512, 513, or 514	(e)					
_	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)					
b											
d											
f g Fees 2 Membe 3 Intere	and contracts from government agencies ership dues and assessments st on savings and temporary cash tments										
<b>4</b> Divide	4 Dividends and interest from securities			14	1,458 75,780						
<b>a</b> Debt <b>b</b> Not o <b>6</b> Net re	debt-financed property										
8 Gain o invent	or (loss) from sales of assets other than tory			18	198,795						
<ul><li>10 Gross</li><li>11 Other</li><li>b</li></ul>	<ul> <li>9 Net income or (loss) from special events</li> <li>0 Gross profit or (loss) from sales of inventory.</li> <li>1 Other revenue a</li> <li>b</li> </ul>										
d											
13 Total. (See v	Add line 12, columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify care  Belationship of Activities to	alculations) the Accom	plishment of E	xempt Purpos		276,033					
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)										
8D	REALIZED GAIN ON SALE OF SECURIT	IES USED TO	FUND PROGRAM	5							

Form 99	0-PF	(2014)										Рa	ge <b>1</b> 3
Part	XVII	Information Re Noncharitable					sactio	ns and	Relationships	With			
		rganization directly or i 01(c) of the Code (othe	ndırectly e	engage	ın any of	the following wi						Yes	No
orga	nızat	ions?											
<b>a</b> Tran	sfers	from the reporting four	ndation to	a nonc	harıtable	exempt organiz	atıon of						
		)									1a(1)		No
(2)	Othe	rassets									1a(2)		No
<b>b</b> Othe	er tra	nsactions											
		s of assets to a noncha											No
		hases of assets from a											No
		al of facilities, equipme											No
		bursement arrangemer									1b(4)		No
		s or loan guarantees.									1b(5)		No
		mance of services or n		-	_						1b(6)		No
		f facilities, equipment, i									1c		No
of th ın ar	e god ny tra	wer to any of the above ods, other assets, or se nsaction or sharing arr	rvices giv angement	en by t , show	he report ın columr	ing foundation in ( <b>d)</b> the value o	f the fo	undation i	received less tha	n fair marke	et value		
(a) Line	No	(b) Amount involved	(c) Name	of nonch	narıtable ex	empt organization	(d)	Description	of transfers, transac	ctions, and sha	arıng arra	ngemer	nts
desc	rıbed	ndation directly or indi I in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		an sectio		ın secti			 iption of relati	.厂Y€ onship	es <b>F</b>	No
Sign	the	er penalties of perjury, best of my knowledge a rmation of which prepar	ınd belief,	ıt ıs tru	ie, correc					an taxpaye	r) is bas	sed on	
Here	ķ.	****				2016-01-29	, k	*****	:	return	IRS disc		
	<i>y</i>	Signature of officer or t	rustee			Date	— <b>,</b>	Title		below	r preparei tr )? ✓ \		
		Print/Type preparer's LAWRENCE S NAN CPA		Prepa	rer's Sıgı	nature	Date		Check if self- employed ▶	PTIN P(	000611	155	
Paid Prepa Use	rer	Firm's name ► KATZ NANNIS SOLO	MON PC						Firm's EIN ► 0	4-288721	1		
Use Only		Firm's address ► 800 SOUTH STREET 024531480	800 SOUTH STREET SUITE 250 WALTHAM, MA								00		

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
500 SH SYMRISE AG	Р	2009-08-14	2014-11-13
7,658 710 EURO CURRENCY	Р	2015-02-06	2015-02-17
FRACTIONAL SHARES HERMES INTL S A	Р	2015-01-08	2015-01-08
FRACTIONAL SHARES HERMES INTL S A	Р	2015-01-08	2015-01-08
62 SHS HERMES INTL S A	Р	2015-01-08	2015-02-06
1,819 SHS MEIJI HOLDINGS CO LTD	D	2009-04-22	2015-04-10
EURO CURRENCY	Р	2015-02-06	2015-05-13
NORWEGIAN KRONE	Р	2015-05-13	2015-05-27
SWEDISH KRONA	Р	2015-05-08	2015-05-27

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
28,873		8,145	20,728
8,637		8,687	-50
284		304	-20
511		547	-36
8,687		9,487	-800
242,136		62,866	179,270
753		794	-41
4,769		4,974	-205
1,418		1,469	-51

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	( <b>k)</b> Excess of col (ı) over col (ʒ), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))
			20,728
			-50
			-20
			-36
			-800
			179,270
			-41
			-205
			-51

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

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	Тестріспе		
a Paid during the year				
ACLU FOUNDATION OF MASSACHUSETTS 211 CONGRESS STREET BOSTON,MA 02110	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,800
AMERICAN JEWISH WORLD SERVICE 45 W 36TH ST NEW YORK,NY 10018	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
B'TSELEM USA 1411 K ST NW STE 603 WASHINGTON,DC 20005	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
CARNEGIE MELLON 5000 FORBES AVENUE PITTSBURGH,PA 15213	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	5,000
CENTER FOR ARMS CONTROL & NONPROLIFERATION 322 4TH ST NE WASHINGTON, DC 20002	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
CHEMICAL HERITAGE FOUNDATION 315 CHESTNUT STREET PHILADELPHIA,PA 19106	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
CLAUDE W BRENNER (1947) SCHOLARSHIP FUND 600 MEMORIAL DR W98-500 CAMBRIDGE,MA 02139	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	500
COMPASSION & CHOICES PO BOX 101810 DENVER,CO 80250	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
EDWARD M KENNEDY INSTITUTE 125 SUMMER STREET BOSTON,ME 02110	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
HISTORIC NEWTON 527 WASHINGTON STREET NEWTON,MA 02458	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	300
INTERFAITH FAMILYCOM 90 OAK STREET FOURTH FLOOR NEWTON UPPER FALLS,MA 02464	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	3,000
ISLAND HOUSING TRUST PO BOX 779 WEST TISBURY,MA 02575	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
JEWISH HERITAGE CENTER 99-101 NEWBURY ST BOSTON,MA 02116	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	5,000
JEWISH VOCATIONAL SERVICES 75 FEDERAL ST BOSTON,MA 02110	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	37,500
LEO BAECK INSTITUTE 15 W 16TH ST NEW YORK, NY 10011	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	7,500
Total				103,600

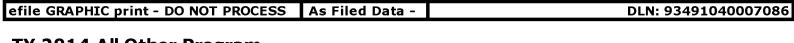
#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
MVHC SUMMER INSTITUTE PO BOX 692 130 CENTER ST VINEYARD HAVEN,MA 02568	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
MIT 600 MEMORIAL DR CAMBRIDGE,MA 02139	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	5,000
MORE THAN WORDS 376 MOODY ST WALTHAM,MA 02453	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
NEW ENGLAND HISTORIC GENEALOGICAL SOCIETY 101 NEWBURY STREET BOSTON,MA 02116	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	5,000
NEW ISRAEL FUND 1101 14TH STREET NW WASHINGTON,DC 20005	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
PARTNERS FOR PROGRESSIVE ISRAEL 114 W 26TH STREET STE 1002 NEW YORK,NY 10001	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
PLOUGHSHARES FUND 1808 WEDEMEYER STREET SUITE 200 SAN FRANCISCO,CA 94129	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
SOCIAL VENTURE PARTNERS BOSTON 11 CONCORD STREET CHARLESTOWN,MA 02129	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	5,500
SOCIETY OF ARTS AND CRAFTS 175 NEWBURY STREET BOSTON,MA 02116	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	2,000
THE CONVERSATION PROJECT 20 UNIVERSITY RD 7TH F CAMBRIDGE,MA 02138	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	1,000
WBUR 490 COMMONWEALTH AVENUE BOSTON,MA 02215	NONE	501(C)(3)	FULFILL PURPOSES OF THE ORGANIZATION	12,500
Total				103,600

# **TY 2014 Accounting Fees Schedule**

Name: OBERMAYER FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
KATZ, NANNIS & SOLOMON	5,460	0	0	5,460



# TY 2014 All Other Program Related Investments Schedule

Name: OBERMAYER FOUNDATION INC

Category	Amount
NONE	0

#### **TY 2014 Investments - Other Schedule**

Name: OBERMAYER FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
100 SHARES GOOGLE	FMV	53,153	124,679
1000 SH BASF	FMV	71,938	76,252
10000 SHARES FIRST TRUST	FMV	171,008	56,200
600 SH SYMRISE AG	FMV	9,775	36,021
1400 SHARES LOOMIS	FMV	26,786	36,584
1420 SHARES CHEVRON TEXACO	FMV	63,332	112,010
1600 SHARES AIR PROD & CHEM	FMV	163,680	204,128
2300 SHARES IPSOS	FMV	81,814	45,064
29705 SHARES BARRAT DEVELOPMENTS	FMV	70,661	143,535
3000 SHARES MOMENTA	FMV	42,233	49,230
3100 SHARES YIT	FMV	41,475	20,210
3600 SHARES STANDARD CHARTERED	FMV	94,153	34,740
3700 SHARES CAVERION	FMV	16,524	36,918
3700 SHARES FREENET	FMV	60,715	92,299
4000 SHARES MARKET VECTORS	FMV	104,076	61,920
4,557.15 SHARES FIDELITY SELECT NATURAL GAS	FMV	155,032	103,721
5395.61 SHARES MATTHEWS ASIA SMALL	FMV	113,270	102,153
600 SHARES CHRISTIAN DIOR	FMV	43,793	93,222
600 SHARES RANGE RESOURCES CO	FMV	40,370	19,272
800 SHARES HANOVER RUCKVERSI	FMV	41,255	81,734
819 SHARE MEIJI DAIRIES	FMV	0	0
VANGUARD GLOBAL EQUITY	FMV	291,227	369,280
VANGUARD INTERNATIONAL GROWTH	FMV	418,758	418,123
3900 SHARES SBERBANK OF RUSSIA	FMV	32,859	19,188
6400 SHARES TULLOW OIL PLC	FMV	92,271	16,391
10000 SHARES SPBK 1 SR BANK	FMV	100,762	49,724
2300 SHARES YARA INT ASA	FMV	96,888	91,573
1300 SHS LANXESS AG	FMV	125,026	88,672
2900 SHARES LOOMIS AB SOLNA	FMV	67,634	75,781
700 SHARES ILLUMINA	FMV	101,844	123,074

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1300 SHARES NOVARTIS	FMV	100,171	119,496
300 SH AMAZON	FMV	119,416	153,567
1000 SH ALIBABA	FMV	88,185	58,970
14300 SH WORLEY PARSONS	FMV	103,262	59,337

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#### **TY 2014 Other Decreases Schedule**

Name: OBERMAYER FOUNDATION INC

Description	Amount
BOOK TAX DIFFERENCE - TAX COST BASIS ADJUSTMENT FOR STOCK SALES	103,907

#### DLN: 93491040007086

## **TY 2014 Other Expenses Schedule**

Name: OBERMAYER FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OUTSIDE SERVICES	70,107	10,475	0	59,632
HONORARIA	5,872	0	0	5,872
BOOKS, DUES & SUBSCRIPTIONS	853	0	0	853
DATABASE EXPENSES	1,071	0	0	1,071
OFFICE SUPPLIES	8,943	0	0	4,807
POSTAGE AND SHIPPING	2,055	0	0	2,055
SERVICE FEES	846	0	0	846
TELEPHONE	3,010	0	0	3,010
MAINTENANCE	2,334	0	0	2,334
MISC GENERAL AND ADMINISTRATIVE EXPENSES	88	0	0	88
ADR FEES	15	0	0	15



#### **TY 2014 Other Increases Schedule**

Name: OBERMAYER FOUNDATION INC

Description	Amount
RETURN OF CAPITAL	851

## **TY 2014 Other Professional Fees Schedule**

Name: OBERMAYER FOUNDATION INC

DLN: 93491040007086

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
KAREN FRANKLIN	15,000	0	0	15,000
JULIET CHAVES	1,880	0	0	1,880
MICHAEL LEVITIN	2,600	0	0	2,600
DLL COMMUNICATIONS	5,000	0	0	5,000
JOHANNA RUDORF	1,500	0	0	1,500
UMLUAF TECHNISCHE DIENSTEISTUN	876	0	0	876
JOHN H WOODS	500	0	0	500
POLARIS CAPITAL	12,863	12,863	0	0

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#### **TY 2014 Substantial Contributors Schedule**

Name: OBERMAYER FOUNDATION INC

Name	Address	
	15 GREY STONE PATH DEDHAM, MA 02026	

#### **TY 2014 Taxes Schedule**

Name: OBERMAYER FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	70	0	0	70
FEDERAL TAX	7,461	0	0	0
ANNUAL REPORT	19	0	0	19
FOREIGN TAXES	8,071	0	0	8,071

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DLN: 93491040007086

2111 00 10 10 10 10001

OMB No 1545-0047

2014

#### Schedule of Contributors

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

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Employer identification number

OBERMAYER FOUNDATION INC

04-2711822

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Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

#### General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

Γ	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 99 Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
Γ	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, of the prevention of cruelty to children or animals. Complete Parts I, II, and III
Г	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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Name of organization
OBERMAYER FOUNDATION INC

**Employer identification number** 04-2711822

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	WILLIAM L BERNHARD 775 PARK AVE NEW YORK, NY 10021	\$ <u>15,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ARTHUR S O BERMAYER  15 GREY STONE PATH  DEDHAM, MA 0 2 0 2 6	\$ <u>133,289</u>	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
(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

Name of organization
OBERMAYER FOUNDATION INC

O4-2711822

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	, , ,	.711022
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1,000 SHARES MEIJI HOLDINGS	\$ 133,289	2015-04-08
(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
		\$_	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization **Employer identification number** OBERMAYER FOUNDATION INC 04-2711822 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions ) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee