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Form 990-PF

#### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2015 or tax year beginning , and ending A Employer identification number Name of foundation DUPONT, ALFRED I TRUST UA Number and street (or P O box number if mail is not delivered to street address) Room/suite 59-6122734 B Telephone number (see instructions) WELLS FARGO BANK - 1 W 4th St 4th Floor MAC D4000-041 City or town ZIP code Winston Salem NC 27101-3818 (888) 730-4933 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply. Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, ☐ Name change Address change check here and attach computation E If private foundation status was terminated under H Check type of organization: X Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method X Cash Accrual Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col (c), under section 507(b)(1)(B), check here ▶□ Other (specify) 3,031,794 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Analysis of Revenue and Expenses (The total of Part I (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily expenses per income income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check X if the foundation is **not** required to attach Sch. B 2 Interest on savings and temporary cash investments 3 Dividends and interest from securities . . . . . 64,753 64,069 Gross rents . . . . . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 35,022 6a Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . 35,022 8 Net short-term capital gain . . . . . . . . . . Income modifications . . . . Gross sales less returns and allowances 10a Less: Cost of goods sold Gross profit or (loss) (attach schedule) . . . . . c 11 Other income (attach schedule) . . . 99,091 99,775 12 Total. Add lines 1 through 11 13 4,085 Compensation of officers, directors, trustees, etc. . 3,064 1,021 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . 16a Legal fees (attach schedule) . . . 9.050 9,050 Accounting fees (attach schedule). 500 500 and Administrative Other professional fees (attach schedule c 17 Interest . Interest . (Attach schedule) (see instruction 8,215 724 18 Depreciation (attach schedule) and deple 19 20 Occupancy Travel, conferences, and meetings Printing and publications. 21 22 23 Other expenses (attach schedule) Operating 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . 21,850 3,788 10,571 25 Contributions, gifts, grants paid 140,198 140.198 26 Total expenses and disbursements. Add lines 24 and 25. . . 162,048 3,788 150,769 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements . -62,27395,303 **Net investment income** (if negative, enter -0-) .

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-) .

Form 990-PF (2015) N

Page 2

Б	art II	Attached schedules and amounts in the description column	Beginning of year		End of	year
	alf (U	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	<u>,  </u>	(c) Fair Market Value
	1	Cash—non-interest-bearing	24,240			
	2	Savings and temporary cash investments	200,421	352	,436	352,436
Assets	3	Accounts receivable •	<b>'</b>			
	ļ	Less allowance for doubtful accounts ▶	·	•		
	4	Pledges receivable ▶	, ",			
	1	Pledges receivable   Less: allowance for doubtful accounts   Grants receivable				
Liabilities	5	Grants receivable		<del></del>	$\neg \neg$	
	6	Receivables due from officers, directors, trustees, and other		<del></del>	$\neg \uparrow$	·
		disqualified persons (attach schedule) (see instructions)			ł	
	7	Other notes and loans receivable (attach schedule)			一十	
	l '	Less allowance for doubtful accounts		-	- 1	
S	8	Inventories for sale or use			-+	
set	_	Prepaid expenses and deferred charges	<del>   -</del>	<del></del>	-+	<del></del>
15.5	9	• •				
As	10a	Investments—U S and state government obligations (attach schedule)			-+	
	b	Investments—corporate stock (attach schedule)			$\longrightarrow$	<del></del>
	C	Investments—corporate bonds (attach schedule)	<del></del>			·
	11	Investments—land, buildings, and equipment basis			l	
		Less accumulated depreciation (attach schedule)	<del></del>		$\longrightarrow$	<del></del>
	12	Investments—mortgage loans			<del></del> }	
	13	Investments—other (attach schedule)		2,512	,758	2,679,358
	14	Land, buildings, and equipment basis			1	
	ľ	Less accumulated depreciation (attach schedule)				
	15	Other assets (describe  )			$\longrightarrow$	
	16	Total assets (to be completed by all filers—see the				
	<u> </u>	ınstructions. Also, see page 1, item I)	2,913,105	2,865	194	3,031,794
	17	Accounts payable and accrued expenses				
S	18	Grants payable				
tie	19	Deferred revenue				
Ę	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe  )				
	23	Total liabilities (add lines 17 through 22)	0		0	
-Sa		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.		<u> </u>		
Š	24	Unrestricted				
nd Balances L	25	Temporarily restricted	<del> </del>	<del></del>	$\dashv$	
ä	26		<del></del>	<del></del>	$\dashv$	
b	26	Permanently restricted	<del>   </del>		$\dashv$	
Net Assets or Ful		Foundations that do not follow SFAS 117, check here ▶ 🗓 and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	2,913,105	2,865	,194	
şţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds				
Ä	30	Total net assets or fund balances (see instructions)	2,913,105	2,865	,194	
<u>e</u> t	31	Total liabilities and net assets/fund balances (see				
_	ļ	instructions)	2,913,105	2,865	.194	
Pa	art III	Analysis of Changes in Net Assets or Fund Balances				<del></del>
_	_	net assets or fund balances at beginning of year—Part II, column (	a), line 30 (must agree	e with	$\neg \neg$	<del></del>
•		of-year figure reported on prior year's return)			1	2,913,105
2		r amount from Part I, line 27a			2	<u>-62,273</u>
		r increases not included in line 2 (itemize) See Attached State			3	17,668
		lines 1, 2, and 3			4	2,868,500
_	_				5	3,306
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II. column (b). line	30	6	2 865 194

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 the instructions before making any entries.  (a)  (b)  (c)  (d)  Distribution ratio  (col (b) divided by column for each year)  Adjusted qualifying distributions	35,022
c d e  (e) Gross sales proce (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) plus (f) mrius (g)  a b c c d e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (f) Gains (Col (h) gain microl (h) F M V as of 12/31/69 (f) Adjusted basis as of 12/31/69 (g) Adjusted by Adjusted Adjusted by Adju	35,022
d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (or allowable) (p) plus (f) minus (g)  a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis (k) Excess of col (i) over col (j), if any col (k), but not less than -6 Losses (from col (n))  b c d e  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 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  Part V Qualiffication 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 The foundation does not qualify under section 4940(e). Do not complete this part  I Enter the appropriate amount in each column for each year, see the instructions before making any entries.  (a)  Base period years Calendary year (or tax year beginning in)  Adjusted qualifying distributions  (b)  Met value of nonchantable-use assets  (c) Logid wided by the foundation of the section sales assets  (c) Logid wided by the foundation of the section sales assets  (c) Logid wided by the foundation set of sales  (d) Met value of nonchantable-use assets	35,022
(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  b  c  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) Adjusted basis as of 12/31/69  (iv) Excess of col (iv) over col (iv), if any  (iv) Excess of col (iv) col (k), but not less than -C Losses (from col (iv))  a  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 If (loss), enter -0- in Part I, line 7 Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8.  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?  If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part  Enter the appropriate amount in each column for each year, see the instructions before making any entries.  (a) Base period year's Celendary year (or tax year beginning in)  Adjusted qualifying distributions  (b) Net value of nonchantable-use assets  (c) Id) Model year	35,022
(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)  b  c  d  e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) Adjusted basis (k) Excess of col. (i) over col. (j), if any  col. (k), but not less than -6 Losses (from col. (ni))  a  b  c  d  e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   f (loss), enter -0- in Part I, line 7   f (loss), enter -0- in Part I, line 8   column (c) (see instructions). If (loss), enter -0- in Part I, line 8   f (loss)   f (loss), enter -0- in Part I, line 8   f (loss)   f (loss)	35,022
(e) Gross sales price (or allowable)  plus expense of sale (e) plus (f) minus (g)  a  b  C  d  e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69  a  b  C  d  e  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (ii) F M V as of 12/31/69  a  b  C  d  e  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 If (loss), enter -0- in Part I, line 7 If (gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8  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?  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 the instructions before making any entries.  (a)  Base period years Calendar year (or tax year beginning in)  Adjusted qualifying distributions  Net value of nonchantable-use assets  Distribution ratic (co) (b) divided by or (co) (c) (c) (d) (d) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	35,022
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) Excess of col (i) over col (j), if any  col (k), but not less than -0 Losses (from col (n))  a b  c d  d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   2   3   1   1   1   1   1   1   1   1   1	35,022
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) FMV as of 12/31/69  (ii) Gains (Col (h) gain microl (k), but not less than -C Losses (from col (h)).  a b  c d  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 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8  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, "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 the instructions before making any entries.  (a)  (b)  Adjusted qualifying distributions  Net value of nonchantable-use assets (col (b) divided by or complete this part or the section 4940 (d) (d) (d) divided by or call (d) divided by or call (d) (d) divided by or call (d) divide	35,022
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis over col. (j), if any col. (k), but not less than -C. Losses (from col. (h))  a  b  c  d  e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   1   1   1   1   1   1   1   1   1	35,022
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) Adjusted basis as of 12/31/69  (iv) Excess of col (iv) col (k), but not less than -C Losses (from col (h))  a  b  c  d  e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   1 (loss), enter -0- in Part I, line 7   2   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  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? Years 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 the instructions before making any entries.  (a)  (b)  Adjusted qualifying distributions  (c)  Net value of nonchantable-use assets  (c)  Distribution ratio (c)  Net value of nonchantable-use assets	35,022
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) Adjusted basis as of 12/31/69  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (j), if any  (iv) Excess of col (iv) over col (ji), if any  (ii) Excess of col (iv)  (iii) Excess of col (iv)  (iv) Gain Micro Excess (from col (iv)  (iv)	35,022
(i) F M V as of 12/31/69  (ii) Adjusted basis as of 12/31/69  (iii) F M V as of 12/31/69  (iv) Excess of col (iv) over col (jv), if any  (iii) Excess of col (iv) excess of col (iv) any  (iii) Excess of col (iv)  (iv)	35,022
b c d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7	
b c d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7	
d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   1   1   1   2   3   3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   1   1   1   2   4 If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in   2   3   4 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, "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 the instructions before making any entries.  (a) (b) (d) Distribution ratic (col (b) divided by column for text of nonchantable-use assets (col (b) divided by column for text of nonchantable-use assets)	
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7	
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    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   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?   Ye   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 the instructions before making any entries.  (a) (b) Adjusted qualifying distributions   Net value of nonchantable-use assets   Col (b) divided by column or the part   Col (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	
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	
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	
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?  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 the instructions before making any entries.  (a)  (b)  (c)  (d)  Distribution ration  (col (b) divided by column for each year of nonchantable-use assets)	
(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?  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 the instructions before making any entries.  (a)  (b)  (c)  (d)  Distribution ration  (col (b) divided by column for each year of nonchantable-use assets (col (b) divided by column for each year).	0
(a) Base period years Calendar year (or tax year beginning in)  (b) Adjusted qualifying distributions (col (b) divided by col	X No
Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by co	
	(c))
2014 104,538 3,280,259	0.031869
2013 55,527 3,117,343	).017812
2012	000000
2011	0.000000
2010	0.000000
2 Total of line 1, column (d)	0.049681
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	024841
4 Enter the net value of nonchantable-use assets for 2015 from Part X, line 5	,219,350
5 Multiply line 4 by line 3	79,972
6 Enter 1% of net investment income (1% of Part I, line 27b)	953
7 Add lines 5 and 6	
8 Enter qualifying distributions from Part XII, line 4	80,925

<ul> <li>Exempt operating foundations described in section 4940(d)(2), check here  □ and enter "N/A" on line 1. Date of ruling or determination letter  (attach copy of letter if necessary—see instructions)</li> <li>Domestic foundations that meet the section 4940(e) requirements in Part V, check here  □ X and enter 1% of Part I, line 27b</li></ul>	2 3 4 5		953 0 953	
<ul> <li>b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% of Part I, line 27b</li></ul>	2 3 4		0	
here ► 🔯 and enter 1% of Part I, line 27b	2 3 4		0	
<ul> <li>c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).</li> <li>2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)</li> </ul>	3			ļ
Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3			
	3			il
<b>3</b> Add lines 1 and 2	4			
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .	5			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			953	
6 Credits/Payments:				1
a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 5,017	_			
b Exempt foreign organizations—tax withheld at source 6b	_			l
c Tax paid with application for extension of time to file (Form 8868) 6c	_			
d Backup withholding erroneously withheld				
7 Total credits and payments. Add lines 6a through 6d	7		5,017	<b>├</b>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<del>] -</del> -
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0	-
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10 ► 11		<u>4,064</u> 3,111	-
Part VII-A Statements Regarding Activities		_	3, 1.11	<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation of	r did it		Yes	No
participate or intervene in any political campaign?		1a	<b>T</b>	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
Instructions for the definition)?		. 1b		X
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.			ł	1
c Did the foundation file Form 1120-POL for this year?		. <u>1c</u>	<u> </u>	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			ì	
(1) On the foundation. ▶\$ (2) On foundation managers. ▶\$				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	imposed			
on foundation managers. • \$		. 2		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . If "Yes," attach a detailed description of the activities		·   4	╁	X
<ul> <li>Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles</li> </ul>				ļ
of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	Ì	x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. 4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		X
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		- 1	ł	
<ul> <li>By language in the governing instrument, or</li> </ul>			•	
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory direct</li> </ul>				
conflict with the state law remain in the governing instrument?			X	↓
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 Par	· XV	. 7	X	⊢–
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			1	}
FL  h If the angular is "Ves" to line 7 has the foundation furnished a copy of Form 000 PE to the Atlanta	Comoral			
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by General Instruction G? If "No," attach explanation.	General		_	
<ul> <li>9 Is the foundation claiming status as a private operating foundation within the meaning of section 49</li> </ul>		. <u>8b</u>	<u>X</u>	$\vdash$
or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Par		.		
"Yes," complete Part XIV			1	×
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule if			<u> </u>	<del></del>
names and addresses				X

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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	<b></b>		
14	The books are in care of ► WELLS FARGO BANK N.A Telephone no. ► 888-730	4933		
	Located at ► 1 W 4th St 4th Floor MAC D4000-041 Winston Salem NC ZIP+4 ► 27101-3	318		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here, ,		. 1	▶ [
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If			
	"Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			N .
	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	ļ		
	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.)			
L	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
b	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	1	Х
	Organizations relying on a current notice regarding disaster assistance (see instructions).	10		
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
С	were not corrected before the first day of the tax year beginning in 2015?	1c	' I	Х
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))	1		
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?			
	If "Yes," list the years   20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>			
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 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_	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		_X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		ļ	.,
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		Х

Organizations relying on a current notice regarding disaster assistance check here	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(s))?	Par	VIES Statements Regarding Activities to	<u>or wni</u>	cn Form 4/	zu ma	y be Requ	urea (	conunue	(a)			
directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)4)(A)? (see instructions).  (5) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(d)4)(A)? (see instructions).  (6) Provide for any purpose other than religious, charitable, etc., organization described in section 5a (1) (4) (4) (A)? (5) (6) (a) (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)?  (a) If any answer is "Yes" to Sa(1)—(5), did any of the transaction fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  (b) If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (c) If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  (a) If "Yes," altach the statement required by Regulations section 53.4945–5(d).  (b) If "Yes," in 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  (a) Name and address foundation managers and their compensation (see instructions).  (b) If "Yes," altach the statement required by Regulations and deferred compensation of five highest-paid employees benefit plans and deferred compensation.  (c) Compensation (a) Componential (b) Contributions to employee benefit plans and deferred compensation.  (d) Contributions to employee benefit plans and deferred compensation.	directly or indirectly, any voter registration drive?  (3) Prowide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(A)? (see instructions).  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b if any answer is "Yes" to 54(1)—(5) daily of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to question 594(4) does the foundation dailer exception from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Tax at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Test VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Pald Employees, and Contractors  (a) Name and address  (b) Title, and average (c) Companisation (see instructions).  (d) Contributions to employee benefit pains and deferred companisation (companisation) (d) Contributions to employee benefit pains and deferred compensation (d) Companisation (d) Contributions to employee benefit pains and deferred compensation (d) Companisation (d) Companisa	5a	During the year did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to	y amou influent	int to ce legislation	(sectio	n 4945(e))'	·	Yes	X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	(3) Provide a grant to an individual for travel, study, or other similar purposes?								Yes	X No			İ
section 4945(d)(4)(A)? (see instructions).	section 4945(d)(4)(A)? (see instructions).									X No			
purposes, or for the prevention of cruelty to children or animals?	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)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  If "Yes" to disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions) and disaster assistance (see instructions) and second organization and second organizations relying to a growing relative to the control of the following on a personal benefit contract?  If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  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?  Organization approach of the foundation receive any proceeds or have any net income attributable to the transaction?  Trustee  I List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Organizations relying on a current notice responsible to position and deferred compensation.  Organizations relying on a current notice responsible to position and deferred compensation.  Organizations relying on a current notice responsible to position and the responsible to position organization and deferred compensation.  Organization for the responsibility of t								X Yes	☐ No			
Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945–5(d).  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," to 6b. file Form 8870.  The statement required by Regulations section 53.4945–5(d).  At any time during the year, pay premiums, directly or indirectly, on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  The statement required by Regulations section 53.4945–5(d).  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Tite, and average four enter-0-1  (a) Name and address (e) Compensation (fir not paid, enter-0-1)  (a) Name and address (e) Compensation (fir not paid, enter-0-1)  (b) Tite, and average hours per week devided to position enter-0-1  (c) 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) Tite, and average hours per week devided to position  (c) Compensation (e) Compens								Yes	X No			
Organizations relying on a current notice regarding disaster assistance check here  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?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (e) Compensation (d) Contributions to employee Sund deferred compensation (firet paid, enter-6.)  A law manager and deferred compensation (e) Expense account other allowances  Wells Fargo Bank, N.A.  Trustee  Trustee  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  Trustee  Compensation (c) Compensation (e) Compensation (e) Expense account other allowances of employee benefit plans and deferred compensation of employee benefit plans and deferred compensation of employees of employee benefit plans and deferred compensation of the allowances	Organizations relying on a current notice regarding disaster assistance check here  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?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Tax At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  The tra	b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to d	qualify i	under the e	xceptio	ns descri	bed in			
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?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Taxif "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Tyes \( \) No \( \) Ni/A \( \) Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address (b) Title, and average devoted to position  (b) Title, and average of the plant of the party of the paid of the plant of the paid of the plant of the	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?  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?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7c A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7c A at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7c Yes \( \text{No} \) No  8c If "Yes," did the foundation forceive any proceeds or have any net income attributable to the transaction?  7c I List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1c List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1c (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (fir not paid, enter -0.)  1c Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  1c) Expense account of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  1c) Expense account of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "None."  1c) Expense account of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "None."  1c) Expense account of the highest-paid employees (other than those included on line 1—see instructions). If none, enter "None."		•	-	_				-		5b		_ X
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?	## "Yes," attach the statement required by Regulations section 53.4945–5(d).  6a Did the foundation, uning the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  ## "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?	С	If the answer is "Yes" to question 5a(4), does the	founda	tion claim exe	emption	from the t	ax		_			
on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7b N/A  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 foundation (if not paid, enter 0-)  1 W 4th St 4th Floor MAC D4000-041 Winston Salem, I  (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 (see instructions).  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation of the allowances of each employee paid more than \$50,000 (e) Expense account of the allowances of each employee pend more than \$50,000 (e) Expense account of the allowances of each employee pend more than \$50,000 (e) Expense account of the allowances of each employee pend more than \$50,000 (e) Expense account of the allowances of each employee	on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  7b N/A  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  Wells Fargo Bank, N.A.  Trustee  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 pend more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee the instructions). If none, enter "NONE."  (e) Expense accounts to employee pend more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee the instructions to employee the pendit plants and deferred compensation  (e) Expense accounts the properties of the account plants and deferred compensation  (e) Expense accounts the properties of the account plants and deferred compensation  (e) Expense accounts the properties of the account plants and deferred compensation  (e) Expense accounts the properties of the properties of the account plants and deferred compensation the properties of the properti							•	<b>(23)</b>				
If "Yes" to 6b, file Form 8870.  7a At any time duning the tax year, was the foundation a party to a prohibited tax shelter transaction?	## TYes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	6a	Did the foundation, during the year, receive any fu on a personal benefit contract?						☐ Yes	<b>⊠</b> No			
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	b		s, direc	tly or indirect	y, on a	personal b	enefit o	contract?		<u>6</u> b		<u> </u>
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   (d) Contributions to employee benefit plans and deferred 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 accounting their allowances   (e	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).  (b) Tritle, and average hours per week devoted to position  Wells Fargo Bank, N.A.  Trustee  1 W 4th St 4th Floor MAC D4000-041 Winston Salem, 1  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation (if not paid, employee benefit plans and deferred compensation)  (a) Contributions to employee benefit plans and deferred compensation (the railowance)  (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Expense account of the railowance)  (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Expense account of the railowance)  (d) Contributions to employee benefit plans and deferred compensation (c) Expense account of the railowance)  (e) Expense account of the railowance)  (e) Expense account of the railowance)  (f) Compensation (f) Compens	7a	At any time during the tax year, was the foundation a pa						_				
and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address (b) Title, and average house per week devoted to position  Trustee  1 W 4th St 4th Floor MAC D4000-041 Winston Salem, I  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  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense accounting the relationship of the relatio	And Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (b) Trile, and average hours per week devoted to position when the properties of the prop												<u> </u>
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 accounting the relation of the 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 employee benefit plans and deferred compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accounting the relation of the rela	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  Trustee  1 W 4th St 4th Floor MAC D4000-041 Winston Salem, I  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  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account of the plant of the plant of the plant of the plant of the plans and deferred compensation of the plant of the	rar		JI3, II	ustees, i o	Jiidati	OII Manag	JC13, 1	inginiy F	aiu Liii	pioye	cə,	
Name and address   Hours per week devoted to position   Hours per per week devoted to position   Hours per week devoted to position   Hours per	hours per week devoted to position enter -0-)  Wells Fargo Bank, N.A.  1 W 4th St 4th Floor MAC D4000-041 Winston Salem, I  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) Compensation  (f) Compensation  (o) Expense account of the plant and deferred compensation  (e) Compensation  (f) Compensation  (h) Title, and average hours per week devoted to position  (e) Compensation  (f) Compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation  (h) Expense account of the plant and deferred compensation of the plant and defe	1	List all officers, directors, trustees, foundation	n mana	gers and the								
1 W 4th St 4th Floor MAC D4000-041 Winston Salem, I 4.00 4,085  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 other allowances	1 W 4th St 4th Floor MAC D4000-041 Winston Salem, 1  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  (d) Expense account other allowances of the plans and deferred compensation of the plans and deferred plans and deferred compensation of the plans and deferred plans are plant and deferred plans and deferred plans are plant and deferred plans and deferred plans are plant and deferred p		(a) Name and address	hou	ırs per week	`´(lf ı	not paid,	emplo	oyee benefit	plans			
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 other allowances	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 other allowances.				_								
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 other allowances	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 of the reliable of the rel	1 W 4	th St 4th Floor MAC D4000-041 Winston Salem, I	-	4.00		_4,085						
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 other allowances	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 of the rallowance of the rallowanc			ļ									
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense accour other allowances	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  other allowances of each employee to employee benefit plans and deferred compensation  NONE												_
"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 accourt other allowances	"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 of the reliable to the reliabl					l							
(a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation other allowances	(a) Name and address of each employee paid more than \$50,000  NONE  (b) Ittle, and average hours per week devoted to position  (c) Compensation  employee benefit plans and deferred compensation  NONE  (e) Expense account other allowances	2		(other	than those	include	ed on line	1—see	instructi	ions). If	none,	enter	
NONE			(a) Name and address of each employee paid more than \$50,00	0	hours per v	veek	(c) Comper	nsation	employee plans and	benefit deferred			
		NON											
										_		_	
	Table with a state of the same to the state of the state of the same to the same to the same to the state of the same to the state of the same to the sa												
	Total and an efath an analysis of the second						i					_	
Total number of other employees paid over \$50,000	i otal number of other employees paid over \$50,000	Total	number of other employees paid over \$50,000 .							•			0

and Contractors (continued)  3 Five highest-paid independent contractors for professional services (see instructions). If none, enter	r "NONE "
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE	(c) compensatio
NONE	
<del></del>	
Total number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
	<del></del> -
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
	<del></del>
1 NONE	
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 NONE	737100111
I NONE	
2	
All other program-related investments See instructions	
3 NONE	
	}
Total. Add lines 1 through 3	<b>&gt;</b>

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundat	ions,
	see instructions.)	T	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1.1	
а	Average monthly fair market value of securities	1a	3,015,531
b	Average of monthly cash balances	1b	252,845
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,268,376
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	
3	Subtract line 2 from line 1d	3	3,268,376
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see	l I	
	instructions)	4	49,026
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,219,350
6	Minimum investment return. Enter 5% of line 5	6	160,968
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	Mınımum investment return from Part X, line 6	1	160,968
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	] [	
c	Add lines 2a and 2b	2c	953
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	160,015
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	160,015
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	160,015
	Out 16 day Distribution (and instructions)		
Pari	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	150,769
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	150,769
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	953
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	149,816
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will		
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 9	90-PF (2015) DUPONT, ALFRED I TRUST UA			59-612	2734 Page <b>9</b>
Part	XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				<u>160,015</u>
2	Undistributed income, if any, as of the end of 2015	Ì		110 100	
a	Enter amount for 2014 only			140,198	<del></del>
	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
a	From 2010	]	j	,	
b	From 2012				
c d	From 2013				
e	From 2014				
f	Total of lines 3a through e	0	1		
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 150,769				
а	Applied to 2014, but not more than line 2a .			140,198	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election	,			
	required—see instructions)				
d	Applied to 2015 distributable amount				10,571
e	Remaining amount distributed out of corpus			- <del></del>	
5	Excess distributions carryover applied to 2015.  (If an amount appears in column (d), the same				
	amount must be shown in column (a), the same				
6	Enter the net total of each column as				
	indicated below:		}		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
_	amount—see instructions			<del></del>	<del></del>
e	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see				
	instructions		}	o	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				149,444
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
40	Subtract lines 7 and 8 from line 6a		<del> </del>		
10	Analysis of line 9:			1	
a b	Excess from 2011 Excess from 2012				
C	Excess from 2013				
-	Excess from 2014				
	Excess from 2015				

Part	XIV Private Operating Foundation	ons (see instruct	ions and Part VI	II-A, question 9)		N/A
1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo	or 2015, enter the	date of the ruling	•	L	
b	Check box to indicate whether the foundation	on is a private opera	ting foundation desc	ribed in section	4942(J)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) rotai
	each year listed					0
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities.		i			
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the	]	]			
	alternative test relied upon:			1		
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed		L	<u> </u>		0
С	"Support" alternative test—enter		}			1
	(1) Total support other than gross	}				
	investment income (interest,	ļ	]			
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)			<u> </u>		0
	(2) Support from general public		1	1		
	and 5 or more exempt organizations as provided in	1				
	section 4942(j)(3)(B)(iii)			<u> </u>		0
	(3) Largest amount of support from	·		Ţ <u> </u>		
	an exempt organization	l				o
	(4) Gross investment income					0
Part	XV Supplementary Information	n (Complete thi	s part only if th	e foundation ha	d \$5,000 or mor	e in assets at
	any time during the year—		s.)			
1	Information Regarding Foundation I	Managers:				
а	List any managers of the foundation w					he foundation
	before the close of any tax year (but or	nly if they have co	ntributed more tha	an \$5,000). (See se	ection 507(d)(2).)	
NON					·····	
b	List any managers of the foundation w					rtion of the
	ownership of a partnership or other en	tity) of which the fo	oundation has a 1	0% or greater inter	est.	
<u>NON</u>						
2	Information Regarding Contribution	•	•	=		
	Check here ► 🛛 if the foundation of	nly makes contribu	utions to preselect	ed charitable organ	nizations and does	not accept
	unsolicited requests for funds. If the fo		ints, grants, etc. (s	ee instructions) to i	ndividuals or orga	nizations
	under other conditions, complete items		<del> </del>	<del></del>	<del></del>	<del></del>
а	The name, address, and telephone nu	mber or e-mail ad	dress of the perso	n to whom applicat	ions should be ad	dressed.
b	The form in which applications should	be submitted and	information and m	naterials they shoul	d include	
C	Any submission deadlines					
<del></del>	<del></del>					<del></del>
đ	Any restrictions or limitations on award	ts, such as by geo	graphical areas, c	charitable fields, kin	ds of institutions, o	or other
	factors:					

Page **11** 

Part XV Supplementary Information (conti 3 Grants and Contributions Paid During	nued)	ed for Fut	ure Payment	
	If recipient is an individual,	Foundation		
Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<del> </del>
a Paid during the year See Attached Statement		{		ĺ
See Allached Statement				
			1	
		}		
				1
		ļ		
			}	}
	1	}	{	}
			}	ł
				1
		Ì		
		ľ		1
			j	j
		1		
		-	1	}
		}	1	ł
Total	<del></del>		<b>&gt;</b> 3a	140,198
b Approved for future payment		<u> </u>	T	1 ,,,,,,,,,
NONE		1		
		[		1
				}
		Į		
		İ		
			1	
			}	
	<u> </u>	<u> </u>	<u> </u>	
Total	<i></i>			0

	Analysis of income-Producing Act		siness income	Excluded by secti	Γ	
	r gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	( <b>d</b> ) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					·
	a			1		
	b					·
	<u> </u>					
	d			-		
	e	-,				
	f					
•	g Fees and contracts from government agencies  Membership dues and assessments			<u> </u>		
2	Interest on savings and temporary cash investments			<u> </u>		
3 4	Dividends and interest from securities			14	64,753	
5	Net rental income or (loss) from real estate			<del> </del>	0.11.00	<del></del>
3	a Debt-financed property	-				
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	35,022	
9	Net income or (loss) from special events				,-	
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
• • •	t.					
	d					
	e					
12	Subtotal. Add columns (b), (d), and (e)				99,775	(
13	Total. Add line 12, columns (b), (d), and (e)				13	99,775
(Se	e worksheet in line 13 instructions to verify calculation	s)				
	rt XVI-B Relationship of Activities to the A		ent of Exemp	t Purposes		
	Explain below how each activity for which incom accomplishment of the foundation's exempt purp	ne is reported in cooses (other than	column (e) of Part by providing fund	XVI-A contributed s for such purpo	d importantly to the ses). (See instruct	e ions.)
	Not Applicable					
			<u> </u>			
			<u> </u>			
						<del></del>
		<u> </u>				
						<u> </u>
		_				
			<u> </u>			<del></del>
_						

Part	XVII			fers To and Transa	ictions	and Re	elationships '	With Nor	ncharitable	<b>:</b>	
		Exempt Org									
1	Did t	he organization d	irectly or indirectly e	ngage in any of the fol	llowing v	vith any	other organizat	ion descrit	oed 🕌	Yes	No
				section 501(c)(3) organ	nzations	) or in se	ection 527, rela	ting to	1 33	·	1
	politi	cal organizations	?							1	
а	Tran	sfers from the rep	orting foundation to	a nonchantable exem	pt organ	ization c	of		Ì	1	Ì
	(1) C	Cash							1a(1	<u> </u>	X
	(2) C	Other assets							1a(2	2)(2)	X
b	Othe	r transactions:							}		
	(1) S	ales of assets to	a noncharitable exe	mpt organization					. 1b(	<u>1)</u>	_X
	(2) P	urchases of asse	ets from a noncharita	ble exempt organization	on				1b(2	2)	X
	(3) F	Rental of facilities,	equipment, or other	assets					. 1b(	3)	X
	(4) F	Reimbursement ar	rangements						[1b(4	1)(1	_X
	(5) L	oans or loan guar	rantees						. 1b(	5)	X
	(6) F	erformance of se	rvices or membersh	ip or fundraising solicit	tations				. 1b(	3)	Х
С	Shar	ing of facilities, ed	quipment, mailing lis	ts, other assets, or pa	id emplo	yees			. 1c		X
d	If the	answer to any of the	he above is "Yes," com	aplete the following sche	dule. Col	umn (b) :	should always sh	now the fair	market		
	value	of the goods, othe	r assets, or services o	iven by the reporting fou	indation.	If the four	ndation received	less than fa	air market		
	value	in any transaction	or sharing arrangeme	nt, show in column (d) th	ne value	of the god	ods, other assets	, or service	s received.		
(a) Lin	e no	(b) Amount involved	(c) Name of nonc	haritable exempt organizatio	n	(d) Des	cription of transfers	, transactions	, and sharing a	rangem	ents
			Not Applicable								_
2a	ls th desc	e foundation direction 5	ctly or indirectly affiliation of the Code (c	ated with, or related to other than section 501	o, one or (c)(3)) or	more ta	x-exempt orgar on 527?	nizations	. 🗌 Yes	X N	10
b	If "Y	es," complete the	following schedule.	<del>,</del>			,				
		(a) Name of organ	nization	(b) Type of orga	anızatıon		(c	) Description	of relationship		
				Ĺ							_
				eturn, including accompanying school eyer) is based on all information of				wledge and belie	f, it is true		
Sign	1.	•			<b>.</b>	-	-		May the IRS discus		
Here		John 15 Lente SVP Well		8/12/2016		<u>Wells F</u>	argo Bank N.A		with the preparer s see instructions)?		
	Sig	nature of officer or true		Date	Title			<b>_</b>			
Paid		Print/Type preparer	's name	Preparer's signature			Date	Check	X if PTIN		
Prepa	arer	JOSEPH J. CAS	STRIANO	selle-			8/12/2016	self-em	ployed P012	<u>51603</u>	
•			PricewaterhouseCo				F <u> F</u>	rm's EIN 🕨	13-4008324		
USE	e Only Firm's address ► 600 GRANT STREET, PITTSBURGH, PA 15219-2777 Phone no 4						412-355-60	00			

## **Account Name Aldred I Dupont Trust**

Attachment to Form 990-PF Part VII-A, Question 5(c), page 5

# Expenditure Responsibility Statement for the year 2015

EIN: 59-6122734

Pursuant to Treasury Regulation § 53.4945-5(d)(2), the Foundation provides the following information:

(i) The name and address of the grantee:

Alfred I. Dupont Testamentary Trust 510 Alfred Dupont Place Jacksonville, FL 32202

(ii) The date(s) and amount(s) of the grant(s):

12/28/2015 \$140,198

(iii) The specific purpose(s) of the grant(s):

For educational and charitable purposes

(iv) The amounts expended by the grantee (based upon the most recent report received from the grantee):

\$66,500 spent \$73,698 remaining unspent

(v) Whether the grantee has diverted any portion of the funds (or the income therefrom in the case of an endowment grant) from the purpose of the grant (to the knowledge of the Foundation as grantor):

To the Foundation's knowledge, no funds have been diverted to any activity other than the activity for which the grant was originally made.

(vi) The dates of report(s) received from the grantee: 8/2/2016

(vii) The date and results of any verification of the grantee's reports undertaken pursuant to and to the extent required under Treasury Regulation § 53.4945-5(c)(1) by the Foundation as the grantor or by others at the direction of the Foundation:

The Foundation has no reason to doubt the accuracy or reliability of information supplied by the grantee; therefore, the Foundation did not undertake or direct independent verification.

### FOLLOW-UP REPORT OF GRANTEE

RE: Funds Received from Alfred I. Dupont Trust ("Trust")

Trustees of the Alfred I. duPont Testamentary Trust Grantee Name: 510 Alfred duPont Place, Jacksonville, FL 32202 Official Address: Official Contact's Name: Hugh M. Durden Contact's Address: Same as official address Contact's Title: Chairman Phone: 904.394.9800 E-Mail Address: Fax #: 904.394.9854 EIN: 59-0226560 Grantee's Tax Status: REPORT PERIOD (month/date/year of Grantee's Fiscal Year Covered by Report): 1/1/2015 - 12/31/2015 Please complete the following (attach additional pages or documentation as needed): This Report relates to the following distributions to Grantee from the Trust (list date & amount of each distribution received as well as brief summary of required charitable purpose per Grant Agreement): 12/28/2015 \$140,198 2. Description of progress made in accomplishing above charitable purpose(s) during Report Period: Continuing expending funds throughout 2016 3. Itemization of expenditures made during Report Period using funds received from the Trust, including salaries, travel & supplies, if applicable (attach sheets as needed): \$10,000 Friends of Casa Feliz \$1,500 Dreams Come True UF Health Proton Therapy Institute \$25,000 Camp Boggy Creek \$10,000 Urban Promise Wilmington \$5,000 Kind to Kids Foundation \$5,000 Baptist Missions to Forgotten People \$2,500 \$2,500 Betty Griffin House **Emergency Services & Homeless** Coalition of St. Johns County \$2,500 Life Services Inc. of St. Augustine \$2,500 4. Total amount of funds received from the Trust spent by Grantee during Report Period: \$66,500 Total amount of funds received from the Trust remaining unspent (if any) as of end of Report Period: 6. Grantee certifies that it has made all expenditures in furtherance of the required purposes per the Grant Agreement signed by Grantee on September 9, 2015, and that Grantee has otherwise complied with all terms and conditions of such agreement. 7. Provide copy of Grantee's tax return, which indicates the distribution made within the reporting period above. The duPont Trust does not file tax returns for this fund, this continues to be the responsibility of Wells Fargo. SIGNATURE: I declare that I am authorized to sign this Report on behalf of the above-referenced Grantee, that I have examined the foregoing statements, and to the best of my knowledge they are true, correct, and complete. Print/Type Name

Submit completed, signed form/attachments to individual listed on the Grant Agreement within 3 months following close of each fiscal year in which Grantee received or spent any portion of funds distributed from Trust (including income, if any, from such funds) until funds are entirely depleted. For multi-year distributions, final report should summarize all expenditures made with such funds.

Last Revised 5/12/2015

State |Zip Code

Foundation Status

Foreign Country

Amount

City

Relationship

Purpose of grant/contribution

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

						Totals	Gro	2	Cost or Other Basis Expenses.	isis Expenses.	Zez	Net Gain
Amount							Sales	S	Depreciation and Adjustments	d Adjustments	o	or Loss
51,722					Ö	Capital Gains/Losses		817,947		782,925		35,022
0						Other sales		0		0		0
		Check "X" If										
Check "X"	x.	Purchaser							Expense of Sale			:
_		e si	Acquisition	Date	Date	Gross Sales	Costor	Valuation	and Cost of			Net Gain
CUSIP# In Part IV	rt IV Purchaser	Business	Method	Acquired	Sold	Pnce	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
693391559 X				11/12/2013	12/15/2015	22,796	26,753			i		-3,957
76628R615 X				9/9/2014	12/15/2015	22,241	26,205	1	-	i :	ا ا	-3,964
94985D582 X				10/21/2009	12/15/2015	4,054	2,000					-946
94985D582 X				12/19/2007	12/15/2015	35,527	41,642					6,115
94985D582 X				9/23/2010	12/15/2015	28,173	35,432					-7,259
044820504 X				3/20/2014	12/15/2015	53,672	66,250				0	-12,578
06738C778 X				11/12/2013	12/15/2015	20,029	33,976	į				-13,947
38142Y401 X				3/24/2009	12/9/2015	8,587	4,300				0	4,287
38142Y401 X				11/7/2008	12/9/2015	70,860	39,549				٥	31,311
7103C241 X				3/24/2009	12/15/2015	4,036	3,000				0	1,036
47103C241 X		;	,	11/7/2008	12/15/2015	59,259	48,137				0	11,122
47103C241 X				12/28/2012	12/15/2015	3,356	3,684					-328
47103C241 X				11/12/2013	12/15/2015	3,259	4,434	ĺ	-:		0	-1,175
589509207 X				11/12/2013	12/15/2015	8,875	9,401					-526
63872T885 X				11/12/2013	12/15/2015	8,154	8,976				0	-822
693390551 X				5/27/2009	12/15/2015	46,203	46,810				0	209-
693390551 X				11/7/2008	12/15/2015	173,248	175,000				0	-1,752
693390551 X				9/9/2014	12/15/2015	8606	9,549					451
693390791 X				9/23/2010	12/15/2015	92,549	97,220					4,671
K 162390791 X				12/28/2012	12/15/2015	40,085	41,406					-1,321
693390882 X				9/23/2010	12/15/2015	18,319	18,750				0	431
693391559				12/19/2007	12/15/2015	33.845	37.451					909'8-

Part I, Line 16a (990-PF) - Legal Fees

	9,050	0	)(	9,050
				Disbursements
	Revenue and			for Charitable
	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books _	Income	Income	(Cash Basis Only)
1 LEGAL FEES	9,050			9,050

Part I, Line 16b (990-PF) - Accounting Fees

		0	(	500
	Revenue and			Disbursements for Chantable
	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books	Income	Income	(Cash Basis Only)
1 TAX PREP FEES	500			500

Part I, Line 18 (990-PF) - Taxes

		8,215	724		00
	Description	Revenue and Expenses per Books	Net Investment	Adjusted Net Income	Disbursements for Charitable Purposes
1	FOREIGN TAX WITHHELD	724	724		
2	PY EXCISE TAX DUE	4,115			
3	ESTIMATED EXCISE PAYMENTS	3,376			

Part II, Line 13 (990-PF) - Investments - Other

	ait II, Eilie 13 (330-Fr) - IIIVestinents - Other	Onlei			
Į	•		2,688,444	2,512,758	2,679,358
		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg. of Year	End of Year	End of Year
_				0	
2	DODGE & COX INCOME FD COM 147		0	278,154	288,428
က	DODGE & COX STOCK FUND 145		0	108,287	182,278
4	LAZARD EMERGING MKTS PTFL 638		0	32,958	36,279
2	PIMCO FOREIGN BD FD USD H-INST 103		0	59,217	57,021
9	T ROWE PRICE SHORT TERM BD FD 55		0	122,960	122,960
7	VOYA INTL RL EST FD CL-1 #2664		0	55,163	50,243
<b>∞</b>	ARTISAN INTERNATIONAL FD I 662		0	125,613	159,366
6	MERGER FUND-INST #301		0	40,684	38,156
10	MET WEST TOTAL RETURN BOND CL   51		0	292,030	292,030
1	FID ADV EMER MKTS INC- CL I 607		0	122,960	122,666
12	T ROWE PRICE REAL ESTATE FD 122		0	109,785	192,050
13	WESTPORT SELECT CAP FD- I 13		0	73,962	60,740
14	EATON VANCE GLOBAL MACRO - I		0	62,643	60,841
15	DODGE & COX INT'L STOCK FD 1048		0	140,628	137,504
16	DRIEHAUS ACTIVE INCOME FUND		0	68,133	62,945
17	ASG GLOBAL ALTERNATIVES-Y 1993		0	42,541	38,908
18	CALVERT CAPTL ACCUMULATION-1 764		0	18,214	14,508
19	WELLS FARGO ADV-DIS US CR-IS #4102		0	159,265	143,279
20	JPMORGAN HIGH YIELD FUND SS 3580		0	78,529	71,646
21	T ROWE PRICE INST FLOAT RATE 170		0	84,918	80,563
22	WFA LARGE CAP GROWTH-I 4137		0	689'96	189,490
23	IPATH DOW JONES-UBS COMMODITY IND		0	103,958	62,070
24	OPPENHEIMER DEVELOPING MKT-I 799		0	134,037	115,167
25	ROBECO BP LNG/SHRT RES-INS		0	101,430	100,220

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# Part III (990-PF) - Changes in Net Assets or Fund Balances

<u></u>	11. 11. (000 ) 1 ) 0.1011   0.1		
	Line 3 - Other increases not included in Part III, Line 2		
1	MUTUAL FUND & CTF INCOME ADDITIONS	1	9,748
2	FEDERAL EXCISE TAX REFUND	2	7,920
3	Total	3	17,668
	Line 5 - Decreases not included in Part III, Line 2		
1	COST BASIS ADJUSTMENT	. 1	1,437
2	MUTUAL FUND & CTF INCOME SUBTRACTION	2	1,669
3	PY RETURN OF CAPITAL ADJUSTMENT	3	200
4	Total	. ,	3 306

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

Long Term CG Distributions	51,722												
Short Term CG Distributions	0				766,225	0	9	782,925	-16,700	-	ی		0 -16,700
				_				Cost or Other		FMV	Adjusted Basis	Excess of FMV	Gains Minus
		Acquisition	Date	Date	Gross	Depreciation		Basis Plus	-	as of	as of	Over	Excess FMV Over
Description of Property Sold	CUSIP #	Method	Acquired	Sold	Sales Price	Allowed	Adjustments	Expense of Sale	Gain or Loss	12/31/69	12/31/69	Adjusted Basis	Adj Basis or Losses
PIMCO EMERG MKTS BD-INS	693391559		11/12/2013	12/15/2015			0	26,753	-3,957		C		-3,957
RIDGEWORTH FD-MIDCAP VA	76628R615		9/9/2014	12/15/2015	22,241	:	0	26,205	-3,964	-	0		-3,964
WELLS FARGO INTL BOND-18	94985D582		10/21/2009	12/15/2015	4.054			5,000	946.		0	-	-946
WELLS FARGO INTL BOND-IS	94985D582		12/19/2007	12/15/2015	35,527		9	41,642	-6,115	_	0		6,115
WELLS FARGO INTL BOND-18	94985D582		9/23/2010	12/15/2015	28,173		9	35,432	-7,259		2		٦,259
ASHMORE EMERG MKTS CR	044820504		3/20/2014	12/15/2015	53,672	!		66,250	-12,578		0		-12,578
BARCLAYS BANK PLC IPATH	06738C778		11/12/2013	12/15/2015	20,029			33,976	-13,947		3		13,947
GOLDMAN SACHS GRTH OPP	381427401		3/24/2009	12/9/2015	8,587			4,300	4,287	_	O	-	7 4,287
GOLDMAN SACHS GRTH OPF	381427401		11/7/2008	12/9/2015	70,860		9	39,549	31,311		0		31,311
PERKINS MID CAP VALUE FIG	47103C241		3/24/2009	12/15/2015	4,036		0	3,000	1,036		0		1,036
PERKINS MID CAP VALUE F/d	47103C241		11/7/2008	12/15/2015	59,259		٥	48,137	11,122	7	0		11,122
12 PERKINS MID CAP VALUE F/C	47103C241		12/28/2012	12/15/2015	3,356		9	3,684	-328	1	C	[	-328
PERKINS MID CAP VALUE F/C	47103C241		11/12/2013	12/15/2015	3,259			4,434	-1,175		0		1,175
MERISER FUND-INST #301	589509207		11/12/2013	12/15/2015	8,875			9,401	-526	_	0		526
15 ASG GLOBAL ALTERNATIVES	638727885		11/12/2013	12/15/2015	8,154		٥	9/6'8	-822		9		-822
16 PIMCO TOTAL RETN FD II INS	693390551		5/27/2009	12/15/2015	46,203			46,810	-607		0		209-
PIMCO TOTAL RETN FD II INS	693390551		11/7/2008	12/15/2015	173,248		0	175,000	-1,752		0		-1,752
18 PIMCO TOTAL RETN FD II INS	693390551		9/9/2014	12/15/2015	860'6		9	9,549	451				7 -451
19 PIMCO LOW DURATION II-INS	693390791		9/23/2010	12/15/2015	92,549		Q .	97,220	-4,671	_	0		7,671
20 PIMCO LOW DURATION II-INS	693390791		12/28/2012	12/15/2015	40,085		<u>ت</u>	41,406	-1,321		9	-	1,321
21 PIMCO FOREIGN BD FD USD	693390882		9/23/2010	12/15/2015	18,319		2	18,750	431	-	O C		431
22 PINCO EMERG MKTS ROUNS	693391459		12/19/2007	12/15/2015	33 845			37.451	-3.606				-3.606

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

7		$\neg$			_;
	Fxnense	Account	_		
		Benefits			
4,085		Compensation	4 085	3	
	200	Avg nrs Per Week	4 00	F	
		Title	TOLICT	1103111	
				_	
		Foreign Country			
		Zin Code	2000	27101-3818	
		. C	2	2	_
		<u> </u>	65	Winston Salem	
, till, tille i (555 · · · )   55mpcmcccc · · · · · · · · · ·		0	Silen	1 W 4th St 4th Floor MAC D4000-041 Winston Salem	
		Check "X"	II BUSINESS	×	
TIII, 1-1111C 1 200-11 20111			Name	WELLS FARGO BANK NA	
ا		1		1	-

Part VI, Line 6a (990-PF) - Estimated Tax Payments

	Date	Amount
1 Credit from prior year return	1	1,641
2 First quarter estimated tax payment	. <u>5/4/2015</u> <b>2</b>	290
3 Second quarter estimated tax payment		
4 Third quarter estimated tax payment	4 .	
5 Fourth quarter estimated tax payment	<u>10/2/2015</u> <b>5</b>	3,086
6 Other payments	6	
7 Total	<u> 7</u>	5,017

Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistributed Income		
1 Distributable amounts for 2014 that remained undistributed at the beginning of the 2015 tax year	. 1	140,198
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10 Total	<u></u> 10	<u>1</u> 40,198