

**THE NETTIE L AND CHARLES L WILEY 52-1231771 FORM 990-PF ESTIMATES  
FOUNDATION**

Form **990-W**

(Worksheet)  
Department of the Treasury  
Internal Revenue Service

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**  
(and on Investment Income for Private Foundations)  
(Keep for your records. Do not send to the Internal Revenue Service.)

OMB No. 1545-0976

**2014**

|     |   |     |       |
|-----|---|-----|-------|
| 1   | Unrelated business taxable income expected in the tax year .....  | 1   |       |
| 2   | Tax on the amount on line 1. See instructions for tax computation .....   | 2   |       |
| 3   | Alternative minimum tax (see instructions) .....  | 3   |       |
| 4   | Total. Add lines 2 and 3 .....  | 4   |       |
| 5   | Estimated tax credits (see instructions) .....  | 5   |       |
| 6   | Subtract line 5 from line 4 .....   | 6   |       |
| 7   | Other taxes (see instructions) .....  | 7   |       |
| 8   | Total. Add lines 6 and 7 .....  | 8   |       |
| 9   | Credit for federal tax paid on fuels (see instructions) .....   | 9   |       |
| 10a | Subtract line 9 from line 8. <b>Note.</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....                          | 10a | 5,058 |
| b   | Enter the tax shown on the 2013 return (see instructions). <b>Caution.</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c ..... | 10b | 5,058 |
| c   | <b>2014 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....                            | 10c | 5,058 |

|    |   | (a) | (b)      | (c)      | (d)      |          |
|----|---|-----|----------|----------|----------|----------|
| 11 | <b>Installment due dates</b> (see instructions) .....   | 11  | 05/15/14 | 06/16/14 | 09/15/14 | 12/15/14 |
| 12 | <b>Required installments.</b> Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions) ..... | 12  | 1,275    | 1,275    | 1,275    | 1,275    |
| 13 | <b>2013 Overpayment</b> (see instructions) .....  | 13  | 642      |          |          |          |
| 14 | <b>Payment due.</b> (Subtract line 13 from line 12.) .....  | 14  | 633      | 1,275    | 1,275    | 1,275    |

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2014)

**IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

Form **8879-EO**

For calendar year 2013, or fiscal year beginning ..... 2013, and ending ..... 20 .....

**2013**

Department of the Treasury  
Internal Revenue Service

**u Do not send to the IRS. Keep for your records.**  
**u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization **THE NETTIE L AND CHARLES L WILEY  
FOUNDATION** Employer identification number **52-1231771**

Name and title of officer **THOMAS GOSSE  
PRESIDENT**

**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

|                             |                                     |  |    |              |
|-----------------------------|-------------------------------------|--|----|--------------|
| 1a Form 990 check here      | <input type="checkbox"/>            | <b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) | 1b | _____        |
| 2a Form 990-EZ check here   | <input type="checkbox"/>            | <b>b Total revenue</b> , if any (Form 990-EZ, line 9)                      | 2b | _____        |
| 3a Form 1120-POL check here | <input type="checkbox"/>            | <b>b Total tax</b> (Form 1120-POL, line 22)                                | 3b | _____        |
| 4a Form 990-PF check here   | <input checked="" type="checkbox"/> | <b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5)     | 4b | <b>5,058</b> |
| 5a Form 8868 check here     | <input type="checkbox"/>            | <b>b Balance Due</b> (Form 8868, Part I, line 3c or Part II, line 8c)      | 5b | _____        |

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

I authorize DEHNERT, CLARKE & CO., P.C. to enter my PIN 22480 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } \_\_\_\_\_ Date } **05/01/14**

**Part III Certification and Authentication**

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**54114822480**

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } \_\_\_\_\_ Date } **05/01/14**

**ERO Must Retain This Form—See Instructions**  
**Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2013)

Form **990-PF**

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

OMB No. 1545-0052

**2013**

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](http://www.irs.gov/form990pf).**

Open to Public Inspection

For calendar year 2013 or tax year beginning , and ending

|  |  |  |
|--|--|--|
| Name of foundation<br><b>THE NETTIE L AND CHARLES L WILEY FOUNDATION</b>   |  | A Employer identification number<br><b>52-1231771</b>  |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>PO BOX 126</b>   | Room/suite   | B Telephone number (see instructions)  |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>IRVINGTON VA 22480</b>  |  | C If exemption application is pending, check here " <input type="checkbox"/>   |
| G Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here " <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation " <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation  |  | E If private foundation status was terminated under section 507(b)(1)(A), check here " <input type="checkbox"/>  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>u \$ 9,708,472</b>   | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here " <input type="checkbox"/>   |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) |   | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|---|------------------------------------|---------------------------|-------------------------|---|
| <b>Revenue</b>  | 1 Contributions, gifts, grants, etc., received (attach schedule) ...                                    |                                    |                           |                         |   |
|   | 2 Check <b>u</b> <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B |                                    |                           |                         |   |
|   | 3 Interest on savings and temporary cash investments  | 78,539                             | 78,539                    | 78,539                  |   |
|   | 4 Dividends and interest from securities  | 186,319                            | 186,319                   | 186,319                 |   |
|   | 5a Gross rents  |                                    |                           |                         |   |
|   | b Net rental income or (loss)   |                                    |                           |                         |   |
|   | 6a Net gain or (loss) from sale of assets not on line 10  | -4,575                             |                           |                         |   |
|   | b Gross sales price for all assets on line 6a <b>951,315</b>  |                                    |                           |                         |   |
|   | 7 Capital gain net income (from Part IV, line 2)  |                                    | 0                         |                         |   |
|   | 8 Net short-term capital gain   |                                    |                           | 0                       |   |
|   | 9 Income modifications  |                                    |                           |                         |   |
|   | 10a Gross sales less returns and allowances   |                                    |                           |                         |   |
| b Less: Cost of goods sold  |   |                                    |                           |                         |   |
| c Gross profit or (loss) (attach schedule)  |   |                                    |                           |                         |   |
| 11 Other income (attach schedule) <b>STMT 1</b>   | -19,200   | 5,381                              | -19,200                   |                         |   |
| 12 <b>Total.</b> Add lines 1 through 11   | 241,083   | 270,239                            | 245,658                   |                         |   |
| <b>Operating and Administrative Expenses</b>  | 13 Compensation of officers, directors, trustees, etc.  | 27,000                             | 8,100                     |                         | 18,900  |
|   | 14 Other employee salaries and wages  |                                    |                           |                         |   |
|   | 15 Pension plans, employee benefits   |                                    |                           |                         |   |
|   | 16a Legal fees (attach schedule) <b>SEE STMT 2</b>  | 350                                | 350                       |                         |   |
|   | b Accounting fees (attach schedule) <b>STMT 3</b>   | 1,972                              | 986                       |                         | 986   |
|   | c Other professional fees (attach schedule)   |                                    |                           |                         |   |
|   | 17 Interest   |                                    |                           |                         |   |
|   | 18 Taxes (attach schedule) (see instructions) <b>STMT 4</b>   | 9,138                              | 4,109                     |                         |   |
|   | 19 Depreciation (attach schedule) and depletion <b>STMT 5</b>   |                                    |                           |                         |   |
|   | 20 Occupancy  | 1,800                              |                           |                         | 1,800   |
|   | 21 Travel, conferences, and meetings  |                                    |                           |                         |   |
|   | 22 Printing and publications  |                                    |                           |                         |   |
|   | 23 Other expenses (att. sch.) <b>STMT 6</b>   | 10,400                             | 3,774                     |                         | 6,450   |
|   | 24 <b>Total operating and administrative expenses.</b><br>Add lines 13 through 23                       | 50,660                             | 17,319                    | 0                       | 28,136  |
|   | 25 Contributions, gifts, grants paid  | 391,145                            |                           |                         | 391,145   |
| 26 <b>Total expenses and disbursements.</b> Add lines 24 and 25   | 441,805   | 17,319                             | 0                         | 419,281                 |   |
| 27 Subtract line 26 from line 12:   |   |                                    |                           |                         |   |
| a Excess of revenue over expenses and disbursements   | -200,722  |                                    |                           |                         |   |
| b <b>Net investment income</b> (if negative, enter -0-)   |   | 252,920                            |                           |                         |   |
| c <b>Adjusted net income</b> (if negative, enter -0-)   |   |                                    | 245,658                   |                         |   |

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2013)

| Part II                     | Balance Sheets  | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)    |                |                       |           |
|-----------------------------|---|---|----------------|-----------------------|-----------|
|                             |   | Beginning of year   | End of year    |                       |           |
|                             |   | (a) Book Value  | (b) Book Value | (c) Fair Market Value |           |
| Assets                      | 1   | Cash – non-interest-bearing   | 23,458         | 52,278                | 52,277    |
|                             | 2   | Savings and temporary cash investments  | 479,249        | 513,129               | 513,129   |
|                             | 3   | Accounts receivable <b>u</b>  |                |                       |           |
|                             |   | Less: allowance for doubtful accounts <b>u</b>  |                |                       |           |
|                             | 4   | Pledges receivable <b>u</b>   |                |                       |           |
|                             |   | Less: allowance for doubtful accounts <b>u</b>  |                |                       |           |
|                             | 5   | Grants receivable   |                |                       |           |
|                             | 6   | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) |                |                       |           |
|                             | 7   | Other notes and loans receivable (att. schedule) <b>u</b>   |                |                       |           |
|                             |   | Less: allowance for doubtful accounts <b>u</b>  | 0              |                       |           |
|                             | 8   | Inventories for sale or use   |                |                       |           |
|                             | 9   | Prepaid expenses and deferred charges   |                |                       |           |
|                             | 10a   | Investments – U.S. and state government obligations (attach schedule)   |                |                       |           |
|                             |   | b Investments – corporate stock (attach schedule) <b>SEE STMT 7</b>   | 4,485,941      | 4,462,272             | 7,127,601 |
|                             |   | c Investments – corporate bonds (attach schedule) <b>SEE STMT 8</b>   | 2,037,770      | 1,638,569             | 1,665,004 |
|                             | 11  | Investments – land, buildings, and equipment: basis <b>u</b>  |                |                       |           |
|                             | Less: accumulated depreciation (attach sch.) <b>u</b>   |   |                |                       |           |
| 12                          | Investments – mortgage loans  |   |                |                       |           |
| 13                          | Investments – other (attach schedule)   |   |                |                       |           |
| 14                          | Land, buildings, and equipment: basis <b>u</b>  | 140,391   |                |                       |           |
|                             | Less: accumulated depreciation (attach sch.) <b>u</b> <b>STMT 9</b>   | 11,915  |                |                       |           |
| 15                          | Other assets (describe <b>u</b> <b>SEE STATEMENT 10</b> )   | 3,960   | 163,408        | 221,985               |           |
| 16                          | <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)  | 7,158,854   | 6,958,132      | 9,708,472             |           |
| Liabilities                 | 17  | Accounts payable and accrued expenses   |                |                       |           |
|                             | 18  | Grants payable  |                |                       |           |
|                             | 19  | Deferred revenue  |                |                       |           |
|                             | 20  | Loans from officers, directors, trustees, and other disqualified persons  |                |                       |           |
|                             | 21  | Mortgages and other notes payable (attach schedule)   |                |                       |           |
|                             | 22  | Other liabilities (describe <b>u</b> )  |                |                       |           |
|                             | 23  | <b>Total liabilities</b> (add lines 17 through 22)  | 0              | 0                     |           |
| Net Assets or Fund Balances | <b>Foundations that follow SFAS 117, check here <b>u</b> <input checked="" type="checkbox"/></b><br>and complete lines 24 through 26 and lines 30 and 31. |   |                |                       |           |
|                             | 24  | Unrestricted  | 7,158,854      | 6,958,132             |           |
|                             | 25  | Temporarily restricted  |                |                       |           |
|                             | 26  | Permanently restricted  |                |                       |           |
|                             | <b>Foundations that do not follow SFAS 117, check here <b>u</b> <input type="checkbox"/></b><br>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  |                |                       |           |
|                             | 29  | Retained earnings, accumulated income, endowment, or other funds  |                |                       |           |
| 30                          | <b>Total net assets or fund balances</b> (see instructions)   | 7,158,854   | 6,958,132      |                       |           |
| 31                          | <b>Total liabilities and net assets/fund balances</b> (see instructions)  | 7,158,854   | 6,958,132      |                       |           |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |  |   |           |
|---|--|---|-----------|
| 1 | Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 7,158,854 |
| 2 | Enter amount from Part I, line 27a   | 2 | -200,722  |
| 3 | Other increases not included in line 2 (itemize) <b>u</b>  | 3 |           |
| 4 | Add lines 1, 2, and 3  | 4 | 6,958,132 |
| 5 | Decreases not included in line 2 (itemize) <b>u</b>  | 5 |           |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30  | 6 | 6,958,132 |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)  |  | (b) How acquired<br>P – Purchase<br>D – Donation | (c) Date acquired<br>(mo., day, yr.)         | (d) Date sold<br>(mo., day, yr.)  |
|---|--|--|--|---|
| <b>1a SEE WORKSHEET</b>   |  |  |  |   |
| <b>b</b>  |  |  |  |   |
| <b>c</b>  |  |  |  |   |
| <b>d</b>  |  |  |  |   |
| <b>e</b>  |  |  |  |   |
| (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale  | (h) Gain or (loss)<br>(e) plus (f) minus (g) |   |
| <b>a</b>  |  |  |  |   |
| <b>b</b>  |  |  |  |   |
| <b>c</b>  |  |  |  |   |
| <b>d</b>  |  |  |  |   |
| <b>e</b>  |  |  |  |   |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   |  |  |  | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
| (i) F.M.V. as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of col. (i)<br>over col. (j), if any  |  |   |
| <b>a</b>  |  |  |  |   |
| <b>b</b>  |  |  |  |   |
| <b>c</b>  |  |  |  |   |
| <b>d</b>  |  |  |  |   |
| <b>e</b>  |  |  |  |   |
| <b>2</b> Capital gain net income or (net capital loss) <span style="border-left: 1px solid black; padding-left: 5px;">If gain, also enter in Part I, line 7<br/>If (loss), enter -0- in Part I, line 7</span> |  |  | <b>2</b>                                     | <b>-4,575</b>   |
| <b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8        |  |  | <b>3</b>                                     |   |

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

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

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)  | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|---|--|--|---|
| 2012  | <b>386,908</b>                           | <b>8,309,909</b>                             | <b>0.046560</b>   |
| 2011  | <b>392,240</b>                           | <b>8,226,490</b>                             | <b>0.047680</b>   |
| 2010  | <b>394,035</b>                           | <b>8,110,567</b>                             | <b>0.048583</b>   |
| 2009  | <b>435,212</b>                           | <b>7,755,689</b>                             | <b>0.056115</b>   |
| 2008  | <b>442,796</b>                           | <b>8,745,441</b>                             | <b>0.050632</b>   |
| <b>2</b> Total of line 1, column (d)  |  |  | <b>0.249570</b>   |
| <b>3</b> Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years                                       |  |  | <b>0.049914</b>   |
| <b>4</b> Enter the net value of noncharitable-use assets for 2013 from Part X, line 5   |  |  | <b>9,014,716</b>  |
| <b>5</b> Multiply line 4 by line 3  |  |  | <b>449,961</b>  |
| <b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)   |  |  | <b>2,529</b>  |
| <b>7</b> Add lines 5 and 6  |  |  | <b>452,490</b>  |
| <b>8</b> Enter qualifying distributions from Part XII, line 4<br>If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions. |  |  | <b>419,281</b>  |

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

|           |   |           |              |
|-----------|---|-----------|--------------|
| <b>1a</b> | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions) |           |              |
| <b>b</b>  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b   | <b>1</b>  | <b>5,058</b> |
| <b>c</b>  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  |           |              |
| <b>2</b>  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | <b>2</b>  | <b>0</b>     |
| <b>3</b>  | Add lines 1 and 2   | <b>3</b>  | <b>5,058</b> |
| <b>4</b>  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | <b>4</b>  | <b>0</b>     |
| <b>5</b>  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-  | <b>5</b>  | <b>5,058</b> |
| <b>6</b>  | Credits/Payments:   |           |              |
| <b>a</b>  | 2013 estimated tax payments and 2012 overpayment credited to 2013   | <b>6a</b> | <b>5,700</b> |
| <b>b</b>  | Exempt foreign organizations – tax withheld at source   | <b>6b</b> |              |
| <b>c</b>  | Tax paid with application for extension of time to file (Form 8868)   | <b>6c</b> |              |
| <b>d</b>  | Backup withholding erroneously withheld   | <b>6d</b> |              |
| <b>7</b>  | Total credits and payments. Add lines 6a through 6d   | <b>7</b>  | <b>5,700</b> |
| <b>8</b>  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached  | <b>8</b>  |              |
| <b>9</b>  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>   | <b>9</b>  |              |
| <b>10</b> | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>   | <b>10</b> | <b>642</b>   |
| <b>11</b> | Enter the amount of line 10 to be: <b>Credited to 2014 estimated tax</b> <b>642</b> <b>Refunded</b>   | <b>11</b> |              |

**Part VII-A Statements Regarding Activities**

|   | Yes      | No       |
|---|----------|----------|
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  |          | <b>X</b> |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |          | <b>X</b> |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?  |          | <b>X</b> |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br><b>(1)</b> On the foundation. <b>u</b> \$ _____ <b>(2)</b> On foundation managers. <b>u</b> \$ _____   |          |          |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <b>u</b> \$ _____  |          |          |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities.  |          | <b>X</b> |
| <b>3</b> 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   |          | <b>X</b> |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?   |          | <b>X</b> |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? <b>N/A</b>   |          |          |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T.  |          | <b>X</b> |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>● By language in the governing instrument, or<br>● 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?                         | <b>X</b> |          |
| <b>7</b> 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  | <b>X</b> |          |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>u</b><br><b>NONE</b>  |          |          |
| <b>b</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 <b>N/A</b>   |          |          |
| <b>9</b> 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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV   |          | <b>X</b> |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  |          | <b>X</b> |

**Part VII-A Statements Regarding Activities (continued)**

|    |  |    |          |                |
|----|--|----|----------|----------------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)  | 11 |          | <b>X</b>       |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)   | 12 |          | <b>X</b>       |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address <b>u WWW.WILEYFDN.ORG</b>   | 13 | <b>X</b> |                |
| 14 | The books are in care of <b>u THE FOUNDATION</b> Telephone no. <b>u 804-438-5656</b><br><b>P. O. BOX 126</b><br>Located at <b>u IRVINGTON</b> VA ZIP+4 <b>u 22480</b>  |    |          |                |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <b>u</b> <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year <b>u 15</b>   |    |          |                |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country <b>u</b> | 16 | Yes      | No<br><b>X</b> |

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

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

|     |  | Yes | No       |
|-----|--|-----|----------|
| 1a  | During the year did the foundation (either directly or indirectly):  |     |          |
| (1) | Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |     |          |
| (2) | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |     |          |
| (3) | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |     |          |
| (4) | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |     |          |
| (5) | Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |          |
| (6) | Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |          |
| b   | If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)? <b>N/A</b><br>Organizations relying on a current notice regarding disaster assistance check here <b>u</b> <input type="checkbox"/>   | 1b  |          |
| 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 2013? <b>N/A</b>   | 1c  |          |
| 2   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):   |     |          |
| a   | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years <b>u</b> 20 , 20 , 20 , 20   |     |          |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement - see instructions.) <b>N/A</b>   | 2b  |          |
| c   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.<br><b>u</b> 20 , 20 , 20 , 20  |     |          |
| 3a  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |     |          |
| b   | If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.) <b>N/A</b> | 3b  |          |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | 4a  | <b>X</b> |
| 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 2013?  | 4b  | <b>X</b> |

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

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **N/A** **5b**

Organizations relying on a current notice regarding disaster assistance check here **u**

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A**  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** **X**

If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11     |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

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

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

**Total** number of other employees paid over \$50,000 **0**



**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

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

**Part IX-A Summary of Direct Charitable Activities**

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 N/A  |          |
| 2  |          |
| 3  |          |
| 4  |          |

**Part IX-B Summary of Program-Related Investments** (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------|
| 1 N/A   |        |
| 2   |        |
| All other program-related investments. See instructions.  |        |
| 3   |        |
| Total. Add lines 1 through 3  | ▶      |

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

|          |   |           |                  |
|----------|---|-----------|------------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |           |                  |
| <b>a</b> | Average monthly fair market value of securities   | <b>1a</b> | <b>8,376,489</b> |
| <b>b</b> | Average of monthly cash balances  | <b>1b</b> | <b>534,058</b>   |
| <b>c</b> | Fair market value of all other assets (see instructions)  | <b>1c</b> | <b>241,449</b>   |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c)   | <b>1d</b> | <b>9,151,996</b> |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | <b>0</b>         |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets  | <b>2</b>  | <b>0</b>         |
| <b>3</b> | Subtract line 2 from line 1d  | <b>3</b>  | <b>9,151,996</b> |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)      | <b>4</b>  | <b>137,280</b>   |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | <b>9,014,716</b> |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5  | <b>6</b>  | <b>450,736</b>   |

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

|           |   |           |                |
|-----------|---|-----------|----------------|
| <b>1</b>  | Minimum investment return from Part X, line 6   | <b>1</b>  | <b>450,736</b> |
| <b>2a</b> | Tax on investment income for 2013 from Part VI, line 5  | <b>2a</b> | <b>5,058</b>   |
| <b>b</b>  | Income tax for 2013. (This does not include the tax from Part VI.)  | <b>2b</b> |                |
| <b>c</b>  | Add lines 2a and 2b   | <b>2c</b> | <b>5,058</b>   |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | <b>445,678</b> |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions   | <b>4</b>  |                |
| <b>5</b>  | Add lines 3 and 4   | <b>5</b>  | <b>445,678</b> |
| <b>6</b>  | Deduction from distributable amount (see instructions)  | <b>6</b>  |                |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | <b>445,678</b> |

**Part XII Qualifying Distributions** (see instructions)

|          |  |           |                |
|----------|--|-----------|----------------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |           |                |
| <b>a</b> | Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26  | <b>1a</b> | <b>419,281</b> |
| <b>b</b> | Program-related investments – total from Part IX-B   | <b>1b</b> |                |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | <b>2</b>  |                |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:   |           |                |
| <b>a</b> | Suitability test (prior IRS approval required)   | <b>3a</b> |                |
| <b>b</b> | Cash distribution test (attach the required schedule)  | <b>3b</b> |                |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | <b>4</b>  | <b>419,281</b> |
| <b>5</b> | 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) | <b>5</b>  | <b>0</b>       |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4  | <b>6</b>  | <b>419,281</b> |

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

**Part XIII Undistributed Income** (see instructions)

|   | (a)<br>Corpus | (b)<br>Years prior to 2012 | (c)<br>2012    | (d)<br>2013    |
|---|---------------|----------------------------|----------------|----------------|
| <b>1</b> Distributable amount for 2013 from Part XI, line 7   |               |                            |                | <b>445,678</b> |
| <b>2</b> Undistributed income, if any, as of the end of 2013:   |               |                            |                |                |
| <b>a</b> Enter amount for 2012 only   |               |                            | <b>405,744</b> |                |
| <b>b</b> Total for prior years: 20____, 20____, 20____  |               |                            |                |                |
| <b>3</b> Excess distributions carryover, if any, to 2013:   |               |                            |                |                |
| <b>a</b> From 2008  |               |                            |                |                |
| <b>b</b> From 2009  |               |                            |                |                |
| <b>c</b> From 2010  |               |                            |                |                |
| <b>d</b> From 2011  |               |                            |                |                |
| <b>e</b> From 2012  |               |                            |                |                |
| <b>f</b> Total of lines 3a through e  |               |                            |                |                |
| <b>4</b> Qualifying distributions for 2013 from Part XII, line 4: <b>u</b> \$ <b>419,281</b>  |               |                            |                |                |
| <b>a</b> Applied to 2012, but not more than line 2a   |               |                            | <b>405,744</b> |                |
| <b>b</b> Applied to undistributed income of prior years (Election required – see instructions)  |               |                            |                |                |
| <b>c</b> Treated as distributions out of corpus (Election required – see instructions)  |               |                            |                |                |
| <b>d</b> Applied to 2013 distributable amount   |               |                            |                | <b>13,537</b>  |
| <b>e</b> Remaining amount distributed out of corpus   |               |                            |                |                |
| <b>5</b> Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)  |               |                            |                |                |
| <b>6</b> Enter the net total of each column as indicated below:   |               |                            |                |                |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  |               |                            |                |                |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b   |               |                            |                |                |
| <b>c</b> 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 |               |                            |                |                |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions   |               |                            |                |                |
| <b>e</b> Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount – see instructions  |               |                            |                |                |
| <b>f</b> Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014  |               |                            |                | <b>432,141</b> |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)                                  |               |                            |                |                |
| <b>8</b> Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)  |               |                            |                |                |
| <b>9</b> Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a  |               |                            |                |                |
| <b>10</b> Analysis of line 9:   |               |                            |                |                |
| <b>a</b> Excess from 2009   |               |                            |                |                |
| <b>b</b> Excess from 2010   |               |                            |                |                |
| <b>c</b> Excess from 2011   |               |                            |                |                |
| <b>d</b> Excess from 2012   |               |                            |                |                |
| <b>e</b> Excess from 2013   |               |                            |                |                |

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling u

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2013, (b) 2012, (c) 2011, (d) 2010, (e) Total. Rows include 2a-e (Qualifying distributions) and 3 (Alternative tests).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year... N/A
b List any managers of the foundation who own 10% or more of the stock of a corporation... N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here u if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: THE FOUNDATION 804-438-5656 PO BOX 126 IRVINGTON VA 22480
b The form in which applications should be submitted and information and materials they should include: SEE WEBSITE
c Any submission deadlines: SEE WEBSITE
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: SEE WEBSITE

**Part XV** Supplementary Information (continued)

**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 or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount         |
|--|---|--------------------------------|----------------------------------|----------------|
| Name and address (home or business)                      |   |                                |                                  |                |
| <b>a</b> Paid during the year<br><b>SEE STATEMENT 12</b> |   |                                |                                  | <b>391,120</b> |
| <b>Total</b>   |   |                                | <b>u 3a</b>                      | <b>391,120</b> |
| <b>b</b> Approved for future payment<br><b>N/A</b>       |   |                                |                                  |                |
| <b>Total</b>   |   |                                | <b>u 3b</b>                      |                |



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

**1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

|   | Yes | No       |
|---|-----|----------|
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:   |     |          |
| <b>(1)</b> Cash .....   |     | <b>X</b> |
| <b>(2)</b> Other assets .....   |     | <b>X</b> |
| <b>b</b> Other transactions:  |     |          |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization .....   |     | <b>X</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization .....   |     | <b>X</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets .....   |     | <b>X</b> |
| <b>(4)</b> Reimbursement arrangements .....   |     | <b>X</b> |
| <b>(5)</b> Loans or loan guarantees .....   |     | <b>X</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations .....   |     | <b>X</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees .....   |     | <b>X</b> |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</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 <b>(d)</b> the value of the goods, other assets, or services received. |     |          |

| (a) Line no. | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|--------------|---------------------|---|--|
| <b>N/A</b>   |                     |   |  |
|              |                     |   |  |
|              |                     |   |  |
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|              |                     |   |  |

**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?  Yes  No

**b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| <b>N/A</b>               |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign Here** 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)?  Yes  No

Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ **PRESIDENT** Title

|                               |   |                               |                         |   |
|-------------------------------|---|-------------------------------|-------------------------|---|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br><b>C DWIGHT CLARKE</b>  | Preparer's signature          | Date<br><b>05/09/14</b> | Check <input type="checkbox"/> if self-employed |
|                               | Firm's name ,, <b>DEHNERT, CLARKE &amp; CO., P.C.</b> | PTIN <b>P00188399</b>         |                         | Firm's EIN ,, <b>20-1212674</b>                 |
|                               | Firm's address ,, <b>P.O. BOX 420</b>                 | Phone no. <b>804-438-5656</b> |                         |   |
|                               | <b>IRVINGTON, VA 22480</b>                            |                               |                         |   |

## Capital Gains and Losses for Tax on Investment Income

Form **990-PF****2013**

For calendar year 2013, or tax year beginning

, and ending

Name

**THE NETTIE L AND CHARLES L WILEY  
FOUNDATION**

Employer Identification Number

**52-1231771**

| (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co. | (b) How acquired<br>P-Purchase<br>D-Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|---|--|--------------------------------------|----------------------------------|
| (1) <b>ISHARES MSCI ETF AUSTRALIA</b>   | <b>P</b>                                     | <b>06/28/11</b>                      | <b>10/28/13</b>                  |
| (2) <b>ISHARES MSCI CDA ETF CANADA</b>  | <b>P</b>                                     | <b>06/28/11</b>                      | <b>10/28/13</b>                  |
| (3) <b>ARCHER DANIELS MIDLAND</b>   | <b>P</b>                                     | <b>12/31/02</b>                      | <b>01/24/13</b>                  |
| (4) <b>SIGMA ALDRICH CORP</b>   | <b>P</b>                                     | <b>12/31/11</b>                      | <b>01/24/13</b>                  |
| (5) <b>SYSCO CORPORATION</b>  | <b>P</b>                                     | <b>01/05/06</b>                      | <b>01/24/13</b>                  |
| (6) <b>AT&amp;T INC NEW</b>   | <b>P</b>                                     | <b>10/17/01</b>                      | <b>05/28/13</b>                  |
| (7) <b>NO EUROPEAN OIL RYLTY TR</b>   | <b>P</b>                                     | <b>12/31/02</b>                      | <b>05/28/13</b>                  |
| (8) <b>VERIZON COMM</b>   | <b>P</b>                                     | <b>10/17/01</b>                      | <b>05/28/13</b>                  |
| (9) <b>NO EUROPEAN OIL RYLTY R</b>  | <b>P</b>                                     | <b>12/31/02</b>                      | <b>05/30/13</b>                  |
| (10) <b>CHESAPEAKE FINL SHS NEW</b>   | <b>P</b>                                     | <b>11/12/02</b>                      | <b>05/31/13</b>                  |
| (11) <b>DELL INC 1.4% NOTES</b>   | <b>P</b>                                     | <b>11/18/10</b>                      | <b>09/10/13</b>                  |
| (12) <b>HEWLETT PACKARD 1.25% NOTES</b>   | <b>P</b>                                     | <b>11/18/10</b>                      | <b>09/13/13</b>                  |
| (13) <b>VERIZON NEW ENG 4.75% NOTES</b>   | <b>P</b>                                     | <b>05/04/09</b>                      | <b>10/01/13</b>                  |
| (14) <b>ABBVIE INC</b>  | <b>P</b>                                     | <b>06/16/11</b>                      | <b>10/28/13</b>                  |
| (15) <b>AMERICAN INTL GROUP</b>   | <b>P</b>                                     | <b>12/31/11</b>                      | <b>10/28/13</b>                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--|---|--|
| (1) <b>26,912</b>     |  | <b>25,220</b>                                   | <b>1,692</b>                                 |
| (2) <b>29,022</b>     |  | <b>30,820</b>                                   | <b>-1,798</b>                                |
| (3) <b>23,343</b>     |  | <b>10,275</b>                                   | <b>13,068</b>                                |
| (4) <b>61,048</b>     |  | <b>21,579</b>                                   | <b>39,469</b>                                |
| (5) <b>31,454</b>     |  | <b>31,268</b>                                   | <b>186</b>                                   |
| (6) <b>57,902</b>     |  | <b>29,875</b>                                   | <b>28,027</b>                                |
| (7) <b>29,556</b>     |  | <b>27,564</b>                                   | <b>1,992</b>                                 |
| (8) <b>40,699</b>     |  | <b>25,488</b>                                   | <b>15,211</b>                                |
| (9) <b>93,297</b>     |  | <b>87,286</b>                                   | <b>6,011</b>                                 |
| (10) <b>12,635</b>    |  | <b>6,735</b>                                    | <b>5,900</b>                                 |
| (11) <b>100,000</b>   |  | <b>100,000</b>                                  |  |
| (12) <b>100,000</b>   |  | <b>100,000</b>                                  |  |
| (13) <b>200,000</b>   |  | <b>200,000</b>                                  |  |
| (14) <b>97,789</b>    |  | <b>53,549</b>                                   | <b>44,240</b>                                |
| (15) <b>7,615</b>     |  | <b>198,600</b>                                  | <b>-190,985</b>                              |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------|--------------------------------------|---|---|
| (1)                       |                                      |   | <b>1,692</b>  |
| (2)                       |                                      |   | <b>-1,798</b>   |
| (3)                       |                                      |   | <b>13,068</b>   |
| (4)                       |                                      |   | <b>39,469</b>   |
| (5)                       |                                      |   | <b>186</b>  |
| (6)                       |                                      |   | <b>28,027</b>   |
| (7)                       |                                      |   | <b>1,992</b>  |
| (8)                       |                                      |   | <b>15,211</b>   |
| (9)                       |                                      |   | <b>6,011</b>  |
| (10)                      |                                      |   | <b>5,900</b>  |
| (11)                      |                                      |   |   |
| (12)                      |                                      |   |   |
| (13)                      |                                      |   |   |
| (14)                      |                                      |   | <b>44,240</b>   |
| (15)                      |                                      |   | <b>-190,985</b>   |



**Capital Gains and Losses for Tax on Investment Income**

Form **990-PF**

**2013**

For calendar year 2013, or tax year beginning , and ending

Name

**THE NETTIE L AND CHARLES L WILEY  
FOUNDATION**

Employer Identification Number

**52-1231771**

| (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co. | (b) How acquired<br>P-Purchase<br>D-Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|---|--|--------------------------------------|----------------------------------|
| (1) <b>OGE ENERGY HLDNGS CO</b>   | <b>P</b>                                     | <b>12/31/02</b>                      | <b>10/28/13</b>                  |
| (2) <b>PARNERSHIP CAPITAL LOSSES</b>  | <b>P</b>                                     | <b>12/31/11</b>                      | <b>12/31/13</b>                  |
| (3) <b>CAPITAL GAIN DISTRIBUTIONS</b>   |  |                                      |                                  |
| (4)   |  |                                      |                                  |
| (5)   |  |                                      |                                  |
| (6)   |  |                                      |                                  |
| (7)   |  |                                      |                                  |
| (8)   |  |                                      |                                  |
| (9)   |  |                                      |                                  |
| (10)  |  |                                      |                                  |
| (11)  |  |                                      |                                  |
| (12)  |  |                                      |                                  |
| (13)  |  |                                      |                                  |
| (14)  |  |                                      |                                  |
| (15)  |  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--|---|--|
| (1) <b>36,561</b>     |  | <b>7,040</b>                                    | <b>29,521</b>                                |
| (2) <b>3,482</b>      |  | <b>591</b>                                      | <b>-591</b>                                  |
| (3) <b>3,482</b>      |  |   | <b>3,482</b>                                 |
| (4)                   |  |   |  |
| (5)                   |  |   |  |
| (6)                   |  |   |  |
| (7)                   |  |   |  |
| (8)                   |  |   |  |
| (9)                   |  |   |  |
| (10)                  |  |   |  |
| (11)                  |  |   |  |
| (12)                  |  |   |  |
| (13)                  |  |   |  |
| (14)                  |  |   |  |
| (15)                  |  |   |  |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------|--------------------------------------|---|---|
|                           |                                      |   | <b>29,521</b>   |
|                           |                                      |   | <b>-591</b>   |
|                           |                                      |   | <b>3,482</b>  |
| (4)                       |                                      |   |   |
| (5)                       |                                      |   |   |
| (6)                       |                                      |   |   |
| (7)                       |                                      |   |   |
| (8)                       |                                      |   |   |
| (9)                       |                                      |   |   |
| (10)                      |                                      |   |   |
| (11)                      |                                      |   |   |
| (12)                      |                                      |   |   |
| (13)                      |                                      |   |   |
| (14)                      |                                      |   |   |
| (15)                      |                                      |   |   |

**Federal Statements**

**Statement 1 - Form 990-PF, Part I, Line 11 - Other Income**

| Description             | Revenue per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income |
|-------------------------|----------------------|--------------------------|------------------------|
| ROYALTIES               | \$ 5,381             | \$ 5,381                 | \$ 5,381               |
| BUCKEYE PARTNERSHIP     | -3,034               |                          | -3,034                 |
| ENBRIDGE PARTNERSHIP    | -20,216              |                          | -20,216                |
| PLAINS ALL AMERICAN PSP | -1,331               |                          | -1,331                 |
| TOTAL                   | <u>\$ -19,200</u>    | <u>\$ 5,381</u>          | <u>\$ -19,200</u>      |

**Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees**

| Description | Total         | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------|---------------|-------------------|-----------------|-----------------------|
| LEGAL FEES  | \$ 350        | \$ 350            | \$              | \$                    |
| TOTAL       | <u>\$ 350</u> | <u>\$ 350</u>     | <u>\$ 0</u>     | <u>\$ 0</u>           |

**Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees**

| Description | Total           | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------|-----------------|-------------------|-----------------|-----------------------|
| ACCOUNTING  | \$ 1,972        | \$ 986            | \$              | \$ 986                |
| TOTAL       | <u>\$ 1,972</u> | <u>\$ 986</u>     | <u>\$ 0</u>     | <u>\$ 986</u>         |

52-1231771

**Federal Statements**

FYE: 12/31/2013

**Statement 4 - Form 990-PF, Part I, Line 18 - Taxes**

| Description          | Total           | Net Investment  | Adjusted Net | Charitable Purpose |
|----------------------|-----------------|-----------------|--------------|--------------------|
| REAL ESTATE TAXES    | \$ 1,591        | \$ 1,591        | \$           | \$                 |
| FOREIGN DIVIDEND TAX | 2,518           | 2,518           |              |                    |
| INCOME TAX           | 5,029           |                 |              |                    |
| TOTAL                | <u>\$ 9,138</u> | <u>\$ 4,109</u> | <u>\$ 0</u>  | <u>\$ 0</u>        |

**Statement 5 - Form 990-PF, Part I, Line 19 - Depreciation**

| Description      | Date Acquired | Cost Basis       | Prior Year Depreciation | Method | Life | Current Year Depreciation | Net Investment Income | Adjusted Net Income |
|------------------|---------------|------------------|-------------------------|--------|------|---------------------------|-----------------------|---------------------|
| WEB DESIGN       | 1/31/07       | \$ 10,232        | \$ 10,232               |        | 3    | \$                        | \$                    | \$                  |
| COPIER & MONITOR | 6/30/07       | 1,155            | 1,155                   | S/L    | 5    |                           |                       |                     |
| COMPUTER UPGRADE | 11/09/07      | 528              | 528                     | S/L    | 5    |                           |                       |                     |
| TOTAL            |               | <u>\$ 11,915</u> | <u>\$ 11,915</u>        |        |      | <u>\$ 0</u>               | <u>\$ 0</u>           | <u>\$ 0</u>         |

**Federal Statements**

**Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses**

| Description             | Total            | Net<br>Investment | Adjusted<br>Net | Charitable<br>Purpose |
|-------------------------|------------------|-------------------|-----------------|-----------------------|
|                         | \$               | \$                | \$              | \$                    |
| EXPENSES                |                  |                   |                 |                       |
| DUES                    | 1,725            |                   |                 | 1,725                 |
| FIDUCIARY FEES          | 7,547            | 3,774             |                 | 3,773                 |
| POSTAGE                 | 58               |                   |                 | 58                    |
| OFFICE                  | 144              |                   |                 | 144                   |
| WEB SITE EXPENSE        | 300              |                   |                 | 300                   |
| NON DEDUCTABLE EXPENSES | 176              |                   |                 |                       |
| CONVENTION EXPENSES     | 450              |                   |                 | 450                   |
| TOTAL                   | <u>\$ 10,400</u> | <u>\$ 3,774</u>   | <u>\$ 0</u>     | <u>\$ 6,450</u>       |

**Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments**

| Description                | Beginning<br>of Year | End of<br>Year      | Basis of<br>Valuation | Fair Market<br>Value |
|----------------------------|----------------------|---------------------|-----------------------|----------------------|
| CORPORATE STOCK & EQUITIES | \$ 4,485,941         | \$ 4,462,272        | COST                  | \$ 7,127,601         |
| TOTAL                      | <u>\$ 4,485,941</u>  | <u>\$ 4,462,272</u> |                       | <u>\$ 7,127,601</u>  |

**Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments**

| Description     | Beginning<br>of Year | End of<br>Year      | Basis of<br>Valuation | Fair Market<br>Value |
|-----------------|----------------------|---------------------|-----------------------|----------------------|
| CORPORATE BONDS | \$ 2,037,770         | \$ 1,638,569        | COST                  | \$ 1,665,004         |
| TOTAL           | <u>\$ 2,037,770</u>  | <u>\$ 1,638,569</u> |                       | <u>\$ 1,665,004</u>  |

## Federal Statements

### Statement 9 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

| <u>Description</u>                     | <u>Beginning<br/>Net Book</u> | <u>End<br/>Cost / Basis</u> | <u>End Accumulated<br/>Depreciation</u> | <u>Net<br/>FMV</u>   |
|--|-------------------------------|-----------------------------|---|----------------------|
| COMPUTER EQUIPMENT AND WEBSITE<br>LAND | \$<br>128,476                 | \$<br>11,915<br>128,476     | \$<br>11,915                            | \$<br>128,476        |
| TOTAL                                  | \$<br><u>128,476</u>          | \$<br><u>140,391</u>        | \$<br><u>11,915</u>                     | \$<br><u>128,476</u> |

**Federal Statements****Statement 10 - Form 990-PF, Part II, Line 15 - Other Assets**

| <u>Description</u>                | <u>Beginning<br/>of Year</u> | <u>End of<br/>Year</u> | <u>Fair Market<br/>Value</u> |
|-----------------------------------|------------------------------|------------------------|------------------------------|
| ESTATE PERSONAL PROPERTY FOR SALE | \$ 3,960                     | \$ 3,960               | \$ 3,960                     |
| PUBLICLY TRADED PARTNERSHIPS      |                              | 159,448                | 218,025                      |
| TOTAL                             | \$ 3,960                     | \$ 163,408             | \$ 221,985                   |

52-1231771

**Federal Statements**

FYE: 12/31/2013

**Statement 11 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,  
Etc.**

| <u>Name and<br/>Address</u>                           | <u>Title</u> | <u>Average<br/>Hours</u> | <u>Compensation</u> | <u>Benefits</u> | <u>Expenses</u> |
|---|--------------|--------------------------|---------------------|-----------------|-----------------|
| CATHARINE B MOORE<br>PO BOX 126<br>IRVINGTON VA 22480 | SECRETARY    | 2.00                     | 5,400               | 0               | 0               |
| GLORIA C CONLEY<br>PO BOX 126<br>IRVINGTON VA 22480   | VICE PRES.   | 2.00                     | 5,400               | 0               | 0               |
| B.H.B HUBBARD<br>PO BOX 126<br>IRVINGTON VA 22480     | TREASURER    | 2.00                     | 5,400               | 0               | 0               |
| THOMAS GOSSE<br>PO BOX 126<br>IRVINGTON VA 22480      | PRESIDENT    | 2.00                     | 5,400               | 0               | 0               |
| LESLIE FRANKLIN<br>PO BOX 126<br>IRVINGTON VA 22480   | BOARD MEMBER | 2.00                     | 5,400               | 0               | 0               |

**Federal Statements**

**Form 990-PF, Part XV, Line 2b - Application Format and Required Contents**

Description

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SEE WEBSITE

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**Form 990-PF, Part XV, Line 2c - Submission Deadlines**

Description

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SEE WEBSITE

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**Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations**

Description

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SEE WEBSITE



52-1231771

## Federal Statements

FYE: 12/31/2013

**Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year**

| Name  | Address | Relationship              | Status | Purpose              | Amount  |
|---|---------|---------------------------|--------|----------------------|---------|
| BETHEL UNITED METHODIST CHURCH<br>LIVELY, VA 22507        | NONE    | P. O. BOX 118,            |        | PRESCHOOL            | 10,250  |
| CHESAPEAKE ACADEMY<br>IRVINGTON VA 22480                  | NONE    | P. O. BOX 8               |        | CHILDREN'S PROGRAMS  | 55,000  |
| CHRISTOPHER NEWPORT UNIVERSITY<br>NEWPORT NEWS VA 23606   | NONE    | 1 AVENUE OF THE ARTS      |        | SCHOLARSHIPS         | 7,500   |
| NORTHERN NECK CONNECTION<br>KILMARNOCK VA 22482           | NONE    | P. O. BOX 78              |        | EDUCATION            | 2,000   |
| JAMES MADISON UNIVERSITY<br>HARRISONBURG VA 22807         | NONE    | 170 BLUESTONE DRIVE MSC 3 |        | SCHOLARSHIPS         | 2,500   |
| LANCASTER COMMUNITY LIBRARY<br>KILMARNOCK VA 22482        | NONE    | P. O. BOX 850             |        | EDUCATION            | 5,000   |
| LANCASTER PRIMARY SCHOOL<br>LANCASTER VA 22503            | NONE    | 36 PRIMARY SCHOOL CIRCLE  |        | CHILDREN'S PROGRAMS  | 16,050  |
| NATIONAL CHILD SAFETY COUNCIL<br>LANCASTER VA 22503       | NONE    | 8293 MARY BALL ROAD       |        | CHILDREN'S PROGRAMS  | 500     |
| NORTHERN NECK FAMILY YMCA<br>KILMARNOCK VA 22482          | NONE    | P. O. BOX 1809            |        | CHILDREN'S PROGRAMS  | 18,000  |
| NORTHERN NECK FOOD BANK<br>WHITE STONE VA 22578           | NONE    | P. O. BOX 93              |        | CHILDREN'S HEALTH    | 1,000   |
| NORTHERN NECK FREE HEALTH CLINIC<br>KILMARNOCK VA 22482   | NONE    | P. O. BOX 1694            |        | HEALTH               | 50,000  |
| NORTHERN NECK MONTESSORI SCHOOL<br>KILMARNOCK VA 22482    | NONE    | P. O. BOX 1003            |        | CHILDREN'S EDUCATION | 5,000   |
| OLD DOMINION UNIVERSITY<br>NORFOLK VA 23529               | NONE    | 121 ROLLINS HALL          |        | SCHOLARSHIPS         | 7,500   |
| LYNCHBURG COLLEGE<br>LYNCHBURG VA 24501                   | NONE    | 1501 LAKESIDE DRIVE       |        | EDUCATION            | 1,000   |
| RAPPAHANNOCK GENERAL HOSPITAL FDN.<br>KILMARNOCK VA 22482 | NONE    | P. O. BOX 588             |        | HEALTH               | 100,000 |
| STEAMBOAT ERA MUSEUM<br>IRVINGTON VA 22480                | NONE    | P. O. BOX 132             |        | CHILDREN'S PROGRAMS  | 1,000   |
| THE HAVEN SHELTER & SERVICES<br>WARSAW VA 22572           | NONE    | P. O. BOX 1267            |        | CHILDREN'S SHELTER   | 5,000   |

52-1231771

**Federal Statements**

FYE: 12/31/2013

**Statement 12 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)**

| <u>Name</u>                         | <u>Address</u>          | <u>Relationship</u> | <u>Status</u>            | <u>Purpose</u>      | <u>Amount</u>  |
|-------------------------------------|-------------------------|---------------------|--------------------------|---------------------|----------------|
| LANCASTER COUNTY PUBLIC SCHOOLS     | KILMARNOCK VA 22482     | NONE                | P. O. BOX 2000           | EDUCATION           | 78,000         |
| UNIVERSITY OF MARY WASHINGTON       | FREDERICKSBURG VA 22401 | NONE                | 1301 COLLEGE AVENUE      | SCHOLARSHIPS        | 3,000          |
| NORTHERN NECK FARM MUSEUM           | HEATHSVILLE VA 22473    | NONE                | P. O. BOX 365            | CHILDREN'S PROGRAMS | 6,000          |
| MARY BALL WASHINGTON MUSEUM         | LANCASTER VA 22503      | NONE                | P. O. BOX 97             | CHILDREN'S PROGRAMS | 1,500          |
| LANCASTER/NORTHUMBERLAND HABITAT    | KILMARNOCK VA 22482     | NONE                | P. O. BOX 908            | HOUSING             | 5,000          |
| MIDDLE PENINSULA-NN CSB             | SALUDA VA 23149         | NONE                | P. O. BOX 40             | HEALTH              | 7,320          |
| KIWANIS KIDS                        | WHITE STONE VA 22578    | NONE                | 218 CLOSE QUARTERS DRIVE | CHILDREN'S PROGRAMS | 1,000          |
| KILMARNOCK-LANCASTER VOL. RESCUE SQ | KILMARNOCK VA 22482     | NONE                | P. O. BOX 333            | HEALTH              | 1,000          |
| UPPER LANCASTER VOL. RESCUE SQUAD   | LIVELY VA 22507         | NONE                | P. O. BOX 176            | HEALTH              | 1,000          |
| TOTAL                               |                         |                     |                          |                     | <u>391,120</u> |

Form **990-T**

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0687

**2013**

For calendar year 2013 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**u** See separate instructions.

**u** Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).

**u** Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

**A**  Check box if address changed

**B** Exempt under section

501(c) ( **3** )

408(e)  220(e)

408A  530(a)

529(a)

Name of organization (  Check box if name changed and see instructions.)  
**THE NETTIE L AND CHARLES L WILEY FOUNDATION**

Number, street, and room or suite no. If a P.O. box, see instructions.  
**PO BOX 126**

City or town, state or province, country, and ZIP or foreign postal code  
**IRVINGTON VA 22480**

**D** Employer identification number  
(Employees' trust, see instructions.)  
**52-1231771**

**E** Unrelated business activity codes  
(See instructions.)  
**211110 | 211110**

**C** Book value of all assets at end of year  
**6,958,132**

**F** Group exemption number (See instructions.) **u**

**G** Check organization type **u**  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Describe the organization's primary unrelated business activity.  
**u INVESTMENT IN PUBLICLY TRADED PARTNERSHIPS.**

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u**  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation.

**J** The books are in care of **u THE FOUNDATION** Telephone number **u 804-438-5656**

| Part I Unrelated Trade or Business Income   |                   | (A) Income     | (B) Expenses | (C) Net        |
|---|-------------------|----------------|--------------|----------------|
| <b>1a</b> Gross receipts or sales   |                   |                |              |                |
| <b>b</b> Less returns and allowances  |                   |                |              |                |
| <b>c</b> Balance  | <b>u</b>          |                |              |                |
| <b>2</b> Cost of goods sold (Schedule A, line 7)  |                   |                |              |                |
| <b>3</b> Gross profit. Subtract line 2 from line 1c   |                   |                |              |                |
| <b>4a</b> Capital gain net income (attach Form 8949 and Schedule D)                           |                   |                |              |                |
| <b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)                     |                   |                |              |                |
| <b>c</b> Capital loss deduction for trusts  |                   |                |              |                |
| <b>5</b> Income (loss) from partnerships and S corporations (attach statement)                | <b>SEE STMT 1</b> | <b>-24,581</b> |              | <b>-24,581</b> |
| <b>6</b> Rent income (Schedule C)   |                   |                |              |                |
| <b>7</b> Unrelated debt-financed income (Schedule E)  |                   |                |              |                |
| <b>8</b> Interest, annuities, royalties, and rents from controlled organizations (Schedule F) |                   |                |              |                |
| <b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)     |                   |                |              |                |
| <b>10</b> Exploited exempt activity income (Schedule I)                                       |                   |                |              |                |
| <b>11</b> Advertising income (Schedule J)   |                   |                |              |                |
| <b>12</b> Other income (See instructions; attach schedule.)                                   |                   |                |              |                |
| <b>13 Total.</b> Combine lines 3 through 12   |                   | <b>-24,581</b> |              | <b>-24,581</b> |

| Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) |            |            |                |
|--|------------|------------|----------------|
| <b>14</b> Compensation of officers, directors, and trustees (Schedule K)   |            | <b>14</b>  |                |
| <b>15</b> Salaries and wages   |            | <b>15</b>  |                |
| <b>16</b> Repairs and maintenance  |            | <b>16</b>  |                |
| <b>17</b> Bad debts  |            | <b>17</b>  |                |
| <b>18</b> Interest (attach schedule)   |            | <b>18</b>  |                |
| <b>19</b> Taxes and licenses   |            | <b>19</b>  |                |
| <b>20</b> Charitable contributions (See instructions for limitation rules.)  |            | <b>20</b>  |                |
| <b>21</b> Depreciation (attach Form 4562)  | <b>21</b>  |            |                |
| <b>22</b> Less depreciation claimed on Schedule A and elsewhere on return  | <b>22a</b> | <b>22b</b> | <b>0</b>       |
| <b>23</b> Depletion  |            | <b>23</b>  |                |
| <b>24</b> Contributions to deferred compensation plans   |            | <b>24</b>  |                |
| <b>25</b> Employee benefit programs  |            | <b>25</b>  |                |
| <b>26</b> Excess exempt expenses (Schedule I)  |            | <b>26</b>  |                |
| <b>27</b> Excess readership costs (Schedule J)   |            | <b>27</b>  |                |
| <b>28</b> Other deductions (attach schedule)   |            | <b>28</b>  |                |
| <b>29 Total deductions.</b> Add lines 14 through 28  |            | <b>29</b>  |                |
| <b>30</b> Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13   |            | <b>30</b>  | <b>-24,581</b> |
| <b>31</b> Net operating loss deduction (limited to the amount on line 30)  |            | <b>31</b>  |                |
| <b>32</b> Unrelated business taxable income before specific deduction. Subtract line 31 from line 30   |            | <b>32</b>  | <b>-24,581</b> |
| <b>33</b> Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)   |            | <b>33</b>  | <b>1,000</b>   |
| <b>34 Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32   |            | <b>34</b>  | <b>-24,581</b> |

Part III Tax Computation

Table with 3 columns: Description, Amount, and Line Number. Rows include Organizations Taxable as Corporations (35), Trusts Taxable at Trust Rates (36), Proxy tax (37), Alternative minimum tax (38), and Total (39).

Part IV Tax and Payments

Table with 3 columns: Description, Amount, and Line Number. Rows include Foreign tax credit (40a-40e), Total credits (40e), Subtract line 40e (41), Other taxes (42), Total tax (43), Payments (44a-44g), Total payments (45), Estimated tax penalty (46), Tax due (47), Overpayment (48), and Refunded (49).

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Questions include interest in foreign country (1), foreign trust (2), and tax-exempt interest (3).

Schedule A - Cost of Goods Sold. Enter method of inventory valuation u

Table with 3 columns: Description, Amount, and Line Number. Rows include Inventory at beginning/end of year (1, 6), Purchases (2), Cost of labor (3), Additional sec. 263A costs (4a, 4b), Cost of goods sold (7), and Do the rules of section 263A apply (8).

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.

Sign Here u Signature of officer: C DWIGHT CLARKE, Date: 05/09/14, Title: u PRESIDENT

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only: Print/Type preparer's name: C DWIGHT CLARKE, Preparer's signature: C DWIGHT CLARKE, Date: 05/09/14, Check self-employed: [ ], PTIN: P00188399, Firm's name: DEHNERT, CLARKE & CO., P.C., Firm's EIN: 20-1212674, Firm's address: P.O. BOX 420, IRVINGTON, VA 22480, Phone no.: 804-438-5656

**Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

|                |
|----------------|
| (1) <b>N/A</b> |
| (2)            |
| (3)            |
| (4)            |

2. Rent received or accrued

| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
|---|---|---|
| (1)   |   |   |
| (2)   |   |   |
| (3)   |   |   |
| (4)   |   |   |

|              |              |   |
|--------------|--------------|---|
| <b>Total</b> | <b>Total</b> | (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) <b>u</b> |
|--------------|--------------|---|

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **u**

**Schedule E – Unrelated Debt-Financed Income (see instructions)**

| 1. Description of debt-financed property | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property |  |
|--|---|--|--|
|  |   | (a) Straight line depreciation (attach schedule)                             | (b) Other deductions (attach schedule) |
| (1) <b>N/A</b>                           |   |  |  |
| (2)                                      |   |  |  |
| (3)                                      |   |  |  |
| (4)                                      |   |  |  |

| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
|---|---|---------------------------------|--|---|
| (1)   |   | %                               |  |   |
| (2)   |   | %                               |  |   |
| (3)   |   | %                               |  |   |
| (4)   |   | %                               |  |   |

|               |          |   |   |
|---------------|----------|---|---|
| <b>Totals</b> | <b>u</b> | Enter here and on page 1, Part I, line 7, column (A). | Enter here and on page 1, Part I, line 7, column (B). |
|---------------|----------|---|---|

Total dividends-received deductions included in column 8 **u**

**Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)**

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations                   |                                     |   |  |
|------------------------------------|-----------------------------------|---|-------------------------------------|---|--|
|                                    |                                   | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross inc. | 6. Deductions directly connected with income in column 5 |
| (1) <b>N/A</b>                     |                                   |   |                                     |   |  |
| (2)                                |                                   |   |                                     |   |  |
| (3)                                |                                   |   |                                     |   |  |
| (4)                                |                                   |   |                                     |   |  |

Nonexempt Controlled Organizations

| 7. Taxable Income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
|-------------------|---|-------------------------------------|--|--|
| (1)               |   |                                     |  |  |
| (2)               |   |                                     |  |  |
| (3)               |   |                                     |  |  |
| (4)               |   |                                     |  |  |

|               |          |   |   |
|---------------|----------|---|---|
| <b>Totals</b> | <b>u</b> | Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). | Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). |
|---------------|----------|---|---|

**Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

| 1. Description of income | 2. Amount of income                                   | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col. 3 plus col.4) |
|--------------------------|---|--|---------------------------------|--|
| (1) <b>N/A</b>           |   |  |                                 |  |
| (2)                      |   |  |                                 |  |
| (3)                      |   |  |                                 |  |
| (4)                      |   |  |                                 |  |
| <b>Totals</b> .....      | Enter here and on page 1, Part I, line 9, column (A). |  |                                 | Enter here and on page 1, Part I, line 9, column (B).  |

**Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). |
|--------------------------------------|---|---|--|---|--------------------------------------|--|
| (1) <b>N/A</b>                       |   |   |  |   |                                      |  |
| (2)                                  |   |   |  |   |                                      |  |
| (3)                                  |   |   |  |   |                                      |  |
| (4)                                  |   |   |  |   |                                      |  |
| <b>Totals</b> .....                  | Enter here and on page 1, Part I, line 10, col. (A).      | Enter here and on page 1, Part I, line 10, col. (B).                        |  |   |                                      | Enter here and on page 1, Part II, line 26.                                      |

**Schedule J – Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

| 1. Name of periodical                         | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|---|-----------------------------|-----------------------------|--|-----------------------|---------------------|---|
| (1) <b>N/A</b>                                |                             |                             |  |                       |                     |   |
| (2)   |                             |                             |  |                       |                     |   |
| (3)   |                             |                             |  |                       |                     |   |
| (4)   |                             |                             |  |                       |                     |   |
| <b>Totals</b> (carry to Part II, line (5)) .. |                             |                             |  |                       |                     |   |

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

| 1. Name of periodical                    | 2. Gross advertising income                          | 3. Direct advertising costs                          | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|--|--|--|--|-----------------------|---------------------|---|
| (1) <b>N/A</b>                           |  |  |  |                       |                     |   |
| (2)                                      |  |  |  |                       |                     |   |
| (3)                                      |  |  |  |                       |                     |   |
| (4)                                      |  |  |  |                       |                     |   |
| <b>Totals from Part I</b>                |  |  |  |                       |                     |   |
| <b>Totals, Part II</b> (lines 1-5) ..... | Enter here and on page 1, Part I, line 11, col. (A). | Enter here and on page 1, Part I, line 11, col. (B). |  |                       |                     | Enter here and on page 1, Part II, line 27.                                       |

**Schedule K – Compensation of Officers, Directors, and Trustees** (see instructions)

| 1. Name        | 2. Title | 3. Percent of time devoted to business | 4. Compensation attributable to unrelated business |
|----------------|----------|--|--|
| (1) <b>N/A</b> |          | %                                      |  |
| (2)            |          | %                                      |  |
| (3)            |          | %                                      |  |
| (4)            |          | %                                      |  |

**Total.** Enter here and on page 1, Part II, line 14 .....

**Federal Statements****Statement 1 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps**

| <u>Name of Partnership or S-Corp</u> | <u>Gross<br/>Income</u> | <u>Direct<br/>Deductions (Part. only)</u> | <u>Net<br/>Income</u> |
|--------------------------------------|-------------------------|---|-----------------------|
| BUCKEYE PARTNERSHIP                  | \$ -3,034               | \$  | \$ -3,034             |
| ENBRIDGE PARTNERSHIP                 | -20,216                 |   | -20,216               |
| PLAINS ALL AMERICAN PSP              | -1,331                  |   | -1,331                |
| TOTAL                                | <u>\$ -24,581</u>       | <u>\$ 0</u>                               | <u>\$ -24,581</u>     |