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Form 990-PF

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

OMB No 1545-0052 2014

Department of the Treasury Internal Revanue Service

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Open to Public Inspection

For ca	lendar year 2014, or tax year beginning		, and ending		<u>i</u> ,	
THE	EQUINOX PRESERVATION TRUST,	INC.	A		oyer identification nur +3197313	mber
PO E	30X 46	1	В	Telep	hone number (see inst	ructions)
MAN	CHESTER, VT 05254		-	80	2-362-1099	
			C	If exe	emption application is	pending, check here
G Cł	eck all that apply. Initial return Final return	Initial return of a form Amended return	ner public charity	1 Fore	gn organizations, ched	k here
	Address change	Name change		2 Fore	gn organizations meet	ing the 85% test, check
H C	eck type of organization. X Section 50	(c)(3) exempt private f		here	and attach computation	on -
	Section 4947(a)(1) nonexempt charitable t		private foundation E	If pri	vate foundation status	was terminated
	r market value of all assets at end of year J Accom Part II, column (c), line 16)	counting method C Other (specify)	ash X Accrual			·
	100,075.	. column (d) must be or	r cash basis)	if the	foundation is in a 60 section 507(b)(1)(B)	-month termination , check here
Part	Analysis of Revenue and	(a) Revenue and	(b) Net investment	T	Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	ıncome		income	for charitable purposes
	sarily equal the amounts in column (a) (see instructions))					(cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	63,853.				
	2 Ck If the foundn is not required to attach Sch B	in .	· %,		<u> </u>	()
	3 Interest on savings and temporary cash investments	46.			46.	**.
	4 Dividends and interest from securities 5 a Gross rents			<u> </u>	1 -	
	b Net rental income or (loss)			+		
R	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all	.,				
E	assets on line 6a 7 Capital gain net income (from Part IV, line 2)		,	_	· · · · · · · · · · · · · · · · · · ·	***
E N U	8 Net short-term capital gain	* * * * * * * * * * * * * * * * * * * *	*		<u> </u>	****
Ē	9 Income modifications. 10 a Gross sales less				1	
	allowances				1	
	b Less Cost of goods sold				1	
	c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule)			-	<u> </u>	
						, ,
	12 Total. Add lines 1 through 11	63,899.	0	•	46.	
	13 Compensation of officers, directors, trustees, etc14 Other employee salaries and wages.	0. 35,677.				35,677
	15 Pension plans, employee benefits	33,011.				33,011
A	16 a Legal fees (attach schedule) b Accounting fees (attach sch) SEE ST 1					
M	C Other prof fees (attach sch)	765.				765
O I	17 Interest					<u> </u>
P S E T R R	18 Taxes (attach schedule) see instrist SEE STM 2	2,729.				2,729
A A	sch) and depletion				!	
N V	20 Occupancy 21 Travel, conferences can on the fings					
	22 Printingland publications	4,787.		1		4,787
ĎŘ	23 Other expenses (attach schedule) SEE STATEMENT 3					
A EXPENSES	SEE STATEMENT 3 Total operating and administrative	12,585.		 	<u> </u>	12,585
E S	- expenses: Add lines 13 through 23	56,543.				56,543
	25 Contributions, gifts, grants paid 26 Total expenses and disbursements.			ļ	ļ	
	Add lines 24 and 25	56,543.	0		0.	56,543.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses					
	and disbursements	7,356.			i	
	b Net investment income (if negative, enter -0-)		0			
	C Adjusted net income (if negative, enter -0-).			1	46.	



Part	<u> </u>	Balance Sheets	column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	10 01	(c) Fair Market Value
	1		(See instructions)	58,199.	65,14	-	65,141.
	2		rary cash investments	30, 229.	30,27		30,275.
	_	Accounts receivable	-	30,223.	30,21	3. -	30,273.
		Less allowance for		4,962.	5,46	3	5,463.
;	4	Pledges receivable		4, 302.	3,40	} 	
	ľ	Less allowance for	doubtful accounts >	·			
	5	Grants receivable				+	
	6		icers, directors, trustees, and other			+	
	ľ	disqualified persons (atta	ach schedule) (see instructions)		1	İ	
	7	Other notes and loans red	ceivable (attach sch)			\neg	
A		Less: allowance for	doubtful accounts >				
Š	8	Inventories for sale	or use				
A S E T	9	Prepaid expenses a	and deferred charges				
Ś	10 a	a Investments – U S obligations (attach s	and state government schedule)				
	1	Investments - corporate	stock (attach schedule)				
	(: Investments — corporate	bonds (attach schedule)			\top	
	11	Investments – land equipment: basis	, buildings, and ▶	*			C Spore
:		Less: accumulated depred (attach schedule)	cration				
	12	Investments - mort	lgage loans		- · · · · · · · · · · · · · · · · · · ·	\top	
	13	Investments - othe	r (attach schedule)		į.	\top	
	14	Land, buildings, and	d equipment: basis►		la d		
		Less accumulated depred (attach schedule)	ciation •				
	1	Other assets (descr	,				
		see the instructions	completed by all filers – Also, see page 1, item I)	93,390.	100,87	9.	100,879.
Ļ	17	. ,	nd accrued expenses	90.	9	0.	× \$*,
A B	18	, ,					
В	19	Deferred revenue					
Ļ	20		ctors, trustees, & other disqualified persons.				*
T	21		es payable (attach schedule)				
Ē	22		scribe SEE STATEMENT 4	1,037.	1,17		
S	23		d lines 17 through 22)	1,127.	1,26	0.	
		Foundations that fo and complete lines	ollow SFAS 117, check here 24 through 26 and lines 30 and 31.				
N F E U	24	Unrestricted					
TN	25	Temporarily restricted					
D	26	Permanently restrict	_				
A S S E L T		Foundations that do and complete lines	o not follow SFAS 117, check here X 27 through 31.				
E L T A	27	Capital stock, trust	principal, or current funds				
SN	28		s, or land, bldg, and equipment fund	- 1		\dashv	
O E	29	Retained earnings, accum	nulated income, endowment, or other funds	92,263.	99,61	9.	
ŘŠ	30		fund balances (see instructions)	92,263.	99,61		
	31	Total liabilities and (see instructions).	net assets/fund balances	i			
Parl			nges in Net Assets or Fund Balance	93,390.	100,87	9.	
					1		
1	Tota end-	I net assets or fund b of-year figure reporte	palances at beginning of year — Part II, colu ed on prior year's return)	ımn (a), line 30 (must aç	gree with	,	00 000
		r amount from Part I,	•			1	92,263.
		increases not included in li				2	7,356.
		lines 1, 2, and 3		- 		3 4	00 610
		ases not included in line 2	(itemize)		; <u> </u>	5	99,619.
			palances at end of year (line 4 minus line 5)	- Part II column (b) I		6	00 (10
<u> </u>				1 a.c.n, column (b), 11		≗⊥	99,619.

L	(a) List and describe 2-story brick warehous	the kind(s) of property sold (e.g., e, or common stock, 200 shares M	real estate, LC Company)	`P' P	acquired urchase lonation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	N/A			1			
b							
c							
d					_		
е		-					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	
a							
b	-			Ì			
				<u>j</u>			
d					-		
е			10/01	150			
	(i) Fair Market Value	ring gain in column (h) and owned (i) Adjusted basis	(k) Excess of colum		⊢ ,	(I) Gains (Col ain minus column (i	
	as of 12/31/69	as of 12/31/69	over column (j), if	any		an -0-) or Losses (f	
a						_ 	
b					<u> </u>		
					-		
d							
е	·						
3		t capital loss)if (loss), en (loss) as defined in sections 1222(5 e 8, column (c) (see instructions)	, · · · · · · · · · · · · · · · · · · ·	-	3		
Par	t V Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investr	nent Ir	come	<u> </u>	
Was	es,' the foundation does not qua	this part blank ction 4942 tax on the distributable a alify under section 4940(e) Do not deach column for each year, see the in	complete this part	·		Yes	☐ No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	ssets	(col	(d) Distribution umn (b) divided	
	2013						
	2012						
	2011						
	2010					-	
	2009						
2	Total of line 1, column (d)				2		
3	Average distribution ratio for the number of years the foundation	ne 5-year base period – divide the n has been in existence if less thar	total on line 2 by 5, or by 5 years	the	3		
4	Enter the net value of nonchar	ritable-use assets for 2014 from Par	rt X, line 5		4		-
5	Multiply line 4 by line 3			i	5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		
8	Enter qualifying distributions fr	rom Part XII, line 4			8		
	If line 8 is equal to or greater that Part VI instructions.	in line 7, check the box in Part VI, line	e 1b, and complete that part	using a		ate See the	
BAA		TEEA0303	L 06/16/14			Forr	n 990-PF (2014)

	990-PF (2014) THE EQUINOX PRESERVATION TRUST, INC.	04-	3197	313		Р	age 4
Par		– see	instru	ictions)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.						
	Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)						
ь	Domestic foundations that meet the section 4940(e) requirements in Part V,		1				0.
	check 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, column (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable						
_	foundations only Others enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2		3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter	0-)	4				0.
2	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				0.
0	Credits/Payments. 2014 estimated tax pmts and 2013 overpayment credited to 2014 6 a		l. i		,		4.
				3	1	, ,	·
	Exempt foreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6 c			* .	. * *	*	
	Backup withholding erroneously withheld 6d						l
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		8		—		0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10				<u> </u>
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	•	11				
	t VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or di			\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		Yes	No
ı a	participate or intervene in any political campaign?	u II			1 a		X
H	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				一	$\overline{}$	
	(see Instructions for the definition)?				1 ь		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d		ļ.		\neg	
	or distributed by the foundation in connection with the activities	•					· \$35.25
	Did the foundation file Form 1120-POL for this year?				1 c		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 S			_ [
e	(1) On the foundation S			0.		,	強なっ
	foundation managers \$ 0.			3		1	,′
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	met max o	X,
	If 'Yes,' attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, up its governing instrument, articles				(** * ` .		(m. 3)
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	jes			3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?				4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If 'Yes,' attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or			ŀ			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that con	flict					
-	with the state law remain in the governing instrument?				6		X_
,	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV				7	Х	
o a	Enter the states to which the foundation reports or with which it is registered (see instructions) VT	-		_			
				_	1		
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation				8 Ь		
9	·		46.55	, <u> </u>	30	<u>X</u>	
7	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' co)(3) or Smalet	' 4942 'e Part	U(5) - V/V	9	X	J
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nai		u	· · · · · ·	-	A	
	and addresses	ries			10		x
BAA						-PF (2	

Pai	rt VII-A	Statements Regarding Activities (continued)						
11	At any tii within the	me during the year, did the foundation, directly or indirectly, a meaning of section 512(b)(13)? If 'Yes', attach schedule (s	own a controlled entity see instructions)			11		Х
12	Did the fo	undation make a distribution to a donor advised fund over which privileges? If 'Yes,' attach statement (see instructions)	the foundation or a disqualified p	erson had		12		х
13	Did the f	oundation comply with the public inspection requirements fo	r its annual returns and exemp	tion applica	tion?	13	Х	
	Website	address ► WWW.EOUINO	XPRESERVATIONTRUST.	ORG	•			
14	The book	s are in care of JOSEPH CHARBONNEAU			802-36	6-14	400	
		at > 374 GREEN MTN ROAD MANCHESTER CE	NTER VT ZIP + 4					
15		1947(a)(1) nonexempt charitable trusts filing Form 990-PF in				N/Ā		\Box
	and ente	r the amount of tax-exempt interest received or accrued dur	ing the year	▶ •	15			N/A
3.0				L_	<u>- </u>		Yes	No
16	bank, se	ne during calendar year 2014, did the foundation have an interes curities, or other financial account in a foreign country?	- 1		[16		X
		instructions for exceptions and filing requirements for FinCE name of the foreign country	N Form 114, (formerly TD F 90	-22 1) If 'Ye	es,'			_
Pa		Statements Regarding Activities for Which For		<u> </u>	<u> </u>			
		n 4720 if any item is checked in the 'Yes' column, unless an	exception applies.				Yes	No
1 8	a During th	ne year did the foundation (either directly or indirectly):		_	[
	(1) Enga	age in the sale or exchange, or leasing of property with a dis	squalified person?	Yes	XNo			
	(2) Borre	ow money from, lend money to, or otherwise extend credit to allified person?	o (or accept it from) a	□ □Yes	XNo	٠3	. * "·	
	,	ish goods, services, or facilities to (or accept them from) a c	disqualified person?	Yes	X No	*		
	•	compensation to, or pay or reimburse the expenses of, a dis	•	Yes	X No			\$
	(5) Tran	sfer any income or assets to a disqualified person (or make benefit or use of a disqualified person)?	1			4		
	101 11	ie beliefit of use of a disqualified persony:	į	Yes	X No	₹	-	
	(6) Agre found of go	e to pay money or property to a government official? (Exceptation agreed to make a grant to or to employ the official for a peopernment service, if terminating within 90 days)	ption. Check 'No' if the eriod after termination	Yes	XNo			\$ * <
ı	b If any an Regulation	swer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify ions section 53 4941(d)-3 or in a current notice regarding disa	under the exceptions described aster assistance (see instruction	ın ns)?	.1	1 b	N	/A
		itions relying on a current notice regarding disaster assistant		•	\Box			
	• Did the f	oundation engage in a prior year in any of the acts describe	d in 15, other than excepted a	·tc				
	that were	e not corrected before the first day of the tax year beginning	ın 2014?			1 c		X
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply perating foundation defined in section 4942(j)(3) or 4942(j)(5)	for years the foundation was a 5)):					
•	a At the er and 6e, I	nd of tax year 2014, did the foundation have any undistribute Part XIII) for tax year(s) beginning before 2014?	ed income (lines 6d	Yes	XNo			
	If 'Yes,' I	ıst the years ▶ 20 , 20 , 20 , 20	: !					
1	b Are there	any years listed in 2a for which the foundation is not apply	ring the provisions of section 49	942(a)(2)				
		to incorrect valuation of assets) to the year's undistributed in listed, answer 'No' and attach statement — see instructions,		42(a)(2) to		-2.	 NT	/7
	•	,	′	re hore	}	2b	N	/A
•	-	ovisions of section 4942(a)(2) are being applied to any of the	e years listed in Za, list the yea !	rs nere			į	
		, 20 , 20 , 20			}		્રે	
3 :	a Did the f enterpris	oundation hold more than a 2% direct or indirect interest in e at any time during the year?	any business	Yes	X No			
ı	or disqua	did it have excess business holdings in 2014 as a result of (1 alified persons after May 26, 1969; (2) the lapse of the 5-yea	i) any purchase by the foundat r period (or longer period appre	ion oved				
	by the Co	alified persons after May 26, 1969; (2) the lapse of the 5-year commissioner under section 4943(c)(7)) to dispose of holding	s acquired by gift or bequest, o	or				
	ine ia رد) determin	pse of the 10-, 15-, or 20-year first phase holding period? (t e if the foundation had excess business holdings in 2014)	use scriedule C, Form 4/20, to i	•		3ь	N	/A
_		•	abdd .a.a.a.e.e.e.e.e.e.e.e.		}		- 14	
4:		oundation invest during the year any amount in a manner the purposes?	at would jeopardize its		,	4 a		X
ı	b Did the f	oundation make any investment in a prior year (but after De	cember 31, 1969) that could					
	jeopardiz	e its charitable purpose that had not been removed from jeopardy	before the first day of		ļ			
D 4 4		ear beginning in 2014?	· · · · · · · · · · · · · · · · · · ·			4 b		X
BAA	١.				For	m 99 (D-PF (2014)

Form 990-PF (2014) THE EQUINOX PRESER				04-319	7313	Pa	age 6
Part VII-B Statements Regarding Activiti		1 4720 May Be Requ	uired (contu	nued)			
5a During the year did the foundation pay or incu	•	/ L 404E/->>2		, _{जि}			
(1) Carry on propaganda, or otherwise attemp	_	•	י 📙 🕴	es X	NO		
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	tion drive? `	,,	1 H.	🛏	No		
(3) Provide a grant to an individual for travel,	•	•	יט ן	es X	No		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or)	ganization described		es X	No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?		res X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to o a current notice regard	qualify under the except ding disaster assistance	tions			b N	′A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here		▶ □			
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim ex sibility for the grant?	emption from the	N/A	Yes 🗍	No		
If 'Yes,' attach the statement required by Regu	ulations section 53 4945	5-5(d).					.
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums		res X	No	2	*
b Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal benef	fit contract?		6	b	Х
If 'Yes' to 6b, file Form 8870				_			
7a At any time during the tax year, was the found					No	_	
b If 'Yes,' did the foundation receive any procee					7.4	b	
Part VIII Information About Officers, Diand Contractors	rectors, Trustees,	Foundation Manag	gers, Highly	Paid E	mploye	es,	
1 List all officers, directors, trustees, foundatio	(b) Title, and average		(d) Contribut	ons to	(a) Evoc	nse acco	unt
(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee plans and c	benefit deferred		r allowan	
SEE STATEMENT 5							
			ļ.				
		<u>0</u> .		0.			0.
					-		
			İ				
			ļ				
			į.				
2 Commention of Graduithead and annual control		11 d		. 1010015	<u> </u>		
Compensation of five highest-paid employees (of (a) Name and address of each employee	(b) Title, and average						
paid more than \$50,000	hours per week	(c) Compensation	(d)Contribut employee	benefit		ense acco r allowan	
	devoted to position		plans and compens				
NONE		 .	Compens	2001			
					_		
					-		
			i				
					<u> </u>		_
			i				
			i				
Total number of other employees paid over \$50,000	<u> </u>		-				0
BAA			 -		ــــــــــــــــــــــــــــــــــــــ	990-PF (2)	<u> </u>

Rart VIII Information About Officers, Directors, Trustees, Fo	undation Managers,	Highly Paid Er	nployees,
3 Five highest-paid independent contractors for professional services (se	ee instructions). If none, e	nter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of s		(c) Compensation
NONE			
· 			
~			
	 		
~- <i>-</i>		1	
~-~			
			-
	_]	İ	
			_
Total number of others receiving over \$50,000 for professional services.		1	0
PartiX A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta proganizations and other beneficiaries served, conferences convened, research papers produced, etc	tistical information such as the ni	umber of	Expenses
1 SEE STATEMENT 6		<u> </u>	
	- 	ļ	
	<u>-</u>		
2		+	
		÷	
3		1	
·		 	
		†I	
4		1	
		I	
PartIX B Summary of Program-Related Investments (see ins	structions)		
Describe the two largest program-related investments made by the foundation durin	ig the tax year on lines 1 and	d ¹ 2	Amount
1		†	
N/A	·		
2		<u> </u>	
		+	
All other program-related investments See instructions.			
3			
3			
		+	
Total. Add lines 1 through 3		<u> </u>	0.
BAA		<u> </u>	Form 990-PF (2014)

04-3197313

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'Form 990-PF (2014) THE EQUINOX PRESERVATION TRUST, INC.

`Form	990-PF (2014) THE EQUINOX PRESERVATION TRUST, INC.	04	-3197313	Page 8
Par	Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. For	eign founda	
1	Fair, market value of assets not used (or held for use) directly in carrying out charitable, etc, purpos Average monthly fair market value of securities	es.	1 a	
	Average of monthly cash balances	}	1 b	01 014
	Fair market value of all other assets (see instructions)		1 c	91,914.
	Total (add lines 1a, b, and c)	}	1 d	5,463. 97,377.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		3 4	91,311.
•	(attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets	0.	2	٥
3	Subtract line 2 from line 1d	}	3	<u>0.</u> 97,377.
_			-3-	91,311.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)		4	1 461
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4		5	1,461.
6	Minimum investment return. Enter 5% of line 5		6	95,916.
Par			· •	4,796.
Гаг	and certain foreign organizations check here X and do not complete this	e operat part.)	ing foundation	ons
1	Minimum investment return from Part X, line 6 N/A		1	
2 a	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)		44	
c	Add lines 2a and 2b		2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	l	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	
Par	Qualifying Distributions (see instructions)			
а	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		1 a	56,543.
	Program-related investments — total from Part IX-B		1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purpos	ses	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)		3a	
	Cash distribution test (attach the required schedule)	,	3 b	
	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, I	ne 4	4	56,543.
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	

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

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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Form **990-PF** (2014)

56,543.

Part XIII Undistributed Income (see Instr	ructions)	N/A	‡	
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7			1	
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only	·		1	
b Total for prior years: 20, 20, 20	w,,			
3 Excess distributions carryover, if any, to 2014:				
a From 2009 .			4	
b From 2010 c From 2011				
d From 2012.			1	
e From 2013				
f Total of lines 3a through e		-	ļ	
4 Qualifying distributions for 2014 from Part				
XII, line 4: > \$	`			
a Applied to 2013, but not more than line 2a		<u> </u>		_
	<u>}</u>			```
 Applied to undistributed income of prior years (Election required — see instructions) 	*			
c Treated as distributions out of corpus (Election required — see instructions)		3 N		• 4-3
d Applied to 2014 distributable amount			1	
e Remaining amount distributed out of corpus		**		7 <u>3</u> 3#
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the				
same amount must be shown in column (a))	*	* *		
6 Enter the net total of each column as indicated below:			*	
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5		3,	*	*
b Prior years' undistributed income Subtract line 4b from line 2b	\$		•	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount – see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				<u></u>
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011]		
c Excess from 2012				
d Excess from 2013 .			l I	
e Excess from 2014				
RAA				F 000 DE (0014)

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Part XIV Private Operating Foundat					
1a If the foundation has received a ruling or dete is effective for 2014, enter the date of the	rmination letter that it	is a private operatir	ng foundation, and th	ne ruling	
b Check box to indicate whether the foundal	_	atıng foundation de	escribed in section	X 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	1.6 10 1-07(07 01)	
income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
each year listed	46.	60.	86.	83.	275.
b 85% of line 2a	39.	51.	73.	71.	234.
c Qualifying distributions from Part XII, line 4 for each year listed	56,543.	56,915.	55,731.	37,292.	206,481.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 	56,543.	56,915.	55,731.	37,292.	206,481.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets	100,879.	93,390.	82,044.	74,910.	351,223.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).	100,879.	93,390.	82,044.	74,910.	351 <u>,223</u> .
b 'Endowment' alternative test — enter 2/3 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					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	l \$5,000 or more	in
1 Information Regarding Foundation Management		dedons.			
a List any managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more tha	an 2% of the total co han \$5,000) (See :	ntributions received, section 507(d)(2).)	by the foundation befo	ore the
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the s foundation has a 10	tock of a corporation % or greater intere	o (or an equally large est	e portion of the owner	ship of
2 Information Regarding Contribution, Gra	nt Gift Loan Schol	arshin etc Progra	ms.		
Check here X if the foundation only ma requests for funds. If the foundation make complete items 2a, b, c, and d	kes contributions to p	reselected charitable	e organizations and	does not accept unsol inizations under othe	icited er conditions,
a The name, address, and telephone number o	r e-mail address of the	e person to whom an	pplications should be	addressed.	· · · · · · · · · · · · · · · · ·
b The form in which applications should be	submitted and inform	nation and material	ls they should inclu	ude:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograph	iical areas, charitat	ole fields, kinds of	institutions, or other	factors
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3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t		N/A
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient		f grant or ution	Amount
Name and address (home or business)	substantial contributor	recibient			
Name and address (home or business) a Paid during the year	substantial contributor	recipient			
Total .	<u> </u>			► 3a	
b Approved for future payment					
Total				► 3b	
10181				- 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated	business income	Excluded b	y section 512, 513, or 514	
	· Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a_					i	
b _					_	
c _						
d_						
e					1	
f _					1	
_	ees and contracts from government agencies					
2 M	Membership dues and assessments					
3 In	nterest on savings and temporary cash investments			14	46	
4 D	Dividends and interest from securities					
	let rental income or (loss) from real estate:	×	ord in at Louis		• •	
a D	Debt-financed property					
	Not debt-financed property					
6 N	let rental income or (loss) from personal property					
7 0	Other investment income					
	ain or (loss) from sales of assets other than inventory				!	
	let income or (loss) from special events					
10 G	Gross profit or (loss) from sales of inventory					
11 0	Other revenue	2 × 1/4	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		41 · ÷	· > \$:
а						
b					!	
c						
d						
е						
12 S	Subtotal Add columns (b), (d), and (e)	1,34			46	
13 T	otal. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	
(See w	orksheet in line 13 instructions to verify calcula	tions)				
Part)	XVI-B Relationship of Activities to th	ne Accomplis	shment of Evemr	at Purnos	505	
Line N					<u> </u>	ntly to the
▼	accomplishment of the foundation's exemp	ot purposes (oth	ner than by providing	funds for s	uch purposes). (See	instructions)
N/Z	A					
						
	_				1	
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Part XVII. Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•	excilipt organiz	auons												
described relating to a Transfers (1) Cash (2) Othe b Other tra (1) Sales (2) Purol (3) Rent (4) Reim (5) Loan (6) Perfor c Sharing of	r assets	of the Code (or ions? foundation to charitable exemple a noncharitable ment, or other ments or membershent, mailing listbove is 'Yes,' vices given by	empt orgable exer assets	ganization 5 ganization empt organi s indraising s er assets, o	xempt orgazation olicitation or paid en	organization ganization is nployees edule Coli e foundatio	umn (b) sho n received le	uld alwa	ays sho	ow the f arket valu	fair mue in	1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes	X X X X X X X
(a) Line no	(b) Amount involved	(c) Name	ot noncha	ritable exempt	organizatio	n	(d) Description	n of trans	ers, tra	nsactions,	and sh	naring arran	ngement	is_
I/A														
													-	
			_					_						
		-		 -										
														
_														
-	·-··				-							_		
						 								
1														
														
describe	indation directly or ind d in section 501(c) o complete the following	of the Code (o	d with, o	or related to, an section 5	, one or m 501(c)(3))	ore tax-exe or in sect	empt organization 527?	ations				XYes	· 🗌	No
(a)	Name of organization	on	Τ	(b) Type o	of organiz	ation		(c)	Descr	iption of	f rela	ionship		
			E 0.1 /				1772200					<u>-</u>		
T INSTIT	OF NATURAL	SCIE	20T (C) (3)			VENDOR	₹	_					
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						-			_	_				
								-						
									<u> </u>				_	
	\sim													
Sign Sign	enalties of perjury, I declar and complete Declaration	e that I have exam of preparer (other	nined this than taxp	return, includin payer) is based D	sg accompan on all inform	ying schedule nation of whic	TREAS PRESID	any knowle WRBN	the best	of my kno	wledge	May the this return preparer (see insti	IRS disc n with the shown l ructions	cuss he below
	Pint/Type preparer's nan	me		Preparer's sig	nature		Date		T 01	al V	, T	PTIN		
				'			15000		Che	_	ן "ע			
Paid	JOSEPH A. WA	AGNER		JOSEPH	<u>A. WA</u>	GNER			self	-employed	<u> </u>	P01075	<u> 206</u>	
Preparer	Firm's name ► J	OSEPH A.	WAGN	ER, CPA	. PLIC	3			ırm's E	IN - 47	1-25	28349		
•		44 EAST						+	_			20047	_	
Jse Only	_					 								_
	<u> </u>	ANCHESTE	K CEN	TER, VT	05255				Phone n	<u> </u>	<u> 802)</u>	<u> 362-</u>	<u>9086</u>	<u> </u>
BAA												Form 99		
									1				'	,,,

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF
Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/torm990.

OMB No 1545-0047

2014

Name of the organization		Employer Identification number
THE EQUINOX PRESERVATION	N TRUST, INC.	04-3197313
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treat	ated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered l	by the General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or	(10) organization can check boxes for both the General Rul	le and a Special Rule See instructions
General Rule		
X For an organization filing Form 990 property) from any one contributor	0, 990-EZ, or 990-PF that received, during the year, contribite Complete Parts I and II. See instructions for determining a	utions totaling \$5,000 or more (in money or a contributor's total contributions
Special Rules		
received from any one contributor.	ection 501(c)(3) filing Form 990 or 990-EZ that met the 33-1 (1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II during the year, total contributions of the greater of (1) \$5, Form 990-EZ, line 1 Complete Parts I and II	l line 13 16a or 16h and that
during the year, total contributions	ection 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that of more than \$1,000 exclusively for religious, charitable, so cruelty to children or animals. Complete Parts I, II, and III	received from any one contributor, cientific, literary, or educational
\$1,000 If this box is checked, enter charitable, etc., purpose Do not co	ection 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that usively for religious, charitable, etc., purposes, but no such er here the total contributions that were received during the omplete any of the parts unless the General Rule applies to charitable, etc., contributions totaling \$5,000 or more during	contributions totaled more than year for an <i>exclusively</i> religious, or this organization because
Part I, line 2, to certify that it does not	overed by the General Rule and/or the Special Rules does n art IV, line 2, of its Form 990, or check the box on line H of t meet the filing requirements of Schedule B (Form 990, 990	its Form 990-F7 or on its Form 990 DF
BAA For Paperwork Reduction Act N or 990-PF.	otice, see the Instructions for Form 990, 990EZ, Sch	edule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)		Page	1 of 1 of Part 1
-	QUINOX PRESERVATION TRUST, INC.		1 1	197313
Partil	Contributors (see instructions) Use duplicate copies of Part I if additional space	ıs needed		
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
1	EQUINOX HOTEL & RESORT	-		Person X
	3567 MAIN STREET	\$5	8,547 <u>.</u>	Payroll Noncash
	MANCHESTER, VT 05254			(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
		 \$		Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
		 \$		Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Tota contribu	l tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

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(a) No. from Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

(d) Date received

(c)
FMV (or estimate)
(see instructions)

(b)
Description of noncash property given

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Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

THE EQUINOX PRESERVATION TRUST, INC. STATEMENT 1 FORM 999 PE BART LLINE 16B	04-3197313
FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES (A) (B) NET (C)	(D)
EXPENSES INVESTMENT ADJUSTED	CHARITABLE PURPOSES \$ 405. 360.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES	
(A) (B) NET (C)	(D) CHARITABLE PURPOSES \$ 2,729. \$ 2,729.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME INSURANCE \$ 3,818. MEMBERSHIP DUES 1,084. OFFICE & MISCELLANEOUS 352. TRAIL MAINTENANCE 6,571. WOODLAND MANAGEMENT SERVICES 760. TOTAL \$ 12,585. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 3,818. 1,084. 352. 6,571. 760. \$ 12,585.
STATEMENT 4 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES PAYROLL TAX LIABILITIES	1,170.
TOTAL \$\overline{\sigma}\$	1,170.

2014 F	EDERAL STATEMEN	NTS		PAGE 2
THE E	QUINOX PRESERVATION TR	UST, INC.		04-3197313
STATEMENT 5 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TR	USTEES, AND KEY EMPLOYE	EES		
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
RICHARD HEILEMAN PO BOX 238 MANCHESTER, VT 05254	PRESIDENT S	0.	\$ 0.	\$ 0.
DAVID CURTIS 4617 VT ROUTE 7A SHAFTSBURY, VT 05262	VICE PRESIDENT 0	0.	0.	0.
BETTY MANGANIELLO SOUTH RD SUNDERLAND, VT 05250	SECRETARY 0	0.	0.	0.
JOSEPH CHARBONNEAU PO BOX 456 MANCHESTER CTR, VT 05255	TREASURER 0	0	0.	0.
KATHE DILLMAN PO BOX 1164 MANCHESTER CTR, VT 05255	DIRECTOR 0	0.	0.	0.
MARK ONEILL PO BOX 46 MANCHESTER, VT 05254	DIRECTOR 0	0.	0.	0.
JENNIFER SAMUELSON PO BOX 1091 MANCHESTER CTR, VT 05255	DIRECTOR 0	0.	0.	0.
RABBI MICHAEL COHEN 293 BARNUMVILLE ROAD MANCHESTER CENTER, VT 05255	DIRECTOR 0	0.	0.	0.
	TOTAL 3	\$ 0.	\$ 0.	<u>\$ 0.</u>
STATEMENT 6 FORM 990-PF, PART IX-A, LINE 1 SUMMARY OF DIRECT CHARITABLE DIRECT C TO ENCOURAGE THE RESPONSIBLE NATURAL AND CULTURAL HISTORY WITH THE ENVIRONMENT THROUGH SENSITIVE RECREATION.	HARITABLE ACTIVITIES USE OF THE LAND AND PROBY PROVIDING THE OPPORT	UNITY TO IN	OUR ITERACT	EXPENSES

114 FEDERAL PRIVATE FOUN	DATION TAX S	UMMARY	PAGE			
THE EQUINOX PRESERVATION TRUST, INC.						
	2014	2013	DIFF			
REVENUE PER BOOKS CONTRIBUTIONS, GIFTS, AND GRANTS INTEREST ON SAVINGS/TEMP CASH INVEST	63,853 46	68,143 60	-4,290 -14			
TOTAL REVENUE	63,899	68,203	-4,304			
EXPENSES PER BOOKS OTHER EMPLOYEE SALARIES AND WAGES ACCOUNTING FEES TAXES PRINTING AND PUBLICATIONS OTHER EXPENSES TOTAL OPERATING/ADMINISTRATIVE EXP	35,677 765 2,729 4,787 12,585 56,543	34,637 755 2,650 0 18,873 56,915	1,040 10 79 4,787 -6,288 -372			
TOTAL EXPENSES	56,543	56,915	-372			
EXCESS OF REVENUE OVER EXPENSES	7,356	11,288	-3,932			
NET INVESTMENT REVENUE TOTAL REVENUE	0	0	(
NET INVESTMENT EXPENSES TOTAL OPERATING/ADMINISTRATIVE EXP	0	0	(
TOTAL EXPENSES	0	0	(
NET INVESTMENT INCOME	0	0	(
TAX COMPUTATION TAX ON INVESTMENT INCOME	0	0	(
PAYMENTS AND CREDITS TOTAL PAYMENTS AND CREDITS	0	0	(
REFUND OR AMOUNT DUE OVERPAYMENT	0	0	(
TAX DUE	0	0	(
ADJUSTED NET INCOME REVENUE INTEREST ON SAVINGS/TEMP CASH INVEST	46	60	-14			
TOTAL REVENUE	46	60	-14			
ADJUSTED NET INCOME EXPENSES TOTAL OPERATING/ADMINISTRATIVE EXP	0	:	(
TOTAL EXPENSES	0	; 0	_ (
ADJUSTED NET INCOME	46	60	-14			
CHARITABLE PURPOSES DISBURSEMENTS OTHER EMPLOYEE SALARIES AND WAGES ACCOUNTING FEES TAXES PRINTING AND PUBLICATIONS OTHER EXPENSES TOTAL OPERATING/ADMINISTRATIVE EXP	35,677 765 2,729 4,787 12,585 56,543	34,637 755 2,650 0 18,873 56,915	1,040 10 79 4,787 -6,288 -372			

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114 FEDERAL PRIVATE FOUN	DATION TAX S	UMMARY	PAGE 2		
THE EQUINOX PRESERVATION TRUST, INC.					
TOTAL EVDENCES AND DISCHURGEMENTS	56 543	FC 015	270		
TOTAL EXPENSES AND DISBURSEMENTS	56,543	56,915	-372		
NET ASSETS OR FUND BALANCES NET ASSETS/FUND BAL. AT BEG. OF YEAR EXCESS OF REVENUE OVER EXPENSES NET ASSETS/FUND BAL. AT END OF YEAR	92,263 7,356 99,619	80,975 11,288 92,263	11,288 -3,932 7,356		
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2014	GENERAL INFORMATION	PAGE 1
	THE EQUINOX PRESERVATION TRUST, INC.	04-3197313
FORMS NEEDED FOR TH	IS RETURN	
FEDERAL: 990-PF, SCH		
	•	
CARRYOVERS TO 2015		
NONE		
	;	
	!	
	1	
	;	

•				1		
PAGE 2	04-3197313	·	DECEMBER	95, 328 88 95, 416		
"	0		NOVEMBER	94,962 		
			OCTOBER	86, 475 88 86, 563		
			SEPTEMBER	90,798		
			AUGUSTS	92, 264 - 88- 92, 352		
EETS	rRUST, INC		JULY	91,205 		
EDERAL WORKSHEETS	THE EQUINOX PRESERVATION TRUST, INC.		JUNE	90, 637 88 90, 725		
ERAL W	NOX PRESE		MAY	90, 613	12	
FED	THE EQUII		APRIL	91, 384 -88 91, 472	S	
		ES	MARCH	91,287 88 91,375	NUMBER OF MONTHS	91, 914
		SH BALANC NE 1B	FEBRUARY	92,089 - 88 92,177	NUME	
		AVERAGE MONTHLY CASH BALANCES FORM 990-PF, PART X, LINE 1B	JANUARY I	94, 868 -88 -94, 956	1,102,966	AVERAGE MONTHLY CASH BALANCES
		ERAGE MO. RM 990-PF,	CASH BAL.	BERKSHIRE BANK PETTY CASH AVERAGES	TOTALS 1,	AAGE MONTHL'
2014		AVE FOF	CAS	BERF PETT AVE	Ĭ	AVE