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#### DLN: 93491137011196

OMB No 1545-0052

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  $\underline{www.irs.gov/form990pf}$ .

Open to Public Inspection

For	cale	ndar year 2015, or tax y	ear beginning 01-0	01-2015	, and end	ling 1	2-31-2015		
	e of four	ndation VEST FOUNDATION INC			A Empl	oyer id	entification numbe	er	_
5 (	X C HAK	VEST FOUNDATION INC			20-044	3423			
		street (or P O box number if mail is i	not delivered to street address	) Room/suite	<b>B</b> Teleph	none nur	nber (see instruction	s)	
25	04 N BIN	IGHAM ST			(802) 4	62-2260	ı		
		state or province, country, and ZIP o VT 05753	r foreign postal code		C If exe	emption	application is pendin	g, check here ► 「	_
G CI	neck al	that apply   Initial return	Initial return of a f	ormer public charity	<del></del>			_	_
•	icek ai	Final return Address chang	A mended return	ormer public entire,	<b>2.</b> Fo	oreign oi	ganizations, check h ganizations meeting k here and attach co	the 85% 🛌 🔽	
H Ch	eck ty	pe of organization  Section 1947(a)(1) nonexempt charitat	ole trust   Other taxabl	e private foundation	<b>E</b> If pr unde	ıvate fol	indation status was to 507(b)(1)(A), chec	erminated	_
		et value of all assets at end	JAccounting method Other (specify)	✓ Cash   Accrual	- 11 11		ition is in a 60-mont n 507(b)(1)(B), chec		_
		rom Part II, col. (c), \$ 4,752,600	(Part I, column (d) must	be on cash basıs.)	unac	or acction	1 307(b)(1)(b), chec	. ,	
(The total of amounts in column necessarily equal the amounts i		Analysis of Revenue a (The total of amounts in columns ( necessarily equal the amounts in co instructions))	b), (c), and (d) may not	Revenue and expenses per (a) books	Net inves (b) incom		Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only	
	1	Contributions, gifts, grants, e	tc , received (attach						
		schedule)		313,124					ı
	2	Check ► ☐ If the foundation							
	_			212		212			
	3	Interest on savings and temp Dividends and interest from s	•	312 118,130		312 118,130		-	
	4   5a	Gross rents		110,130		110,130		-	
	Ь	Net rental income or (loss)							
Ф	6a	Net gain or (loss) from sale o		195,283					
Revenue	b	Gross sales price for all asse							
Re	7	Capital gain net income (from	n Part IV, line 2)			195,283			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	С	Gross profit or (loss) (attach	schedule)						
	11	Other income (attach schedu	le)	-33,479					
	12	Total.Add lines 1 through 11		593,370		313,725			
	13	Compensation of officers, dire	ectors, trustees, etc						
	14	O ther employee salaries and	wages						
φ	15	Pension plans, employee ben							
SH.	16a	Legal fees (attach schedule).							
Expenses	Ь	Accounting fees (attach sche	edule)	1,000		1,000			
	С .	Other professional fees (atta	ch schedule)						
Administrative	17	Interest							
2	18	Taxes (attach schedule) (see	einstructions)	306		306			
	19	Depreciation (attach schedul	e) and depletion						
듣	20	Occupancy							
and #	21	Travel, conferences, and mee	_						
	22	Printing and publications							_
Ĭ.	23	Other expenses (attach sche		62				6	52 —
Operating	24	Total operating and administ Add lines 13 through 23	-	1,368		1,306		6	52
Ō	25	Contributions, gifts, grants pa	aıd	255,000				255,00	00
_	26	<b>Total expenses and disbursen</b> 25	nents.Add lines 24 and	256,368		1,306		255,06	52
	27	Subtract line 26 from line 12							
	a	Excess of revenue over exper		337,002					
	b	Net investment income (if ne	- '			312,419			
	С	Adjusted net income(If negat	ıve, enter -0-)						ø

Pa	rt 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 o	
	1	Cash—non-interest-bearing	(a) Book Value 88,782	<b>(b)</b> Book Value 66,282	(c) Fair Market Value 66,282
		Savings and temporary cash investments	· · ·	9,258	<u> </u>
	2		0,403	9,230	9,238
	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 🟲			
اع	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		926	926
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4,946,779	4,676,134	4,676,134
	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	O ther assets (describe 🟲)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	5,041,964	4,752,600	4,752,600
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>\$</u>	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
ᄀ	22	Other liabilities (describe	4,610		
	23	Total liabilities(add lines 17 through 22)	4,610	0	
		Foundations that follow SFAS 117, check here			
\$		and complete lines 24 through 26 and lines 30 and 31.			
읡	24	Unrestricted	5,037,354	4,752,600	
훒	25	Temporarily restricted		, ,	
쁿	26	Permanently restricted			
딞		Foundations that do not follow SFAS 117, check here			
or Fund Balances		and complete lines 27 through 31.			
9	27	Capital stock, trust principal, or current funds			
첽	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances(see instructions)	5,037,354	4,752,600	
긷	31	Total liabilities and net assets/fund balances(see instructions)	4,752,600		
Do			5,041,964	1,7 32,000	
	rt III		(a) line 20 (		
1		Total net assets or fund balances at beginning of year—Part II, column			E 027 254
•		with end-of-year figure reported on prior year's return)			5,037,354
2		Enter amount from Part I, line 27a		<del></del>	337,002
3		Other increases not included in line 2 (itemize)		_   3	E 274 251
4		Add lines 1, 2, and 3			5,374,356
5		Decreases not included in line 2 (itemize)			621,756
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	∼art 11, column (b), lii	ne 30 <b>.   6  </b>	4,752,600

Form 9	90-PF (2015)					Page:	
Part	Capital Gains and Lo	sses for Tax on Investme	ent Income	1			
		d(s) of property sold (e g , real es or common stock, 200 shs MLC		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )		
1 a	SEE ATTACHED VANGUAR	D 9269		Р	2015-01-01	2015-07-01	
b	SEE ATTACHED VANGUAR	D 9269		Р	2014-01-01	2015-07-01	
С	SEE ATTACHED VANGUAR	D 9269		Р	2014-01-01	2015-07-01	
d							
е							
(6	e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale		or (loss) (f) mınus (g)	
а	38,498			39,360	)	-862	
b	264,266			178,553	85,71		
С	215,794			124,583	91,21		
d							
e							
Со	mplete only for assets showing	gaın ın column (h) and owned by	the foundation	on 12/31/69			
(i)	FM V as of 12/31/69	Adjusted basıs <b>(j)</b> as of 12/31/69		ess of col (ı) col (յ), ıf any	Gains (Col (h) gain minus col (k), but not less than -0-) ( (I) Losses (from col (h))		
a						-862	
b						85,71	
С						91,21	
d							
e							
2	Capital gain net income or (n			in Part I, line 7 ) in Part I, line 7 }	2	195,28	
3	Net short-term capital gain o	or (loss) as defined in sections 12	222(5) and (6)	)			
	If gain, also enter in Part I, li in Part I, line 8	ne 8, column (c) (see instruction	s) If(loss), e	nter -0 -	3	-862	
Part	V Oualification Under	Section 4940(e) for Redu	ced Tax on	Net Investme	nt Income		
	-	• •					
	tional use by domestic private f on 4940(d)(2) applies, leave th	oundations subject to the section is part blank	1 4940(a) tax	on net investment	ncome)		
		on 4942 tax on the distributable a			rıod?	┌ Yes ┌ No	

'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>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ratio (col (b) divided by col (c))
	2014	219,619	4,268,244		0 051454
	2013	189,210	3,602,029		0 052529
	2012	168,107	3,162,551		0 053156
2011		144,782	2,791,250		0 051870
	2010	124,000	2,536,933		0 048878
2	<b>Total</b> of line 1, colum	n (d)		2	0 257887
3	_	ratio for the 5-year base period—div the foundation has been in existence		3	0 051577
4	Enter the net value o	f noncharitable-use assets for 2015	5 from Part X, line 5	4	4,803,819
5	Multiply line 4 by line	e 3		5	247,767
6	Enter 1% of net inve	stment income (1% of Part I, line 2	7b)	6	3,124
7	Add lines 5 and 6.			7	250,891
8	Enter qualifying distr	ributions from Part XII, line 4		8	255,062
	If line 8 is equal to o the Part VI instruction		in Part VI, line 1b, and complete tha	it part	using a 1% tax rate See

	990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	040(a)	o# 4049 or		10 of	the inst	mustis		age <b>4</b>
			, UI 4946—St	e page	5 10 OI	the inst	ructio	115)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	- 1		]					
	Date of ruling or determination letter			}					
h	(attach copy of letter if necessary-see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V,	chack			1				3,124
b	here F and enter 1% of Part I, line 27b	, CHECK		,					5,124
c	All other domestic foundations enter 2% of line 27b Exempt foreign organiza	ations (	enter 4% of						
2	Part I, line 12, col (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	2				
3	Add lines 1 and 2				3				3,124
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter -0-)	ndatıor	ns only Oth	ers	4				
5	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0							3	3,124
6	Credits/Payments		1						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		4,050					
b	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c							
d _	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				4,050
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2				8				
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount</b> .				9				0.2.6
10 11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b>	926	Refunded		10				926
	t VII-A Statements Regarding Activities	720	Kerundeu						
1a	During the tax year, did the foundation attempt to influence any national, state	e. or loc	al legislatio	n or di				Yes	No
	it participate or intervene in any political campaign?				· .		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	politica	l purposes (	see In	structi	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and co	ppies of any i	materia	ls				
	published or distributed by the foundation in connection with the activities.								
C	Did the foundation file <b>Form 1120-POL</b> for this year?						1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impor								
	(1) On the foundation  \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for pol	itical e	xpenditure t	ax imp	osed				
2	on foundation managers 🕨 \$		+- +b - IDC2				2		N-
2	Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities.	ported	to the IKS?				2		No
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts anve	arning inetri	ımant	articles	-			
,	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	_	_	•			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						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 du						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 49	45)sa	tisfied eithe	er					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the								
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	and Part XV		s," complete		, col. (c <sub>.</sub>	), • • •	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ( $\blacktriangleright \text{VT}$	see ins	structions)						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G? $\it If$	"No," at	tach explana	tion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the $\boldsymbol{\eta}$	meanın	g of section	4942	(յ)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	tructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9	$\longmapsto$	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes, and addresses.</i>			_			10		No
		-	-	-	-	-			

Par	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 ►CHARLES W GRIGG Telephone no ►(802	1462	-2260	
	Located at ►2504 N BINGHAM ST CORNWALL VT  ZIP+4 ►05753	<del>/</del>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	i	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 🟲			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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?  Yes  No			
	(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)? $ extstyle  ex$			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes 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	41.		
	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,	10		
_	that were not corrected before the first day of the tax year beginning in 2015?	1c		
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 $4942(j)(5)$ )			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
u	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20			
ь	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 allyears listed, answer "No" and attach statement—see instructions )	2b		
c	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			
За	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 2015 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 2015.).	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 2015?	4b	1	No

Pal	Statements Rega	irding Activities for	· Wr	iich Form 4/20	мау	, se kednirea ( <i>cont</i>	inuea)	<u>'</u>	_
5a	During the year did the foundation	n pay or incurany amoun	t to						ı
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (section 49	45(e	(a)) <sup>?</sup>	No		l
	(2) Influence the outcome of any	specific public election (	(see	section 4955), or to	car	ry			l
	on, directly or indirectly, any voter registration drive?								l
(3) Provide a grant to an individual for travel, study, or other similar purposes?									l
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organızatıon de	scrib	ped			l
	ın section 4945(d)(4)(A)? (see instructions)								
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or					l
	educational purposes, or for t	he prevention of cruelty	to ch	ııldren or anımals?.			√ No		l
b	If any answer is "Yes" to 5a(1)-(	5), dıd <b>any</b> of the transac	tions	s fail to qualify under	the	exceptions described in			i
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?								
	Organizations relying on a curren	t notice regarding disast	eras	ssistance check her	e		_		ı
C	If the answer is "Yes" to question	n 5a(4), does the foundat	ion c	laım exemption fron	n the				l
	tax because it maintained expend	diture responsibility for th	he gr	ant?		\ Yes \	No No		l
	If "Yes," attach the statement requ	ired by Regulations sectio	n 53.	.4945–5(d).					l
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	miums on			l
	a personal benefit contract?						No No		l
b	Did the foundation, during the yea	ar, pay premiums, directl	y or i	indirectly, on a perso	onal	benefit contract?		6b No	
	If "Yes" to 6b, file Form 8870.								l
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter t	ransaction? <b>TYes F</b>	No No		i
b	If yes, did the foundation receive	any proceeds or have an	ıy ne	t income attributable	e to t	the transaction?		7b	
Pai		t Officers, Directors	s, T	rustees, Founda	atio	n Managers, Highly	Paid E	mployees,	
	and Contractors  List all officers, directors, trustee	- foundation monages	4	hair commonantion (	:				-
	List all officers, directors, trustee				<u>see i</u>	(d)			-
	(a) Name and address	Title, and average hours per week	(c)	) Compensation( <b>If</b> not paid, enter		Contributions to	Ex	pense account,	
	(a) Name and address	(b) devoted to position		-0-)		mployee benefit plans	<b>(e)</b> otl	her allowances	
500	Addıtıonal Data Table				and	deferred compensation			-
See	Additional Data Fable	1							
									-
		-							
									-
		4							
									_
		4							
									_
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1– T	-see	1	nter "NO	NE."	-
	(a)	Title, and aver				Contributions to employee benefit	Ex	pense account,	
Nar	me and address of each employee ; more than \$50,000	paid hours per we <b>(b)</b> devoted to pos		(c) Compensation	n	plans and deferred		herallowances	
		(b) devoted to pos	1011			(d) compensation			_
NON	IE								
									_
							1		
									_
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							1		
									-
							1		
T	I					<u> </u>			-

Form 990-PF	(2015)		Page <b>7</b>
Part VIII	Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly	Paid Employees,
3 Five high	est-paid independent contractors for professional services	(see instructions). If none, enter "NONE".	
(a) Name a	and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE			
Total number	of others receiving over \$50,000 for professional services.		
Part IX-A		<u> </u>	
	on's four largest direct charitable activities during the tax year. Include re d other beneficiaries served, conferences convened, research papers proc		Expenses
	CONTRIBUTIONS TO 33 WORTHY 501(C)3 CHARITIES LL TRY TO IMPROVE THE WORLD	TO PERFORM AND EXECUTE PROGRAMS	
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	A mount
<b>1</b> N/A			
2			
•			
All other p	rogram-related investments See instructions		
3			
-			]
Total. Add lin	es 1 through 3		

#### Part X Minimum Investment Return

Ра	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	4,821,979
b	Average of monthly cash balances	1b	54,995
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	4,876,974
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,876,974
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	73,155
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,803,819
6	Minimum investment return. Enter 5% of line 5	6	240,191
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	240,191
2a	Tax on investment income for 2015 from Part VI, line 5 2a 3,124		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	3,124
3	Distributable amount before adjustments Subtract line 2c from line 1	3	237,067
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	237,067
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	237,067
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	255,062
	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	255,062
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	3,124
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	251,938
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII U	Indistributed	Income (see instr	uctions)			
				<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d</b> ) 2015
1	Distributable a	amount for 2015	from Part XI, line 7				237,067
2	Undistributed	income, if any, as	s of the end of 2015				
а	Enter amount	for 2014 only.					
b	Total for prior	years 20	, 20, 20				
3	Excess distrib	outions carryover					
а	From 2010.		1,271				
b	From 2011.		7,755				
C	From 2012.		13,849				
d	From 2013.		11,197				
е	From 2014.		16,969				
f	<b>Total</b> of lines 3	3a through e		51,041			
4	Qualifying dist	ributions for 201	5 from Part				
	XII, line 4 🕨	\$	255,062				
а	Applied to 201	14, but not more	than line 2a				
Ь		listributed income					
			ions)				
С		tributions out of a instructions)					
d			imount				237,067
е	Remaining am	ount distributed o	out of corpus	17,995			
5	Excess distrib	outions carryover	applied to 2015				
	•	appears ın column	· //				
_		ount must be show	, , ,				
6	indicated bel	total of each colo ow:	umn as				
а	Corpus Add III	nes 3f, 4c, and 4e	e Subtract line 5	69,036			
b	Prior years' un	distributed incom	ne Subtract				
	line 4b from lir	ne 2b					
C		unt of prior years					
		ch a notice of def r on which the se	•				
	•		sed				
d		c from line 6b T					
	—see ınstructı	ons					
е	Undistributed	ıncome for 2014	Subtract line				
		a Taxable amoun	t—see				
_	instructions.						
Т		income for 2016 from line 1 This					
		ın 2015					0
7	Amounts treat	ed as distribution	ns out of				
		sfy requirements					
	•	· · · · · · · · · · · · · · · · · · ·	ı)(3) (Election may				
0	•	ee instructions) outions carrvover	from 2010 not				
0		5 or line 7 (see i		1,271			
9		utions carryover t	· · · · · · · · · · · · · · · · · · ·				
-		7 and 8 from line		67,765			
10	Analysis of lin	ie 9					
а	Excess from 2	2011	7,755				
b	Excess from 2	2012	13,849				
	Excess from 2		11,197				
d	Excess from 2	2014	16,969				
е	Excess from 2	2015	17,995				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
<b>b</b> 8	35% 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					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	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					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 255,000 **b** Approved for future payment

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ing Activitie	S			Page <b>1</b> 2
Enter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	<b>(d)</b> A mount	function income (See instructions)
a b					
c					
e f					
<ul> <li>g Fees and contracts from government agencies</li> <li>2 Membership dues and assessments.</li> <li>3 Interest on savings and temporary cash investments.</li> </ul>					31
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate					118,13
<ul><li>a Debt-financed property</li><li>b Not debt-financed property</li></ul>					
6 Net rental income or (loss) from personal property					
<ul><li>7 Other investment income</li><li>8 Gain or (loss) from sales of assets other than inventory</li></ul>					195,28
<ul><li>9 Net income or (loss) from special events</li><li>10 Gross profit or (loss) from sales of inventory</li></ul>					
.1 Other revenue a RENTAL  b OTHER					-6
c PARTNERSHIP CAP GAINS & LOSSE d PARTNERSHIP HOLDINGS					-54 -32,86
e			1	3	280,246
(See worksheet in line 13 instructions to verify  Part XVI-B Relationship of Activities to	calculations )			es	
Explain below how each activity for wh the accomplishment of the foundation instructions )	ıch ıncome ıs rep	orted in column	(e) of Part XVI-A co	ntributed import	

Part 2	XVII	Information Re Noncharitable					nsactio	ns and I	Relationships	With			
		rganızatıon dırectly or ıı	ndırectly (	engage II	n any of	the following v						Vas	No.
		01(c) of the Code (other	er than se	ction 50	1(c)(3) c	organizations)	orinsed	ction 527,	relating to politic	:al		res	NO
_		ions? s from the reporting four	dation to	a nonch	aritable :	avamnt argan	zation of	<b>.</b>					
		n									1a(1)		No
		erassets									-		
` ,		nsactions									IU(2)		140
		s of assets to a noncha	ritable ex	emnt ora	ianizatioi	n					1b(1)		No
		hases of assets from a									$\vdash$	<u> </u>	
		al of facilities, equipme									$\vdash$		
		nbursement arrangemen										1	
		is or loan guarantees.									$\overline{}$		
		mance of services or m										<u> </u>	
		of facilities, equipment, i									$\vdash$		
													140
of th	e god ıy tra	ods, other assets, or se insaction or sharing arra (b) Amount involved	rvices giv angement	en by the , show in	e reportı ı column	ng foundation	If the fo of the go	undation r oods, other	eceived less that assets, or servi	n fair mark ces receive	et value ed		nts
						· -		•		·	_		
							+						
	_												
	_												
	_						_						
desc	rıbed	indation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		n sectio		rın sect			ption of relati	·	s 🔽	No
Sign Here	the Info	ler penalties of perjury, best of my knowledge a rmation of which prepar *****	nd belief,	ıt ıs true	e, correct		e Decla			an taxpaye May t	r) is bas he IRS dis	ed on	all
	•	Signature of officer or t	rustee			Date	— <b>)</b>	Title		below	1b(2) No 1b(3) No 1b(4) No 1b(5) No 1b(6) No r market value arket value delived  Individual sharing arrangements  Individual sharing		
		Print/Type preparer's STEVEN M MISASI CPA		Prepare	er's Sıgn	ature	Date 201	6-05-10	Check if self- employed ▶	PTIN P	012833	46	
Paid Prepa Use	rer	Firm's name MISASI & MISASI							Firm's EIN ► 2	0-366259	3		
Only		Firm's address ► PO BOX 693 MIDDLE	BURY, V	Γ 05753	30693				Phone no (802	2)388-630	)7		

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

	, ,					
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances		
CHARLES W GRIGG	PRESIDENT	0	0	0		
2504 N BINGHAM ST CORNWALL,VT 05753	2 00					
SUSAN K GRIGG	VP/SECY/TREA	0	0	0		
2504 N BINGHAM ST CORNWALL, VT 05753	2 00					
DONALD W GRIGG	TRUSTEE	0	0	0		
5208 PINEY HOLLOW CT DURHAM, NC 27705	1 00					
SALLY G OLMSTED	TRUSTEE	0	0	0		
167 FOWLER RD ADAMONT, VT 05640	1 00					
LAURIE D GRIGG	TRUSTEE	0	0	0		
1051 JACK HILL RD E CALAIS, VT 05650	1 00					

Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor			
a Paid during the year				
ADDISON COUNTY HUMANE SOC MIDDLEBURY MIDDLEBURY,VT 05753	NONE	501C3	ANIMAL SHELTER	3,000
ADDISON COUNTY PARENT CHILD PO BOX 646 MIDDLEBURY,VT 05753	NONE	501C3	GENERAL FUNDS	10,000
BUCKNELL UNIVERSITY LEWISBURG LEWISBURG,PA 17837	NONE	501 C3	SUPPORT EDUCATION	3,000
CAPSTONE COMMUNITY ACTION 20 GABLE PLACE BARRE,VT 05641	NONE	501C3	GENERAL	7,000
DOCTORS WITHOUT BORDERS NEW YORK NEW YORK, NY 10001	NONE	501C 3	PROVIDE MEDICAL HELP FOR NEEDY	3,000
DUKE FOREST BOX 90332 DURHAM,NC 27708	NONE	501C3	TRAIL MAINT	1,000
DUKE GARDENS BOX 90341 DURHAM,NC 27708	NONE	501C3	ENDANGERED SPECIES	500
DUKE UNIVERSITY BOX 90581 DURHAM,NC 27701	NONE	501C3	SUPPORT EDUCATION	3,000
ELDERLY SERVICES INC MIDDLEBURY MIDDLEBURY,VT 05753	NONE	501 C3	PROVIDE SERVICES FOR ELDERLY	5,000
EMILY K CENTER 904 WEST CHAPEL ST DURHAM,NC 27701	NONE	501C3	GENERAL FUNDS	3,500
FAMILY CENTER OF WASHINGTON COUNTY 383 SHERIDAN DR MONTPELIER, VT 05602	NONE	501C3	GENERAL FUNDS	10,000
GIRLS & BOYS FIRST MENTORING 73 MAIN ST MONTPELIER, VT 05602	NONE	501C3	GENERAL	5,000
GIVE DIRECTLY PO BOX 3221 NEW YORK, NY 10008	NONE	501C3	GENERAL FUNDS	6,500
GOLDEN DOOR SCHOLARS 1101 521 CORPORATE CTR FORT MILLS,SC 29707	NONE	501C3	GENERAL FUNDS	6,500
HABITAT FOR HUMANITY MIDDLEBURY MIDDLEBURY,VT 05753	NONE	501C 3	BUILD AFFORDABLE HOUSING	3,000
Total				255,000

Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor	recipient		
a Paid during the year				
HAITI OUTREACH MINISTRIES SUMMER SUMMER,ME 04292	NONE	501 C3	HELP REBUILD HOMES IN HAITI	2,000
HOUSING FOR NEW HOPE 18 WEST COLONY PL DURHAM,NC 27705	NONE	501C3	GENERAL FUNDS	2,500
HUNGER FREE VT 38 EASTWOOD DR SO BURLINGTON,VT 05403	NONE	501C3	CHILDRENS NUTRITION	5,000
INSTITUTE FOR SUSTAINABLE COMMUNITI 535 STONE CUTTERS WAY MONTPELIER,VT 05602	NONE	501C3	GENERAL	5,000
LANDMARK SCHOOL 429 HALE ST PRIDES CROSSING, MA 01965	NONE	501C3	GENERAL	5,000
MOTHERS & CHILDREN PO BOX 14469 RALEIGH,NC 27620	NONE	501C3	OPERATING FUNDS	2,500
NATURE CONSERVANCY MONTPELIER MONTPELIER,VT 05633	NONE	501 C3	SUPPORT CONSERVATION PROJECTS	10,000
OPERA COMPANY OF MIDDLEBURY MIDDLEBURY MIDDLEBURY,VT 05753	NONE	501C3	GENERAL	3,000
PENNYWISE FOUNDATION 25 OLD PLUMB RD ESSEX JUNCTION, VT 05452	NONE	501C3	GENERAL	5,000
PEOPLE FOR PORTER PORTER DR MIDDLEBURY,VT 05753	NONE	501C3	GENERAL FUNDS	3,000
POPULATION MEDIA CENTER PO BOX 547 SHELBURNE,VT 05482	NONE	501C3	OPERATING FUNDS	5,000
REALITY MINISTRIES DURHAM DURHAM,NC 27701	NONE	501 C3	PROVIDE AID FOR NEEDY	10,000
THE CARTER CENTER ATLANTA ATLANTA, GA 30303	NONE	501 C 3	SUPPORT OUTREACH PROGRAM	1,000
TOWN HALL THEATRE 68 SOUTH PLESANT ST MIDDLEBURY,VT 05753	NONE	501C3	GENERAL FUNDS	10,000
TRIANGLE LAND CONSERVANCY RALEIGH RALEIGH,NC 27601	NONE	501 C3	SUPPORT CONSERVATION PROJECTS	1,000
Total			▶ 3a	255,000

			the real of Approved for	
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		
a Paid during the year				
TRINITY SCHOOL DURHAM DURHAM,NC 27701	NONE	501 C3	SUPPORT EDUCATION	5,000
UNITED WAY COURT ST MIDDLEBURY,VT 05753	NONE	501C3	OPERATING FUNDS	5,000
VERMONT COMMUNITY FOUNDATION 3 COURT ST MIDDLEBURY,VT 05753	NONE	501C3	COMMUNITY SUPPORT	25,000
VERMONT HORSE-ASSISTED THERAPY 307 CULVER HILL RD MIDDLESEX,VT 05602	NONE	501C3	GENERAL FUNDS	6,000
VERMONT WORKS FOR WOMEN 22A MALLETS BAY AVE WINOOSKI,VT 05404	NONE	501C3	GENERAL	3,000
VT LAND TRUST MONTPELIER MONTPELIER, VT 05633	NONE	501 C3	SUPPORT CONSERVATION PROJECTS	4,000
VT PUBLIC RADIO BURLINGTON BURLINGTON,VT 05401	NONE	501 C3	SUPPORT PUBLIC RADIO	5,000
MIDDLEBURY AREA LAND TRUST 63 MAPLE ST MIDDLEBURY,VT 05753	NONE	501C3	OPERATING FUNDS	2,000
ADDISON RESPITE CARE HOME LTD PO BOX 953 MIDDLEBURY,VT 05753	NONE	501C3	OPERATING FUNDS	10,000
INTERNATIONAL RESCUE CMTEE 122 EAST 42ND ST NEW YORK,NY 10168	NONE	501C3	OPERATING FUNDS	2,000
CHARTER HOUSE COALITION PO BOX 344 EAST MIDDLEBURY,VT 05740	NONE	501C3	OPERATING FUNDS	5,000
CONNECTICUT COLLEGE 270 MOHEGAN AVE NEW LONDON,CT 06320	NONE	501C3	OPERATING FUNDS	3,000
ADDISON COUNTY COMMUNITY TRUST 272 MAIN ST VERGENNES,VT 05491	NONE	501C3	OPERATING FUNDS	5,000
VERMONT PBS 204 ETHAN ALLEN AVE COLCHESTER,VT 05446	NONE	501C3	OPERATING FUNDS	1,000
FINCA 1201 15TH STREET WASHINGTON, DC 20005	NONE	501C3	OPERATING FUNDS	1,000
Total			▶ 3a	255,000

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				
OXFAM AMERICA 266 CAUSEWAY ST BOSTON,MA 02114	NONE	501C3	OPERATING FUNDS	2,000
U32 930 GALLISON HILL RD MONTPELIER, VT 05602	NONE	501C3	OPERATING FUNDS	1,000
UNION OF CONCERNED SCIENTISTS 2 BRATTELE SQ CAMBRIDGE,MA 02138	NONE	501C3	OPERATING FUNDS	3,000
VYCC 1949 EAST MAIN ST RICHMOND, VT 05477	NONE	501C3	OPERATING FUNDS	5,000
LOCAL SOCIAL SERVICES 167 FOWLER ST ADAMANT, VT 05640	NONE	501C3	OPERATING FUNDS	5,000
TRUST FOR PUBLIC LANDS 3 SHIPMAN PL MONTPELIER, VT 05602	NONE	501C3	OPERATING FUNDS	5,000
ADAMANT COMMUNITY ARTS CENTER 135 CHURCH ST BURLINGTON,VT 05401	NONE	501C3	OPERATING FUNDS	3,000
PROCTOR ACADEMY 204 MAIN ST ANDOVER,NH 03216	NONE	501C3	OPERATING FUNDS	3,000
PEOPLES HEALTH AND WELLNESS CLINIC 553 N MAIN ST BARRE,VT 05641	NONE	501C3	OPERATING FUNDS	6,000
Total			▶ 3a	255,000

# **TY 2015 Accounting Fees Schedule**

Name: S & C HARVEST FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	1,000	1,000		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491137011196

## **TY 2015 Investments Corporate Stock Schedule**

Name: S & C HARVEST FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VARIOUS SECURITIES	4,676,134	4,676,134

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### **TY 2015 Other Decreases Schedule**

Name: S & C HARVEST FOUNDATION INC

Description	Amount
2015 FEDERAL EXCISE TAX	4,613
UNREALIZED LOSS ON HOLDINGS	617,143

## **TY 2015 Other Expenses Schedule**

Name: S & C HARVEST FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
CHARITY WATCH				
CONT FROM PASS PTP'S	62			62
SUPPLIES				

#### **TY 2015 Other Income Schedule**

Name: S & C HARVEST FOUNDATION INC

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RENTAL	-69		
OTHER	1		
PARTNERSHIP CAP GAINS & LOSSE	-543		
PARTNERSHIP HOLDINGS	-32,868		



#### **TY 2015 Other Liabilities Schedule**

Name: S & C HARVEST FOUNDATION INC

Description	Beginning of Year - Book Value	End of Year - Book Value
FEDERAL EXCISE TAX PAYABLE	4,610	

#### **TY 2015 Taxes Schedule**

Name: S & C HARVEST FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID PTP'S	37	37		
FOREIGN TAX PAID VANGUARD	269	269		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491137011196

LIN. 95<del>4</del>91157611190

OMB No 1545-0047

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

S & C HARVEST FOUNDATION INC		20-0443423		
Organization type (check one)				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)( ) (enter number) organization			
		private foundation		
	527 political organization			
Form 990-PF	√ 501(c)(3) exempt private foundation			
	☐ 4947(a)(1) nonexempt charitable trust treated as a priva	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation		
General Rule  For an organiza	(c)(7), (8), or (10) organization can check boxes for both the Gen stion filing Form 990, 990-EZ, or 990-PF that received, during the year from any one contributor Complete Parts I and II See instructions	ear, contributions totaling \$5,000 or more (in money or		
Special Rules				
under sections 50 received from an	on described in section 501(c)(3) filing Form 990 or 990-EZ that m 09(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 y one contributor, during the year, total contributions of the greate or (ii) Form 990-EZ, line 1 Complete Parts I and II	0 or 990-EZ), Part II, line 13, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 99 otal contributions of more than \$1,000 <i>exclusively</i> for religious, changed of cruelty to children or animals. Complete Parts I, II, and III	•		
during the year, of this box is checked purpose Do not of	con described in section 501(c)(7), (8), or (10) filing Form 990 or 98 contributions exclusively for religious, charitable, etc., purposes, bed, enter here the total contributions that were received during the complete any of the parts unless the <b>General Rule</b> applies to this ble, etc., contributions totaling \$5,000 or more during the year	out no such contributions totaled more than \$1,000 lf e year for an exclusively religious, charitable, etc, organization because it received nonexclusively		
Caution. An organization	n 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)

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,

Name of organization
S & C HARVEST FOUNDATION INC

Employer identification number 20-0443423

Part I	Contributors (see instructions) Use duplicate copies of Part I if ad	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	GRIGG FAMILY CHARITABLE LEAD TRUST 2504 N BINGHAM ST	\$ 66,792	Person Payroll	Г Г –
	CORNWALL, VT 05753		Noncash (Complete Part II for contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
2	CHARLES W GRIGG 2504 N BINGHAM ST	\$ 146,332	Person Payroll	r r
	CORNWALL, VT 05753		Noncash (Complete Part II for contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
3	GRIGG FAMILY LEAD TRUST 2011		Person Payroll	r □
	2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 50,000	Noncash	I코
			(Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
4	GRIGG FAMILY CHARITABLE LEAD TR 201 2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 50,000	Person Payroll Noncash (Complete Part II for contributions)	「「 「 or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
		\$	Person Payroll Noncash (Complete Part II for	┌ ┌ or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions ) (d) Type of cont	
		\$	Payroll  Noncash  (Complete Part II for contributions)	r F or noncash

Name of organization S & C HARVEST FOUNDATION INC Employer identification number

20-0443423

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
	See Addıtıonal Data Table	\$	
(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-F	F)	(201	5)
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chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page <b>4</b>
lame of organization &CHARVEST FOUN	IDATION INC		Employer identification number 20-0443423
total more line entry. of \$1,000 o	than \$1,000 for the year from any of	one contributor. Complete co III, enter the total of <i>exclusive</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following ely religious, charitable, etc., contributions is.)   \$\bigsir \bigsir
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.   _			
_	Transferee's name, address, an	(e) Transfer of gil d ZIP4	ft 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
.  -			
<del>-</del>	Transferee's name, address, an	(e) Transfer of gri	ft 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
.   _			
-	Transferee's name, address, an	(e) Transfer of gri	ft 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
	Transferee's name, address, an	(e) Transfer of gil id ZIP4	ft Relationship of transferor to transferee
-			

#### **Additional Data**

Software ID: Software Version:

**EIN:** 20-0443423

Name: S & C HARVEST FOUNDATION INC

#### Form 990 Schedule B, 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
1	100 SHS BOEING	\$ 15,390	2015-03-23
3	BOEING SHARES	\$ 30,780	2015-03-23
1	200 SHS PRECISION CAST PARTS	\$ 42,114	2015-03-23
1	40 SHS PRECISION CAST PARTS	\$ 9,288	2015-12-08
2	500 SHS BOEING	\$ 76,950	2015-03-23
2	100 SHS PRECISION CAST PARTS	\$ 23,197	2015-12-08
2	2,354 BREEZE-EASTERN	<u>\$ 46,185</u>	2015-12-08