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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 Internal Revenue Service

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2015 Open to Public Inspection

| | | | | | 15, and | | | , 20 |
|-----------------------------|----------|--|----------------------------------|---------------------------------|--|---------------------------------------|--|--|
| Name of foundation | | | | | | | r Identification numb | 9 7 |
| | Ne | J port Area Com | munity Orch | cstra | | | 533952 | |
| Nur | nber and | street (or P.O. box number if mail is | not delivered to street address) | Roc | m/suite | | e number (see instruct | ions) |
| | | 371 VT RT 111 | | 1 | | 802- | 766-3021 | |
| City | or town | , state or province, country, and ZIP of | or foreign postal code | | | | tion application is pend | ling, check here ▶ □ |
| | | Derby VT 058 | 29 - 9759 | | | | | g, |
| G | Check | all that apply: X Initial retu | | of a former publi | c charity | D 1. Foreig | n organizations, check | here . ▶□ |
| | 011001 | ☐ Final retu | | • | · , | i | | _ |
| | | ☐ Address | | nae | | | n organizations meetin here and attach comp | |
| H | Check | type of organization: Z S | | | I | | foundation status was | |
| | | n 4947(a)(1) nonexempt chari | | | | section 5 | i07(b)(1)(A), check here | ▶∐ |
| | | arket value of all assets at | J Accounting method | Cash | Accrual | 1 | | |
| _ | | year (from Part II, col. (c), | Other (specify) | . (2) | 100,000 | F if the four under se | ndation is in a 60-mon ction 507(b)(1)(B), chec | th termination k here . ▶ ☐ |
| | line 16 | | (Part I, column (d) must be | on cash basis.) | | | | _ |
| | art I | | | | ij | 1 | | (d) Disbursements |
| , , | 31 (| Analysis of Revenue and Examounts in columns (b), (c), and (d) | | (a) Revenue and expenses per | | tinvestment | (c) Adjusted net | for charttable |
| | | the amounts in column (a) (see insti | | books | , " | ncome | ıncome | purposes (cash basis only) |
| \neg | 4 | | | 3609 | + | | | |
| | 1 | Contributions, gifts, grants, etc., | | 2607 | + | · · · · · · · · · · · · · · · · · · · | | |
| | 2 | Check ▶ ☐ if the foundation is r | | | + . | | | |
| 1 | 3 | Interest on savings and temp | - | 0 | + | | | - |
| | 4 | Dividends and interest from | secunties | 0 | | | | |
| _ | 5a | Gross rents | | | + | | | |
| #⊒irtiteVere Revenue | b | Net rental income or (loss) | | | | | <u></u> | <u> </u> |
| S e | 6a | Net gain or (loss) from sale of | | 0 | | DI | OFN (FP | |
| en en | b | Gross sales price for all assets on | | | | K | CEIVED | |
| 30. eV | 7 | Capital gain net income (from | | | <u> </u> | - | | <u> </u> |
| 5 | 8 | Net short-term capital gain . | | | | AP AP | R 1 1 2016 | 50.5 |
| | 9 | | | | ļ | ω | 2 - 2010 | |
| ָ ל | 10a | Gross sales less returns and allo | wances | | | 1 | | 辰 |
| ğ | b | | | | | <u> </u> | DEN, UT | <u> </u> |
| =4 | С | Gross profit or (loss) (attach | | 0 | | | | Ϊ |
| ת | 11 | Other income (attach schedu | | 0 | | | ļ | |
| <u> </u> | 12 | Total. Add lines 1 through 1 | | 3609 | | | | ļ |
| 2∩18 Expenses | 13 | Compensation of officers, di | rectors, trustees, etc. | 0 | | | | |
| " & S | 14 | Other employee salaries and | _ | ٥ | | | | <u> </u> |
| e | 15 | Pension plans, employee be | nefits | 0 | | | | <u> </u> |
| Ď. | 16a | Legal fees (attach schedule) | | 0 | | | | |
| E E | ь | Accounting fees (attach scho | edule) | 6 | | | | |
| Š | C | Other professional fees (atta | ch schedule) | 370 | | | | |
| <u>r</u> | 17 | | | ٥ | | | | |
| ist | 18 | Taxes (attach schedule) (see in | structions) | 0 | | | | |
| Ę | 19 | Depreciation (attach schedu | | 0 | | , | | |
| 臣 | 20 | Occupancy | | 8 | | | | |
| Ĭ | 21 | Travel, conferences, and me | | C | | | | |
| 2 | 22 | | | 206 | 1 | | | |
| a | 23 | Other expenses (attach sche | | 2599 | 1 | | | |
| Operating and Administrativ | 24 | Total operating and adr | | | | | | |
| rat | | Add lines 13 through 23 . | | 3175 | | | | |
| be | 25 | Contributions, gifts, grants p | | 0 | | | 1 | |
| Ō | 26 | Total expenses and disbursen | | 3175 | 1 | | | 1 |
| | 27 | Subtract line 26 from line 12 | | | 1 | | | 1 |
| | a a | Excess of revenue over expe | | 434 | | | | |
| | b | Net investment income (if | | 7.7. | 1 | 0 | | |
| | | Adjusted net income (if neg | - | | | <u> </u> | 0 | |
| | <u> </u> | valuaten net income (ii net | <u> </u> | | | | · · · · · · | 000 PE 2010 |

| 1 Cash — non-interest-bearing 19 17 212.6 2.12.6 2 Savings and temporary cash investments 9 0 0 3 Accounts receivable ► 0 0 4 Piedges receivable ► 0 0 0 4 Piedges receivable ► 0 0 0 5 Grants receivable ► 0 0 0 6 Receivable Sulevance for doubtful accounts ► 0 0 0 7 Cher notes and lears receivable 0 0 0 0 8 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 0 0 0 8 Investments—corporate stock (stach schedule) 0 0 0 0 9 Prepaid expenses and deferred charges 0 0 0 0 10 Investments—corporate stock (stach schedule) 0 0 0 0 10 Investments—corporate bonds (statach schedule) 0 0 0 0 10 Investments—corporate bonds (statach schedule) 0 0 0 0 10 Investments—corporate bonds (statach schedule) 0 0 0 0 10 Investments—corporate bonds (statach schedule) 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 0 0 0 0 10 Investments—order particles (statach schedule) 0 0 0 0 0 0 0 0 0 | D a | et II | Attached schedules and amounts in the description column | column Beginning of year End | | End o | nd of year | |
|---|-----|---------|--|------------------------------|---------------|-------|-----------------------|--|
| 2 Sanngs and temporary cash investments | | | Balance Sheets should be for end-of-year amounts only. (See instructions.) | (a) Book Value | | е | (c) Fair Market Value | |
| Accounts receivable Less: allowance for doubtful accounts O D D D D D D D D D D D D D D D D D D | | 1 | | 1917 | 2126 | | 2126 | |
| Less: allowance for doubtful accounts ▶ | | 2 | Savings and temporary cash investments | 0 | Ð | | 0 | |
| Less: allowance for doubtful accounts ▶ | | 3 | Accounts receivable ▶ | | | | | |
| Pickges receivable Less: allowance for doubtful accounts O D D D D D D D D D D D D D D D D D D | | | Less: allowance for doubtful accounts ▶ | 0 | O | | 0 | |
| S Grants receivable | | 4 | | | | | | |
| S Grants receivable | | | Less: allowance for doubtful accounts ▶ | | O | | δ | |
| disqualified persons (attach schedule) See instructions O | | 5 | Grants receivable | 0 | 0 | | 0 | |
| 7 Other notes and loans receivable (statch schedule) | | 6 | Receivables due from officers, directors, trustees, and other | | | Ţ | | |
| Less: allowance for doubtful accounts ▶ | | | disqualified persons (attach schedule) (see instructions) | 0 | B | | D | |
| Less: allowance for doubtful accounts ▶ | | 7 | Other notes and loans receivable (attach schedule) ▶ | | | | | |
| 8 Inventories for sale or use 0 0 0 0 0 0 0 0 0 | | | | 1 | 0 | | 0 | |
| b Investments—corporate stock (attach schedule) | 29 | 8 | | 0 | 0 | | Ø | |
| b Investments—corporate stock (attach schedule) | se | 9 | | | 0 | | | |
| b Investments—corporate stock (attach schedule) | AB | 10a | | 0 | 0 | | | |
| c Investments—corporate bonds (attach schedule) 11 Investments—land, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) ▶ 12 Investments—mortgage loans 13 Investments—other (attach schedule) ▶ 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (accyribe ▶ 16 Total assets fo be completed by all filers—see the instructions. Also, see page 1, item I) | • | | | | | | | |
| 11 Investments—land, buldings, and equipment basis | | | | 8 | ٥ | | | |
| Lass: accumulated depreciation (attach schedule) | | | | | | | | |
| 12 Investments—mortgage loans 0 | | •• | | n l | 0 | | Ŏ | |
| 13 Investments—other (attach schedule) 0 0 0 0 | | 12 | | | | | | |
| Less: accumulated deprecation (attack schedule) ▶ | | | | | | | | |
| Less: accumulated deprecation (attach schedule) | i | _ | | | | | | |
| 15 Other assets (describe ► 1 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i) | | 17 | Less: accumulated depressation (attach schedule) | 601 | 2440 | | 2.440 | |
| 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1) | | 15 | | | | | | |
| instructions. Also, see page 1, item 1) 17 Accounts payable and accrued expenses | | | | | | | | |
| 17 Accounts payable and accrued expenses | | | | 2.518 | 4566 | | 4566 | |
| 18 Grants payable | _ | 17 | | 8 | | | , | |
| 19 Deferred revenue | | 1 | | | | | | |
| Total liabilities (add lines 17 through 22) | es | | • • | | | | | |
| Total liabilities (add lines 17 through 22) | Ϊ | | | | | | | |
| Total liabilities (add lines 17 through 22) | ğ | l | | | | | | |
| Total liabilities (add lines 17 through 22) C. | Ë | | | | | | | |
| Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund and complete lines 27 through 31. 30 Total net assets or fund balances (see instructions) 10 Total liabilities and net assets/fund balances (see instructions) 1 Total liabilities and net assets fund balances (see instructions) 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 2 5 9 2 | | | Total liabilities (add lines 17 through 22) | | | | | |
| and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted | | 23 | Total liabilities (add lines 17 dirodgir 22) | | | | | |
| Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds | S | | and complete lines 24 through 26 and lines 30 and 31 | | | | | |
| Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds | ၓၟ | 04 | · · · · · · · · · · · · · · · · · · · | | | | | |
| Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds | ā | | | | | | | |
| Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds | Ba | | | | | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | P | 40 | | | · | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 5 | | noundations that do not follow ShAS 117, check here | | | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 7 | 27 | " | 26.2 | 14011 | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 18 | i | | | | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | Se- | | | | | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | Š | i | | | | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | at/ | | | 4518 | 47566 | | | |
| Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | ž | 31 | | 2512 | 4066 | | | |
| 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | D. | et 1118 | | | -1306 | | <u> </u> | |
| end-of-year figure reported on prior year's return) | | | | | st agree with | | | |
| 2 Enter amount from Part I, line 27a 2 434 3 Other increases not included in line 2 (itemize) ▶ 3 0 4 Add lines 1, 2, and 3 4 2592 5 Decreases not included in line 2 (itemize) ▶ 5 0 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 2592 | • | | | | | 4 | 20.8 | |
| 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 | _ | | | | | | | |
| 4 Add lines 1, 2, and 3 | | | | | | | | |
| 5 Decreases not included in line 2 (itemize) ► 5 0 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . 6 2 ≤ 92 | 3 | Othe A | er increases not included in line ∠ (Remize) ► | | | | | |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 2 5 9 2 | | | | | | _ | | |
| | 5 | Deci | reases not included in line 2 (itemize) | Part II column (b) li | ne 30 | _ | | |
| | | iota | i riet assets of futio balances at end of year fille 4 minus line 3)— | raitii, commit (D), ii | | | | |

| Part | (a) List and describe th | I Losses for Tax on Investi e kind(s) of property sold (e.g., real esta se; or common stock, 200 shs. MLC Co | te, | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|---|--|---|--|--------------------------------------|--|
| 1a | | | | <u> </u> | | |
| b | | | | | | |
| C | | NA | | | | |
| d | | | | | | |
| е | | | | | | · |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | or other basis ense of sale | | or (loss)) minus (g) |
| а | | | | | | |
| b | | | | | | |
| C | | | | | | |
| đ | | | | | | |
| e | | | 1 | | | |
| | Complete only for assets sho | owing gain in column (h) and owned | by the foundation | n on 12/31/69 | | (h) gaun minus |
| | (i) F M V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ess of col. (1) ol. (1), if any | | less than -0-) or om col (h)) |
| а | | | | | | |
| b | | | | | | |
| C | | | | | | |
| d | | | | | | |
| 8 | | | | | | |
| 2 | Capital gain net income o | | , also enter in Page 1, enter -0- in Page 1 | | 2 | |
| 3 | | n or (loss) as defined in section I, line 8, column (c) (see instru | | | | |
| | • | | | , | 3 | |
| | • | ler Section 4940(e) for Red | | | | |
| s ti | he foundation liable for the | section 4942 tax on the distrib qualify under section 4940(e). | utable amount o | of any year in the | base period? | ☐ Yes ☐ |
| <u>:~</u> | | ount in each column for each ye | | | aking any entries. | |
| <u>. </u> | (a) | (b) | | (c) | | (d) |
| Cala | Base period years endar year (or tax year beginning in | Adverted avolution distribution | ns Net value | of noncharitable-use a | | ribution ratio divided by col. (c)) |
| Oale | 2014 | <u>'</u> | | | (===,(=),= | |
| | 2013 | | | | | |
| | 2012 | NA | | | | |
| | 2012 | - N. | | | | |
| | | | | | | |
| | 2010 | | L | | | |
| _ | | | | | | |
| 2 | Total of line 1, column (d) |) | | | 2 | |
| 3 | | for the 5-year base period—di | | | | |
| | number of years the found | dation has been in existence if | iess triari 5 year | 5 | . 3 | |
| 4 | Enter the net value of nor | ncharitable-use assets for 2015 | from Part X, line | e5 | . 4 | |
| 5 | Multiply line 4 by line 3 | | | | 5 | |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27 | 'b) | | . 6 | |
| 7 | Add lines 5 and 6 | | | | . 7 | |
| 8 | Enter qualifying distribution | ons from Part XII, line 4 | | | . 8 | 10/ A |
| | If line 8 is equal to or gre Part VI instructions. | ater than line 7, check the box | in Part VI, line 1 | ib, and complete | that part using a 1 | tax rate. Se |

| Part ' | | nstru | ctio | 15) | | | | | |
|------------|---|----------|------|-------------|--|--|--|--|--|
| 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: (attach copy of letter if necessary—see instructions) | | | | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | | | | | | |
| | here ▶ ☐ and enter 1% of Part I, line 27b | | | | | | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | | | | | |
| 2 | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| 3 | Add lines 1 and 2 | | | | | | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | | | | | | |
| 5 6 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | | | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 6a | | | | | | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | | | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) . 6c | | | | | | | | |
| d | Backup withholding erroneously withheld 6d | | | | | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | | | | | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached 8 | | | | | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 | | | | | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 | | | | | | | | |
| 11 Para | Enter the amount of line 10 to be: Credited to 2016 estimated tax ► Refunded ► 11 VII-A Statements Regarding Activities | | | | | | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | ··· | Yes | No | | | | | |
| | participate or intervene in any political campaign? | 1a | | メ | | | | | |
| b | | | | | | | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | X | | | | | |
| | published or distributed by the foundation in connection with the activities. | | | , | | | | | |
| C | | | | | | | | | |
| d | | | | | | | | | |
| _ | (1) On the foundation. ► \$ (2) On foundation managers. ► \$ | | | | | | | | |
| 8 | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ | | | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | <u> </u> | | | | | |
| 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 changes | 3 | | X | | | | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X | | | | | |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | - | | | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | <u> </u> | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | : | | | | | | | |
| | By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | | | ., | | | | | |
| 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 XV | 7 | | 庚 | | | | | |
| 7 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | | | | |
| | | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | ./ | | | | | |
| _ | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | | -X - | | | | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," | | | | | | | | |
| | complete Part XIV | 9 | X | | | | | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | <u> </u> | `, | | | | | | |
| _ | names and addresses | 10 | L | X | | | | | |

| Part | VII-A Statements Regarding Activities (continued) | | | |
|------|---|-------------|----------|-------------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | Yes | No |
| 12 | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | <u> </u> | X |
| - | 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 \blacktriangleright The books are in care of \blacktriangleright Rayl M. Gavin Telephone no. \blacktriangleright 802: Located at \blacktriangleright Po Box 215 East Charleston VT ZIP+4 \blacktriangleright 0583 | -77 | マー | 667 |
| • | Located at ▶ Po Box 215 Fact Charlecton VT ZIP+4 > 0583 | 3- | 021 | <u> </u> |
| 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 | ٠ . | · | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authorit | <u></u> | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | <u> </u> | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name o | ' | | |
| | the foreign country | | | |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | Yes | No |
| 1. | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly): | | 103 | |
| 1a | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (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? | | | , |
| | (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 | | 1 | |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? | 1c | <u> </u> | 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)): | | | |
| 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? | | | |
| 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, 20, 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 | 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.) | | | |
| 4а | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | İΧ |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | X |

| Page | 6 |
|------|---|
| | • |

| Part | VII-B Statements Regarding Activities | for W | hich Form | 4720 I | May Be R | equire | d (contir | nued) | | | |
|-------|--|-----------|---------------------------------|----------|----------------------|--------------|----------------------------|-------------|----------|-----------------------------|--|
| 5a | During the year did the foundation pay or incur a | | | | | | | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . Yes X No | | | | | | | | | | |
| | (2) Influence the outcome of any specific public election (see section 4955); or to carry on, | | | | | | | | | | |
| | directly or indirectly, any voter registration drive? | | | | | | | | | | |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes? | | | | | | | | | | |
| | | | | | | | ☐ Yes | ⊠ No | | | |
| | section 4945(d)(4)(A)? (see instructions) | | | | | | | | | | |
| | purposes, or for the prevention of cruelty to c | | | | | | ☐Yes | Ø No | | | |
| b | b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in | | | | | | | | | | |
| | Regulations section 53.4945 or in a current notice | | | | | uctions) | ? | | 5b | NA | |
| | Organizations relying on a current notice regarding | | | | | | | ▶□ | | | |
| C | If the answer is "Yes" to question 5a(4), does to | | | | | | | п., | | | |
| | because it maintained expenditure responsibility | | | | | | ∐ Yes | ∐ No | | | |
| 6a | If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any | | | | | emiums | | | | | |
| - | on a personal benefit contract? | | | | | | ☐ Yes | ⊠ No | | | |
| b | Did the foundation, during the year, pay premium | ns, dire | ctly or indired | tly, on | a personal | benefit | | | 6b | X | |
| | If "Yes" to 6b, file Form 8870. | | _ | - | | | | | | | |
| 7a | At any time during the tax year, was the foundation a | a party t | o a prohibited | itax she | elter transac | tion? | Yes | | 1 1 | | |
| | If "Yes," did the foundation receive any proceeds | | | | | | | | 7b | | |
| Par | Information About Officers, Direct and Contractors | tors, I | rustees, F | ounda | uon man | agers, | migniy r | alo E | трюу | ees, | |
| 1 | List all officers, directors, trustees, foundation | n mana | gers and th | eir con | pensation | ı (see iı | structio | ns). | | | |
| | | (b) Title | , and average | (c) Cor | npensation | (d) (| Contribution | s to | (e) Expe | nse account, | |
| | (a) Name and address | | s per week ed to position | | ot paid, ter -0-) | | yee benefit erred compe | | other | other allowances | |
| | Keu Michelli | Die | rector | | 0 | | 0 | | 0 | | |
| | | | | | | | | | | | |
| | | 750 | asurer | | 0 | | 0 | | 0 | | |
| | Yaul Gavin | . 1 C | e Sur er | | | | | | | | |
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| | | | | | | l | | | | | |
| 2 | Compensation of five highest-paid employed | es (oth | er than tho | se incli | uded on li | ne 1—: | see instr | uction | s). If n | one, enter | |
| | "NONE." | | | | | | (d) Contrib | dione to | | | |
| | (a) Name and address of each employee paid more than \$50,00 | 10 | (b) Title, and a hours per v | | (c) Compe | nsation | | benefit | | ense account, allowances | |
| | ., | | devoted to p | osition | | | compen | | Outer | alowalices | |
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| Total | number of other employees paid over \$50,000 . | • • | <u> </u> | | <u> </u> | <u>· · ·</u> | <u> </u> | . ▶ | | 0 DE | |
| | | | | | | | | | Form 98 | 0-PF (2015) | |

| Part VIII Information About Officers, Directors, Trustees, and Contractors (continued) | Foundation Managers, Highly Paid Em | ployees, |
|--|--|------------------------|
| 3 Five highest-paid independent contractors for professional set | rvices (see instructions). If none, enter "NON | E." |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | | |
| NA | | |
| | | |
| Fotal number of others receiving over \$50,000 for professional services | s | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Includ organizations and other beneficianes served, conferences convened, research papers p | | Expenses |
| 1 | | |
| 2 | | |
| NA | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments (se | | |
| Describe the two largest program-related investments made by the foundation during the | ie tax year on lines 1 and 2. | Amount |
| 1NA | | |
| 2 | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| Total. Add lines 1 through 3 | <u> </u> | 000 55 |
| | | Form 990-PF (20 |

| Part | | gn tour | ndations, |
|------|--|---------|-------------------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | 1 | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | <u> </u> |
| b | Average of monthly cash balances | 1b | 0 |
| C | Fair market value of all other assets (see instructions) | 10 | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 0 |
| e | 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 | <u> </u> |
| 3 | Subtract line 2 from line 1d | 3 | 0 |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | Ø |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 0 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | λ |
| Part | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for | oundat | |
| | and certain foreign organizations check here ▶ □ and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | D |
| 2a | Tax on investment income for 2015 from Part VI, line 5 2a | | |
| b | Income tax for 2015. (This does not include the tax from Part VI.) | 1 | |
| C | Add lines 2a and 2b | 2c | 0 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | Ò |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | O |
| 5 | Add lines 3 and 4 | 5 | 0 |
| 6 | Deduction from distributable amount (see instructions) | 6 | ð |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | _ |
| | line 1 | 7 | ð |
| Dod | VIII Outlier Distributions (see instructions) | | - |
| 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 | 0 |
| b | Program-related investments—total from Part IX-B | 1b | Ô |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc., | | |
| | purposes | 2 | 0 |
| 3 | Amounts set aside for specific chantable projects that satisfy the: | | |
| 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 | Ò |
| 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 | Ò |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 0 |
| | 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 wheth | er the foundation |
| | quanties for the section 4540(e) reduction of tax in those years. | | |

| 1 | Distributable amount for 2015 from Part XI, | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
|----|---|---------------|--|--|---------------------------------------|
| _ | line 7 | | | | |
| 2 | Undistributed income, if any, as of the end of 2015: | | | | |
| а | Enter amount for 2014 only | | | | |
| b | Total for prior years: 20,20,20 | | | | |
| 3 | Excess distributions carryover, if any, to 2015: | | | | 1 |
| а | From 2010 | | | | |
| b | From 2011 | | | | |
| C | From 2012 | | | | |
| d | From 2013 | | | | 1 |
| e | From 2014 | | | | / |
| f | Total of lines 3a through e | | | | 1/ |
| 4 | Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ | | | / | / |
| а | Applied to 2014, but not more than line 2a . | | | / | |
| | Applied to undistributed income of prior years | | | <i> </i> - | |
| ~ | (Election required—see instructions) | | | / | 1 |
| c | Treated as distributions out of corpus (Election | | | | |
| | required – see instructions) | | | | |
| đ | Applied to 2015 distributable amount | | | ļ <i> </i> | |
| e | Remaining amount distributed out of corpus | | | | ļ |
| 5 | Excess distributions carryover applied to 2015 | | | ļ/ | |
| | (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: | | | NA | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | / | | |
| 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 | amount—see instructions | | | | |
| 0 | Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see instructions | | | | |
| f | Undistributed income for 2015. Subtract lines | | / | | |
| | 4d and 5 from line 1. This amount must be distributed in 2016 | | | | |
| 7 | Amounts treated as distributions out of corpus | | | | |
| • | to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) | | | | |
| 8 | Excess distributions carryover from 2010 not | | | | · · · · · · · · · · · · · · · · · · · |
| | applied on line 5 or line 7 (see instructions) . | | | | |
| 9 | Excess distributions carryover to 2016. | / | | | |
| | Subtract lines 7 and 8 from line 6a | | | | |
| 10 | Analysis of line 9: | | | | |
| а | Excess from 2011 | | | | |
| b | Excess from 2012 | | | | |
| C | Excess from 2013 | | 1 | | 1 |
| d | Excess from 2014 | | | | |
| е | E / 2015 | | ļ | | |

| Part | | | | | | |
|------|---|----------------------|--------------------|--|--------------------|---------------------------------------|
| 1a | If the foundation has received a ruling foundation, and the ruling is effective for | | | | July 17 | , 2014 |
| b | Check box to indicate whether the four | ndation is a private | operating founda | tion described in se | | 3) or 4942(j)(5) |
| | Enter the lesser of the adjusted net | Tax year | <u> </u> | Prior 3 years | | |
| | income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| | investment return from Part X for each year listed | 0 | 8 | 1 | | 0 |
| h | 85% of line 2a | , o | O | | | 0 |
| | Qualifying distributions from Part XII, | . 0 | ļ | 1 | • • | |
| | line 4 for each year listed | 0 | 6 | | | 0 |
| đ | Amounts included in line 2c not used directly for active conduct of exempt activities | ð | 0 | | | 0 |
| e | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | 0 | 0 | | | 8 |
| 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 | | | NA | | |
| _ | section 4942(j)(3)(B)(i) | | | 1911 | | |
| 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(f)(3)(f)(i) | | | NA | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Part | XV Supplementary Information | n (Complete th | is part only if t | he foundation ha | ad \$5,000 or mo | ore in assets at |
| | any time during the year- | see instruction | ns.) | | | |
| 1 | Information Regarding Foundation | Managers: | | | | |
| а | List any managers of the foundation vibefore the close of any tax year (but of | who have contribu | | | | by the foundation |
| | Doisio tilo Glose of any tax year (Dut o | any ii aley ilave C | Similared HIGIA (I | 40,000). (000 St | | |
| b | List any managers of the foundation | uto out 10% o | r more of the stor | ck of a compration | /or an equally la | rge portion of the |
| D | ownership of a partnership or other er | | | - | | rge portion of the |
| | Ownership of a particularity of other or | inty) of willow the | TOURIGUE TIES & | 1070 or greator line | | |
| | Information Recording Contribution | Grant Gift Los | n Cahalarshin s | to Drograma | | · · · · · · · · · · · · · · · · · · · |
| 2 | Information Regarding Contribution Check here ▶ ☐ if the foundation | | | · - | raanizatione and | door not accomt |
| | unsolicited requests for funds. If the f | oundation makes | • | | - | |
| | other conditions, complete items 2a, l | | | | | |
| а | The name, address, and telephone nu | mber or e-mail ac | Idress of the pers | on to whom applica | ations should be a | iddressed: |
| b | The form in which applications should | be submitted and | d information and | materials they sho | uld include: | |
| | | | | | | |
| C | Any submission deadlines: | | | | | |
| d | Any restrictions or limitations on av | vards, such as b | y geographical a | reas, charitable fie | lds, kinds of ins | titutions, or other |
| - | factors: | , | , gg | , | _, | |

| | XV Supplementary Information (cont | inued) | | | | | | | | |
|-----|--|--|----------------------|----------------------------------|---------|--|--|--|--|--|
| _3_ | 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | | |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount | | | | | |
| | Name and address (home or business) | any foundation manager or substantial contributor | recipient | Controlled | | | | | | |
| а | Paid during the year | | | | | | | | | |
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| Pai | rt XVI | -A Analysis of Income-Producing Ac | ctivities | | | | | | | |
|-----|---------------|---|---------------------------------------|---------------------------------------|-------------------------------------|--|---|--|--|--|
| | | s amounts unless otherwise indicated. | | siness income | Excluded by secti | on 512, 513, or 514 | (-) | | | |
| | | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions.) | | | |
| 1 | _ | ram service revenue: | | | | ····- | , | | | |
| | a | Musical Performances | 711130 | 1714,cc | | | | | | |
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| 2 | | ees and contracts from government agencies bership dues and assessments | | | | | | | | |
| 3 | | bership dues and assessments | | 6 | | | _ | | | |
| 4 | | ends and interest from securities | | <u> </u> | <u> </u> | | <u> </u> | | | |
| 5 | | ental income or (loss) from real estate: | | <u></u> | · | | | | | |
| • | | ebt-financed property | | 8 | | | | | | |
| | | lot debt-financed property | | 0 | | | | | | |
| 6 | | rental income or (loss) from personal property | | ò | | | | | | |
| 7 | | r investment income | | 0 | | | | | | |
| 8 | | or (loss) from sales of assets other than inventory | | Ò | | | | | | |
| 9 | | ncome or (loss) from special events | | 0 | | | <u> </u> | | | |
| 10 | Gros | s profit or (loss) from sales of inventory | | 70 | | | | | | |
| 11 | Othe | r revenue: a | | | | | | | | |
| | b _ | | | | | | | | | |
| | c _ | | | | | | | | | |
| | d _ | | | | | | | | | |
| | е _ | | | | | | | | | |
| 12 | Subt | otal. Add columns (b), (d), and (e) | | | | | <u> </u> | | | |
| | | | | | | 13 | 714-00 | | | |
| | | sheet in line 13 instructions to verify calculation | | | A D | | | | | |
| | t XV e No. | | | | | | | | | |
| Lin | e 140. ▼ | Explain below how each activity for which accomplishment of the foundation's exempt pur | income is report rooses (other tha | orted in column n by providing fun | e) of Part XVI) ds for such purp | -A contributed i oses), (See instru | mportantly to the ctions.) | | | |
| | <u> </u> | | | | | | - | | | |
| | | The purpose of t | ne Four | adation | is bo | promote | | | | |
| | | Classical music | in the | Northe | east reg | ion of 1 | lermont. | | | |
| | | This is done with concerts and recitals. | | | | | | | | |
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| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(e) of the Code (other than section 501(e)3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (3) Sales of assets to a noncharitable exempt organization (4) Political organization and incharitable exempt organization (5) Sales of assets to a noncharitable exempt organization (6) Performance of services or membership or fundralising solicitations (8) Performance of services or membership or fundralising solicitations (9) Performance of services or membership or fundralising solicitations (10) Sales of assets or any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received walue in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services received. (d) Line no. (e) Armount involved (d) Armount involved (d) Armount involved (d) Name of organization (e) Name of organization (e) Description of transfers, and to the best of my browfedge and better, it is the foundation of prepare (bits then section 501(c)(3)) or in section 5277 (e) Name of organization (f) Name of organization (h) Type of organization (d) Description of malatomship (e) Description of malatomship (f) Name of organization (g) Name of organization (h) Type of organization (h) Type of organization (e) Description of malatomship (f) Prim's size by Prime no. From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going From \$60 - Prip going | Part | XVII | | n Regarding Tra | nsfers To and | Transac | tions and R | elationsh | ips Wil | h Noncha | ritabl | le | <u> </u> |
|--|--------------------------|---|---------------------------|----------------------------|--|-------------|---------------------------------|------------------|------------|-----------------|----------|-------------------|-------------|
| (1) Cash | | in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political | | | | | | | Yes | No | | | |
| (2) Other assets Id(2) X Other transactions: (1) Sales of assets to a noncharitable exempt organization | | a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | | | | 1a(1) | ŀ | × | | |
| (1) Sales of assets to a noncharitable exempt organization | | (2) Other assets | | | | | | | | X | | | |
| (3) Reintal of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services when the value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (8) Line no. (9) Amount involved (1) Name of nonchamitable exempt organization (1) Pescription of transactions, and sharing arrangements (1) Description of transactions, and sharing arrangements (2) Description of transactions, and sharing arrangements (2) Description of transactions, and sharing arrangements (3) Description of transactions, and sharing arrangements (3) Description of transactions, and sharing arrangements | | (1) Sales of assets to a noncharitable exempt organization | | | | | | | | X | | | |
| (4) Reimbursement arrangements | | | | | | | | | | | | | |
| (6) Performance of services or membership or fundraising solicitations 16(5) | | | | | | | | | | | _ | | 5 |
| (g) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (ii) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (g) Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | _ | | | | | | | | | 7 |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees It I Y If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Une no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements are serviced. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjur, I declars that I have examined this influence of the following accompanying schedules and statements, and to the boat of my knowledge and belief, it is true, or correct, and complete. Declaration of preparer (other than topologie) based on all information of which prepare has any knowledge. Under penalties of perjur, I declars that I have examined this influence of the following accompanying schedules and statements, and to the boat of my knowledge and belief, it is true. | | | _ | | | | | | | | <u> </u> | | 7 |
| value of the goods, other assets, or services given by the reporting foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (d) Ine no. (b) Amount involved (e) Name of nonchamtable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (e) Name of organization (e) Name of nonchamtable exempt organization of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (e) Name of organization (f) Properties and statements, and to the best of my knowledge and belief, it is but, signature of organization of preparer (other than texpeyer) is based on all information of which preparer has any knowledge. Date Print/lipe preparer's name Preparer's signature Date Chock f Print's name Preparer's signature Print's sidens | | | | | • | _ | | | | | | | X |
| value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of nonchambable exempt organization (d) Description of transfers, transactions, and sharing arrangements (b) Line no. (c) Amount involved (c) Name of nonchambable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (e) Name of involved transfers, transactions, and sharing arrangements (f) Rescription of transfers, transactions, and sharing arrangements (g) Line no. (h) Amount involved (c) Name of involved transfers, transactions, and sharing arrangements (g) Line no. (h) Amount involved (c) Name of indirectly of indirectly affiliated with, or related to, one or more tax-exempt organizations (g) Line no. (h) Amount involved (l) Amount involved (l) Properties and statements, and sharing arrangements (g) Line no. (h) Amount involved (l) Amount involved (l) Description of relationship organizations (g) Line no. (h) Amount involved (l) Amount involved (l) Amount involved (l) Description of relationship organizations (h) Name of organization (l) Transfers has not been of my knowledge and betef, it is true. (h) Name of organization (l) Description of relationship organizations of prepare (lone that have examined the return, including accompanying schedules and statements, and to the best of my knowledge and betef, it is true. (e) Description of relationship organizations of prepare (lone that have examined the return, including accompanying schedules and statements, and to the best of my knowledge and betef, it is true. (e) Description of relationship organizations of prepare (lone that have examined the return, including accompanying schedules and statements, and to the best of my knowledge and betef, it is true. (e) Description of relationship organizations of which prepare has any knowledge and betef, it is true. (e) Descriptio | | | | | | | | | | | | | |
| 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | (a) Line | no. (| (b) Amount involved | (c) Name of nonc | hantable exempt org | anızatıon | (d) Descri | ption of transfe | rs, transa | ctions, and sha | anng am | angem | ents |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | - | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | _ | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | - | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | - | | | | | · | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | - | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | · | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | - | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | _ | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? | | | | | | | | | | | | | |
| b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below (see instructions)? Yes No Paid Preparer Use Only Firm's name Firm's address Phone no. | | | | | | | | | | | | | |
| (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below (see instructions)? \[\text{Yea} \] No Paid Preparer Print/Type preparer's name Preparer's signature Preparer's signature Prim's name Firm's address Phone no. | | | | | | on 501(c)(3 |)) or in sectio | n 527? . | | [|] Yes | ; 🗆 | No |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below (see instructions)? Vea No Proparer shown below (see instructions)? Vea No Preparer shown below (see instructions)? Vea No Preparer Print/Type preparer's name Preparer's signature Date Check if self-employed Firm's EIN Firm's EIN Proparer Proparer Proparer Proparer Proparer Proparer Proparer Proparer Proparer Proparer Proparer Printy Proparer Proparer Proparer Proparer Proparer Printy Proparer | b | If "Ye | | | 9. | | | | | | | | |
| Sign Here Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print Print Print Preparer Preparer | (a) Name of organization | | | (b) Type of organization | | | (c) Description of relationship | | | | | | |
| Sign Here Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print Print Print Preparer Preparer | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| Sign Here Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print Print Print Preparer Preparer | | | - · - · · | | | | | | | | | | |
| Sign Here Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print Print Print Preparer Preparer | | | | | | | | | | | | | |
| Sign Here Print/Type preparer's name Preparer's signature Prim's name Firm's address Phone no. Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below (see instructions)? Yea No Treasurer Title Print/Type preparer's name Preparer's signature Date Check If self-employed Firm's name Print/Type preparer Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer | | | | | | | | | | | | | |
| Here P-K-Gauca 4/4/6 Treasurer May the IRS discuss this return with the preparer shown below (see instructions)? □ Yes □ No Paid Preparer Print/Type preparer's name Preparer's signature Date Check □ rf setf-employed Firm's name Firm's address ▶ Phone no. | | Unde | er penalties of penury, I | declare that I have examin | ed this return, includin | д ассотралу | ng schedules and | statements, and | to the be | st of my knowle | dge and | belief, r | t is true, |
| Here | Sign | correct, and complete. Declaration of preparer (other th | | | nan taxpayer) is based on all information of which p | | | arer has any kno | wiedge. | May the | IRS disc | uss th i s | return |
| Signature of officer or trustee Paid Preparer Use Only Signature Date Title Check ☐ rf self-employed Firm's name Firm's address ▶ Proparer's signature Preparer's signature Firm's signature Preparer's signature Proparer's signature Firm's address ▶ Phone no. | - | | | | | | | with the | | | preparer | shown | below |
| Paid Preparer Use Only Firm's name ► Firm's address ► Firm's address ► From to Elim t | | | nature of officer or tru | stee | Date | <u> </u> | itte | | | | | | |
| Preparer Use Only Firm's name ▶ Firm's EIN ▶ Firm's address ▶ Phone no. | Paid | | Print/Type preparer | 's name | Preparer's signat | ure | | Date | c | heck rf | PTIN | | |
| Use Only Firm's name ► Firm's EIN ► Phone no. | _ | arer | | | | | | <u> </u> | s | elf-employed | | | |
| | - | | | | | | | | 1 | | | | |
| | | | Firm's address | | · - · - · · - · · · · · · · · · · · · · | | . | | Phone n | | om Q0 | n Dr | 2015 |

Newport Area Community Orchestra

Income and Expenses 2015

| | Code | Income |
|--------------------|------|----------|
| Pledges | IP | 0 00 |
| Donaton | ID | 0 00 |
| Private Donations | IPD | 250.00 |
| Ad Sales | IBA | 795.00 |
| Event Donations | IED | 1,714.00 |
| Corporate Donation | ICD | 850.00 |
| Fundraiser | IF | 0 00 |
| Grants | IG | 0 00 |
| Total Income | | 3,609.00 |

| | | Expenses |
|-----------------------------------|------|----------|
| | | Actual |
| Professional Expenses (mileage) | EWP | 75 00 |
| Office Supplies | EAO | 206.00 |
| Postage | EAP | 0.00 |
| ASCAP Fee, Web fee | EAS | 340.00 |
| Bank, State Fees | EAB | 0 00 |
| Telephone | EAT | 0.00 |
| Gift Certificates | EGC | 0.00 |
| Compensation for ad solicitations | ECAS | 278.00 |
| Equipment | EEQ | 856.23 |
| Miscelaneous work | EMW | 100.00 |
| Outreach Publicity / Web | EPP | 268 00 |
| Musical equipment, scores | EME | 131.70 |
| Musician Fees | EMF | 370 00 |
| Fundraiser Expense | EF | 550 00 |
| Total Expenses | EZ | 3,174.93 |