DLN: 93491243002006

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	caler	ndar year 2015, or tax year beginning	, a	and ending 12-31-2015							
	e of foun	ndation undation Ltd				A Employer ide	entification numbe	er			
						20-1957778					
Num	ber and s	LIAM GEFELL street (or P O box number if mail is not delivered to street a	address)	Room/suite		B Telephone num	nber (see instruction	ıs)			
80	Industria	al pkwy PO BOX 4449				(802) 295-1800					
	or town, ngton, VT	state or province, country, and ZIP or foreign postal code T 05401				C If exemption application is pending, check here					
G C ł	neck all	I that apply Tinitial return Tinitial return	of a fc	ormer public charity		P 4 Foreign on	sanizations check h	. .			
_		Final return Amended ret Address change Name chang	turn			2. Foreign or	ganizations, check hog ganizations meeting k here and attach co	the 85%			
Se	ection 4	pe of organization Section 501(c)(3) exempt 1947(a)(1) nonexempt charitable trust Other t	taxable	e private foundation			indation status was t n 507(b)(1)(A), chec	. —			
of y	year <i>(fr</i>	rom Part II, col. (c), \$ 7,602,238 JAccounting metr Com Part II, col. (c), (Part I, column (d)	fy)	F Cash Accrual be on cash basis.)	•		ition is in a 60-mont n 507(b)(1)(B), chec				
Pai	rt 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)	ot	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)			
	1	Contributions, gifts, grants, etc , received (attac	:h								
		schedule)	[7,641,602							
	2	Check ► ┌ if the foundation is not required to a	ttach								
		Sch B									
	3	Interest on savings and temporary cash investm	nents								
	4	Dividends and interest from securities		982		982					
	5a	Gross rents									
	b	Net rental income or (loss)	ļ								
₽	6a	Net gain or (loss) from sale of assets not on line	10	88,692							
Reveilue	b	Gross sales price for all assets on line 6a 7,721,544									
ŭ	7	Capital gain net income (from Part IV, line 2).				6,638,030					
	8	Net short-term capital gain									
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	b	Less Cost of goods sold	\longrightarrow								
	С	Gross profit or (loss) (attach schedule)		l							
	11	Other income (attach schedule)	L								
	12	Total.Add lines 1 through 11		7,738,863		6,639,012					
	13	Compensation of officers, directors, trustees, et			<u> </u>			<u> </u>			
	14	Other employee salaries and wages			<u> </u>			<u> </u>			
φ	15	Pension plans, employee benefits	H					 			
en:	16a	Legal fees (attach schedule)		-57.0	<u> </u>			0.750			
Expenses	b	Accounting fees (attach schedule)		8,750		0	0	8,750			
	С	Other professional fees (attach schedule)		i				<u> </u>			
ativ	17	Interest			<u> </u>			<u> </u>			
¥	18	Taxes (attach schedule) (see instructions) .	· · · ·	21,587							
Admını strative	19	Depreciation (attach schedule) and depletion .									
들	20	Occupancy									
and 6	21	Travel, conferences, and meetings						<u> </u>			
	22	Printing and publications			<u> </u>			 			
jul.	23	Other expenses (attach schedule)		i	<u> </u>						
Operating	24	Total operating and administrative expenses. Add lines 13 through 23		30,337		0	O	8,750			
ŏ	25	Contributions, gifts, grants paid		788,500				788,500			
	26	Total expenses and disbursements. Add lines 24	ŀ								
	 	25	\longrightarrow	818,837		0	0	797,250			
	27	Subtract line 26 from line 12		6 020 026							
	a b	Net investment income (If negative, enter -0-)	ents	6,920,026		6,639,012					
	C	Adjusted net income(If negative, enter -0-)				0,035,012					
	1 -	, , , ,					i				

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 (a) Book Value	End o (b) Book Value	f year (c) Fair Market Value
	1	Cash—non-interest-bearing	(a) book value	(b) book value	(c) Fall Market Value
	2	Savings and temporary cash investments	577,858	7,601,884	7,602,238
	3	Accounts receivable	,	, ,	, ,
		Less allowance for doubtful accounts -			
	4	Pledges receivable			
	7	Less allowance for doubtful accounts -			
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
	6	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			
Assets	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	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			
		ınstructions Also, see page 1, item I)	577,858	7,601,884	7,602,238
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ES.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Liat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
and	24	Unrestricted			
<u>8</u>	25	Temporarily restricted			
핃	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
ĄŠ	29	Retained earnings, accumulated income, endowment, or other funds	577,858	7,601,884	
Net	30	Total net assets or fund balances(see instructions)	577,858	7,601,884	
_	31	Total liabilities and net assets/fund balances(see instructions)	577,858	7,601,884	
Pa	rt III				
1		Total net assets or fund balances at beginning of year—Part II, column (a) line 30 (must ad	ree	
_		with end-of-year figure reported on prior year's return)			577,858
2		Enter amount from Part I, line 27a			6,920,026
3		Other increases not included in line 2 (itemize)		95 3	129,000
4		Add lines 1, 2, and 3			7,626,884
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	25,000
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			7,601,884
-					. ,

Part IV Capital Gains and Losses for Tax on Investment Income

the Part VI instructions

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)							ed e (c)	Date acquired	Date sold (d) (mo , day, yr)
	VARIOUS SECURITIE	·				(b) D—Donation	n ()	, (, , , , , ,	(=) (//, //
<u>та</u> b	75,758 SHS JD COM					D	+		
	90,909 SHS JD COM					D	+		
<u>c</u>	90,909 3113 30 6014					D	+		
d							+		
e							4		
(e) Gross sales price			Depreciation allowe (f) (or allowable)			or other basis expense of sale			n or (loss) (f) mınus (g)
a 2,068,906						1,000,1	80		1,068,726
b	2,532	2,707				37,8	79		2,494,828
С	3,119	9,931				45,4	5 5		3,074,476
d									
e									
Co	mplete only for assets sh	owing gain	ın column (h) and owne	ed by the foundati	ıon	on 12/31/69		Gains (Col	(h) gain minus
(i) F M V as of 12/31/69			A djusted basis (j) as of 12/31/69	E	хс	ess of col (1) col (j), if any	(I)	col (k), but no	ot less than -0-) or (from col (h))
а									1,068,726
b									2,494,828
С									3,074,476
d									
3	Capital gain net income Net short-term capital If gain, also enter in Pa in Part I, line 8	gaın or (los	(ss) as defined in sectio		0 - (6)	in Part I, line 7	} - }	2	6,638,030
	•	· · ·		· · · ·	<u> </u>	· ·	<u> </u>	3	
Part	V Qualification U	ider Sec	tion 4940(e) for R	teduced lax o	<u>n</u>	Net Investm	ent	Income	
If secti Was the	tional use by domestic pr on 4940(d)(2) applies, le e foundation liable for the ," the foundation does not	ave this pa section 49	rt blank 42 tax on the distribut	able amount of ar	ıy y	year in the base			┌ Yes ┌ No
	iter the appropriate amou						ntries		
	(a)							(d)	
	e period years Calendar or tax year beginning in)	Adjusted o	(b) qualifying distributions	Net value of noncl	(c) hari	table-use assets		Distribution (col (b) divided	n ratio
	2014		965,700			938,001			1 02953
	2013		504,453			482,293			1 045947
	2012		322,203			895,845			0 359664
	2011		296,503			149,600			1 981972
	2010		389,094			228,038		T	1 706268
2	Totalof line 1, column				•		2		6 123381
3	A verage distribution ra the number of years th						3		1 224676
4	Enter the net value of						4		4,413,468
5	Multiply line 4 by line 3			•			5		5,405,068
	Enter 1% of net invest								
6	Furei 1 70 of tier linkest	ment nicon	ic (1 /0 of Fait 1, fille 2	<i>, , , , , , , , , , , , , , , , , , , </i>	•		6	i	66,390

Form **990-PF** (2015)

5,471,458

797,250

7

	990-PF (2015) rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948—see page	a 18 of the inst	ructio		age 4			
		, or 4540 see page	to or the ma	ractio	113)				
1a	and enter "N/A" on line 1								
	Date of ruling or determination letter	ļ							
	(attach copy of letter if necessary—see instructions)	ĺ							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1		132	780,2			
	here ► Tand enter 1% of Part I, line 27b								
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations (Part I, line 12, col (b)	enter 4% of							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation enter $-0-$)	s only Others	2			 2,780			
3									
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation enter -0-)	is only Others	4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0)	5		137	2,780			
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a	7,587							
b	Exempt foreign organizations—tax withheld at source 6b								
С	Tax paid with application for extension of time to file (Form 8868) 6c	130,000							
d	Backup withholding erroneously withheld 6d								
7	Total credits and payments Add lines 6a through 6d		7		137	7,587			
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 2220 is	s 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 over	paid 🕨	10			4,807			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax • 4,807	Refunded 🕨	11						
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state, or loc	al legislation or di	d		Yes	No			
	ıt participate or intervene in any political campaign?			1a		No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for politica	l purposes (see In	structions						
	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 materia	ls						
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?			1c		No			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed du	ring the year							
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$ _								
е	Enter the reimbursement (if any) paid by the foundation during the year for political e	xpenditure tax imp	osed						
	on foundation managers 🕨 \$								
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 gove	•							
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed			3	\longmapsto	No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during t			4a	\longmapsto	No			
ь -	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	e 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) sa • By language in the governing instrument, or	tisfied either							
	 By state legislation that effectively amends the governing instrument so that no r 	mandatory direction	ne						
				6	Voc				
7	that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes			6	Yes				
,	4.5 - 1.14	· · · · · · ·		7	Yes				
8a	Enter the states to which the foundation reports or with which it is registered (see ins	structions)							
	► <u>VT</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF								
_	General (or designate) of each state as required by General Instruction G? If "No," at		,	8b	Yes				
9	Is the foundation claiming status as a private operating foundation within the meaning	_							
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see inst	tructions for Part X	11),	^		NI-			
10	If "Yes," complete Part XIV	a schedule licture	their names	9	$\vdash \vdash \vdash$	No			
10	and addresses.	_		10		No			
					\bot				

Pai	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 ▶			
14	The books are in care of ►MR WILLIAM GEFELL Telephone no ►(802) 295	-1800	
	Located at ►LEAVITT ASSOCIATES 26 DREW RD TURNBRIDGE VT ZIP+4 ►05077			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	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	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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)			
Ь	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			
С	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 2015?	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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years > 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		No
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			
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			
	ıf the foundation had excess business holdings in 2015.)	3b	<u> </u>	
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		No

Pai	Statements Rega	arding Activities for	Which Form 4/20	may be Required (Cont	tinuea)						
5a	During the year did the foundation	n pay or incurany amoun	t to								
	(1) Carry on propaganda, or othe	rwise attempt to influence	e legislation (section 49	45(e))? 	No						
	(2) Influence the outcome of any	specific public election ((see section 4955), or to	carry							
	on, directly or indirectly, any	voter registration drive?.		T Yes 🖟	No						
	(3) Provide a grant to an individu	ıal for travel, study, or oth	her sımılar purposes?	☐ Yes ि	No						
	(4) Provide a grant to an organiza										
	ın section 4945(d)(4)(A)? (se			T Yes 🖟	No						
	(5) Provide for any purpose other										
			prevention of cruelty to children or animals? Yes Volume No , did any of the transactions fail to qualify under the exceptions described in								
Ь											
	Regulations section 53 4945 or i										
	Organizations relying on a curren										
С	If the answer is "Yes" to question										
	tax because it maintained expend			Yes	No						
_	If "Yes," attach the statement requ										
6a	Did the foundation, during the year		, , , , ,	•	- N						
	a personal benefit contract?			· · · · · · · · · · · · · · · · · · ·							
Ь	Did the foundation, during the year	ar, pay premiums, directly	y or indirectly, on a perso	onal benefit contract?	. 6b No						
	If "Yes" to 6b, file Form 8870.				7 No.						
7а ь	At any time during the tax year, v	·									
D	If yes, did the foundation receive	· ·	•								
Pai	and Contractors	t Officers, Directors	s, Trustees, Founda	ation Managers, Highly	Paid Employees,						
1	List all officers, directors, trustee	s, foundation managers a	and their compensation (see instructions).							
		Title, and average	(c) Compensation(If	(d)							
	(a) Name and address	hours per week	not paid, enter	Contributions to employee benefit plans	Expense account, (e) other allowances						
		(b) devoted to position	-0-)	and deferred compensation							
john	burton carpenter	president	0	·							
•	ox 4449	0									
	ngton,VT 05406										
	a carpenter	VP & Secretary	0								
	ox 4449 ngton, VT 05406	l ^o									
	n wright	treasurer	0								
	outh portland	0									
	klyn, NY 11217										
2	Compensation of five highest-paid	d employees (other than	those included on line 1-		nter "NONE."						
	(a)	Title, and aver	age	Contributions to employee benefit	Expense account,						
Nar	ne and address of each employee ; more than \$50,000	paid hours per wee (b) devoted to pos		plans and deferred	(e) other allowances						
	more than \$50,000	(b) devoted to posi	ition	(d) compensation							
	1 6 11	+50.000			I						

Part VIII Information About Officers, Directors, Truste and Contractors (continued)	ees, Foundation Managers, Highly	Paid Employees,
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
Total number of others receiving over \$50,000 for professional services.		
Part IX-A Summary of Direct Charitable Activities	•	
		T
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ	Expenses	
1 NO NE		
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 t	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
<u> </u>		
Total. Add lines 1 through 3		

Part X Minimum Investment Return

Pa	(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	0
b	Average of monthly cash balances	1b	4,480,678
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	4,480,678
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	4,480,678
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	67,210
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,413,468
6	Minimum investment return. Enter 5% of line 5	6	220,673
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.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	220,673
2a	Tax on investment income for 2015 from Part VI, line 5 2a 132,780		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	132,780
3	Distributable amount before adjustments Subtract line 2c from line 1	3	87,893
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	87,893
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	87,893
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		į
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	797,250
	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	0
3	A mounts set aside for specific charitable projects that satisfy the		l
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	797,250
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	797,250
	Note: 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 XIIII Undistribute	ed Income (see instr	uctions)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 20	15 from Part XI, line 7				87,893
2	Undistributed income, if any	, as of the end of 2015				
а	Enter amount for 2014 only				0	
b	Total for prior years 201	3, 2012, 2011		0		
3	Excess distributions carryo	ver, if any, to 2015				
а	From 2010	379,504				
b	From 2011	289,023				
c	From 2012	276,413				
d	From 2013	490,976				
е	From 2014	925,324				
	Total of lines 3a through e.		2,361,240			
4	Qualifying distributions for 2					
	XII, line 4 🕨 \$					
	Applied to 2014, but not mo				0	
b	Applied to undistributed inco (Election required—see instr	*				
С	Treated as distributions out required—see instructions).					
d	Applied to 2015 distributab	le amount				87,893
е	Remaining amount distribute	ed out of corpus	709,357			
5	Excess distributions carryo	ver applied to 2015				
	(If an amount appears in colu same amount must be si	, ,,				
6	Enter the net total of each indicated below:	column as				
а	Corpus Add lines 3f, 4c, and	d 4e Subtract line 5	3,070,597			
b	Prior years' undistributed inc	ome Subtract				
	line 4b from line 2b			0		
C	Enter the amount of prior year					
	income for which a notice of been issued, or on which the	•				
	tax has been previously ass	• •				
d	Subtract line 6c from line 6b					
	—see instructions			0		
е	Undistributed income for 20					
	4a from line 2a Taxable amo	ount—see			0	
£	Undistributed income for 20	16 Subtract				
•	lines 4d and 5 from line 1 T					
	be distributed in 2015.					0
7	Amounts treated as distribu	tions out of				
	corpus to satisfy requiremen	' '				
	section 170(b)(1)(F) or 494 be required - see instruction					
Ω	Excess distributions carryo	<i>'</i>				
0	applied on line 5 or line 7 (se		379,504			
9	Excess distributions carryov	·				
	Subtract lines 7 and 8 from l		2,691,093			
10	Analysis of line 9					
	Excess from 2011					
	Excess from 2012					
	Excess from 2013					
	Excess from 2014					
е	Excess from 2015	709,357				

- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	l During the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year SEE ATTACHMENT SEE ATTACHMENT SEE ATTACHMENT, VT 99999	none		GENERAL SUPPORT	788,500
Total			▶ 3a	788,500
b Approved for future payment	1			
Total			▶ 3b	

Part XVI-A Analysis of Income-Produc			Evaluded by section	F12 F12 or F14	(e)	
nter gross amounts unless otherwise indicated	(a)	(b)	(c)			
L Program service revenue	Business code	A mount	Exclusion code	A mount	(See instructions)	
a b						
c						
d						
e f						
g Fees and contracts from government agencies						
Membership dues and assessments Interest on savings and temporary cash investments						
Dividends and interest from securities			14	982		
Net rental income or (loss) from real estate a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal property						
Other investment income						
Gaın or (loss) from sales of assets other than						
inventory			18	88,692		
Net income or (loss) from special events Gross profit or (loss) from sales of inventory						
)ther revenue						
Other revenue a <u>FEDERAL TAX REFUND</u>			01	7,587		
s Subtotal Add columns (b), (d), and (e)				97,261		
Total.Add line 12, columns (b), (d), and (e).			1	.3	97,261	
(See worksheet in line 13 instructions to verify int XVI-B Relationship of Activities to		alishment of	Evemnt Durnos	96		
Explain below how each activity for whe the accomplishment of the foundation's instructions)	ıch ıncome ıs rep	orted in column	(e) of Part XVI-A co	ontributed importa		

Part	XVI	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		rganization directly or ii	ndırectly (engage i	ın any of t	the following wit						V	NI-
		01(c) of the Code (other	er than se	ction 50)1(c)(3) c	organizations) o	rın sec	tion 527,	relating to politic	al		Yes	No
_		ions? s from the reporting four	dation to	2 2026	aritable i	avamnt organiz	ation of						
		n									1a(1)		No
		erassets								F	1a(2)		No
` '		nsactions									(_)		
		s of assets to a noncha	rıtable ex	empt or	ganızatıoı	n				[1b(1)		No
		hases of assets from a								H-	1b(2)		No
(3)	Rent	al of facilities, equipme	nt, or othe	erasset	s					[1b(3)		No
(4)	Reim	nbursement arrangemen	its								1b(4)		No
(5)	Loan	s or loan guarantees.								[1b(5)		No
(6) P	erfor	mance of services or m	embershi	p or fund	draising s	olicitations				[1b(6)		No
c Shar	rıng o	of facilities, equipment, i	mailing lis	sts, othe	rassets,	or paid employ	ees			[1c		No
of th	ne god ny tra	swer to any of the above ods, other assets, or se insaction or sharing arm (b) Amount involved	rvices giv angement	en by th , show II	ne reporti n column	ng foundation I	If the fou f the god	indation r ods, other	eceived less than	n fair market ces received	value 1		nts
(a) Line		(D) ramount involved	(c) Hame	OT HOHEIN	arrabic exc	pr organization	(4)	Безеприон	or transfers, transact	ions, and shar	ing arrai	igemei	
	-												
desc	cribed	indation directly or indir d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		an sectioi		ın secti			• • • • otion of relation	. ┌Ye	s F	No
Sign Here	the Info	der penalties of perjury, best of my knowledge a rmation of which prepar *****	ınd belief,	ıt ıs tru	e, correct					May the return	IS bas	ed on	all
	7	Signature of officer or t	rustee			Date	— ,	Title		with the below (see ins	str)? 🔽		
		Print/Type preparer's CHARLES SHIRLEY		Prepar	er's Sıgn	ature	Date		Check if self- employed ►	PTIN PO	06424	82	
Paid Prepa Use	arer	Firm's name PRICEWATERHOUSE	COOPER	S LLP					Firm's EIN ▶				
Only		101 SEAPORT BLVD	BOSTON	,MA 0	2210				Phone no (617	')530-441	7		

Form 990PF Part XV Line 1a - 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).

JAKE B D	ONNA G CARPENTER
РО ВОХ 4	4449
BURLING	TON VT 05406

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491243002006

TY 2015 Accounting Fees Schedule

Name: The Mill Foundation Ltd

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF PREPARATION	8,750			8,750

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DLN: 93491243002006

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: The Mill Foundation Ltd

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TY 2015 Other Decreases Schedule

Name: The Mill Foundation Ltd

Description	Amount
2014 DONATIONS - CLEARED IN 2015	25,000

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TY 2015 Other Income Schedule

Name: The Mill Foundation Ltd

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
federal tax refund	7,587		

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TY 2015 Other Increases Schedule

Name: The Mill Foundation Ltd

Description	Amount
2015 DONATIONS - NOT CLEARED IN 2015	129,000

TY 2015 Taxes Schedule

Name: The Mill Foundation Ltd

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	21,587			

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DLN: 93491243002006

OMB No 1545-0047

Schedule of Contributors

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

Department of the Treasury Internal Revenue Service

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 www.irs.gov/form990.

2015

Name of the organization Employer identification number The Mill Foundation Ltd 20-1957778 Organization type (check one) Filers of: Section: Form 990 or 990-FZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation Form 990-PF 501(c)(3) exempt private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules 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 (1) 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 lf 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*

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
The Mill Foundation Ltd

Employer identification number 20-1957778

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 con	
1			Person	ᅜ
	JOHN B DONNA G CARPENTER PO BOX 4449	\$ 7,641,602	Payroll	Γ
	BURLINGTON, VT 05406		Noncash (Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Г
		`	Noncash	Г
			(Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Г
		<u> </u>	Noncash	Γ
			(Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
		· · · · · · · · · · · · · · · · · · ·	Noncash	Γ
			(Complete Part II to contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Γ
	-		Noncash	Γ
			(Complete Part II to contributions)	or noncash

lame of organiza	1990, 990-EZ, or 990-FF) (2015)	Employer identification n	umber
he Mill Foundati	on Ltd	20-1957778	
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	28,264 SHS - VARIOUS SECURITIES 166,667 SHS - JD COM, INC	\$ 7,632,852	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) Vo.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, o	r 990-PF)	(2015	(د
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Page 4

Name of organization The Mill Foundation L			ployer identification number
total mor line entry of \$1,000	e than \$1,000 for the year from any o	utions to organizations described one contributor. Complete colum III, enter the total of exclusively r rmation once. See instructions.)	d in section 501(c)(7), (8), or (10) that ns (a) through (e) and the following eligious, charitable, etc., contributions
(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 gift	elationship 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 gift	elationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- <u>-</u>	Transferee's name, address, an	(e) Transfer of gift	elationship 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 gift	elationship of transferor to transferee