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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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

For calendar year 2015 or tax year beginning**, and ending**

Name of foundation NEWTON, CLYDE F. CHARITABLE T U A			A Employer identification number 95-6378937	
Number and street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephone number (see instructions) (888) 730-4933	
Wells Fargo Bank N A Trust Tax Dept - 1 W 4th St 4th Floor MAC D4000-041				
City or town Winston Salem	State NC	ZIP code 27101-3818		
Foreign country name		Foreign province/state/country	Foreign postal code	
			C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply:			D 1. Foreign organizations, check here <input type="checkbox"/>	
<input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity			2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<input type="checkbox"/> Final return <input type="checkbox"/> Amended return			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation				
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 520,569		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	7,742			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	12,324	12,075		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-7,067			
	b Gross sales price for all assets on line 6a	119,430			
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	12,999	12,075	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	3,257	2,443		814
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,163			1,163
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	694	284		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publication				
	23 Other expenses (attach schedule)	1,784			10
	24 Total operating and administrative expenses. Add lines 13 through 23	6,898	2,727	0	1,987
	25 Contributions, gifts, grants paid	7,397			7,397
26 Total expenses and disbursements. Add lines 24 and 25	14,295	2,727	0	9,384	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-1,296				
b Net investment income (if negative, enter -0-)		9,348			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	12,673	27,326	27,326
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
Less: accumulated depreciation (attach schedule) ▶				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	450,798	435,369	493,243	
14 Land, buildings, and equipment: basis ▶				
Less: accumulated depreciation (attach schedule) ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	463,471	462,695	520,569	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	463,471	462,695	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances (see instructions)	463,471	462,695		
31 Total liabilities and net assets/fund balances (see instructions)	463,471	462,695		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	463,471
2 Enter amount from Part I, line 27a	2	-1,296
3 Other increases not included in line 2 (itemize) ▶ <u>Mutual Fund & CTF Income Additions</u>	3	917
4 Add lines 1, 2, and 3	4	463,092
5 Decreases not included in line 2 (itemize) ▶ <u>See Attached Statement</u>	5	397
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	462,695

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Attached Statement				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
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	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or 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 If (loss), enter -0- in Part I, line 7 }			2	-7,067
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }			3	0

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries				
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))	
2014	42,708	542,446	0.078732	
2013	22,070	527,444	0.041843	
2012	19,578	491,922	0.039799	
2011	38,559	495,462	0.077824	
2010	17,593	456,374	0.038550	
2 Total of line 1, column (d)			2	0.276748
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3	0.055350
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			4	532,828
5 Multiply line 4 by line 3			5	29,492
6 Enter 1% of net investment income (1% of Part I, line 27b)			6	93
7 Add lines 5 and 6			7	29,585
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			8	9,384

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
3	Add lines 1 and 2			187
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			187
6	Credits/Payments:			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	431	
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d			431
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			244
11	Enter the amount of line 10 to be Credited to 2016 estimated tax <input type="checkbox"/> 187 Refunded <input type="checkbox"/>			57

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>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</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		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? Website address N/A	13	X	
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 27101-3818			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country N/A	16	Yes	No
				X

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	X

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

- 5a** During the year did the foundation pay or incur any amount to:
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☒ Yes ☐ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No
- b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No
- Organizations relying on a current notice regarding disaster assistance check here ☐
- 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? ☐ Yes ☒ No
- If "Yes," attach the statement required by Regulations section 53.4945–5(d) N/A
- 6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- If "Yes" to 6b, file Form 8870
- 7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No
- b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

5b

X

6b

X

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	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Wells Fargo Bank, N.A. 1 W 4th St 4th Floor MAC D4000-041 Winston Salem, NC	Trustee	4 00	3,257	

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 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	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	517,366
b	Average of monthly cash balances	1b	23,576
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	540,942
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	540,942
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	8,114
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	532,828
6	Minimum investment return. Enter 5% of line 5	6	26,641

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

1	Minimum investment return from Part X, line 6	1	26,641
2a	Tax on investment income for 2015 from Part VI, line 5	2a	187
b	Income tax for 2015 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	187
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	26,454
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	26,454
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	26,454

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	9,384
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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,384
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,384

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				26,454
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014	9,506			
f Total of lines 3a through e	9,506			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 9,384				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2015 distributable amount				9,384
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	9,506			9,506
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				7,564
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. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Attached Statement				
Total			▶ 3a	7,397
b <i>Approved for future payment</i> NONE				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated					
		Unrelated business income		Excluded by section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount
		(e) Related or exempt function income (See instructions)			
1	Program service revenue.				
a					
b					
c					
d					
e					
f					
g	Fees and contracts from government agencies				
2	Membership dues and assessments				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities			14	12,324
5	Net rental income or (loss) from real estate				
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	-7,067
9	Net income or (loss) from special events				
10	Gross profit or (loss) from sales of inventory				
11	Other revenue a				
b					
c					
d					
e					
12	Subtotal. Add columns (b), (d), and (e)		0		5,257
13	Total. Add line 12, columns (b), (d), and (e)				5,257

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

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year
Recipient(s) paid during the year**Name**

SHRINERS HOSPITALS FOR CHILDREN

Street

PO BOX 31356

City

TAMPA

State

FL

Zip Code

33631

Foreign Country**Relationship**

NONE

Foundation Status

PC

Purpose of grant/contribution

GENERAL SUPPORT GRANT

Amount

3,549

Name

ORANGE ELKS LODGE #1475

Street

PO BOX 768

City

ORANGE

State

CA

Zip Code

92856-6768

Foreign Country**Relationship**

NONE

Foundation Status

PC

Purpose of grant/contribution

GENERAL SUPPORT GRANT

Amount

100

Name

CA-HI ELKS MAJOR PROJECT, INC

Street

5450 E LAMONA AVE

City

FRESNO

State

CA

Zip Code

93727-2224

Foreign Country**Relationship**

NONE

Foundation Status

PC

Purpose of grant/contribution

GENERAL SUPPORT GRANT

Amount

1,774

Name

CHILDREN'S HOSPITAL OF ORANGE COUNTY

Street

455 S MAIN ST

City

ORANGE

State

CA

Zip Code

92868

Foreign Country**Relationship**

NONE

Foundation Status

PC

Purpose of grant/contribution

GENERAL SUPPORT GRANT

Amount

1,774

Name

ORANGE EMBLEM CLUB CHARITY

Street

P O BOX 742

City

ORANGE

State

CA

Zip Code

92666

Foreign Country**Relationship**

NONE

Foundation Status

PC

Purpose of grant/contribution

GENERAL SUPPORT GRANT

Amount

200

Name**Street****City****State****Zip Code****Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution****Amount**

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

Long Term CG Distributions		Amount		Totals												Gross Sales		Cost or Other Basis, Expenses, Depreciation and Adjustments		Net Gain or Loss			
Short Term CG Distributions		655		Capital Gains/Losses												Other sales		119,430		128,497		-7,067	
		0																					
	Description	CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss								
1	AQR MANAGED FUTURES ST	00203H859	X				1/24/2014	10/27/2015	1,933	1,811				0	122								
2	AQR MANAGED FUTURES ST	00203H859	X				1/22/2015	10/27/2015	2,381	2,381				0	0								
3	AQR MANAGED FUTURES ST	00203H859	X				7/23/2015	10/27/2015	723	704				0	19								
4	AQR MANAGED FUTURES ST	00203H859	X				10/27/2015	10/27/2015	1,134	1,043				0	91								
5	CREDIT SUISSE COMM RET	2254AR305	X				11/23/2010	7/21/2015	5,400	8,785				0	-3,385								
6	CREDIT SUISSE COMM RET	2254AR305	X				9/5/2014	7/21/2015	4,249	5,526				0	-1,277								
7	DREYFUS EMG MKT DEBT LC	261980494	X				6/24/2011	7/21/2015	1,212	1,532				0	-320								
8	DREYFUS EMG MKT DEBT LC	261980494	X				8/17/2012	7/21/2015	706	873				0	-167								
9	DREYFUS EMG MKT DEBT LC	261980494	X				2/17/2012	11/20/2015	745	984				0	-239								
10	DREYFUS EMG MKT DEBT LC	261980494	X				8/17/2012	11/20/2015	1,331	1,774				0	-443								
11	DREYFUS EMG MKT DEBT LC	261980494	X				7/17/2013	11/20/2015	2,953	3,960				0	-907								
12	DREYFUS EMG MKT DEBT LC	261980494	X				7/17/2013	12/4/2015	2,569	3,411				0	-842								
13	DREYFUS EMG MKT DEBT LC	261980494	X				1/24/2014	12/4/2015	967	1,206				0	-239								
14	DREYFUS EMG MKT DEBT LC	261980494	X				1/22/2015	12/4/2015	1,412	1,635				0	-223								
15	DREYFUS INTERNATL BOND	261980668	X				9/17/2014	6/10/2015	3,803	4,090				0	-287								
16	DRIEHAUS ACTIVE INCOME	282028855	X				7/17/2013	1/20/2015	5,424	5,590				0	-166								
17	DRIEHAUS ACTIVE INCOME	282028855	X				7/17/2013	10/27/2015	44	47				0	-3								
18	DRIEHAUS ACTIVE INCOME	282028855	X				10/17/2013	10/27/2015	5,177	5,451				0	-274								
19	ISHARES S&P MID-CAP 400	464287806	X				7/31/2014	1/20/2015	1,753	1,878				0	75								
20	ISHARES S&P MID-CAP 400	464287705	X				7/31/2014	1/20/2015	985	978				0	7								
21	ISHARES CORE S&P SMALL	464287804	X				7/31/2014	1/20/2015	551	537				0	14								
22	ISHARES CORE S&P SMALL	464287804	X				10/21/2014	1/20/2015	1,213	1,156				0	57								
23	ISHARES CORE S&P SMALL	464287804	X				6/22/2011	1/20/2015	662	431				0	231								
24	JPMORGAN HIGH YIELD FUND	4812CB803	X				9/17/2014	8/28/2015	8,198	8,982				0	-784								
25	MERGER FUND-INST #301	589509207	X				6/24/2011	1/20/2015	1,951	2,029				0	-78								
26	MERGER FUND-INST #301	589509207	X				2/11/2013	1/20/2015	564	572				0	-8								
27	MERGER FUND-INST #301	589509207	X				2/11/2013	10/27/2015	758	771				0	-13								
28	ASG GLOBAL ALTERNATIVES	638721885	X				7/17/2013	1/20/2015	601	611				0	-10								
29	ASG GLOBAL ALTERNATIVES	638721885	X				7/17/2013	10/27/2015	1,577	1,683				0	-106								
30	PIMCO FOREIGN BD FD USD	693308882	X				8/2/2011	6/10/2015	2,499	2,544				0	-45								
31	PIMCO FOREIGN BD FD USD	693308882	X				1/24/2014	6/10/2015	1,455	1,471				0	-16								
32	PRINCIPAL GL MULT STRAT	742551698	X				8/4/2014	10/27/2015	5,525	5,545				0	-20								
33	ROBEKO BP LNG/SHRT RES	74925K581	X				7/17/2013	1/20/2015	2,979	2,651				0	328								
34	T ROWE PRICE INST FLOAT	77958B402	X				1/24/2014	8/28/2015	3,741	3,846				0	-105								
35	AMEX HEALTH CARE SPDR	81369Y209	X				10/28/2014	1/20/2015	629	589				0	40								
36	HEALTH CARE SELECT SECT	81369Y209	X				7/21/2015	11/10/2015	929	1,008				0	-77								
37	CONSUMER STAPLES SECT	81369Y308	X				9/15/2014	1/20/2015	1,479	1,359				0	120								
38	AMEX CONSUMER DISCR SP	81369Y407	X				9/15/2014	1/20/2015	626	614				0	12								
39	AMEX CONSUMER DISCR SP	81369Y407	X				7/21/2015	11/10/2015	562	553				0	9								
40	AMEX ENERGY SELECT SPDR	81369Y508	X				9/15/2014	1/20/2015	371	472				0	-101								
41	FINANCIAL SELECT SECTOR	81369Y605	X				9/15/2014	1/20/2015	705	703				0	2								
42	FINANCIAL SELECT SECTOR	81369Y605	X				7/21/2015	11/10/2015	928	970				0	-42								
43	AMEX INDUSTRIAL SPDR	81369Y704	X				10/28/2014	1/20/2015	549	544				0	5								
44	AMEX TECHNOLOGY SELECT	81369Y803	X				9/15/2014	1/20/2015	890	882				0	8								
45	AMEX TECHNOLOGY SELECT	81369Y803	X				7/21/2015	11/10/2015	1,305	1,306				0	-1								
46	VANGUARD INTERMEDIATE	921937819	X				9/15/2014	1/20/2015	1,643	1,585				0	48								
47	VANGUARD FTSE DEVELOPER	921943858	X				4/22/2014	7/21/2015	851	875				0	-24								
48	VANGUARD FTSE DEVELOPER	921943858	X				7/31/2014	7/21/2015	4,379	4,514				0	-135								
49	VANGUARD FTSE DEVELOPER	921943858	X				2/7/2013	7/21/2015	10,955	8,955				0	1,100								
50	VANGUARD FTSE EMERGING	922042858	X				6/22/2011	7/21/2015	2,750	3,260				0	-510								
51	VANGUARD FTSE EMERGING	922042858	X				2/7/2013	7/21/2015	1,594	1,759				0	-165								
52	VANGUARD FTSE EMERGING	922042858	X				1/20/2015	11/10/2015	1,168	1,369				0	-201								
53	VANGUARD FTSE EMERGING	922042858	X				2/7/2013	11/10/2015	4,605	5,893				0	-1,288								
54	VANGUARD REIT VIPER	922908553	X				10/15/2013	1/20/2015	956	731				0	225								
55	VANGUARD REIT VIPER	922908553	X				2/6/2009	1/20/2015	3,304	1,027				0	2,277								
56	VANGUARD REIT VIPER	922908553	X				7/21/2015	11/10/2015	1,322	1,333				0	-11								

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

		1,163	0	0	1,163
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	TAX PREP FEES	1,163			1,163

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

		694	284	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Foreign Tax Withheld	284	284		
2	PY Excise Tax Due	225			
3	Estimated Excise Payments	185			

Part I, Line 23 (990-PF) - Other Expenses

		1,784	0	0	10
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	State AG Fees	10	0		10
2	TAXABLE EXPENDITURE	1,774	0		

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

Asset Description		Basis of Valuation	Book Value Beg of Year	Book Value End of Year	FMV End of Year
1				0	493,243
2	ISHARES S&P MIDCAP 400 GROWTH		0	14,440	23,339
3	AMEX INDUSTRIAL SPDR		0	12,520	15,373
4	AMEX HEALTH CARE SPDR		0	13,440	18,872
5	AMEX CONSUMER DISCR SPDR		0	11,711	18,055
6	ASG GLOBAL ALTERNATIVES-Y 1993		0	14,644	13,564
7	VANGUARD REIT VIPER		0	7,832	20,969
8	AQR MANAGED FUTURES STR-I		0	4,862	4,889
9	VANGUARD EMERGING MARKETS ETF		0	37,850	35,458
10	JPMORGAN HIGH YIELD FUND SS 3580		0	11,913	10,747
11	T ROWE PRICE INST FLOAT RATE 170		0	4,242	4,030
12	BLACKROCK GL US CREDIT-INS #1833		0	13,052	12,261
13	VANGUARD BD INDEX FD INC		0	34,012	33,817
14	SPDR DJ WILSHIRE INTERNATIONAL REA		0	15,354	20,108
15	VANGUARD INTERMEDIATE TERM B		0	18,203	18,024
16	VANGUARD EUROPE PACIFIC ETF		0	55,464	55,704
17	ROBECO BP LNG/SHRT RES-INS		0	4,746	5,312
18	NEUBERGER BERMAN LONG SH-INS #183		0	13,284	12,900
19	CREDIT SUISSE COMM RT ST-CO 2156		0	14,401	9,450
20	CONSUMER STAPLES SECTOR SPDR TR		0	7,371	10,754
21	AMEX MATERIALS SPDR		0	3,316	3,560
22	AMEX TECHNOLOGY SELECT SPDR		0	21,463	28,568
23	AMEX ENERGY SELECT SPDR		0	10,008	8,264
24	MERGER FUND-INST #301		0	4,643	4,501
25	FID ADV EMER MKTS INC-CL I 607		0	21,083	19,996
26	T ROWE PRICE REAL ESTATE FD 122		0	3,008	3,017
27	ISHARES TR SMALLCAP 600 INDEX FD		0	23,515	33,694
28	ISHARES S&P MIDCAP 400 VALUE		0	17,438	22,737
29	EATON VANCE GLOBAL MACRO - I		0	5,254	5,191
30	AMEX FINANCIAL SELECT SPDR		0	16,300	20,089

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

Line 3 - Other increases not included in Part III, Line 2

1	Mutual Fund & CTF Income Additions	1	917
2	Total	2	917

Line 5 - Decreases not included in Part III, Line 2

1	Mutual Fund & CTF Income Subtraction	1	103
2	PY Return of Capital Adjustment	2	242
3	Cost Basis Adjustment	3	52
4	Total	4	397

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

Long Term CG Distributions										655		Short Term CG Distributions										0													
Description of Property Sold										CUSIP #		Acquisition Method		Date Acquired		Date Sold		Gross Sales Price		Depreciation Allowed		Adjustments		Cost or Other Basis Plus Expense of Sale		Gain or Loss		F M V as of 12/31/89		Adjusted Basis as of 12/31/89		Excess of FMV Over Adjusted Basis		Gains Minus Excess FMV Over Adj Basis or Losses	
1	AQR MANAGED FUTURES ST	002033H859	1/24/2014	10/27/2015	1,933		0	1,811	122	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722				
2	AQR MANAGED FUTURES ST	002033H859	1/22/2015	10/27/2015	2,381		0	2,381	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722			
3	AQR MANAGED FUTURES ST	002033H859	7/23/2015	10/27/2015	723		0	704	19	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722			
4	AQR MANAGED FUTURES ST	002033H859	7/17/2013	10/27/2015	1,134		0	1,043	91	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722			
5	CREDIT SUISSE COMM RET	22544R305	11/23/2010	7/12/2015	5,400		0	8,785	-3,385	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722			
6	CREDIT SUISSE COMM RET	22544R305	9/5/2014	7/12/2015	4,249		0	5,526	-1,277	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
7	DREYFUS EMG MKT DEBT LC	261980494	6/24/2011	7/12/2015	1,212		0	1,532	-320	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
8	DREYFUS EMG MKT DEBT LC	261980494	8/17/2012	7/12/2015	708		0	873	-167	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
9	DREYFUS EMG MKT DEBT LC	261980494	2/17/2012	7/12/2015	745		0	984	-239	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
10	DREYFUS EMG MKT DEBT LC	261980494	8/17/2012	7/12/2015	1,331		0	1,774	-443	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
11	DREYFUS EMG MKT DEBT LC	261980494	7/17/2013	7/12/2015	2,963		0	3,860	-907	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
12	DREYFUS EMG MKT DEBT LC	261980494	7/17/2013	7/12/2015	2,569		0	3,411	-842	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
13	DREYFUS EMG MKT DEBT LC	261980494	1/24/2014	7/12/2015	967		0	1,206	-239	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
14	DREYFUS EMG MKT DEBT LC	261980494	1/22/2015	7/12/2015	1,412		0	1,535	-223	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
15	DREYFUS EMG MKT DEBT LC	261980494	1/22/2015	7/12/2015	3,803		0	4,090	-287	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
16	DRIEHAUS ACTIVE INCOME	262028855	9/17/2014	6/10/2015	5,424		0	5,590	-166	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
17	DRIEHAUS ACTIVE INCOME	262028855	7/17/2013	10/27/2015	44		0	47	-3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
18	DRIEHAUS ACTIVE INCOME	262028855	10/17/2013	10/27/2015	5,177		0	5,451	-274	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
19	ISHARES S&P MID-CAP 400	464287606	7/31/2014	1/20/2015	1,753		0	1,678	75	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
20	ISHARES S&P MID-CAP 400	464287606	7/31/2014	1/20/2015	985		0	978	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
21	ISHARES CORE S&P SMALL	464287604	7/31/2014	1/20/2015	1,213		0	1,156	57	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
22	ISHARES CORE S&P SMALL	464287604	10/21/2014	1/20/2015	622		0	431	191	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
23	ISHARES CORE S&P SMALL	464287604	6/22/2011	1/20/2015	662		0	431	231	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
24	JPMORGAN HIGH YIELD FUN	4812C0803	9/17/2014	8/28/2015	8,198		0	8,982	-784	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
25	MERGER FUND-INST #301	589509207	6/24/2011	1/20/2015	1,951		0	2,029	-78	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
26	MERGER FUND-INST #301	589509207	2/11/2013	1/20/2015	564		0	572	-8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722		
27	MERGER FUND-INST #301	589509207	2/11/2013	1/20/2015	758		0	771	-13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
28	ASG GLOBAL ALTERNATIVES	638727885	7/17/2013	1/20/2015	601		0	611	-10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
29	ASG GLOBAL ALTERNATIVES	638727885	7/17/2013	10/27/2015	1,577		0	1,683	-106	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
30	PIMCO FOREIGN BD FD USD	693390882	8/2/2011	8/10/2015	2,499		0	2,544	-45	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
31	PIMCO FOREIGN BD FD USD	693390882	1/24/2014	8/10/2015	1,455		0	1,471	-16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
32	PRINCIPAL GL MULT STRAT	742551696	8/4/2014	10/27/2015	5,525		0	5,545	-20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
33	ROBECO BP LONG/SHORT RES	74925K581	7/17/2013	1/20/2015	2,979		0	2,851	128	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
34	T ROWE PRICE INST FLOAT	77958B402	1/24/2014	8/28/2015	3,741		0	3,846	-105	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
35	AMEX HEALTH CARE SPDR	81369Y209	10/28/2014	1/20/2015	629		0	599	30	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
36	HEALTH CARE SELECT SECT	81369Y209	7/21/2015	11/10/2015	929		0	1,006	-77	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
37	CONSUMER STAPLES SECT	81369Y308	9/15/2014	1/20/2015	1,478		0	1,359	119	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
38	AMEX CONSUMER DISCR SP	81369Y407	9/15/2014	1/20/2015	626		0	614	12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
39	AMEX CONSUMER DISCR SP	81369Y407	7/21/2015	11/10/2015	562		0	553	9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
40	AMEX ENERGY SELECT SPD	81369Y506	9/15/2014	1/20/2015	371		0	472	-101	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
41	FINANCIAL SELECT SECTOR	81369Y605	9/15/2014	1/20/2015	705		0	703	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
42	FINANCIAL SELECT SECTOR	81369Y605	7/21/2015	11/10/2015	928		0	970	-42	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
43	AMEX INDUSTRIAL SPDR	81369Y704	10/28/2014	1/20/2015	549		0	544	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
44	AMEX TECHNOLOGY SELECT	81369Y803	9/15/2014	1/20/2015	890		0	882	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
45	AMEX TECHNOLOGY SELECT	81369Y803	7/21/2015	11/10/2015	1,305		0	1,306	-1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
46	VANGUARD INTERMEDIATE	921937819	9/15/2014	1/20/2015	1,643		0	1,595	48	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
47	VANGUARD FTSE DEVELOPE	921943858	4/22/2014	7/12/2015	851		0	875	-24	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
48	VANGUARD FTSE DEVELOPE	921943858	7/31/2014	7/12/2015	4,379		0	4,514	-135	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-7,722	
49	VANGUARD FTSE DEVELOPE	921943858	2/7/2013																																

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

	Date	Amount
1 Credit from prior year return		246
2 First quarter estimated tax payment		
3 Second quarter estimated tax payment		
4 Third quarter estimated tax payment	9/10/2015	185
5 Fourth quarter estimated tax payment		
6 Other payments		
7 Total		431

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

NEWTON, CLYDE F CHARITABLE T U A

Employer identification number

95-6378937

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

Name of organization NEWTON, CLYDE F CHARITABLE T U A	Employer identification number 95-6378937
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEWTON, CLYDE F TUA C/O WELLS FARGO BANI 1 W 4TH FLOOR MAX D4000-041 WINSTON-SALEM NC 27101-3818 Foreign State or Province _____ Foreign Country _____	\$ 7,742	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- ----- Foreign State or Province _____ Foreign Country _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

NEWTON, CLYDE F CHARITABLE T U A

Employer identification number

95-6378937

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----

Name of organization NEWTON, CLYDE F CHARITABLE T U A	Employer identification number 95-6378937
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ 0

Use duplicate copies of Part III if additional space is needed

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