

Form

990-PF

Department of the Treasury
Internal Revenue Service

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 www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 12-01-2014, and ending 11-30-2015

Name of foundation DANIEL P & GRACE I TULLY CHARITABLE TRUST		A Employer identification number 22-2804896	
Number and street (or P O box number if mail is not delivered to street address) C/O PO BOX 4080		B Telephone number (see instructions) (203) 655-2800	
City or town, state or province, country, and ZIP or foreign postal code DARIEN, CT 06820		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 6,715,885		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	5,500			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	17	17		
	4 Dividends and interest from securities.	167,951	167,951		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	275,843			
	b Gross sales price for all assets on line 6a 2,297,718				
	7 Capital gain net income (from Part IV, line 2) . . .		275,843		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	449,311	443,811		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	36,000	36,000		36,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	10,500	10,500		0
	c Other professional fees (attach schedule)				
	17 Interest	38,873	38,873		0
	18 Taxes (attach schedule) (see instructions)	8,945	8,945		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	56,696	56,696		0
	24 Total operating and administrative expenses. Add lines 13 through 23	151,014	151,014		36,000
	25 Contributions, gifts, grants paid	379,850			379,850
	26 Total expenses and disbursements. Add lines 24 and 25	530,864	151,014		415,850
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-81,553			
	b Net investment income (if negative, enter -0-)		292,797		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	132,882		
	2	Savings and temporary cash investments			
	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) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	3,928,493	4,335,458	6,715,885
	c	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)			
	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 instructions Also, see page 1, item I)	4,061,375	4,335,458	6,715,885	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)		394,390	
	22	Other liabilities (describe ▶ _____)	38,754	0	
	23	Total liabilities (add lines 17 through 22)	38,754	394,390	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	4,022,621	3,941,068	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
	30	Total net assets or fund balances (see instructions)	4,022,621	3,941,068	
31	Total liabilities and net assets/fund balances (see instructions)	4,061,375	4,335,458		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	4,022,621
2	Enter amount from Part I, line 27a	2	-81,553
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	3,941,068
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	3,941,068

Part IV

Capital Gains and Losses for Tax on Investment Income

(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)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table		
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table		
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	275,843
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	367,950	6,733,147	0 054648
2012	363,250	6,262,295	0 058006
2011	456,250	4,760,157	0 095848
2010	566,550	4,996,737	0 113384
2009	312,050	4,531,632	0 068860

2	Total of line 1, column (d).	2	0 390746
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 078149
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	4	7,041,452
5	Multiply line 4 by line 3.	5	550,282
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,928
7	Add lines 5 and 6.	7	553,210
8	Enter qualifying distributions from Part XII, line 4.	8	415,850

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	5,856
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-)		2	0
3		Add lines 1 and 2.		3	5,856
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	5,856
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	4,917	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c	1,000	
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments. Add lines 6a through 6d.		7	5,917
8		Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> 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	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	61
11		Enter the amount of line 10 to be Credited to 2015 estimated tax 39 Refunded		11	0

Part VII-A

Statements Regarding Activities

1a		During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	Yes	No
b		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?		1b		No
		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c		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 \$ 0 (2) On foundation managers \$ 0				
e		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?		2		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
4a		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 Form 990-T 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) CT				
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		No
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		10	Yes	

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the 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 MARK A RICCA CPA Telephone no (203) 655-2800 Located at PO BOX 4080 DARIEN CT ZIP+4 06820			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	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				

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
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?			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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 operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	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 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 statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
20 , 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 if 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		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

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (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 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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	7,469,868
b	Average of monthly cash balances.	1b	-321,186
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	7,148,682
e	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	7,148,682
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	107,230
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,041,452
6	Minimum investment return. Enter 5% of line 5.	6	352,073

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	352,073
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	5,856
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	5,856
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	346,217
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	346,217
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	346,217

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	415,850
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		
a	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	415,850
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	415,850
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			

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				346,217
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.				99,960
b From 2010.				320,583
c From 2011.				225,254
d From 2012.				55,991
e From 2013.				32,376
f Total of lines 3a through e.	734,164			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 415,850				
a Applied to 2013, but not more than line 2a			0	
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.				346,217
e Remaining amount distributed out of corpus	69,633			
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	803,797			
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 instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . .	99,960			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	703,837			
10 Analysis of line 9				
a Excess from 2010. . . .				320,583
b Excess from 2011. . . .				225,254
c Excess from 2012. . . .				55,991
d Excess from 2013. . . .				32,376
e Excess from 2014. . . .				69,633

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
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					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

EILEEN CEGLARSKI

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

EILEEN CEGLARSKI
CO PO BOX 4080
DARIEN, CT 06820
(203) 655-2800

b

The form in which applications should be submitted and information and materials they should include

WRITTEN REQUEST AND A BRIEF SUMMARY OF THEIR CHARITABLE PURPOSE AND HISTORY

c

Any submission deadlines

NONE

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

PRIMARILY HOSPITALS, SCHOOLS, EDUCATIONAL FACILITIES

Part XV

Supplementary Information (continued)

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	379,850
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received				

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Sign Here	*****	2016-07-11	*****	<div style="border: 1px solid black; padding: 5px;"> May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div>
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name JAMES P DE SIMONE	Preparer's Signature	Date 2016-07-11	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00071584
	Firm's name <input checked="" type="checkbox"/> WALTER BERLINGO & CO			Firm's EIN <input checked="" type="checkbox"/> 06-0947821	
	Firm's address <input checked="" type="checkbox"/> 280 TOKENEKE ROAD PO BOX 4080 DARIEN, CT 06820			Phone no (203) 655-2800	

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)
800 SHS TIME WARNER CABLE	P	2014-07-25	2015-03-02
1,000 SHS THERAVANCE	P	2014-02-06	2015-03-20
US TREASURY BILLS 0% 5/14/15	P	2014-12-09	2015-05-14
400 SHS TIME WARNER CABLE	P	2014-07-25	2015-05-22
300 SHS TIME WARNER CABLE	P	2014-11-10	2015-05-22
3 SHARE LIBERTY GLOBAL	P	2004-09-09	2015-07-08
US TREASURY BILLS 0% 11/12/15	P	2015-05-15	2015-08-24
352 SHS LIBERTY GLOBAL PLC	P	2015-07-08	2015-09-25
US TREASURY BILLS 0% 11/12/15	P	2015-05-15	2015-10-19
US TREASURY BILLS 0% 11/12/15	P	2015-06-03	2015-11-12

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
123,693		119,052	4,641
16,608		31,800	-15,192
300,000		299,917	83
68,416		59,526	8,890
51,312		40,734	10,578
14		2	12
99,996		99,962	34
11,999		2,724	9,275
199,987		199,924	63
300,000		299,947	53

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			4,641
			-15,192
			83
			8,890
			10,578
			12
			34
			9,275
			63
			53

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)
5,300 SHS NESTLE SA	P		2015-01-16
450 SHS WEIGHT WATCHERS	P	2012-07-10	2015-02-27
850 SHS WEIGHT WATCHERS	P	2012-07-10	2015-03-02
750 SHS WEIGHT WATCHERS	P	2013-08-02	2015-03-02
2,000 SHS DISCOVERY COMMUNICATIONS	P	2010-11-10	2015-03-12
1,150 SHS WEIGHT WATCHERS	P	2013-08-02	2015-03-20
550 SHS WEIGHT WATCHERS	P	2014-02-19	2015-03-20
950 SHS WEIGHT WATCHERS	P	2014-02-19	2015-03-23
5,200 SHS AMEREN	P	2011-01-19	2015-05-07
4,800 SHS OLD REPUBLIC INTL CORP	P	2007-08-21	2015-06-18

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
401,461		123,169	278,292
6,056		21,589	-15,533
9,182		40,780	-31,598
8,102		28,730	-20,628
62,356		35,990	26,366
10,349		44,053	-33,704
4,950		11,665	-6,715
7,716		20,149	-12,433
210,462		147,659	62,803
77,040		85,621	-8,581

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			278,292
			-15,533
			-31,598
			-20,628
			26,366
			-33,704
			-6,715
			-12,433
			62,803
			-8,581

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)
1,200 SHS DANONE SA	P	2013-12-02	2015-09-18
1,400 SHS AMEREN	P	2011-01-19	2015-09-24
200 SHS AMEREN	P	2011-02-11	2015-09-24
3,600 SHS AMEREN	P	2011-06-02	2015-09-24
695 SHS PENTAIR	P	2012-10-04	2015-09-25
2,500 SHS APPROACH RESOURCES	P	2011-08-05	2015-09-25

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
74,221		87,632	-13,411
57,163		39,754	17,409
8,166		5,745	2,421
146,991		104,824	42,167
35,878		18,430	17,448
5,600		52,497	-46,897


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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-13,411
			17,409
			2,421
			42,167
			17,448
			-46,897


Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DANIEL P TULLY	TRUSTEE 0 00	0	0	0
76 GOMEZ ROAD HOBE SOUND,FL 33455				
GRACE I TULLY	TRUSTEE 0 00	0	0	0
76 GOMEZ ROAD HOBE SOUND,FL 33455				
MARK RICCA	BOARD OF DIRECTORS 0 00	0	0	0
280 TOKENEKE ROAD DARIEN,CT 06820				
EILEEN CEGLARSKI	BOARD OF DIRECTORS 5 00	36,000	0	0
28 BRUSH ISLAND DARIEN,CT 06820				
ELIZABETH BERRY	BOARD OF DIRECTORS 0 00	0	0	0
26 BRUSH ISLAND DARIEN,CT 06820				
DANIEL G TULLY	BOARD OF DIRECTORS 0 00	0	0	0
C/O PO BOX 4080 DARIEN,CT 06820				


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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
1000 FRIENDS OF FLORIDA PO BOX 5948 TALLAHASSEE,FL 323145948	NONE	PUBLIC	SOCIAL WELFARE	1,000
AMERICAN CIVIL RIGHTS UNION 3213 DUKE STREET ALEXANDRIA,VA 22314	NONE	PUBLIC	SOCIAL WELFARE	300
ANNUAL BISHOPS APPEAL 238 JEWETT AVENUE BRIDGEPORT,CT 06606	NONE	PUBLIC	SOCIAL WELFARE	2,000
BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL,MA 024673819	NONE	PUBLIC	EDUCATION	100,000
BOYS TOWN OF JERUSALEM 1 PENN PLAZA SUITE 6250 NEWYORK,NY 10119	NONE	PUBLIC	SOCIAL WELFARE	1,000
CATO INSTITUTE 1000 MASSACHUSETTS AVE NW WASHINGTON,DC 200015403	NONE	PUBLIC	EDUCATIONAL	500
COLUMBIA UNIVERSITY NY PRESBYTERIAN HOSPITAL 630 WEST 168TH STREET NEWYORK,NY 10032	NONE	PUBLIC	HEALTHCARE	1,000
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD 2ND FLOOR BETHESDA,MD 20814	NONE	PUBLIC	HEALTH	8,000
FAIRFIELD UNIVERSITY NORTH BENSON ROAD FAIRFIELD,CT 06824	NONE	PUBLIC	EDUCATION	100,000
HOBE SOUND NATURE CENTER 13640 US HIGHWAY ONE HOBE SOUND,FL 33475	NONE	PUBLIC	EDUCATIONAL	200
JUPITER ISLAND HISTORICAL SOCIETY PO BOX 938 HOBE SOUND,FL 33475	NONE	PUBLIC	HISTORICAL PRESERVATION	150
JUPITER MEDICAL CENTER 1210 SOUTH OLD DIXIE HIGHWAY JUPITER,FL 33458	NONE	PUBLIC	HEALTH	1,000
LA SALLE ACADEMY 215 EAST 6TH STREET NEWYORK,NY 10003	NONE	PUBLIC	EDUCATION	100
MARTIN MEMORIAL FOUNDATION 200 SE HOSPITAL AVENUE STUART,FL 34995	NONE	PUBLIC	HEALTH	25,000
MEDIA RESEARCH CENTER 325 S PATRICK STREET ALEXANDRIA,VA 22314	NONE	PUBLIC	HUMAN SERVICES	1,000
Total  3a				379,850

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK,NY 10021	NONE	PUBLIC	HEALTH	26,000
PARALYZED VETS OF AMERICA 801 EIGHTEENTH STREET NW WASHINGTON,DC 200063517	NONE	PUBLIC	SOCIAL SERVICES	100
SPECIAL OLYMPICS OF CONNECTICUT INC 2666 STATE STREET SUITE 1 HAMDEN,CT 06517	NONE	PUBLIC	SOCIAL WELFARE	200
ST SEBASTIAN SCHOOL 39-76 58TH STREET WOODSIDE,NY 11377	NONE	PUBLIC	EDUCATION	500
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105	NONE	PUBLIC	HEALTH	1,000
STAMFORD HOSPITAL HEALTH FOUNDATION 30 SHELBOURNE ROAD STAMFORD,CT 06904	NONE	PUBLIC	HEALTH	11,000
THE DISABILTY OPPORTUNITY FUND 201 IU WILLETS ROAD ALBERTSON,NY 115071599	NONE	PUBLIC	SOCIAL WELFARE	1,000
THE GUARDIANS OF MARTIN COUNTY PO BOX 1489 HOBE SOUND,FL 33475	NONE	PUBLIC	HUMAN SERVICES	100
THE LEADERSHIP INSTITUTE 1101 NORTH HIGHLAND STREET ARLINGTON,VA 22201	NONE	PUBLIC	HUMAN SERVICES	1,000
SAFE WATER NETWORK 122 EAST 42ND STREET NEW YORK,NY 10168	NONE	PUBLIC	SOCIAL WELFARE	1,000
UNITED WAY OF MARTIN COUNTY PO BOX 362 STUART,FL 34995	NONE	PUBLIC	SOCIAL WELFARE	86,000
VETERANS OF FOREIGN WARS 406 W 34TH STREET KANSAS CITY,MO 64111	NONE	PUBLIC	SOCIAL SERVICES	100
WOUNDED WARRIOR PROJECT 7020 AC SKINNER PKWY SUITE 100 JACKSONVILLE,FL 32556	NONE	PUBLIC	SOCIAL WELFARE	500
AMERICAN CANCER SOCIETY OF FLORIDA 865 SE MONTEREY COMMONS BLVD STUART,FL 34996	NONE	PUBLIC	HEALTH	100
AMERICANS FOR PROSPERITY 1310 N COURTHOUSE ROAD STE 700 ARLINGTON,VA 22201	NONE	PUBLIC	SOCIAL WELFARE	1,000
Total  3a				379,850

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAPITAL RESEARCH CENTER 1513 16TH STREET NW WASHINGTON,DC 20036	NONE	PUBLIC	SOCIAL WELFARE	500
COMBAT WOUNDED VETERANS 26 W ORANGE STREET TARPOON SPRINGLS,FL 34689	NONE	PUBLIC	SOCIAL SERVICES	1,000
DONT TREAD ON MY BUSINESS 14001-C ST GERMAIN DR CENTREVILLE,VA 20121	NONE	PUBLIC	EDUCATION	1,000
JUDICAL WATCH 425 THIRD STREET SW SUITE 800 WASHINGTON,DC 20024	NONE	PUBLIC	EDUCATION	300
ST JOHN PAUL NATIONAL SHRINE PO BOX 1966 NEW HAVEN,CT 06509	NONE	PUBLIC	SOCIAL WELFARE	1,000
TEMPLE ISRAEL 350 ROXBURY ROAD STAMFORD,CT 06902	NONE	PUBLIC	RELIGIOUS	1,000
ST ROSE PARISH 603 SEVENTH AVE BELMAR,NJ 07719	NONE	PUBLIC	RELIGIOUS	1,000
WEST POINT ASSOCIATION OF GRADUATES 698 MILLS ROAD WEST POINT,NY 10996	NONE	PUBLIC	EDUCATION	1,000
HAVERFORD COLLEGE-WHITEHEAD MINDFULNESS INITATIVE 370 LANCASTER AVENUE HAVERFORD,PA 19041	NONE	PUBLIC	EDUCATION	1,000
YMCA SCHOLARSHIP FUND- NORTH SHORE 245 CABOT STREET BEVERLY,MA 01915	NONE	PUBLIC	SOCIAL SERVICES	1,000
CLUB CHEFS OF CONNECTICUT - MEADOW RIDGE C/O BRIAN LIMITONEMEADOW RIDGE 100 REDDING DR REDDING,CT 06896	NONE	PUBLIC	EDUCATION	200
Total  3a				379,850

TY 2014 Accounting Fees Schedule**Name:** DANIEL P & GRACE I TULLY CHARITABLE TRUST**EIN:** 22-2804896

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,500	5,500		0
CONSULTANT	5,000	5,000		0

TY 2014 Investments Corporate
Stock Schedule

Name: DANIEL P & GRACE I TULLY CHARITABLE TRUST
EIN: 22-2804896

Name of Stock	End of Year Book Value	End of Year Fair Market Value
3,650.49 SHS EOG RES INC	30,541	304,560
5,450 NESTLE SA	128,400	404,793
5,870 RECKITT BENCKISER PLC	88,737	550,417
7,046 LIBERTY GLOBAL COM C	54,890	288,886
3,800 SHS CANADIAN NATURAL RES LTD	96,052	91,960
13,575.856 SHS OLD RUPUBLIC INTL CORP	229,117	257,398
7,700 SHS SKF FRUEHER AB SVENSKA	131,218	134,332
13,500 SHS BROOKFIELD ASSET MANAGEMENT	199,840	463,590
73,844 SHS ENERGY TRANSFER EQUITY	823,570	1,398,605
2,200 SHS CHUBB CORP	105,464	287,166
5,800 SHS DISCOVERY COMMUNICATIONS	104,371	171,564
3,500 SHS WELLS FARGO	84,798	192,850
10,000 SHS BANK OF AMERICA	150,000	174,300
9,900 SHS ULTRA PETROLEUM	250,971	39,699
1,800 SHS RANGE RESOURCES CORP	75,442	51,444
AMEREN	0	0
APPROACH RESOURCES	0	0
PENTAIR LTD	0	0
WEIGHT WATCHERS	0	0
DANONE	0	0
5,200 SHS ORACLE	206,002	202,644
3,785 SHS THERAVANCE BIOPHARMA	111,688	71,044
THERAVANCE	0	0
TIME WARNER CABLE	0	0
9,800 SHS ACTUANT	210,444	242,648
600 SHS ALLERGAN	161,181	188,334
900 SHS APPLE	98,742	106,470
1,900 SHS EBAY	43,864	56,221
5,870 SHS INDIVIOR	2,262	16,964
5,200 SHS MICROSOFT	219,999	282,620

Name of Stock	End of Year Book Value	End of Year Fair Market Value
4,100 SHS ONEX	231,732	253,236
4,300 SHS PAYPAL HOLDINGS	158,962	151,618
2,200 SHS UNITED TECHNOLOGIES	200,909	211,310
1,200 SHS ZIMMER BIOMET HOLDINGS	136,262	121,212

TY 2014 Other Expenses Schedule

Name: DANIEL P & GRACE I TULLY CHARITABLE TRUST

EIN: 22-2804896

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL INVESTMENT FEES	56,696	56,696		0

TY 2014 Other Liabilities Schedule

Name: DANIEL P & GRACE I TULLY CHARITABLE TRUST

EIN: 22-2804896

Description	Beginning of Year - Book Value	End of Year - Book Value
PAYROLL TAXES PAYABLE	38,754	0

TY 2014 Substantial Contributors Schedule

Name: DANIEL P & GRACE I TULLY CHARITABLE TRUST

EIN: 22-2804896

Name	Address
DANIEL P TULLY	C/O PO BOX 4080 DARIEN, CT 06820

TY 2014 Taxes Schedule**Name:** DANIEL P & GRACE I TULLY CHARITABLE TRUST**EIN:** 22-2804896

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES WITHHELD	5,471	5,471		0
PAYROLL TAXES	3,474	3,474		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ 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 <u>www.irs.gov/form990</u>.	OMB No 1545-0047
		2014

Name of the organization DANIEL P & GRACE I TULLY CHARITABLE TRUST	Employer identification number 22-2804896
--	---

Organization type (check one)

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

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

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).

Name of organization DANIEL P & GRACE I TULLY CHARITABLE TRUST	Employer identification number 22-2804896
--	---

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
<u>1</u>	DANIEL P TULLY 76 GOMEZ ROAD HOBE SOUND, FL 33455	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u> </u>		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization DANIEL P & GRACE I TULLY CHARITABLE TRUST	Employer identification number 22-2804896
--	---

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(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 DANIEL P & GRACE I TULLY CHARITABLE TRUST	Employer identification number 22-2804896
--	---

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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	