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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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

_		The Service ► Information about Form 990-PF and its service								
		dar year 2014 or tax year beginning / Octo	ber	, 2014,	, and e		30 Septe	rm B	4, 20	15
الآنا	Name of fo	. ^ . /				~ >	r identification nu	nber	37	
€)_	<u> </u>	LCO FOUNDATION INC.		0.3	<u>039 0</u>					
ev 1	Number an	d street (or PO box number if mail is not delivered to street address)		Room/s	suite	•	ne number (see instr	uctions		> 441
<u>~</u> _	<u> </u>	Box 96	2 508	85 <u>9919</u>	01	<u>~ 61</u>	200			
NON	City or towi	n, state or province, country, and ZIP or foreign postal code	C If exempt	tion application is p	ending	, check l	nere ▶ 🔲			
(C)_	Man	Klin VI 03937-0096								
्रेगों G	i Check	all that apply: 🔲 Initial return 🔲 Initial return	D 1. Foreigi	n organizations, che	ck her	e	▶ 🗌			
; ;		☐ Final return ☐ Amended	2 Foreigi	n organizations mee	etina th	e 85% t	est			
` _}		☐ Address change ☐ Name chai	-	here and attach cor	~		Ŭ, ► 🗆			
\circlearrowleft H	Check	type of organization: Section 501(c)(3) exempt p		foundation status w 07(b)(1)(A), check he		minated	under _			
Ω ⊑	Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation							316		
Ī	Fair m	narket value of all assets at J Accounting method	: 🔼 Cash	☐ Acc	cruál	F If the four	ndation is in a 60-m	onth te	erminatic	n.
		f year (from Part II, col. (c), Other (specify)				under sec	ction 507(b)(1)(B), cl	neck h	ere	^{`''} ▶□
	line 16	S) ► \$ [\ 7 90 \ 36 (Part I, column (d) must be	on cash basis	s.)						
	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and						sements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p			investment come	(c) Adjusted net income		for char purpo	
		the amounts in column (a) (see instructions))						(cash bas	sis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	837	5.00			*	~		
	2	Check ► ☐ If the foundation is not required to attach Sch. B		Ĝ;	·5534		% m	à .	* A^	į
	3	Interest on savings and temporary cash investments	1003	. 25	100	3.85	0			
Ø.	4	Dividends and interest from securities			•					**da
\mathcal{C}) 5a	Gross rents							44 · •	800
	b	Net rental income or (loss)						Т		
الح	<u>စ်</u> 6a	Net gain or (loss) from sale of assets not on line 10		7	1 verified	200	**************************************			Ť
	€ b	Gross sales price for all assets on line 6a	17 (18) 1/2(ch/she	g., i	停息。	. 144			, ,	
	7	Capital gain net income (from Part IV, line 2)	, , ,							
	8	Net short-term capital gain	2007 1 7 N	W/	sipilita.	***				
	9	Income modifications	, 		Auto	/4.4			-	
¢. €		Gross sales less returns and allowances					,			
		Less: Cost of goods sold	· (2)		%#/ 1	, Ški, x	§ .	\top		
2015	C	Gross profit or (loss) (attach schedule)			ww / w	4.2 AC			***************************************	
U	11	Other income (attach schedule)]						
	12	Total. Add lines 1 through 11	1838	85	100	3,85	0	\top	3 2	
_	_{n′} 13	Compensation of officers, directors, trustees, etc.				•				
		Other employee salaries and wages								
1	5 15	Pension plans, employee benefits								
5	16a	Legal fees (attach schedule)					0 (133		<u> </u>	
	p p	Accounting fees (attach schedule)				NE	JEIWS	\cap	li	
Roc In Bu	ĕ	Other professional fees (attach schedule)				000	7	- 1	, ,	
C	<u>9</u> 17	Interest				Ø 00	T 1 9 2015	16) .	,
90	<u>2</u> 18	Interest	16.5	96		9	1.010	用力	1	
8 1	19	Depreciation (attach schedule) and depletion				.00	TOBAL 119		l in	
Q	20	Occupancy			i					
ğ 3 .	21	Travel, conferences, and meetings							, -	
~ 3	22	Printing and publications								
	<u>2</u> 3	Other expenses (attach schedule)								
8	24	Total operating and administrative expenses.		\Box				Ţ		
-	ב <u></u>	Add lines 13 through 23	14,9	16						
Ogder OCT 2 6 2	25	Contributions, gifts, grants paid	800,	ー *		e malpparee	14 ******			
OCT 2 6 2015	26	Total expenses and disbursements. Add lines 24 and 25	811.	96						
3	27	Subtract line 26 from line 12:			.sv					
	а	Excess of revenue over expenses and disbursements	1026.	89	,00 T	*	•			1
	b	Net investment income (if negative, enter -0-) .	1		100	3.85	^	\neg	9	
	l c	Adjusted net income (if negative, enter -0-)				-		1	**************************************	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

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Ρa	rt II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)				of year , '		
			should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value		
	1	Cash-non-interest-l	bearing	7323.74	7357,1	9	7357,19		
	2	Savings and tempora	ary cash investments	108 839,73	109833.	17	109833.77		
	3	Accounts receivable	>						
		Less: allowance for o	loubtful accounts ▶	· · · · · · · · · · · · · · · · · · ·					
Ì	4	Pledges receivable	•						
		Less: allowance for d	doubtful accounts ►						
	5	Grants receivable .							
	6	Receivables due from	m officers, directors, trustees, and other			•			
			(attach schedule) (see instructions)						
	7	Other notes and loans re	eceivable (attach schedule) ▶						
		Less: allowance for dou	ubtful accounts ▶	·	· · · · · · · · · · · · · · · · · · ·				
S	8	Inventories for sale o	ruse						
Assets	9		d deferred charges				-		
As	10a		state government obligations (attach schedule)						
	b		rate stock (attach schedule)						
	C		rate bonds (attach schedule)						
	11		lings, and equipment: basis ▶						
		Less: accumulated depre	ciation (attach schedule) ▶						
	12	Investments - morta	age loans						
	13	_	attach schedule)				-		
	14	Land, buildings, and eq	•						
		Less, accumulated depi	reciation (attach schedule) ▶						
	15	Other assets (describ	pe ▶						
ļ	16		be completed by all filers-see the						
		instructions. Also, se	e page 1, item I)	116 163.47	117 190	36	117190.36		
+	17		d accrued expenses		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-0			
	18			800 -					
<u>ë</u>	19			000		-			
abilities	20		ectors, trustees, and other disqualified persons			_	ļ		
<u>a</u>	21		notes payable (attach schedule)						
ت	22	Other liabilities (desc							
	23	Total liabilities (add	lines 17 through 22)	802 -	O				
			llow SFAS 117, check here ▶ □	W - W -					
ces			24 through 26 and lines 30 and 31.						
	24	Unrestricted		115363.47	1171903	36			
ā	25	Temporarily restricted	d				,		
8	26	Permanently restricted	ed		- , , ,				
Net Assets or Fund Balan		Foundations that do and complete lines	o not follow SFAS 117, check here ► ☐						
5	27	•	rincipal, or current funds						
2	28		plus, or land, bldg., and equipment fund						
Se	29		umulated income, endowment, or other funds						
&	30	_	fund balances (see instructions)	1/5 363.47	//7/90.3	7/.			
e	31		and net assets/fund balances (see	1/2 202'41	77 7 7 70.	טכ	Ì		
Z	•		· · · · · · · · · · · · · · · · · · ·	116/63.47	117 190.	36			
Pa	rt III		nges in Net Assets or Fund Balances	[110704.17]	177 7751		<u> </u>		
			palances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with				
			d on prior year's return)			1	116/63.47		
2	Ente	r amount from Part I, I	line 27a			2	1026.89		
3	Othe	er increases not includ	led in line 2 (itemize) ▶			3			
4	Add	lines 1, 2, and 3				4			
5	Decr	reases not included in	line 2 (itemize) ▶	****************		5			
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30	6	117190,36		
							Form 990-PF (2014)		

Part	(a) List and describe the	LOSSES for Tax on Investn kind(s) of property sold (e.g., real estat , or common stock, 200 shs MLC Co	е,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1a						
<u> b</u>		\/				
<u>c</u>		VONE				
d						
<u> e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		n or (loss) (f) minus (g)
<u>a</u>						
b						
<u>c</u>						<u> </u>
d						
<u>e</u>						
	Complete only for assets show	ing gain in column (h) and owned	by the foundation	n on 12/31/69	(I) Gains (Co	I (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		t less than -0-) or rom col (h))
_ a						
b						
c						
<u>` d</u>						
<u> e</u>						
2	Capital gain net income or (net canital incel ? -	also enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) (see instruc	ctions). If (loss	s), enter -0- in }		
					3	
		r Section 4940(e) for Redute foundations subject to the				
Was t		this part blank. ection 4942 tax on the distribu ualify under section 4940(e). D			pase period?	☐ Yes ☐ No
1	Enter the appropriate amou	nt in each column for each yea	ar; see the instr	uctions before ma	aking any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution:		(c) of noncharitable-use as	Dist	(d) tribution ratio divided by col (c))
	2013	h / n				<u></u>
	2012					
	2011	1/1/19				
	2010					<u> </u>
	2009					
			<u> </u>		· · ·	
2	Total of line 1, column (d)				. 2	
3	Average distribution ratio for	r the 5-year base period-divi	de the total on	line 2 by 5, or by	the	
	number of years the foundat	tion has been in existence if le	ss than 5 years	3	. 3	

4	Enter the net value of nonch	aritable-use assets for 2014 fi	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investment	income (1% of Part I, line 27b)		. 6	.
7	Add lines 5 and 6				. 7	
8	Enter qualifying distributions	from Part XII, line 4 r than line 7, check the box in		h and complete the	. 8	0/ toy rata 0 "
	Part VI instructions.	r than line 7, theta the box III	irait vi, iiile II	o, and complete th	nat part using a 1	70 tax rate. See th

Page	4

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	494	8-s	ee in	ștru	ctio	ıs)	
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	$\overline{1}$. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	\ [1	· · · · · · · · · · · · · · · · · · ·		مح	08	
\sim	here ▶ ☐ 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). I DO 3.85 × .02 C	f J]	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	0-)	2			a		
3	Add lines 1 and 2	. [3			05	08	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -	0-) [4			O		
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Credits/Payments:	. [5			٥٥	08	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	ı						
b	Exempt foreign organizations—tax withheld at source 6b	$\neg \neg$	1					
С	Tax paid with application for extension of time to file (Form 8868) . 6c	\neg		,	•	ŀ		
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d		7					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ſ	8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ [9			20	08	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ [10					
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded	>	11					
	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla			⊢		Yes	No	
b	participate or intervene in any political campaign?				1a		X	
U	Did it spend more than \$100 during the year (either directly or indirectly) for political pull instructions for the definition)?	urpos	ses (s		46		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a	any n	nateri		1b			
	published or distributed by the foundation in connection with the activities.			L		<u> </u>		
C	Did the foundation file Form 1120-POL for this year?			. <u>L</u>	1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to on foundation managers. ▶ \$	ax im	pose	d		,		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.			.	2		X	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrume incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					, bit .		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? .	_			3 la		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?				tb		<u>~</u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.			_	5		X	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1			
•	By language in the governing instrument, or				ļ			
	 By state legislation that effectively amends the governing instrument so that no mandatory di 	irecti	ons th	nat				
	conflict with the state law remain in the governing instrument?				6		~	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c.) and	Part		7	X		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		, air	`` -	•	- `		
b	VERMONT If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto		Gene	ral				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation .				3b	X	i	
9	Is the foundation claiming status as a private operating foundation within the meaning of section			<u> </u>				
_	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part X							0
10	complete Part XIV	٠.			9		X	۷.
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul names and addresses		_	Į.	10		Х	(

Part	VII-AN, Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
14	Website address No Website / Notice will be published in Franklin County Courier on 1 The books are in care of Hugh H. Gates Yer Kinhardy Gates Maynard Telephone no. > 802-2		120	15 14
	Located at ► 5217 Main Street, Franklin VT - ZIP+4 ► WW.		0091	5
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		•	▶ ∟
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	<u> </u>	1
	"Yes," enter the name of the foreign country ▶			<u> </u>
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? Yes X No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			* , # y , # y , per \$4.50
	disqualified person?			yan
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (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.)		,	`
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□	ash.	3000	rea.
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	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)):			, v
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?		*.	
	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.)	OL		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	_	F
·	▶ 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?			** *** *** ***
b	If "Yes," did it have excess business holdings in 2014 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		1	
	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		ļ	<u> </u>
_	foundation had excess business holdings in 2014.)	3b	_	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	メ
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			98000
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

Part	VII-B Statements Regarding Activities	for V	Vhich Form	4720	May Be R	equire	d (contir	nued)	.'		
5a	During the year did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration dri	o influe electi	ence legislation ion (see sect	on 495	5); or to ca			ĭ No			
	 (3) Provide a grant to an individual for travel, stud (4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions) 	dy, or o	ritable, etc.,	ourpos organiz	es?	ribed in	☐ Yes ※Yes	M No □ No □ No			
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to c	charit	able, scientif	c, litera	ary, or educ	ational		∐No			*
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice in	transa regardi	actions fail to ing disaster as	qualify ssistanc	under the e (see instr	excepti uctions)	ons descr	ibed in	5b		X
С	Organizations relying on a current notice regardir If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	he foul	ndation claim	exem			□ Yes	▶ □ ⊠ No			
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any to on a personal benefit contract?	funds,	directly or in	directly	, to pay pre	emiums 	☐ Yes	⊠No		·	
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	s, dire	ectly or indire	ctly, on	a personal	benefit	contract	? .	6b		<u> </u>
	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes ransaction	⊠ No ì? .	7b		
Part	VIII Information About Officers, Direct and Contractors		·			•			mploy	ees,	
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see iı	nstruction	ns).			
	(a) Name and address	hou	e, and average irs per week ed to position	(lf r	mpensation not paid, ter -0-)	emplo	Contributions lyee benefit perred compe	plans	(e) Exper	nse acc	
Hud 130	. H. Gates - Director CLake Road, Franklin VT 05457	Presi	dent/10		0		O		(<u> </u>	
Po	Bex 16, Franklin VT US457-0076	Treas	100 TOU	•	0		0			O	
Kabo 190	4 Birish - Director 9 Bornum Rood, Franklia VTOS487	Sean	Tay Fat	•	0		0			d	
		's7'			atory		hedulo				
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uctions	s). If no	one, e	enter
	a) Name and address of each employee paid more than \$50,000	0	(b) Title, and a hours per v devoted to p	/eek	(c) Comper	sation	(d) Contribution employee I plans and documpens	benefit leferred	(e) Exper	nse acc	
	None							:			
· 	V -										
otal	number of other employees paid over \$50,000 .				• • • •			. ▶			

Par	and Contractors (continued)	npioyees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	√E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	1 VONE / / V. IT	
		+
		+
Tota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
	at the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
`	DI to leit 1.	
1	Education/Scholarship	
•		800 -
2		+ • • • •
_		
3		
4		
	<u></u>	
Dar	t IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
·		
	1/2/2 / 1/ /	
2	/Vore / /V/4.	-
	J	
_	other program-related investments. See instructions	
3		
	······	
Total	I. Add lines 1 through 3	
14		Form 990-PF (2014

Part	, , , , , , , , , , , , , , , , ,	gn foundations,
1	see instructions.) 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
b	Average of monthly cash balances	1b
С	Fair market value of all other assets (see instructions)	1c
d	Average of monthly cash balances Fair market value of all other assets (see instructions) Total (add lines 1a, b, and c)	1d
е	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	i m
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	
	instructions)	4
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5
6	Minimum investment return. Enter 5% of line 5	6
Part		oundations
1	Minimum investment return from Part X, line 6	1
2a	Tax on investment income for 2014 from Part VI, line 5	*
b	Income tax for 2014. (This does not include the tax from Part VI.)	
C		2c
3	Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 Deduction from distributable amount (see instructions)	3
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5
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
Part	XII Qualifying Distributions (see instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a
b	Program-related investments—total from Part IX-B	1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
	purposes	2
3	Amounts set aside for specific charitable projects that satisfy the:	
а	Amounts set aside for specific charitable projects that satisfy the: 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
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
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the foundation
		Form 990-PF (2014)

	rt XIII Undistributed Income (see instruc			_,						
1	Distributable amount for 2014 from Part XI		(a) Orpus	Years p	(b) nor to 201	3	(c) 2013			(d) 2014
2	Undistributed income, if any, as of the end of 2014:	india in				india in in	·	· · · · · · · · · · · · · · · · · · ·	 	
a	cities amount for 2013 only	~ #\$#\$####	## ·		*				†	
ь З	notation phot years: 20 20 20	78	/////	- 100 m	. 100.002					
a	Excess distributions carryover, if any, to 2014:		***	-			- juo			2"
b	From 2010	_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	*** /		ere Lec'					
С	From 2011	,	/1/							
d	From 2012	2.00 mm	/: \\\	1		<u> </u>				
е	From 2013	- " '			3.7					No.
f	Total of lines 3a through e	 	***/	- Sain	weer to					
4	Qualifying distributions for 2014 from Part XII, line 4: ▶ \$	<i>*</i> ,	*		nano, n napoloĝio n napoloĝio	***		**		ingeneral and a second
а			^	š						<u> </u>
	Applied to 2013, but not more than line 2a .	[X.**	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·			,	>
_	Applied to undistributed income of prior years (Election required—see instructions)	- Andrew				+		$-\downarrow$		
С	Treated as distributions out of corpus (Election		1.828			drig v	•		_	*
	roquired—see instructions) .		T	*****					~ ;	^^
d	Applied to 2014 distributable amount	signatur Semestik	2008	·	~~ \£	**************************************				
e	remaining amount distributed out of corpus	soligite.	<u> </u>	, , K		.78%	7.000	\dashv	<u></u>	
	LACESS distributions carryover applied to god a				λ 	»».		1		
	(" all allibuil appears in column (a) the	*>	*		***************************************	2 146- 2 quiller	Á			
	amount must be snown in column (a))	i.				.		T		
	Enter the net total of each column as indicated below:	tor biolific	The line in		•	. **	100 mg/s 100 mg/s 100 mg/s 100 mg/s			
a (b F	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	~,		in.	٧ ;	~				
•	Prior years' undistributed income. Subtract line 5 ne 4b from line 2b	, ,			^5 <u>}%/%</u> ~	2 100 hr.	*	*		٠. ٧
		34. 1 2000 - 1	As -							
jr	inter the amount of prior years' undistributed a notice of deficiency has	Toppole was	37			•		- -		
~	our issued. Of On Which the coation 4040/ \							- 1		
•	or has been previously assessed					1 111	~		*	٤
S	ubtract line 6c from line 6b Tayoble	^4 > 200						1	*	•
u	mount—see instructions		3 7			* * *				
U	ndistributed income for 2013. Subtract line	/ 100				(O		T	* * *	•
70	from line 2a. Taxable amount—see	rođen Postor	edinir .	or of the party.						
				40. 4	140.31				5	
40	and 5 from line 1. This amount must be		2 100	* 74	×					
dis	stributed in 2015			(c * 3.4		31,34	4 3 * F	1		
An	nounts treated as distributions out of a	982t		más >	,					
	Subject the subject of the subject o		-	All the second	, ,	anging "		┼─		
	19/11/11 UL 4942/01/31 (Flootion 1		Î)						*
	and see instructions)		j.		2	~	es' North] .	19 Y ^	\$r.2
apr	cess distributions carryover from 2009 not		 							*\$
Exc	plied on line 5 or line 7 (see instructions) . cess distributions carryover to 2015.		15%				rjst			
Sub	otract lines 7 and 8 from line 6a				*, ***** * *	**************************************	<u> </u>		at in	3 A).
Ana	lysis of line 9:	,		Samuel Sa		riyes indon.				
Exc	ess from 2010	,	"		7		∺──┤			
Exc	ess from 2011			e#	.		1			
XC6	ess from 2012	2000 P. P Salanta Va			3			:	~ V.JJM.	cr.
	ess from 2013		J**		1		1			1

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo	or determination	letter that it is a	private operating		,
b	Check box to indicate whether the four	ndation is a private	operating founda	tion described in se	ection)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	- (e) rotal
	each year listed					
b	85% of line 2a	,				
С	Qualifying distributions from Part XII,	A	1			
	line 4 for each year listed	/\/	1/1			
d	Amounts included in line 2c not used directly for active conduct of exempt activities	/ \/\	1.1.			
е	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					_
	(2) Value of assets qualifying under	-			<u> </u>	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed .					-
С	"Support" alternative test—enter:		<u> </u>	<u> </u>		
	, ,					
	(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		<i>"</i>			+
	and 5 or more exempt					
	organizations as provided in	/				
	section 4942(j)(3)(B)(iii)					
	an exempt organization					
	· ·					
Part	(4) Gross investment income XV Supplementary Information	n (Complete th	is part only if t	he foundation h	ad \$5,000 or m	ore in accete at
ı aı ı	any time during the year-			ne ioundation i	iau \$5,000 01 111	ore in assets at
1	Information Regarding Foundation		19./			
a	List any managers of the foundation		ited more than 20	4 of the total cent	ributions received	by the foundation
a	before the close of any tax year (but of					by the foundation
	λ/	my in they have of		ian 45,550). (Occ 3	0011011011(0)(2).)	
b	List any managers of the foundation	who own 1004 o	r mara of the sta	ok of a corporation	n /or on oqually le	argo portion of the
b	ownership of a partnership or other en			•	•	arge portion of the
	A/A	may) or windir tile	iouridation has a	1070 or greater filt	0.031.	
	/ Y' / \ .	0	0.1.1			
2	Information Regarding Contribution					d daga wat aat
	Check here ► if the foundation					
	unsolicited requests for funds. If the f		gnis, granis, etc.	(see instructions)	to individuals of o	rganizations under
	other conditions, complete items 2a, I					
a L	The name, address, and telephone nungh H. GATES, President, FELL Telephone 802 28	imber or e-mail ac	aress of the person	on to whom applic	ations should be	addressed:
rr	WER THURSIES, ITTSIDENT, I LAL	~ \bu \under \	1, 1. V. Nox 70	11 TON NITE XI	03 93 /-	00 10
	1elephone 802 28	N 4414	or 6600			
b	The form in which applications should	l be submitted and	d information and	materials they sho	ould include:	
	See Attached Form					
	Ste Milabres 101 m					
C	Any submission deadlines:	/ -11	1: 15	^//		
	Capital Projects - No	/ Joholars	14/PS -10	rriay		
d	Any submission deadlines: Capital Projects No Any restrictions or limitations on aviactors: Scholarship Appli	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of ins	stitutions, or other
	tactors: Capilal Thojacts	iust de b <i>ei</i>	niticial to	THE Town of	Franklin, Va	rmonl
	Scholarship Apol	icants mi	ust be r	esidents of	Franklin, V	era ont
						Form 990-PF (2014)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor Paid during the year Nakia Wighton No College/Education 100,00 No 1185 Richard Road Franklin VT 05457 Cody Paradis 1705 State Part Road 100,00 No 11 No Enosburgh Falls VT OSKOV Kraig W. Mc Fadden 81 Towle Neighborhard Rad Enosburgh Falls, VT 05450 11 11 **3a** Approved for future payment

r ai	EXVITA Analysis of Income-Producing Ac	tivities				,
nter	gross amounts unless otherwise indicated.	Unrelated bu	usiness income (b)	Excluded by sect	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Program service revenue: a	Business code	Amount	Exclusion code	Amount	(See instructions.)
	b	1				
	d —	/	7			
	e — One /	/\./~		<u> </u>		
	f					
	Fees and contracts from government agencies					
	Membership dues and assessments					
	Interest on savings and temporary cash investments Dividends and interest from securities					
	Net rental income or (loss) from real estate:		GART THE SECTION			
	a Debt-financed property		3.09 S. 193		whelf he is	Or The Control of the
	b Not debt-financed property					
	Net rental income or (loss) from personal property					-
	Other investment income					
	Net income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
	Other revenue: a					
	b					
	c					
	<u> </u>					
12	Subtotal. Add columns (b), (d), and (e)					
13	Total. Add line 12, columns (b), (d), and (e)				13	
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s.)			13	
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)

Preparer Use Only

Firm's name

Firm's address ▶

		,								90 .
Part	XVII		n Regarding Trang ganizations	sfers To and Transaction	ons and F	Relationships W	ith Noncha	aritabl	е	
1	in se	he organization of	directly or indirectly e		in any of the following with any other organization described 501(c)(3) organizations) or in section 527, relating to political				Yes	No
а		-		o a noncharitable exempt organization of:						
		Cash								V
b	(2) Other assets							1a(2)		
		(1) Sales of assets to a noncharitable exempt organization						1b(1)		X
	(2) Purchases of assets from a noncharita (3) Rental of facilities, equipment, or other			. •		1b(2)		X		
								1b(3)		X
	(4) R	(4) Reimbursement arrangements						1b(4)		X
	(5) L	oans or loan gua	rantees					1b(5)		X
				ip or fundraising solicitation				1b(6)		X
C		•	• •	ts, other assets, or paid em				1c	اــــا	<u> </u>
d				s," complete the following s						
				ces given by the reporting fement, show in column (d) t						
(a) Line		(b) Amount involved		aritable exempt organization		ption of transfers, tran				
(4) [-	(b) Amount involved	(o) Name of Henon	artable exempt organization	(4) 500011	phon or transfers, trans	Sacrono, and on	arrig arri	211901110	-
	1				1	·				
		1 / 0								
		1//								
		107								
	_				ļ				-	
					-					
					 					
	+				 					
	$\overline{}$								-	
					 					
2a	Is the	e foundation dire	ectly or indirectly aff	iliated with, or related to, o	ne or mor	e tax-exempt org	janizations			
			• • • • • • • • • • • • • • • • • • • •	ther than section 501(c)(3))	or in sectio	on 527?	[☐ Yes	B	No
b	If "Ye		following schedule.							
	(a) Name of organization		(b) Type of organization		(c) Description of relationship					
				<u> </u>						
							-			
	Unde	er penalties of periury. I	declare that I have examined	d this return, including accompanying	schedules and	statements, and to the	best of my knowle	dge and I	pelief it	is true
Sign		ect, and complete. Decl	aration of preparer (other tha	n taxpayer) is based on all information	of which prepared	arer has any knowledge.	May the	_		
Here		Hugh V	later	10 Oxfobar ZOKS A	cesiden	t.	with the	preparer	shown	below
		nature of officer or tru	stee	Date Title)		(see instru	uctions)?	Yes[□No
Paid		Print/Type preparer	's name	Preparer's signature		Date	Check If	PTIN		-
_	Preparer					self-employed				

Firm's EIN ▶

Phone no