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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

| For | cale | ndar year 2015, oı | r tax year beginning 07-0 | 01-2015 | , and endi | ng 00 | 6-30-2016 | | |
|--------------------|-----------|---|--|--|-----------------------------------|----------|---|--|-----------------------|
| | e of four | ndation JLLING CHAPLAINCY FUND | | | A Emplo | er ide | ntification numbe | er | |
| AIN | INA M TO | DELING CHAFLAINCT FOND | | | 06-60238 | 83 | | | |
| | | | f mail is not delivered to street address; |) Room/suite | B Telepho | ne num | iber (see instruction | s) | |
| P (| O BOX 18 | 302 | | | (888) 866 | 5-3275 | | | |
| | | state or province, country, a , RI 029011802 | and ZIP or foreign postal code | | C If exen | nption a | application is pendin | g, check here | ▶ □ |
| c Cl | anck al | I that apply Tinitial r | eturn Initial return of a f | ormor public charity | | | | | _ |
| G C1 | ieck ai | Final re Addres | turn Amended return | offiler public charity | 2. For | eign org | janizations, check hoganizations meeting there and attach co | the 85% | ► □ |
| H Ch | neck ty | pe of organization 🔽 🤄 | Section 501(c)(3) exempt privat | e foundation e private foundation | E If priva | te fou | ndation status was t 507(b)(1)(A), chec | erminated | ▶ □ |
| | | et value of all assets at | end JAccounting method | ┌ Cash ┌ Accrual | I E II III E | | tion is in a 60-mont | | . – |
| | | rom Part II, col. (c), \$ 2,370,239 | Other (specify)(Part I, column (d) must | be on cash basıs.) | under | section | 507(b)(1)(B), chec | ck here | • |
| Pa | rt I | | enue and Expenses columns (b), (c), and (d) may not bunts in column (a) (see | Revenue and expenses per (a) books | Net investm (b) income | | Adjusted net (c) income | Disburse for char purpo (d) (cash bas | ntable ses |
| | 1 | Contributions, gifts, g | rants, etc , received (attach | | | | | | |
| | | schedule) | | | | | | | |
| | 2 | Check 🟲 🔽 If the four | idation is not required to attach | | | | | | |
| | | Sch B | | | | | | | |
| | 3 | _ | nd temporary cash investments | 54 520 | | 1 000 | | | |
| | 4 | Dividends and interes | | 54,520 | 5 | 4,000 | | | |
| | 5a | | local | | | | | | |
| ds | b | | loss) n sale of assets not on line 10 | 46,828 | | | | | |
| Revenue | 6a b | Gross sales price for a | | 40,020 | | | | | |
| Ð | 7 | 1,515,558 | ne (from Part IV, line 2) | | | 6,828 | | | |
| | 8 | Net short-term capita | , , | | | ,,,,, | 0 | | |
| | 9 | • | | | | | | | |
| | 10a | Gross sales less retu | 1 | | | | | | |
| | ь | Less Cost of goods s | old | | | | | | |
| | c | Gross profit or (loss) | (attach schedule) | | | | | | |
| | 11 | Other income (attach | schedule) | 2,816 | | | | | |
| | 12 | Total.Add lines 1 thro | ugh 11 | 104,164 | 10 | 0,828 | | | |
| | 13 | Compensation of offic | ers, directors, trustees, etc | 19,050 | 1 | 1,430 | | | 7,620 |
| | 14 | O ther employee salar | ies and wages | | | 0 | 0 | | 0 |
| S. | 15 | Pension plans, employ | vee benefits | | | 0 | 0 |) | |
| Ϋ́ | 16a | Legal fees (attach sch | nedule) | | | | | | 0 |
| Expenses | ь | Accounting fees (atta | ch schedule) | 1,250 | | 0 | 0 |) | 1,250 |
| | С . | Other professional fee | es (attach schedule) | | | | | | 0 |
| ₫ | 17 | Interest | | | | | | | 0 |
| Stra Stra | 18 | Taxes (attach schedu | le) (see instructions) | 1,612 | | 752 | | | 0 |
| and Administrative | 19 | Depreciation (attach s | schedule) and depletion | 0 | | 0 | | | |
| 틍 | 20 | Occupancy | | | | | | | |
| 4 | 21 | Travel, conferences, a | and meetings | | | 0 | 0 |) | |
| | 22 | Printing and publication | ons | | | 0 | 0 | | |
| | 23 | Other expenses (attac | ch schedule) | | | | | | |
| Operating | 24 | | dministrative expenses. | | | | | | |
| <u>æ</u> | | _ | 23 | | 1 | 2,182 | 0 | | 8,870 |
| U | 25 | Contributions, gifts, g | rants paid | 80,247 | | | | | 80,247 |
| | 26 | Total expenses and di 25 | sbursements.Add lines 24 and | 102,159 | 1 | 2,182 | 0 | | 89,117 |
| | 27 | Subtract line 26 from | line 12 | | | | | | |
| | a | Excess of revenue over | er expenses and disbursements | 2,005 | | | | | |
| | ь | | e (ıf negatıve, enter -0-) | | 8 | 8,646 | | | |
| | С | Adjusted net income(| ıf negatıve, enter -0-) | | | | 0 | | |

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year (a) Book Value | End o | f year (c) Fair Market Value |
|-----------|--------|---|----------------------------------|-----------------|------------------------------|
| | 1 | Cash—non-interest-bearing | (a) Book value | (b) Book Value | (c) Fair Plance Value |
| | 2 | Savings and temporary cash investments | 19,782 | 104,962 | 104,962 |
| | 3 | Accounts receivable | , | | |
| | • | Less allowance for doubtful accounts | | 0 | 0 |
| | 4 | Pledges receivable - | | J | |
| | 7 | Less allowance for doubtful accounts - | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | U | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| | • | Less allowance for doubtful accounts •0 | | | |
| | 8 | Inventories for sale or use | | | |
| 쫉 | 9 | Prepaid expenses and deferred charges | | | |
| Assets | _ | Investments—U S and state government obligations (attach | | | |
| ∢ | 10a | schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | 2,329,322 | 2,245,617 | 2,265,277 |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | 0 |
| | 14 | Land, buildings, and equipment basis 🕨 | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 | O ther assets (describe 🟲) | | | |
| | 16 | Total assets(to be completed by all filers—see the | | | |
| | | ınstructions Also, see page 1, item I) | 2,349,104 | 2,350,579 | 2,370,239 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ě | 19 | Deferred revenue | | | |
| abilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Lial | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe 🟲) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | 0 | |
| ۰. | | Foundations that follow SFAS 117, check here 🕨 🦵 | | | |
| Balances | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| an | 24 | Unrestricted | | | |
| 89 89 | 25 | Temporarily restricted | | | |
| Ξ | 26 | Permanently restricted | | | |
| or Fund | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | |
| 5 | | and complete lines 27 through 31. | | | |
| Ş | 27 | Capital stock, trust principal, or current funds | 2,349,104 | 2,350,579 | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| 4 | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Net | 30 | Total net assets or fund balances(see instructions) | 2,349,104 | 2,350,579 | |
| | 31 | Total liabilities and net assets/fund balances(see instructions) | 2,349,104 | 2,350,579 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | | <u> </u> | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column (| a), line 30 (must agr | ree | |
| | | with end-of-year figure reported on prior year's return) | | | 2,349,104 |
| 2 | | Enter amount from Part I, line 27a | | | 2,005 |
| 3 | | Other increases not included in line 2 (itemize) | | _ 3 | 0 |
| 4 | | Add lines 1, 2, and 3 | | 4 | 2,351,109 |
| 5 | | Decreases not included in line 2 (itemize) | | _95 5 | 530 |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—Pa | art II, column (b), lın | e 30 . 6 | 2,350,579 |

| | | the kınd(s) of property sold (e g , ehouse, or common stock, 200 sl | | • | How acquire P—Purchase (b) D—Donation | | Date acquired (mo , day, yr) | Date sold (d) (mo , day, yr) |
|-------------|---|---|--------------|--|---------------------------------------|--------|----------------------------------|---|
| 1a | See Additional Data | Table | | | | | | |
| ь | | | | | | | | |
| С | | | | | | | | |
| d | | | | | | | | |
| <u>u</u> | | | | | | | | |
| | | Depreciation allo | wod | Cost | or other basıs | | Gar | l or(loss) |
| (€ | e) Gross sales price | (f) (or allowable) | | | xpense of sale | | | (f) minus (g) |
| a | See Additional Data | | | | • | | . , , , . | ., |
| b | | | | | | | | |
| | | | | | | | | |
| d | | | | | | | | |
| | | | | | | | | |
| e | | | | | | | | |
| Со | mplete only for assets s | showing gain in column (h) and ow | | | | | • | (h) gain minus |
| (i) | F M V as of 12/31/69 | A djusted basis (j) as of 12/31/69 | | | ess of col (ı) col (j), ıf any | (1) | | ot less than -0-) or (from col (h)) |
| a | See Additional Data | | | (K) OVEI | cor (j), ir arry | 107 | | (110111 001 (11)) |
| | See Additional Data | Tubic | | | | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| 2 | - | me or (net capital loss) | [If(I | ain, also enter il loss), enter -0- | | 2 | | 46,828 |
| 3 | Net short-term capit | al gain or (loss) as defined in sec | tions 1 | .222(5) and (6) | | | | |
| | If gain, also enter in l in Part I, line 8 . | Part I, line 8, column (c) (see ins | tructio • | ns) If(loss), en | ter -0- | . | | |
| Part | V Qualification l | Under Section 4940(e) for | Redu | uced Tax on | Net Investm | ent I | ncome | |
| | cional use by domestic p on 4940(d)(2) applies, | private foundations subject to the leave this part blank | sectio | on 4940(a) tax o | on net investmen | incor | me) | |
| | | e section 4942 tax on the distrib ot qualify under section 4940(e) | | | | eriod? |) | ┌ Yes ┌ No |
| 1 En | ter the appropriate amo | unt in each column for each year, | seeır | structions befo | re makıng any en | tries | | |
| | (a) period years Calendar or tax year beginning in) | (b) Adjusted qualifying distributions | Ne | (c) et value of noncharr | table-use assets | | (d) Distributio | n ratio |
| | 2014 | 95,66 | 4 | | 2,470,623 | | , , | 0 038721 |
| | 2013 | 132,98 | 6 | | 2,455,584 | | | 0 054157 |
| | 2012 | 246,54 | 2 | | 2,325,273 | | | 0 106027 |
| | 2011 | 124,23 | | | 2,337,764 | | | 0 053141 |
| | 2010 | 110,47 | | | 2,387,605 | | | 0 046269 |
| 2 | Totalof line 1, columi | n (d) | | | [| 2 | | 0 298315 |
| 3 | | ratio for the 5-year base period— the foundation has been in existei | | | | 3 | | 0 059663 |
| 4 | Enter the net value o | f noncharitable-use assets for 20 | 15 fro | m Part X, line 5. | | 4 | | 2,306,621 |
| 5 | Multiply line 4 by line | e 3 | | | [| 5 | | 137,620 |
| 6 | Enter 1% of net inve | stment income (1% of Part I, line | 27b). | | [| 6 | | 886 |
| 7 | Add lines 5 and 6. | | | | | 7 | | 138,506 |

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

89,117

8

| ĽŒΙ | Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49 | 7 4 0(e), | UI 4940—SE | e page | = 10 OL | the ms | LIUCLIO | 115) | |
|-----|---|----------------------|----------------|----------|------------------------|--------|---------|------|----------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | · [| |) | | | | | |
| | Date of ruling or determination letter | | | ļ | | | | | |
| | (attach copy of letter if necessary-see instructions) | | | | | | | | |
| Ь | Domestic foundations that meet the section 4940(e) requirements in Part V, | | | J | 1 | | | | 1,773 |
| _ | here 🟲 🦵 and enter 1% of Part I, line 27b | | | • | | | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b) | tions e | enter 4% of | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-) | dation | s only Othe | rs | 2 | | | | 0 |
| 3 | Add lines 1 and 2 | | | | 3 | | | : | 1,773 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-) | ndation | s only Othe | ers | 4 | | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, en | nter - 0 | | | 5 | | | | 1,773 |
| 6 | Credits/Payments | | | | | | | | |
| a | 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a |] : | 1,706 | | | | | |
| b | Exempt foreign organizations—tax withheld at source. | 6b | | | | | | | |
| c | Tax paid with application for extension of time to file (Form 8868) | 6c | | 0 | | | | | |
| d | Backup withholding erroneously withheld | 6d | | | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | ٠ | | | 7 | | | | 1,706 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here T if Form 2 | | | | 8 | | | | , 0 |
| 9 | Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed . | | | • | 9 | | | | 67 |
| 10 | Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount | | | ► | 10 | | | | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax | | Refunded | • | 11 | | | | 0 |
| Pai | t VII-A Statements Regarding Activities | | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state | , or loc | al legislatio | n or dı | d | | | Yes | No |
| | it participate or intervene in any political campaign? | | | | | | 1a | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for p | olitica | l purposes (| see In | structi | ons | | | |
| | for definition)? | | | | | • | 1b | | No |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities | and co | pies of any n | nateria | ls | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | | | | | |
| c | Did the foundation file Form 1120-POL for this year? | | | | | | 1c | | No |
| d | Enter the amount (If any) of tax on political expenditures (section 4955) impos | sed dur | ing the year | - | | | | | |
| | (1) On the foundation 🕨 \$ (2) On foundation managers | - \$ _ | | | | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for poli | tical e | xpenditure t | ax ımp | osed | | | | |
| | on foundation managers 🕨 \$ | | | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been rep | orted | to the IRS? | | | | 2 | | No |
| | If "Yes," attach a detailed description of the activities. | | | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in it | _ | = | - | | 5 | | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo | ormed o | copy of the ci | hanges | | | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more di | urıng tl | he year? | | | | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | | | 4b | | <u> </u> |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction dur | ring the | e year? | | | | 5 | | No |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 494 | 45) sa | tisfied eithe | r | | | | | |
| | By language in the governing instrument, or By state large lates that effectively amonds the governing instrument as the | | | t | | | | | |
| | By state legislation that effectively amends the governing instrument so the | | | | | | | V | |
| _ | that conflict with the state law remain in the governing instrument? | | | | | | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? and Part XV | rir Tres | s," complete i | ₽art 11, | , coi. (c _. |), | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (s | see ins | tructions) | | | | | | |
| | <u>▶</u> <u>c</u> | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99 | 0-PF | to the Attorr | ney | | | | | |
| | General (or designate) of each state as required by General Instruction G? If | | | | | | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the n | neanın | g of section | 4942 | (3)(3) | | | | |
| | or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (see | ee inst | ructions for | Part X | (IV)? | | | | |
| | If "Yes," complete Part XIV | | | | | | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," | " attach | a schedule i | listing | their n | ames | | | |
| | and addresses. | | | | | | 10 | | No |

| Par | Statements Regarding Activities (continued) | | | |
|-----|---|------|-------|-------------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ▶ | | | |
| 14 | The books are in care of ►US TRUST FIDUCIARY TAX SERVICES Telephone no ►(888 |)866 | -3275 | |
| | Located at ▶PO BOX 1802 PROVIDENCE RI ZIP +4 ▶0290118 | 302 | | |
| 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 | • • | - , | |
| | | | 1 | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over | مد ا | Yes | No |
| | a bank, securities, or other financial account in a foreign country? | 16 | | No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country | | | |
| | | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) | | | |
| ь | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | No |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | | | |
| Ī | that were not corrected before the first day of the tax year beginning in 2015? | 1c | | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$) | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo | | | |
| | If "Yes," list the years ▶ 20, 20, 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement—see instructions) | 2b | | |
| 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 <u>, 20</u> , 20 <u>, 20</u> | | | |
| За | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| | any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | if the foundation had excess business holdings in 2015.) | 3b | | <u> </u> |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | No |

| | Content to g | ar anny monthines re | ,, ,,,,, | 1011 1 01111 47 20 | May Be Required (Cons | umacay |
|--------------------------|---|---|-----------|---|--|--|
| 5a | During the year did the foundatio | n pay or incurany amou | int to | | | |
| | (1) Carry on propaganda, or othe | rwise attempt to influen | ce legi | ıslatıon (section 49 | 45(e))? | ✓ No |
| | (2) Influence the outcome of any | | | | | |
| | on, directly or indirectly, any | | | | | _ No |
| | (3) Provide a grant to an individu | | | | ⊤ Yes Γ | |
| | (4) Provide a grant to an organiza | • | | | · | . 140 |
| | in section 4945(d)(4)(A)? (s | | | · - | | √ No. |
| | | | | | res p | * IAO |
| | (5) Provide for any purpose other | | | | ⊏ v 「 | 7 No. |
| | educational purposes, or for t | | | | | |
| b | If any answer is "Yes" to 5a(1)-(| | | | | |
| | Regulations section 53 4945 or | | | | | |
| | Organizations relying on a currer | | | | | |
| C | If the answer is "Yes" to question | n 5a(4), does the founda | ation c | laım exemptıon from | n the | |
| | tax because it maintained expend | diture responsibility for | the gra | ant? | 「 Yes「 | No No |
| | If "Yes," attach the statement requ | ured by Regulations sect | on 53. | 4945-5(d). | | |
| 6a | Did the foundation, during the yea | ar, receive any funds, di | rectly | or indirectly, to pay | premiums on | |
| | a personal benefit contract? | | | | T Yes . | ✓ No |
| b | Did the foundation, during the yea | ar, pay premiums, direct | tly or 11 | ndırectly, on a perso | onal benefit contract? | . 6b No |
| | If "Yes" to 6b, file Form 8870. | | | | | |
| 7a | At any time during the tax year, v | was the foundation a pai | tv to a | prohibited tax shel | ter transaction? TYes F | √ No |
| b | If yes, did the foundation receive | • | - | • | • | |
| | | | | | ition Managers, Highly | |
| Pa | and Contractors | it Officers, Directo | 15, 11 | ustees, i ouilda | ition Hanagers, inging | raid Lilipioyees, |
| 1 | | - foundation | and th | | | |
| _ | List all officers, directors, trustee | s, roungation managers | anu ti | heir compensation (: | see instructions). | |
| | List all officers, directors, trustee | Ī | | | see instructions). (d) | |
| | | Title, and average | (c) | Compensation (If | (d) Contributions to | Expense account, |
| | (a) Name and address | Ī | (c) | | (d) Contributions to employee benefit plans | (e) other allowances |
| | (a) Name and address | Title, and average hours per week (b) devoted to positio | (c) | Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) other allowances |
| BANK | (a) Name and address OF AMERICA N A | Title, and average hours per week | (c) | Compensation(If not paid, enter | (d) Contributions to employee benefit plans and deferred compensation | (e) other allowances |
| BANK PO E | (a) Name and address OF AMERICA N A 30 X 1802 | Title, and average hours per week (b) devoted to positio | (c) | Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) other allowances |
| BANK PO E PRO | (a) Name and address OF AMERICA N A BOX 1802 VIDENCE, RI 02901 | Title, and average hours per week (b) devoted to positio TRUSTEE 1 | e (c) | Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) other allowances |
| BANK PO E PRO | (a) Name and address OF AMERICA N A 30 X 1802 | Title, and average hours per week (b) devoted to positio TRUSTEE 1 | e (c) | Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e | (e) other allowances |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BOX 1802 VIDENCE, RI 02901 Compensation of five highest-pair (a) | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than Title, and average) | n those | Compensation(If not paid, enter -0-) 19,050 e included on line 1- | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e | (e) other allowances |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE,RI 02901 Compensation of five highest-paid (a) me and address of each employee | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit | (e) other allowances |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BOX 1802 VIDENCE, RI 02901 Compensation of five highest-pair (a) | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than Title, and average) | n those | Compensation(If not paid, enter -0-) 19,050 e included on line 1- | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |
| BANK PO E PRO 2 | (a) Name and address OF AMERICA N A BO X 1802 VIDENCE, RI 02901 Compensation of five highest-paid (a) me and address of each employee more than \$50,000 | Title, and average hours per week (b) devoted to position TRUSTEE 1 d employees (other than average) Title, and average hours per week | n those | Compensation(If not paid, enter -0-) 19,050 | (d) Contributions to employee benefit plans and deferred compensation -see instructions). If none, e Contributions to employee benefit plans and deferred | (e) other allowances nter "NONE." Expense account, |

| Form 990-PF (2015) | | Page 7 |
|--|--|--|
| Part VIII Information About Officers, Directors, Trust and Contractors (continued) | ees, Foundation Managers, Higl | hly Paid Employees, |
| 3 Five highest-paid independent contractors for professional services | (see instructions). If none, enter "NONE | " <u>. </u> |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services. | | 0 |
| | | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produced. | | Expenses |
| 1 | , | |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments | (see instructions) | |
| Describe the two largest program-related investments made by the foundation during | • | Amount |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | P |

Part X Minimum Investment Return

| Pa | (All domestic foundations must complete this part. Foreign foundations, see instruction | s.) | |
|-----|--|--------|--------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | | |
| а | Average monthly fair market value of securities | 1a | 2,263,115 |
| b | Average of monthly cash balances | 1b | 78,632 |
| С | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 2,341,747 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 2,341,747 |
| 4 | Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 35,126 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 2,306,621 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 115,331 |
| Pai | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.) | taın f | oreign organizations |
| 1 | Mınımum ınvestment return from Part X, line 6 | 1 | 115,331 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 2a 1,773 | | |
| b | Income tax for 2015 (This does not include the tax from Part VI) 2b | | |
| c | Add lines 2a and 2b | 2c | 1,773 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 113,558 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0 |
| 5 | Add lines 3 and 4 | 5 | 113,558 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0 |
| 7 | Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 113,558 |
| | Qualifying Distributions (see instructions) | | |
| 1 | A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| a | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 89,117 |
| | Program-related investments—total from Part IX-B | 1b | 0 |
| 2 | A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , | _ | |
| | purposes | 2 | 0 |
| 3 | A mounts set aside for specific charitable projects that satisfy the | | l |
| а | Suitability test (prior IRS approval required) | 3a | 0 |
| b | Cash distribution test (attach the required schedule) | 3b | 0 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 89,117 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income Enter 1% of Part I, line 27b (see instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 89,117 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years | er the | foundation qualifies for |

| P | art XIII Undistributed Income (see inst | ructions) | | | |
|----|---|---------------|----------------------------|--------------------|----------------------|
| | | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| 1 | Distributable amount for 2015 from Part XI, line 7 | | | | 113,558 |
| 2 | Undistributed income, if any, as of the end of 2015 | | | | |
| а | Enter amount for 2014 only | | | 0 | |
| ь | Total for prior years 2013, 20, 20 | | 0 | | |
| 3 | Excess distributions carryover, if any, to 2015 | | | | |
| а | | 0 | | | |
| b | From 2011 | 0 | | | |
| c | From 2012 80,70 | 9 | | | |
| d | From 2013 | 9 | | | |
| е | From 2014 | 0 | | | |
| f | Total of lines 3a through e | 96,268 | | | |
| 4 | Qualifying distributions for 2015 from Part | | | | |
| | XII, line 4 🕨 \$89,117 | | | | |
| а | Applied to 2014, but not more than line 2a | | | 0 | |
| b | Applied to undistributed income of prior years | | 0 | | |
| | (Election required—see instructions) | | | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | 0 | | | |
| d | Applied to 2015 distributable amount | | | | 89,117 |
| е | Remaining amount distributed out of corpus | 0 | | | |
| 5 | Excess distributions carryover applied to 2015 | 24,441 | | | 24,441 |
| | (If an amount appears ın column (d), the same amount must be shown ın column (a).) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 71,827 | | | |
| | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | 0 | | |
| C | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) tax has been previously assessed | | 0 | | |
| А | Subtract line 6c from line 6b Taxable amount | | | | |
| | —see instructions | | 0 | | |
| е | Undistributed income for 2014 Subtract line | | | | |
| | 4a from line 2a Taxable amount—see | | | 0 | |
| _ | instructions | | | 0 | |
| T | Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must | | | | |
| | be distributed in 2015 | | | | 0 |
| 7 | A mounts treated as distributions out of | | | | |
| | corpus to satisfy requirements imposed by | | | | |
| | section 170 (b)(1)(F) or 4942(g)(3) (Election may | 0 | | | |
| _ | be required - see instructions) | | | | |
| 8 | Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) | 0 | | | |
| 9 | Excess distributions carryover to 2016. | | | | |
| _ | Subtract lines 7 and 8 from line 6a | 71,827 | | | |
| 10 | Analysis of line 9 | | | | |
| а | Execus nom 2011. | 0 | | | |
| b | Excess from 2012 | | | | |
| | Excess from 2013 15,55 | | | | |
| | EXCESS NOME OF IT I | <u>0</u> | | | |
| е | Excess from 2015 | 0 | | | |

| | Private Operating Foundat | • | | | 19) | |
|------------|---|---------------------|------------------------|----------------------|----------------------|------------|
| 1a | If the foundation has received a ruling or determ | | | | | |
| | foundation, and the ruling is effective for 2015, | | | | | |
| | Check box to indicate whether the organization | | ting foundation de | | 1 4942(j)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | |
| | year listed | | | | | |
| b 8 | 35% of line 2a | | | | | |
| c | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used | | | | | |
| | directly for active conduct of exempt activities | | | | | |
| e | Qualifying distributions made directly | | | | | |
| • | for active conduct of exempt activities | | | | | |
| | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | 1 | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 | | 1 | | | |
| - | of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | |
| C | "Support" alternative test—enter | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, dividends, rents, payments | | | | | |
| | on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public | | | | | |
| | and 5 or more exempt organizations as provided in | | | | | |
| | section $4942(j)(3)(B)(iii)$ | | | | | |
| | (3) Largest amount of support | | | | | |
| | from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Pa | rt XV Supplementary Information (C | | | e organizatio | n had \$5,000 o | r more in |
| | assets at any time during the | <u>year—see ins</u> | tructions.) | | | |
| L a | Information Regarding Foundation Managers: List any managers of the foundation who have co | ontributed more th | nan 2% of the tota | ıl contributions rec | eived by the found | lation |
| | before the close of any tax year (but only if they | | | | | ideloli |
| | | | | | | |
| b | List any managers of the foundation who own 10 | | | | large portion of th | е |
| | ownership of a partnership or other entity) of wh | ich the loundation | inas a 10% or gre | eaterinterest | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Total Control Control Control City | Cabalanak | :t- B | | | |
| 2 | Information Regarding Contribution, Grant, Gift | | | | | |
| | Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation | | | | | |
| | other conditions, complete items 2a, b, c, and d | | its, etc. (see ilisti) | actions) to marvia | dais of organizatio | iis uiidei |
| | | | | | | |
| а | The name, address, and telephone number or e | mail address of th | e nerson to whom | annlications shou | ld he addressed | |
| u | The name, address, and telephone number of el | man address of th | e person to whom | applications shou | ia be addressed | |
| | | | | | | |
| | | | | | | |
| b | The form in which applications should be submi | tted and informat | ion and materials t | they should includ | e | |
| | | | | | | |
| | | | | | | |
| C | Any submission deadlines | | | | | |
| | | | | | | |
| _ | A | | | | | |
| d | Any restrictions or limitations on awards, such factors | as by geographic | aı areas, charitabl | e neias, kinds of ii | nstitutions, or othe | Γ |

Part XV Supplementary Information(continued)

| 3 Grants and Contributions Paid | I During the Year or Ap_{I} | proved for F | uture Payment | |
|---|---|-------------------------|----------------------|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or | A mount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | |
| a Paid during the year THE CONFERENCE OF CHURCHES 224 FARMINGTON AVE HARTFORD,CT 061053501 | N/A | PC | UNRESTRICTED GENERAL | 80,247 |
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| | | | | |
| | | | | |
| | | | | |
| Total | | · | | 80,247 |
| b Approved for future payment | | | | |
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| rt XVI-A Analysis of Income-Produc | 1 | | Evaluate to the | . E10 E10 514 | (e) |
|--|--|----------------|---|-----------------------|-----------------------------------|
| er gross amounts unless otherwise indicated | Unrelated bu | (b) | Excluded by section (c) | (d) | Related or exer function incon |
| Program service revenue | Business code | A mount | Exclusion code | A mount | (See instructions |
| a | | | | | |
| b | | | | | |
| c d | | | | | |
| e | | | | | |
| · | | | | | |
| ; Fees and contracts from government agencies Membership dues and assessments | | | | | |
| Interest on savings and temporary cash investments | | | | | |
| Dividends and interest from securities | | | 14 | 54,520 | |
| Net rental income or (loss) from real estate Debt-financed property | | | | | |
| Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income. Gain or (loss) from sales of assets other than | | | | | |
| inventory | | | 18 | 46,828 | |
| let income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a EXCISE TAX REFUND | | | 1 | 2,816 | |
| | | | | · | |
| | | | | | |
| | | | | | |
| · | | | | | |
| | | | | 104,164 | |
| Subtotal Add columns (b), (d), and (e) Total.Add line 12, columns (b), (d), and (e) | | | : | 104,164 13 | |
| Subtotal Add columns (b), (d), and (e) Fotal.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify | calculations) | | | 13 | |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify rt XVI-B Relationship of Activities to Explain below how each activity for what the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 ntly to |
| Fotal.Add line 12, columns (b), (d), and (e). Fotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify THE XVI-B Relationship of Activities to the accomplishment of the foundation. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 ntly to |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities to the No. Explain below how each activity for what the accomplishment of the foundations. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Sotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities t Explain below how each activity for whethe accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| instructions (b), (d), and (e). iotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities to the Relationship of Activity for whether accomplishment of the foundation of the foundation. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| wibtotal Add columns (b), (d), and (e). cotal.Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Sotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities to Explain below how each activity for whethe accomplishment of the foundation. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| wibtotal Add columns (b), (d), and (e). cotal.Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| instructions (b), (d), and (e). iotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities to the Relationship of Activity for whether accomplishment of the foundation of the foundation. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Sotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities to Explain below how each activity for whethe accomplishment of the foundation. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Sotal.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities t Explain below how each activity for whethe accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TXVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TXVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TXVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify rt XVI-B Relationship of Activities to Explain below how each activity for what the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TH XVI-B Relationship of Activities to the No. Explain below how each activity for whith the accomplishment of the foundations. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TT XVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify TH XVI-B Relationship of Activities to the No. Explain below how each activity for whith the accomplishment of the foundations. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |
| Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify t XVI-B Relationship of Activities t Explain below how each activity for what the accomplishment of the foundations. | calculations) o the Accomplich income is re | plishment of E | Exempt Purpos (e) of Part XVI-A c | es ontributed importa | 104,1 |

| Form 990-PF | (2015) | | | | | | | | Pag | ge 13 |
|---------------------|---|-----------------------------------|----------------------------------|-------------------------------------|---------------------|--|---|--------------------------|---------|--------------|
| Part XVII | Information Re Noncharitable | | | | actio | ns and Relatio | onships With | | | |
| | rganization directly or i 01(c) of the Code (othe | | | | | | | | Yes | No |
| organızat | ions? | | | | | | | | | |
| | from the reporting four | | | | | | | | | |
| • • | 1 | | | | | | | 1a(1) | | No |
| | erassets | | | | • • | | | 1a(2) | | No |
| b O ther tra | | | | | | | | 41.443 | | |
| | s of assets to a noncha | | | | | | | - | | No |
| | hases of assets from a | | | | | | | 1b(2) | | No |
| | al of facilities, equipme | | | | | | | - | | No |
| | nbursement arrangemer | | | | | | | 1b(4) | | No |
| | s or loan guarantees. | | | | | | | 1b(5) | | No |
| | mance of services or m | | | | | | | 1b(6) | | No |
| d If the ans | of facilities, equipment, in the swer to any of the above ods, other assets, or se insaction or sharing arm | e is "Yes," coi rvices given l | mplete the fol by the reporti | llowing schedule ng foundation I | e Colur f the fo | mn (b) should alwa undation received | ays show the fair ma I less than fair mark | rket value | ne T | No_ |
| (a) Line No | (b) Amount involved | (c) Name of n | oncharitable exe | empt organization | (d) | Description of transfe | ers, transactions, and sha | arıng arran | gemen | nts |
| | | | | | | | | | | |
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| described | indation directly or indi d in section 501(c) of th complete the following: | ne Code (othe | , | , | | , , | | . 「Yes | s v | No |
| | (a) Name of organization | | (b |) Type of organiza | tion | | (c) Description of relati | onship | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| the | ler penalties of perjury, best of my knowledge a rmation of which prepar ***** | and belief, it is | true, correct | | • | | (other than taxpaye May t | r) is bas he IRS dis | ed on | all |
| | Signature of officer or t | rustee | | Date | | Title | below | he prepare nstr)? 「ヽ | _ | |
| | Print/Type preparer's | s name | Preparer's S | Signature | | Date | Check if self- employed ▶ | PTIN | | |
| Paid Preparer | | | | | | | Firm's EIN ▶ | 1 | | |
| Use Only | Firm's address ▶ | | | | | | Phone no | | | |

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

| List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|---|-----------------------------------|-------------------------------------|
| 1916 88 COLUMBIA EMERGING MARKETS FUND CLASS Z SHARES | | 2014-07-08 | 2015-08-17 |
| 1338 692 COLUMBIA EMERGING MARKETS FUND CLASS Z SHARES | | 2014-04-21 | 2015-08-17 |
| 2641 358 COLUMBIA EMERGING MARKETS FUND CLASS Z SHARES | | 2014-04-21 | 2015-10-23 |
| 681 545 CREDIT SUISSE COMMODITY-RETURN STRATEGY FUND CL I | | 2014-06-04 | 2015-08-17 |
| 2378 295 CREDIT SUISSE COMMODITY-RETURN STRATEGY FUND CL I | | 2014-06-04 | 2015-10-23 |
| 2803 131 GOLDMAN SACHS GROWTH OPPORTUNITIES FUND INSTL | | 2013-12-06 | 2015-08-17 |
| 797 351 GOLDMAN SACHS STRATEGIC INCOME FUND INSTL | | 2014-04-21 | 2015-08-17 |
| 132 101 GOLDMAN SACHS STRATEGIC INCOME FUND INSTL | | 2014-04-21 | 2015-10-23 |
| 8438 442 GOLDMAN SACHS STRATEGIC INCOME FUND INSTL | | 2014-04-21 | 2016-03-10 |
| 2846 211 GOLDMAN SACHS ABSOLUTE RETURN TRACKER FUND CL I | | 2014-04-21 | 2015-08-17 |

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

| (e) Gross sales price | Depreciation allowed (f) (or allowable) | Cost or other basis (g) plus expense of sale | Gain or (loss) (h) (e) plus (f) minus (g) |
|-----------------------|---|--|---|
| 17,961 | | 20,817 | -2,856 |
| 12,544 | | 13,815 | -1,271 |
| 24,697 | | 27,259 | -2,562 |
| 3,503 | | 5,187 | -1,684 |
| 11,939 | | 18,099 | -6,160 |
| 79,721 | | 83,337 | -3,616 |
| 7,974 | | 8,476 | -502 |
| 1,313 | | 1,404 | -91 |
| 78,899 | | 89,694 | -10,795 |
| 26,384 | | 26,441 | -57 |

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

| Complete only for assets showing gain in column (h) and owned by the foundation on $12/31/69$ | | | |
|---|--|--|--|
| A djusted basis (j) as of 12/31/69 | Excess of col (ı) (k) over col (j), ıf any | col (k), but not less than -0-) or (I) Losses (from col (h)) | |
| | | -2,856 | |
| | | -1,271 | |
| | | -2,562 | |
| | | -1,684 | |
| | | -6,160 | |
| | | -3,616 | |
| | | -502 | |
| | | -91 | |
| | | -10,795 | |
| | | -57 | |
| | Adjusted basis | Adjusted basis Excess of col (i) | |

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

| List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|---|-----------------------------------|--|
| 101 296 GOLDMAN SACHS ABSOLUTE RETURN TRACKER FUND CL I | | 2014-04-21 | 2015-10-23 |
| 3822 005 GOLDMAN SACHS ABSOLUTE RETURN TRACKER FUND CL I | | 2014-04-21 | 2016-03-10 |
| 9319 212 GOLDMAN SACHS ABSOLUTE RETURN TRACKER FUND CL I | | 2013-12-06 | 2016-03-10 |
| 1075 572 HATTERAS ALPHA HEDGED STRATEGIES FUND INS SHS | | 2013-06-04 | 2015-08-17 |
| 5302 4 HATTERAS ALPHA HEDGED STRATEGIES FUND INS SHS | | 2013-06-04 | 2016-03-10 |
| 2140 109 HATTERAS ALPHA HEDGED STRATEGIES FUND INS SHS | | 2013-04-12 | 2016-03-10 |
| 2665 ISHARES RUSSELL 1000 GROWTH ETF | | 2012-09-26 | 2015-10-23 |
| 475 ISHARES MBS ETF | | 2014-04-21 | 2015-08-17 |
| 8865 793 JPMORGAN INTL VALUE FUND INSTL CL | | 2013-12-06 | 2015-08-17 |
| 1756 893 LEGG MASON CLEARBRIDGE SMALL CAP GROWTH FUND CL I | | 2014-04-21 | 2015-08-17 |

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

| (e) Gross sales price | Deprectation allowed (f) (or allowable) | Cost or other basis (g) plus expense of sale | Gain or (loss) (h) (e) plus (f) minus (g) |
|-----------------------|---|--|---|
| 926 | | 941 | -15 |
| 33,519 | | 35,506 | -1,987 |
| 81,729 | | 85,644 | -3,915 |
| 12,423 | | 11,993 | 430 |
| 55,092 | | 59,122 | -4,030 |
| 22,236 | | 23,648 | -1,412 |
| 266,450 | | 177,036 | 89,414 |
| 51,815 | | 50,589 | 1,226 |
| 123,944 | | 134,583 | -10,639 |
| 52,232 | | 49,790 | 2,442 |

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

| Gains (Col (h) gain minus | Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | |
|---|---|---|--------------------------|--|
| col (k), but not less than -0-) or (l) Losses (from col (h)) | Excess of col (1) (k) over col (j), if any | A djusted basis (j) as of 12/31/69 | (i) F M V as of 12/31/69 | |
| -15 | | | | |
| -1,987 | | | | |
| -3,915 | | | | |
| 430 | | | | |
| -4,030 | | | | |
| -1,412 | | | | |
| 89,414 | | | | |
| 1,226 | | | | |
| -10,639 | | | | |
| 2,442 | | | | |

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

| List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|---|--|-------------------------------------|
| 2139 779 NEUBERGER BERMAN HIGH INCOME BD FUND INSTL CL | | 2013-06-04 | 2015-08-17 |
| 3573 159 OPPENHEIMER INTL GROWTH FUND CL Y SHS | | 2014-04-21 | 2015-08-17 |
| 3041 849 PRUDENTIAL GLOBAL REAL ESTATE FUND CL Z | | 2014-06-04 | 2015-08-17 |
| 1232 46 PRUDENTIAL GLOBAL REAL ESTATE FUND CL Z | | 2013-04-12 | 2015-08-17 |
| 6042 124 RIDGEWORTH MID CAP VALUE EQUITY FUND CL I | | 2014-07-08 | 2015-10-23 |
| 2438 SPDR BARCLAYS SHORT TERM CORP BD ETF | | 2014-04-21 | 2015-08-17 |
| 908 075 UNDISCOVERED MANAGERS FDS BEHAVIORAL VALUE FD INSTL CL | | 2014-07-08 | 2015-10-23 |
| 1800 VANGUARD FTSE DEVELOPED MARKETS ETF | | 2013-06-04 | 2015-08-17 |
| CAPITAL GAIN DIVIDENDS | Р | | |

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

| (e) Gross sales price | Depreciation allowed (f) (or allowable) | Cost or other basis (g) plus expense of sale | Gain or (loss) (h) (e) plus (f) minus (g) |
|-----------------------|---|--|---|
| 18,466 | | 20,435 | -1,969 |
| 134,065 | | 136,923 | -2,858 |
| 75,560 | | 74,099 | 1,461 |
| 30,614 | | 29,789 | 825 |
| 78,910 | | 89,786 | -10,876 |
| 74,273 | | 75,127 | -854 |
| 52,714 | | 51,306 | 1,408 |
| 71,281 | | 67,884 | 3,397 |
| | | | 14,374 |

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

| Complete only for assets showing | 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 | Adjusted basis (j) as of 12/31/69 | Excess of col (1) (k) over col (j), if any | col (k), but not less than -0-) or (I) Losses (from col (h)) |
| | | | -1,969 |
| | | | -2,858 |
| | | | 1,461 |
| | | | 825 |
| | | | -10,876 |
| | | | -854 |
| | | | 1,408 |
| | | | 3,397 |
| | | | |

TY 2015 Accounting Fees Schedule

Name: ANNA M FULLING CHAPLAINCY FUND

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------------------------|--------|--------------------------|------------------------|---|
| TAX PREPARATION FEE - BOA | 1,250 | | | 1,250 |

TY 2015 General Explanation Attachment

Name: ANNA M FULLING CHAPLAINCY FUND

| Identifier | Return Reference | Explanation |
|---------------------|---|---|
| FEDERAL FOOTNOTE | PART VIII LIST OF OFFICERS AND DIRECTORS | THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR THE TIME SPENT BY THE TRUSTEE, RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES. |

DLN: 93491277004036

TY 2015 Investments Corporate Stock Schedule

Name: ANNA M FULLING CHAPLAINCY FUND

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|--------------------------------|---------------------------|----------------------------------|
| 464287614 ISHARES RUSSELL 1000 | | |
| 464287655 ISHARES RUSSELL 2000 | 116,195 | 116,935 |
| 921943858 VANGUARD FTSE DEVELO | | |
| 922042858 VANGUARD FTSE EMERGI | | |
| 41902V872 HATTERAS ALPHA HEDGE | | |
| 744336504 PRUDENTIAL GLOBAL RE | 70,068 | 74,606 |
| 197199409 COLUMBIA ACORN FUND | | |
| 19765N245 COLUMBIA DIVIDEND IN | 105,998 | 148,896 |
| 19765P406 COLUMBIA CONTRARIAN | | |
| 64128K868 NEUBERGER BERMAN HIG | 27,043 | 23,843 |
| 693390700 PIMCO TOTAL RETURN F | | |
| 722005667 PIMCO COMMODITY REAL | | |
| 72201P100 PIMCO GLOBAL MULTI-A | | |
| 411511306 HARBOR INTERNATIONAL | | |
| 464287168 ISHARES SELECT DIVID | 151,558 | 171,839 |
| 464287507 ISHARES CORE S&P MID | 74,113 | 84,405 |
| 464288588 ISHARES MBS ETF | 23,963 | 24,743 |
| 78462F103 SPDR S&P 500 ETF TR | 126,519 | 137,206 |
| 78464A474 SPDR BARCLAYS SHORT | 49,520 | 49,463 |
| 38145N220 GOLDMAN SACHS ABSOLU | | |
| 47803W406 JOHN HANCOCK FDS III | | |
| 52470H765 LEGG MASON CLEARBRID | | |
| 92646A815 VICTORY SMALL CO OPP | | |
| 38145C646 GOLDMAN SACHS STRATE | | _ |
| 22544R305 CREDIT SUISSE COMMOD | 53,740 | 36,203 |
| 38142Y401 GOLDMAN SACHS GROWTH | | _ |
| 4812A0573 JPMORGAN INTL VALUE | | |
| 68380L407 OPPENHEIMER INTL GRO | | |
| 19765Y852 COLUMBIA EMERGING MA | 131,841 | 121,860 |
| 76628R615 RIDGEWORTH MID CAP V | | |

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|--------------------------------|---------------------------|----------------------------------|
| 904504842 UNDISCOVERED MANAGER | | |
| 233051200 DB X-TRACKERS MSCI E | 99,868 | 85,666 |
| 464287200 ISHARES CORE S&P 500 | 289,837 | 292,806 |
| 464287226 ISHARES CORE US AGGR | 98,240 | 101,128 |
| 464287457 ISHARES 1-3 YEAR TRE | 24,503 | 24,657 |
| 464287499 ISHARES RUSSELL MID- | 73,349 | 73,840 |
| 46432F842 ISHARES CORE MSCI EA | 210,401 | 186,545 |
| 46434G103 ISHARES CORE MSCI EM | 36,008 | 34,351 |
| 922908553 VANGUARD REIT ETF | 73,459 | 81,576 |
| 97717X701 WISDOMTREE EUROPE HE | 49,806 | 40,475 |
| 00203H602 AQR DIVERSIFIED ARBI | 34,079 | 34,302 |
| 00203H859 AQR MANAGED FUTURES | 22,719 | 23,052 |
| 03875R205 ARBITRAGE FUND CL I | 34,079 | 34,367 |
| 091928101 BLACKROCK SMALL CAP | 47,832 | 42,584 |
| 091936526 BLACKROCK GLOBAL LON | 22,719 | 21,763 |
| 55272P596 MFS MID CAP VALUE FU | 47,832 | 46,969 |
| 64128R608 NEUBERGER BERMAN LON | 39,759 | 41,117 |
| 74925K581 ROBECO BOSTON PARTNE | 39,759 | 40,529 |
| 524686672 LEGG MASON BW ABSOLU | 34,079 | 34,708 |
| 008882532 INVESCO INTL GROWTH | 36,731 | 34,843 |

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TY 2015 Other Decreases Schedule

Name: ANNA M FULLING CHAPLAINCY FUND

| Description | Amount |
|-----------------------|--------|
| NET ROUNDING | 3 |
| SECURITIES ADJUSTMENT | 7 |
| COST BASIS ADJUSTMENT | 520 |

TY 2015 Other Income Schedule

Name: ANNA M FULLING CHAPLAINCY FUND

| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
|-------------------|-----------------------------------|--------------------------|---------------------|
| EXCISE TAX REFUND | 2,816 | 0 | |

TY 2015 Taxes Schedule

Name: ANNA M FULLING CHAPLAINCY FUND

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------------|--------|--------------------------|------------------------|---|
| EXCISE TAX ESTIMATES | 860 | 0 | | 0 |
| FOREIGN TAXES ON QUALIFIED FOR | 205 | 205 | | 0 |
| FOREIGN TAXES ON NONQUALIFIED | 547 | 547 | | 0 |