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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| For | calend | aar year 2014 or tax year beginning , a | and ending | | | | |
|--------------------|---|---|-----------------------|-----------------|----------------|---------------------------------|----------------------------|
| | me of for | undation NETTIE L AND CHARLES L WILEY | | | A Emplo | yer identification number | |
| | | DATION | **- | -***1771 | | | |
| | Number and street (or P.O. box number if mail is not delivered to street address) Room/suite | | | | | one number (see instructions |) |
| F | ОВ | OX 126 | | | | | |
| Cit | y or town | n, state or province, country, and ZIP or foreign postal code | | | C If over | nption application is pending, | chack hara |
| I | RVI | NGTON VA 22480 | | | - II exer | inplion application is pending, | ,, |
| G | Check a | all that apply: Initial return Initial retur | rn of a former public | charity | D 1. Fo | reign organizations, check her | e " |
| | | Final return Amended | return | | 2. Fo | reign organizations meeting th | ie |
| | | Address change Name cha | ange | | 859 | % test, check here and attach | computation " |
| Н | Check | type of organization: X Section 501(c)(3) exempt private | e foundation | | E If priva | ite foundation status was term | inated under |
| | | | le private foundation | | section | 507(b)(1)(A), check here | " L |
| IF | air mar | rket value of all assets at J Accounting method: | X Cash A | ccrual | F If the f | oundation is in a 60-month ter | mination |
| е | nd of y | rear (from Part II, col. (c), Other (specify) | | | under | section 507(b)(1)(B), check he | ere " |
| | - | u \$ 9,857,710 (Part I, column (d) must | be on cash basis.) | | | | |
| P | art I | Analysis of Revenue and Expenses (The total of | (a) Revenue and | (h) Not in | | (a) Adjusted not | (d) Disbursements |
| | | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | expenses per books | (b) Net in inco | | (c) Adjusted net income | for charitable purposes |
| _ | Τ. | | | 6 | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | 79,75 | 0 | | | |
| | 2 | Check u if the foundation is not required to attach Sch. B | 62.61 | 7 | 62 610 | 62 610 | |
| | 3 | Interest on savings and temporary cash investments | 63,61 | _ | 63,617 | 63,617 | |
| | 4 | Dividends and interest from securities | 228,44 | 2 | 28,447 | 228,447 | |
| | 5a | Gross rents | | | | | |
| <u>9</u> | b | Net rental income or (loss) | 600.70 | | | | |
| Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | 692,78 | 3 | | | |
| ě | _b | Gross sales price for all assets on line 6a 2,287,768 | | | 02 702 | | |
| œ | 1 | Capital gain net income (from Part IV, line 2) | | - 6 | 92,783 | 24 470 | |
| | 8 | Net short-term capital gain | | | | 24,470 | |
| | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less: Cost of goods sold | | | | | |
| | C | Gross profit or (loss) (attach schedule) | -3,47 | 2 | | -3,472 | |
| | 11 12 | Other income (attach schedule) STMT 1 | 1,061,13 | | 84,847 | 313,062 | |
| | 13 | Total. Add lines 1 through 11 | 26,60 | | 7,980 | 313,002 | 18,620 |
| benses | 14 | Other employee salaries and wages | 20,00 | <u> </u> | 7,700 | | 10,020 |
| Su | 15 | Pension plans amployee hanefits | | | | | |
| g | 16a | Legal fees (attach schedule) SEE STMT 2 | 10 | 15 | 105 | | |
| ш | b | Accounting fees (attach schedule) STMT 3 | 3,02 | | 1,514 | | 1,514 |
| Ve. | C | Other professional fees (attach schedule) | | | | | |
| ati | 17 | Interest | 6 | 54 | 64 | | |
| <u>st</u> | 18 | Taxes (attach schedule) (see instructions) STMT 4 | 10,34 | 4 | 5,886 | | |
| Ë | 19 | Depreciation (attach schedule) and depletion STMT 5 | 12 | | - | | |
| and Administrative | 20 | Occupancy | 1,80 | | | | 1,800 |
| ⋖ | 21 | Travel, conferences, and meetings | _ | | | | |
| ī | 22 | Printing and publications | | | | | |
| | 23 | Other expenses (att. sch.) STMT 6 | 14,47 | 2 | | 5,222 | 9,250 |
| Operating | 24 | Total operating and administrative expenses. | | | | | |
| ī | | Add lines 13 through 23 | 56,54 | 0 | 15,549 | 5,222 | 31,184 |
| ğ | 25 | Contributions, gifts, grants paid | 409,66 | 2 | | | 409,662 |
| _ | 26 | Total expenses and disbursements. Add lines 24 and 25 | 466,20 | | 15,549 | 5,222 | 440,846 |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | а | Excess of revenue over expenses and disbursements | 594,92 | 9 | | | |
| | b | Net investment income (if negative, enter -0-) | | 9 | 69,298 | | |
| | С | Adjusted net income (if negative, enter -0-) | | | | 307,840 | |

| | Part I | Balance Sheets Attached schedules and amounts in the description column should be for end-of-wear amounts only. (See instructions.) | Beginning of year | End of | f year | | | |
|-----------------------------|---------|---|---|----------------|-----------------------|--|--|--|
| | Part I | should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | |
| | 1 | Cash – non-interest-bearing | 52,278 | 5,990 | 5,990 | | | |
| | 2 | Savings and temporary cash investments | 513,129 | 517,988 | 517,988 | | | |
| | 3 | Accounts receivable u | | | | | | |
| | | Less: allowance for doubtful accounts ${f u}$ | | | | | | |
| | 4 | Pledges receivable u | | | | | | |
| | | Less: allowance for doubtful accounts ${f u}$ | | | | | | |
| | 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) ${f u}$ | | | | | | |
| | | Less: allowance for doubtful accounts ${\bf u}$ 0 | | | | | | |
| ţ | 8 | Inventories for sale or use | | | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | | | |
| ĕ | 10a | Investments - U.S. and state government obligations (attach schedule) | | | | | | |
| | b | Investments – corporate stock (attach schedule) SEE STMT 7 | 4,462,272 | 4,643,720 | 6,835,151 | | | |
| | С | Investments – corporate bonds (attach schedule) SEE STMT 8 | 1,638,569 | 1,935,121 | 1,951,537 | | | |
| | 11 | Investments – land, buildings, and equipment: basis ${f u}$ | | | | | | |
| | | Less: accumulated depreciation (attach sch.) u | | | | | | |
| | 12 | Investments – mortgage loans | | | | | | |
| | 13 | Investments – other (attach schedule) | | | | | | |
| | 14 | Land, buildings, and equipment: basis u 141,664 Less: accumulated depreciation (attach sch.) u STMT 9 12,043 | | | | | | |
| | | Less: accumulated depreciation (attach sch.) u STMT 9 12,043 | 128,476 | 129,621 | 129,621 | | | |
| | 15 | Other assets (describe ${\bf u}$ SEE STATEMENT 10) | 163,408 | 320,621 | 417,423 | | | |
| | 16 | Total assets (to be completed by all filers – see the | | | | | | |
| _ | | instructions. Also, see page 1, item I) | 6,958,132 | 7,553,061 | 9,857,710 | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | |
| " | 18 | Grants payable | | | | | | |
| ţį | 19 | Deferred revenue | | | | | | |
| ≣ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | | | | |
| | 22 | Other liabilities (describe u) | 0 | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0 | <u>\</u> | | | | |
| " | | Foundations that follow SFAS 117, check here u X and complete lines 24 through 26 and lines 30 and 31. | | | | | | |
| ĕ | | | 6 050 122 | 7 552 061 | | | | |
| <u>a</u> | 24 | Unrestricted | 6,958,132 | 7,553,061 | | | | |
| Net Assets or Fund Balances | 25 | Temporarily restricted | | | | | | |
| Б | 26 | Permanently restricted Foundations that do not follow SFAS 117, check here u | | | | | | |
| 교 | | Foundations that do not follow SFAS 117, check here u and complete lines 27 through 31. | | | | | | |
| ō | 27 | Capital stock, trust principal, or current funds | | | | | | |
| şţs | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | | | |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | | |
| + | 30 | 4 000 400 - 000 000 | | | | | | |
| ž | 31 | Total liabilities and net assets/fund balances (see | 7,7557,252 | .,, | | | | |
| | •• | instructions) | 6,958,132 | 7,553,061 | | | | |
| | Part I | , | , | , , | | | | |
| | | net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu | st agree with | | | | | |
| | | f-year figure reported on prior year's return) | | 1 | 6,958,132 | | | |
| 2 | 2 Enter | amount from Part I, line 27a | | | 594,929 | | | |
| | | increases not included in line 2 (itemize) u | | 3 | | | | |
| 4 | Add I | ines 1, 2, and 3 | | 4 | 7,553,061 | | | |
| 5 | Decre | eases not included in line 2 (itemize) u | | 5 | | | | |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (I | b), line 30 | 6 | 7,553,061 | | | |

| (a) List and desc | nd Losses for Tax on Investment of the kind(s) of property sold (e.g., real estate, arehouse; or common stock, 200 shs. MLC Co.) | | | (b) How acquired P – Purchase | | ate acquired ., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|--|----------------|---------------------------|-------------------------------|-----------|------------------------------|--|
| 1a SEE WORKSHEET | · · · · · · · · · · · · · · · · · · · | | | D – Donation | ` | , | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| е | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | g) Cost or o | | | | n or (loss) f) minus (g) |
| а | | | | | | | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| Complete cally for coasts abouting | | farmalation on | 40/04/0 | | | | |
| Complete only for assets snowin | g gain in column (h) and owned by the | | | | | | . (h) gain minus less than -0-) or |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | (k) Excess over col. (| ** | | | om col. (h)) |
| | 00 01 120 1100 | | | 3,7, | | | |
| b | | | | | | | |
| C | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| 2 Capital gain net income or (net o | capital loss) If gain, also enter in If (loss), enter -0- in | | IS. | | 2 | | 692,783 |
| 3 Net short-term capital gain or (lo | ss) as defined in sections 1222(5) and | | _ | | | | - |
| If gain, also enter in Part I, line 8 | B, column (c) (see instructions). If (loss), | enter -0- in | ٦, | | | | |
| Part I, line 8 | | | _} | | 3 | | 24,470 |
| Part V Qualification Un | nder Section 4940(e) for Redu | ced Tax or | n Net I | nvestment Inco | ome | | |
| For optional use by domestic private | e foundations subject to the section 494 | 0(a) tax on ne | et investr | ment income.) | | | |
| f section 4940(d)(2) applies, leave the | his part blank. | | | | | | |
| .,,,, | · | | المالمالة ما | | | | □ vaa 🔽 Na |
| | tion 4942 tax on the distributable amou alify under section 4940(e). Do not comp | , , | | ase period? | | | Yes X No |
| <u>'</u> | | · · | | a any entrice | | | |
| 1 Enter the appropriate amount in (a) | each column for each year; see the ins | uctions betol | re makin | · · · | Т | | (d) |
| Base period years | (b) Adjusted qualifying distribution | ns | Net value | (c) of noncharitable-use asse | ts | | tribution ratio |
| Calendar year (or tax year beginning in 2013 | 7 | 281 | THOU PAILUO | 9,014, | | (COI. (D) | 0.046511 |
| 2013 | | 7,201 | | 8,309, | 909 | | 0.046560 |
| 2012 | | 2,240 | | 8,226, | 490 | | 0.047680 |
| 2010 | 394 | ,035 | | 8,110, | 567 | | 0.048583 |
| 2009 | | ,212 | | 7,755, | | | 0.056115 |
| 2000 | | , | | .,, | | | |
| 2 Total of line 1, column (d) | | | | | | 2 | 0.245449 |
| | 5-year base period – divide the total on | line 2 bv 5. o | r by the | | ····· | - | |
| | has been in existence if less than 5 year | | | | | 3 | 0.049090 |
| , | , | | | | ····· | | |
| 4 Enter the net value of noncharita | able-use assets for 2014 from Part X, lin | e 5 | | | | 4 | 9,636,346 |
| | | | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | 5 | 473,048 |
| | | | | | ····· [| | |
| 6 Enter 1% of net investment incor | me (1% of Part I, line 27b) | | | | | 6 | 9,693 |
| | | | | | ···· | | |
| 7 Add lines 5 and 6 | | | | | L | 7 | 482,741 |
| | | | | | | | |
| | | | | | I | | |
| 8 Enter qualifying distributions from | n Part XII, line 4 | | | | L | 8 | 440,846 |
| 8 Enter qualifying distributions from If line 8 is equal to or greater that | n Part XII, line 4 | b, and comple | ete that p | eart using a 1% tax | rate. See | • | 440,846 |

| **-***17' | 71 | |
|-----------|----|--|
|-----------|----|--|

| Form | 990-PF (2014) THE NETTIE L AND CHARLES L WILEY **-***1771 | | Р | age 4 | | | |
|------|--|----|-----|--------------|--|--|--|
| Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions) | | | | | | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here u and enter "N/A" on line 1. | | | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) | | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 19, | <u> 386</u> | | | |
| | here u and enter 1% of Part I, line 27b | | | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of | | | | | | |
| | Part I, line 12, col. (b). | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0 | | | |
| 3 | Add lines 1 and 2 | | 19, | 386 | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0 | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 | | 19, | 386 | | | |
| 6 | Credits/Payments: | | | | | | |
| а | 2014 estimated tax payments and 2013 overpayment credited to 2014 | | | | | | |
| b | Exempt foreign organizations – tax withheld at source 6b | | | | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c 6c | | | | | | |
| d | Backup withholding erroneously withheld 6d 6d | | | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | 5,3 | 100 | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed u 9 | | 14, | 286 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid u 10 | | | | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax u Refunded u 11 | | | | | | |
| Pa | rt VII-A Statements Regarding Activities | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No | | | |
| | participate or intervene in any political campaign? | 1a | | X | | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | | | | |
| | Instructions for the definition)? | 1b | | X | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | | | |
| С | Billio A. A. C. C. E. Atto Bol A. di | | | | | | |
| d | | | | | | | |
| | (1) On the foundation. u \$ (2) On foundation managers. u \$ | | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | | |
| | on foundation managers. u \$ | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | Х | | | |
| | If "Yes," attach a detailed description of the activities. | | | | | | |
| 3 | | | | | | | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | | | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X | | | |
| b | | | | | | | |
| 5 | b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | | | |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | | | |
| | By language in the governing instrument, or | | | | | | |
| | • 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? | 6 | X | | | | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | 7 | Х | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ${f u}$ | | | | | | |
| | NONE | | | | | | |
| 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 N/A | 8b | | | | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | | | | |
| | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | _ | | | |
| | complete Part XIV | 9 | | X | | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | | | | |
| | names and addresses | 10 | | X | | | |

6e. Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years ${f u}$ 20 \dots , 20 \dots , 20 \dots , 20 \dots Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.) N/A2b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. **u** 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

Yes at any time during the year? If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the 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 2014.)

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that

Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private

At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and

operating foundation defined in section 4942(j)(3) or 4942(j)(5)):

were not corrected before the first day of the tax year beginning in 2014?

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Х

3b

N/A

X No

1c

2

| Pa | art VII-B Statements Regarding Activities for Which Form 4 | 720 May Be F | Required (con | tinued) | | | |
|------------|---|---------------------------------------|-----------------------------|---------------------------------------|------------|---------------|--|
| 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))? | | | | | | |
| | (2) Influence the outcome of any specific public election (see section 4955); or to | | _ | _ | | | |
| | directly or indirectly, any voter registration drive? | | | Yes X No | | | |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes? | | | Yes X No | | | |
| | (4) Provide a grant to an organization other than a charitable, etc., organization | described in | _ | _ | | | |
| | section 4945(d)(4)(A)? (see instructions) | | | Yes X No | | | |
| | (5) Provide for any purpose other than religious, charitable, scientific, literary, or | | | | | | |
| | purposes, or for the prevention of cruelty to children or animals? | | | Yes X No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under | | | _ | | | |
| | 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 he | | | | | | |
| С | If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro | | | _ | | | |
| | 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 pa | y premiums | | | | | |
| | on a personal benefit contract? | | | Yes X No | | | |
| b | Did the foundation, during the year, pay premiums, directly or indirectly, on a per | sonal benefit conti | ract? | | 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 sh | elter transaction? | | Yes X No | | | |
| | If "Yes," did the foundation receive any proceeds or have any net income attribut | | | | 7b | | |
| Pa | art VIII Information About Officers, Directors, Trustees, Fo | undation Mana | agers, Highly | Paid Employ | ees, | | |
| | and Contractors | | | | | | |
| <u>1</u> I | ist all officers, directors, trustees, foundation managers and their compens | ation (see instruc | tions). | | | | |
| | | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit | (a) Evn | ense account, | |
| | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | plans and deferred | | allowances | |
| | | devoted to position | critici 0) | compensation | | | |
| SI | E STATEMENT 11 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 | Compensation of five highest-paid employees (other than those included or | n line 1 – see ins | tructions). If nor | ne, enter | | | |
| | "NONE." | <u> </u> | T | | | | |
| | | (b) Title, and average | | (d) Contributions to employee benefit | (e) Fxn | ense account, | |
| | (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred | , , , | allowances | |
| | | develor to position | | compensation | | | |
| NC | NE | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| Tota | I number of other employees paid over \$50,000 | | | | . - | 0 | |

Form **990-PF** (2014)

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

Amount

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Form **990-PF** (2014)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 8,789,647 1a а Average of monthly cash balances 1b 544,692 Fair market value of all other assets (see instructions) 448,753 С 1c 9,783,092 Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) <u>1e</u> Acquisition indebtedness applicable to line 1 assets 2 2 Subtract line 2 from line 1d 9,783,092 3 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see 146,746 9,636,346 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 5 Minimum investment return. Enter 5% of line 5 481,817 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here **u** | and do not complete this part.) 481,817 Minimum investment return from Part X, line 6 Tax on investment income for 2014 from Part VI, line 5 19,386 2a 2a Income tax for 2014. (This does not include the tax from Part VI.) 2b 19,386 Add lines 2a and 2b 2c С Distributable amount before adjustments. Subtract line 2c from line 1 462,431 3 3 Recoveries of amounts treated as qualifying distributions 4 4 462,431 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 7 462,431 line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 440,846 Program-related investments – total from Part IX-B b 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 440,846 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4 440,846 6

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.

Form **990-PF** (2014)

| orm | 990-PF (2014) THE NETTIE L AND CHARLE | S L WILEY | **-***1771 | | Page 9 |
|--------|---|-----------|---------------------|---------|---------------|
| Pa | art XIII Undistributed Income (see instructions) | | | | |
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2014 from Part XI, | Corpus | Years prior to 2013 | 2013 | 2014 |
| | line 7 | | | | 462,431 |
| 2 | Undistributed income, if any, as of the end of 2014: | | | | |
| а | Enter amount for 2013 only | | | 432,141 | |
| b | Total for prior years: 20 , 20 , 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | | |
| | From 2009 | | | | |
| | From 2010 | | | | |
| | From 2011 | | | | |
| | From 2012 | | | | |
| | From 2013 | | | | |
| | Total of lines 3a through e | | | | |
| 4 | Qualifying distributions for 2014 from Part XII, | | | | |
| _ | line 4: u \$ 440,846 | | | 432,141 | |
| | Applied to 2013, but not more than line 2a | | | 432,141 | |
| b | Applied to undistributed income of prior years (Election required – see instructions) | | | | |
| | Treated as distributions out of corpus (Election | | | | |
| · | required and instructions) | | | | |
| ч | Applied to 2014 distributable amount | | | | 8,705 |
| | Remaining amount distributed out of corpus | | | | 37733 |
| 5 | Excess distributions carryover applied to 2014 | | | | |
| - | (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a).) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | | | |
| | Prior years' undistributed income. Subtract | | | | |
| | line 4b from line 2b | | | | |
| С | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b. Taxable | | | | |
| | amount – see instructions | | | | |
| е | Undistributed income for 2013. Subtract line | | | | |
| | 4a from line 2a. Taxable amount – see | | | | |
| | instructions | | | | |
| f | Undistributed income for 2014. Subtract lines | | | | |
| | 4d and 5 from line 1. This amount must be | | | | 452 506 |
| _ | distributed in 2015 | | | | 453,726 |
| 7 | Amounts treated as distributions out of corpus | | | | |
| | to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| _ | required—see instructions) | | | | |
| 8 | Excess distributions carryover from 2009 not | | | | |
| 9 | applied on line 5 or line 7 (see instructions) | | | | |
| 9 | Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a | | | | |
| 0 | Analysis of line 9: | | | | |
| а | Excess from 2010 | | | | |
| a b | | | | | |
| C | Excess from 2011 Excess from 2012 | | | | |
| d | Excess from 2013 | | | | |
| u | Excess from 2014 | | | | |

| Pa | art XIV Private Operating Fo | undations (see in | structions and Par | t VII-A, guestion 9 |)) | . ago . c |
|----|--|--------------------------|---------------------------|----------------------------|---------------------|------------------|
| 1a | | | | | | |
| | foundation, and the ruling is effective for | | | u | | |
| b | Check box to indicate whether the found | | | | 942(j)(3) or 4942 | 2(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| | income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| | investment return from Part X for | (*) | (1) | (1) | (-,- | |
| | each year listed | | | | | |
| h | 95% of line 2a | | | | | |
| b | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly | | | | | |
| | for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities. | | | | | |
| | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon: | | | | | |
| а | "Assets" alternative test – enter: | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under | | | | | |
| | section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test - enter 2/3 | | | | | |
| | of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test - enter: | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on | | | | | |
| | securities loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public and 5 or more exempt | | | | | |
| | organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from | | | | | |
| | an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Pa | art XV Supplementary Inform | ation (Complete | this part only if | the foundation ha | ad \$5,000 or more | in assets at |
| | any time during the y | ear – see instruc | tions.) | | | |
| 1 | Information Regarding Foundation Ma | anagers: | | | | |
| а | List any managers of the foundation who | have contributed mor | e than 2% of the total | contributions received | by the foundation | |
| | before the close of any tax year (but only | if they have contribut | ed more than \$5,000). | (See section 507(d)(2 |).) | |
| | N/A | | | | | |
| b | List any managers of the foundation who | own 10% or more of | the stock of a corporat | ion (or an equally large | e portion of the | |
| | ownership of a partnership or other entity |) of which the foundat | ion has a 10% or grea | ater interest. | | |
| | N/A | | | | | |
| 2 | Information Regarding Contribution, C | Grant, Gift, Loan, Sch | nolarship, etc., Progr | ams: | | |
| | Check here u if the foundation only | makes contributions | to preselected charital | ole organizations and o | loes not accept | |
| | unsolicited requests for funds. If the four | dation makes gifts, gr | ants, etc. (see instruct | ions) to individuals or | organizations under | |
| | other conditions, complete items 2a, b, c | , and d. | | | | |
| а | The name, address, and telephone number | per or e-mail address of | of the person to whom | applications should be | e addressed: | |
| | THE FOUNDATION 804- | | | | | |
| | PO BOX 126 IRVINGTON | I VA 22480 | | | | |
| b | The form in which applications should be | submitted and inform | nation and materials the | ey should include: | | |
| | SEE WEBSITE | | | | | |
| С | Any submission deadlines: | | | | | |
| | SEE WEBSITE | | | | ., | |
| d | Any restrictions or limitations on awards, | such as by geographi | ıcaı areas, charitable fi | elds, kinds of institution | ns, or other | |
| | factors: | | | | | |

SEE WEBSITE

Page **11**

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year SEE STATEMENT 12 409,650 409,650 Total u 3a **b** Approved for future payment N/A u 3b Total

| Form 990-PF (2014) THE NETTIE L AND CHARLE Part XVI-A Analysis of Income-Producing Acti | | <u> EY **-*</u> | **1771 | | Page 12 | | |
|--|----------------------|------------------------|--------------------------|--------------------------|---|--|--|
| Enter gross amounts unless otherwise indicated. | | | Excluded by | section 512, 513, or 514 | | | |
| 1 Program service revenue: | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions.) | | |
| a b c d e | | | | | | | |
| f g Fees and contracts from government agencies Membership dues and assessments | | | | | | | |
| Interest on savings and temporary cash investments Dividends and interest from securities | | | 14 | 63,617 228,447 | | | |
| Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property | | | | | | | |
| 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 692,783 | | | |
| 9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory | | | | | | | |
| b BUCKEYE PARTNERSHIP c ENBRIDGE PARTNERSHIP | 211110 211110 | -3,002 11,577 | | | | | |
| d PLAINS ALL AMERICAN PSP | 211110 | -12,047 | | | | | |
| | | -3,472 | | 984,847 | 981,375 | | |
| Part XVI-B Relationship of Activities to the Activities No. Explain below how each activity for which income is accomplishment of the foundation's exempt purposed in the image is accomplishment of the foundation of the fou | is reported in co | olumn (e) of Part XVI- | A contribute | | ons.) | | |
| | | | | | | | |

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

| | | Exempt Organiza | ations | | | | | | | |
|--------------|-------------|---|-----------------|--------------------------|---------------------|---|---|---------------|-------------|-----------|
| 1 Dic | d the orga | anization directly or indi | rectly engag | ge in any of the foll | owing with any | other organization described | | Y | es N | No |
| in | section 50 | 01(c) of the Code (other | er than section | on 501(c)(3) organi | zations) or in s | ection 527, relating to political | | | | |
| org | ganization | s? | | | | | | | | |
| a Tra | ansfers fro | om the reporting found | ation to a no | oncharitable exemp | ot organization of | of: | | | | |
| (1) | Cash | , - | | · | - | | | 1a(1) | | X |
| | | | | | | | | 1a(2) | | X |
| b Otl | her trans | actions: | | | | | | | | |
| | | f assets to a noncharita | able exempt | organization | | | | 1b(1) | | X |
| | | | | | | | | 1b(2) | - | X |
| (3) | Rental | of facilities, equipment. | or other ass | sets | | | | 1b(3) | - | X |
| (4) | Reimbu | rsement arrangements | \ . | | | | | 1b(4) | - | X |
| (5) | Loans | r loon allorontoon | | | | | | 1b(5) | - | X |
| | | ance of services or me | | | otiono | | | 1b(6) | - | X |
| ٠, | | acilities, equipment, ma | • | ŭ | d amplayage | | | 1c | - | X |
| | | | | | | ımn (b) should always show the fa | | | | _ |
| | | | | - | | f the foundation received less than | | | | |
| | | • | - | | • | f the goods, other assets, or servi | | | | |
| | ine no. | (b) Amount involved | | e of noncharitable exemp | | (d) Description of transfers, tra | | rangements | | _ |
| N/A | | | | | | | | | | _ |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 2a Is | the found | lation directly or indirec | tly affiliated | with, or related to, | one or more ta | x-exempt organizations | | _ | _ | |
| de | scribed in | section 501(c) of the | Code (other | than section 501(c |)(3)) or in section | on 527? | | Yes | X | No |
| b If " | 'Yes," cor | mplete the following scl | hedule. | | | | | | | |
| | (a | a) Name of organization | | (b) Type of o | rganization | (c) Descrip | tion of relationship | | | |
| N/. | <u> </u> | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | edules and statements, and to the best of a which preparer has any knowledge. | ny knowledge and belief, | it is true, | | _ |
| | , | , | (| ,.,., | | . , ,, , , , , , , , , , , , , , , , , | May the IRS disc | | | |
| Sign | | | | | | | with the preparer (see instructions) | | | No |
| Here | | | | | | | | | <u> </u> | |
| | _ | | | | | | IDENT | | | |
| | Signa | ature of officer or trustee | | | Date | e Title | 1 | | | _ |
| | Print/Ty | pe preparer's name | | | Preparer's signate | ıre | Date | l c | neck | if |
| Paid | | | | | | | | | elf-employ | /ed |
| Preparer | C DW | IGHT CLARKE | | | | | 05/11 | | | |
| Jse Onl | Firm's n | | | LARKE & CO |)., P.C. | | PTIN | **** | | |
| - 50 Oili | Firm's a | " | BOX 42 | | | | - " | ***26 | | |
| | | IRVIN | IGTON, | VA 22480 |) | | Phone no. 804 | <u>-438</u> - | <u>-565</u> | <u> 6</u> |
| | | | | | | | | ~~~ | | |

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

or 990-PF)
Department of the Treasury
Internal Revenue Service
u Information about

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

2014

OMB No. 1545-0047

Name of the organization

THE NETTIE L AND CHARLES L WILEY FOUNDATION

Employer identification number

FOUNDATION **-**1771
Organization type (check one):

| Filers of: | Section: |
|--|---|
| Form 990 or 990-EZ | 501(c)() (enter number) organization |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | 527 political organization |
| Form 990-PF | X 501(c)(3) exempt private foundation |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | 501(c)(3) taxable private foundation |
| | |
| | vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See |
| General Rule | |
| · | ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a libutions. |
| Special Rules | |
| regulations under section 13, 16a, or 16b, and the \$5,000 or (2) 2% of the For an organization descontributor, during the y | scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line at received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. |
| contributor, during the y contributions totaled moduring the year for an e | scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions during the year |
| 990-EZ, or 990-PF), but it must | s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, t answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). |

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

THE NETTIE L AND CHARLES L WILEY

Employer identification number **-***1771

| Part I | Contributors (see instructions). Use duplicate copies of Pa | rt I if additional space is ne | eded. |
|------------|--|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | N L WILEY IRREV TUA FBO BETTY L LOKE PO BOX 1419 KILMARNOCK VA 22482 | \$ 79,756 | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

THE NETTIE L AND CHARLES L WILEY

Employer identification number **-*** 1771

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| 1 | ISHARES BARLAYS TRES FUND | | |
| | • | \$ 12,587 | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | ISHARES TR BARCLAYS FUND | | |
| | | \$ 51,065 | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | ISHARES TRUST BARCLAYS | \$ 7,861 | 12/31/14 |
| (a) Na | | | · |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | ISHARES TR RUSSELL 3000 INDX FD | | |
| | | \$ 8,243 | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | 6 | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

-*1771

Federal Statements

FYE: 12/31/2014

| Description | Revenue per Books | Net Investment Income | Α | Adjusted Net Income | |
|--|--------------------------------|--------------------------|----|-----------------------------|--|
| BUCKEYE PARTNERSHIP ENBRIDGE PARTNERSHIP PLAINS ALL AMERICAN PSP | \$ -3,002 11,577 -12,047 | | \$ | -3,002 11,577 -12,047 | |
| TOTAL | \$ | 2 \$ 0 | \$ | -3,472 | |

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

| Description | Total | _ Inve | Net estment | justed Net | aritable ırpose |
|-------------|-----------|--------|----------------|---------------|--------------------|
| LEGAL FEES | \$ 105 | \$ | 105 | \$ | \$ |
| TOTAL | \$ 105 | \$ | 105 | \$ 0 | \$ 0 |

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

| Description | Total | _ Inv | Net vestment | , | usted Net | haritable Purpose |
|-------------|-------------|-------|-----------------|----|--------------|----------------------|
| ACCOUNTING | \$ 3,028 | \$ | 1,514 | \$ | | \$ 1,514 |
| TOTAL | \$ 3,028 | \$ | 1,514 | \$ | 0 | \$ 1,514 |

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

| Description | Total | _Inv | Net /estment | Adjuste Net | d | Charitable Purpose | _ |
|---|-------------------------------|------|-----------------|----------------|-------|-----------------------|---|
| REAL ESTATE TAXES FOREIGN DIVIDEND TAX INCOME TAX | \$ 2,185 3,701 4,458 | \$ | 2,185 3,701 | \$ | | \$ | |
| TOTAL | \$ 10,344 | \$ | 5,886 | \$ | 0 | \$ 0 | _ |

-*1771

Federal Statements

FYE: 12/31/2014

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 | | | |
| LAPTOP | | | | | | | |
| 7/08/14 | 1,273 | | S/L | 5 | 127 | | |
| TOTAL \$ | 13,188 | \$ 11,915 | | | \$ 127 | \$ 0 | \$ 0 |

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

| Description | Total | let stment | djusted Net | haritable Purpose |
|-------------------------|--------------|---------------|--------------------|----------------------|
| | \$ | \$ | \$ | \$ |
| EXPENSES | | | | |
| DUES | 1,000 | | | 1,000 |
| FIDUCIARY FEES | 10,443 | | 5,222 | 5,221 |
| POSTAGE | 60 | | | 60 |
| OFFICE | 1,138 | | | 1,138 |
| WEB SITE EXPENSE | 967 | | | 967 |
| NON DEDUCTABLE EXPENSES | 114 | | | 114 |
| CONVENTION EXPENSES | 750 | | | 750 |
| TOTAL | \$ 14,472 | \$ 0 | \$ 5,222 | \$ 9,250 |

5/11/2015 9:34 AM

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FYE: 12/31/2014

Federal Statements

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

| Description | Beginning of Year | End of Year | Basis of Valuation | Fair Market Value |
|----------------------------|----------------------|----------------|-----------------------|----------------------|
| CORPORATE STOCK & EQUITIES | \$ 4,462,272 | \$ 4,643,720 | COST | \$ 6,835,151 |
| TOTAL | \$ 4,462,272 | \$ 4,643,720 | | \$ 6,835,151 |

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

| Description | Beginning of Year | End of Year | Basis of Valuation | Fair Market Value |
|-----------------|-------------------|----------------|-----------------------|----------------------|
| CORPORATE BONDS | \$ 1,638,569 | \$ 1,935,121 | COST | \$ 1,951,537 |
| TOTAL | \$ 1,638,569 | \$ 1,935,121 | | \$ 1,951,537 |

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

| Description | Beginning Net Book | End Cost / Basis | End Accumulated Depreciation | Net FMV |
|-------------------------------------|-----------------------|----------------------|---------------------------------|---------------------|
| COMPUTER EQUIPMENT AND WEBSITE LAND | \$ 128,476 | \$ 13,188 128,476 | \$ 12,043 | \$ 1,145 128,476 |
| TOTAL | \$ 128,476 | \$ 141,664 | \$ 12,043 | \$ 129,621 |

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Federal Statements

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

| Description | Beginning of Year | End of Year | | Fair Market Value |
|--|------------------------|------------------------|-----|----------------------|
| ESTATE PERSONAL PROPERTY FOR SALE PUBLICLY TRADED PARTNERSHIPS | \$ 3,960 159,448 | \$ 3,960 316,661 | \$ | 3,960 413,463 |
| TOTAL | \$ 163,408 | \$ 320,621 | \$_ | 417,423 |

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Federal Statements

FYE: 12/31/2014

Statement 11 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, <u>Etc.</u>

| Name and Address | Title | Average Hours | Compensation | Benefits | Expenses |
|---|--------------|------------------|--------------|----------|----------|
| CATHARINE B MOORE PO BOX 126 IRVINGTON VA 22480 | SECRETARY | 2.00 | 5,000 | 0 | 0 |
| GLORIA C CONLEY PO BOX 126 IRVINGTON VA 22480 | VICE PRES. | 2.00 | 5,400 | 0 | 0 |
| B.H.B HUBBARD PO BOX 126 IRVINGTON VA 22480 | TREASURER | 2.00 | 5,400 | 0 | 0 |
| THOMAS GOSSE PO BOX 126 IRVINGTON VA 22480 | PRESIDENT | 2.00 | 5,400 | 0 | 0 |
| LESLIE FRANKLIN PO BOX 126 IRVINGTION VA 22480 | BOARD MEMBER | 2.00 | 5,400 | 0 | 0 |

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

SEE WEBSITE

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

Description

SEE WEBSITE

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

Description

SEE WEBSITE

Federal Statements

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

| Name | | | | | |
|--|-----------|---------------------|-----------------------------|---|---------------|
| Address | Re | lationship | Status | Purpose | Amount |
| BETHEL UNITED METHODIST CHURCH LIVELY VA 22507 MARY BALL WASHINGTON MUSEUM | NONE | P. O. BOX P. O. BOX | 501 C | PRESCHOOL | 10,000 |
| | NONE | P. O. BOX | 501 C | CHILDREN'S PROGRAMS | 2,500 |
| IRVINGTON VA 22480 CHRISTOPHER NEWPORT UNIVERSITY | NONE | 1 UNIVERSI | 501 C TY PLACE | CHILDREN'S PROGRAMS | 11,750 |
| NORTHERN NECK CONNECTION | NONE | P. O. BOX | | SCHOLARSHIPS | 2,500 |
| JAMES MADISON UNIVERSITY | NONE | WARREN HAL | 501 C L, MSC 3519 | EDUCATION | 2,000 |
| LANCASTER COMMUNITY LIBRARY | NONE | P. O. BOX | | SCHOLARSHIPS | 2,000 |
| LANCASTER PRIMARY SCHOOL | NONE | 36 PRIMARY | 501 C SCHOOL CIRCL | | 132,000 |
| NATIONAL CHILD SAFETY COUNCIL | NONE | 8293 MARY | 501 C BALL ROAD 501 C | CHILDREN'S EDUCATION | 66,000 |
| NORTHERN NECK FAMILY YMCA | NONE | P. O. BOX | | CHILDREN'S PROGRAMS CHILDREN'S PROGRAMS | 500 20,000 |
| NORTHERN NECK FOOD BANK | NONE | P. O. BOX | | CHILDREN'S PROGRAMS CHILDREN'S HEALTH | 5,000 |
| NORTHERN NECK FREE HEALTH CLINI | | P. O. BOX | | HEALTH | 50,000 |
| LYNCHBURG COLLEGE | NONE | 1501 LAKES | | SCHOLARSHIPS | 2,000 |
| | L NONE | P. O. BOX | 501 C | CHILDREN'S EDUCATION | 20,000 |
| | NONE | | LOMBARDY ST. 501 C | SCHOLARSHIPS | 5,000 |
| | NONE | P. O. BOX | 501 C | SCHOLARSHIPS | 3,000 |
| OLD DOMINION UNIVERSITY NORFOLK VA 23529 | NONE | 121 ROLLIN | 501 C | SCHOLARSHIPS | 2,500 |

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Federal Statements

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

| Name | Address | | |
|-------------------------------------|------------------------|----------------------------|---------|
| Address | elationship Status | Purpose | Amount |
| MIDDLE PENINSULA-NN CSB | P. O. BOX 40 | | |
| SALUDA VA 23149 NONE | 501 C | CHILDREN'S HEALTH | 5,400 |
| UNIVERSITY OF MARY WASHINGTON | 1119 HANOVER STREET | | |
| FREDERICKSBURG VA 22401 NONE | 501 C | SCHOLARSHIPS | 13,000 |
| JEFFERSON COLLEGE OF HEALTH | 101 ELM AVE., SE | | |
| ROANOKE VA 24013 NONE | 501 C | SCHOLARSHIPS | 5,000 |
| KILMARNOCK-LANCASTER RESCUE SQUAD | P. O. BOX 333 | | |
| KILMARNOCK VA 22482 NONE | 501 C | HEALTH | 1,000 |
| RAPPAHANNOCK COMMUNITY COLLEGE | P. O. BOX 923 | | |
| WARSAW VA 22572 NONE | 501 C | SCHOLARSHIPS | 2,500 |
| RAPPAHANNOCK COMMUNITY COLLEGE | P. O. BOX 923 | | |
| WARSAW VA 22572 NONE | 501 C | EDUCATION | 29,000 |
| LANCASTER COMMUNITY CHRISTMAS PROJ. | 218 CLOSE QUARTERS DR. | GILLI DD TILL G DD OGD IVG | 1 000 |
| WHITE STONE VA 22578 NONE | 501 C | CHILDREN'S PROGRAMS | 1,000 |
| STEAMBOAT ERA MUSEUM | P. O. BOX 132 | CHILD DENIES DE CORANG | 5 000 |
| IRVINGTON VA 22480 NONE | 501 C | CHILDREN'S PROGRAMS | 5,000 |
| UPPER LANCASTER VOL. RESCUE SQUAD | P. O. BOX 176 | 1177 7 7 771 | 1 000 |
| LIVELY, VA 22507 NONE | 501 C | HEALTH | 1,000 |
| THE NEMOURS FOUNDATION | 10140 CENTURION PKWY N | EDUCATION | 10 000 |
| JACKSONVILLE FL 32256 NONE | 501 C | EDUCATION | 10,000 |
| TOTAL | | | 409,650 |

OMB No. 1545-0687 Form **990-T Exempt Organization Business Income Tax Return** (and proxy tax under section 6033(e)) , and ending For calendar year 2014 or other tax year beginning u Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Open to Public Inspection for Department of the Treasury 501(c)(3) Organizations Only u Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Check box if Name of organization (Check box if name changed and see instructions.) D Employer identification number address changed (Employees' trust, see instructions.) THE NETTIE L AND CHARLES L WILEY Exempt under section X **3**) FOUNDATION 501(**C**)(**Print** **-***1771 220(e) ٥r Number, street, and room or suite no. If a P.O. box, see instructions. 408(e) PO BOX 126 408A 530(a) Type E Unrelated business activity codes (See instructions) City or town, state or province, country, and ZIP or foreign postal code 529(a) VA 22480 211110 IRVINGTON 211110 Book value of all assets Group exemption number (See instructions.) u at end of year 7,553,061 **G** Check organization type **u** X 501(c) corporation 501(c) trust 401(a) trust Other trust Describe the organization's primary unrelated business activity. INVESTMENT IN PUBLICLY TRADED PARTNERSHIPS. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? u If "Yes." enter the name and identifying number of the parent corporation. THE FOUNDATION 804-438-5656 The books are in care of **u** Telephone number **u Unrelated Trade or Business Income** Part I (A) Income (B) Expenses (C) Net 1a Gross receipts or sales Less returns and allowances c Balance u 1c 2 Cost of goods sold (Schedule A, line 7) 2 Gross profit. Subtract line 2 from line 1c 3 3 Capital gain net income (attach Schedule D) 4a 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) b 4b Capital loss deduction for trusts С 4c 5 Income (loss) from partnerships and S corporations (attach statement) SEE STMT 1 5 -3,472 -3,472Rent income (Schedule C) 6 6 Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from controlled organizations (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 9 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 -3,472-3,47213 13 Total. Combine lines 3 through 12 **Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Except for contributions. Part II deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 15 Salaries and wages 15 16 Repairs and maintenance 16 17 17 18 18 Interest (attach schedule) Taxes and licenses 19 19 Charitable contributions (See instructions for limitation rules) 20 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 22a 22b 23 23 Contributions to deferred compensation plans 24 24 Employee benefit programs 25 25 26 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27 27 Other deductions (attach schedule) 28 28 Total deductions. Add lines 14 through 28 29 29 -3,472 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 31 Net operating loss deduction (limited to the amount on line 30) 31 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 -3,472 32 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 33 33 1,000

-3,472

enter the smaller of zero or line 32

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32,

| Pa | t III Tax Computation | | | | | | | | | | |
|----------|---|--------|--------------------------|---------|----------------------|----------|--------------|----------|---------------------------------|------------------|----------------|
| 35 | Organizations Taxable as Corporations. See instructions for ta | ах со | mputation. Controlled g | group | ı | | | | | | |
| | members (sections 1561 and 1563) check here u See ins | struc | tions and: | | | | | | | | |
| а | Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable | e inc | ome brackets (in that o | order) |): | | | | | | |
| | (1) \$ (2) \$ | \$ | | | | | | | | | |
| b | Enter organization's share of: (1) Additional 5% tax (not more that | n \$1 | 1,750) | \$ | | | | | | | |
| | (2) Additional 3% tax (not more than \$100,000) | | | | | | | | | | |
| С | Income tax on the amount on line 34 | | | | | | 350 | ; | | | |
| 36 | Trusts Taxable at Trust Rates. See instructions for tax computar | tion. | Income tax on | | | | | | | | |
| | the amount on line 34 from: Tax rate schedule or | Scl | hedule D (Form 1041) | | | | ▶ 36 | ; | | | |
| 37 | Proxy tax. See instructions | | | | | 1 | 37 | , | | | |
| | Alternative minimum tax | | | | | | 38 | 3 | | | |
| 39 | Total. Add lines 37 and 38 to line 35c or 36, whichever applies | | | | | | . 39 | , | | | |
| | t IV Tax and Payments | | | | | | | | | | |
| 40a | Foreign tax credit (corporations attach Form 1118; trusts attach F | | | | | | | | | | |
| b | Other credits (see instructions) | | 40b | | | | | | | | |
| С | General business credit. Attach Form 3800 (see instructions) | | 40c | | | | | | | | |
| d | Credit for prior year minimum tax (attach Form 8801 or 8827) | | 40d | | | | | | | | |
| е | Total credits. Add lines 40a through 40d | | | | | | 400 | е | | | |
| 41 | Subtract line 40e from line 39 | | | | | | . 41 | 1 | | | |
| 42 | Other taxes. Check if from: Form 4255 Form 8611 Form 8697 For | rm 886 | Other (att. sch.) | | | | . 42 | 2 | | | |
| 43 | Total tax. Add lines 41 and 42 | | | | | | 43 | ; | | | 0 |
| 44a | Payments: A 2013 overpayment credited to 2014 | | 44a | | | | | | | | |
| b | 2014 estimated tax payments | | 44b | | | | | | | | |
| С | Tax deposited with Form 8868 | | 44c | | | | | | | | |
| d | Foreign organizations: Tax paid or withheld at source (see instruc | ctions | s) 44d _ | | | | | | | | |
| е | Backup withholding (see instructions) | | 44e | | | | | | | | |
| f | Credit for small employer health insurance premiums (Attach For | m 89 | (44f) 44f | | | | | | | | |
| g | Other credits and payments: Form 2439 | | | | | | | | | | |
| | | | Total u 44g | | | | | | | | |
| 45 | Total payments. Add lines 44a through 44g | | | | | | _ 45 | <u>ن</u> | | | |
| 46 | Estimated tax penalty (see instructions). Check if Form 2220 is at | ttach | ed | | | u L | _ 46 | <u>i</u> | | | |
| | Tax due. If line 45 is less than the total of lines 43 and 46, enter a | | | | | | ı <u>47</u> | <u>'</u> | | | |
| | Overpayment. If line 45 is larger than the total of lines 43 and 46 | | er amount overpaid | | | 1 | ı <u>48</u> | | | | |
| | Enter the amount of line 48 you want: Credited to 2015 estimated tax u | | | | Refund | | 1 49 | <u> </u> | | | |
| | t V Statements Regarding Certain Activities a | | | | | | | | | 1 | |
| 1 | At any time during the 2014 calendar year, did the organization ha | | | | | | | | | Yes | No |
| | over a financial account (bank, securities, or other) in a foreign co | - | • | | • | | | | | | |
| | FinCEN Form 114, Report of Foreign Bank and Financial Account | ts. It | YES, enter the name of | or the | e toreign counti | У | | | | | v |
| • | here u | | | | | | | | | | $\frac{x}{x}$ |
| | During the tax year, did the organization receive a distribution from | | = | or tra | nsieror to, a io | reigr | trust? | | | | |
| | If YES, see instructions for other forms the organization may have Enter the amount of tax-exempt interest received or accrued durin | | | | | | | | | | |
| | edule A – Cost of Goods Sold. Enter method of inve | | | | | | | | | | |
| | Inventory at beginning of year 1 | | Inventory at end of year | ar | | | 6 | \top | | | |
| 2 | | | Cost of goods sold. | | ract line 6 from | | . | | | | |
| 3 | | ′ | line 5. Enter here and | | | • | 7 | | | | |
| 10 | Additional and 262A | 8 | Do the rules of section | | • • • | t to | | | | Yes | No |
| b | costs (attach schedule) | ٥ | property produced or a | | ` . | | lv. | | | 163 | 140 |
| 5 | Total. Add lines 1 through 4b 5 | | to the organization? | acqu | ilica ioi icsaic) | арр | ıy | | | | |
| <u> </u> | Under penalties of perjury, I declare that I have examined this return, including accompa | anying | | o the b | pest of my knowledge | and b | elief, it is | <u></u> | | | |
| Sigi | true correct and complete Declaration of propager (other than taypayer) is based on all | | | | | | | М | ay the IRS di | scușs thi: | s return |
| Her | - I | DEG | SIDENT | | | | | wi (s | th the prepar ee instruction | er shown is)? | below |
| 01 | Signature of officer Date Title | | 2TNEWT | | | | | -1 | Ye | | No |
| | Print/Type preparer's name Preparer's | | ure | | Date | | Chec | ck 🗖 | if PTIN | | |
| Paid | C DWIGHT CLARKE | | | | 05/ | 11/: | | employed | " | **** | |
| Prep | |)., | P.C. | | 103/ | T | m's EIN } | | **_* | | 674 |
| Use | | | | | | 1." | | | | | |
| | Firm's address } IRVINGTON, VA 22480 |) | | | | Pr | one no. | 80 | 4-43 | 8-56 | 656 |

| Schedule C – Rent Incor | ne (From Rea | | | | | ty Le | eased \ | With F | | ty) | Page . | |
|--|--|---|---------------|---|--|-------|--|---|--|--|---|--|
| (see instructions) | | | | | | | | | | | | |
| 1. Description of property | | | | | | | | | | | | |
| (1) N/A | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| | 2. Rent re | eceived or accr | ued | | | | | | | | | |
| (a) From personal property (if the for personal property is more than 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) | | | | | | (a) Deductions dire in columns 2(a) | | attach schedule) | | |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| Total | | Total | | | | | | (b) To | tal daduations | | | |
| (c) Total income. Add totals of here and on page 1, Part I, line (| | 2(b). Enter | | | u | | | Enter h | ital deductions. nere and on page line 6, column (B | | | |
| Schedule E – Unrelated | Debt-Finance | d Incom | e (see i | inst | ructions) | | | | | | | |
| 1. Description of debt- | financed property | | | Gross income from or allocable to debt-financed | | | | Deductions directly connected with or allocable to debt-financed property | | | | |
| 1. Description of descrimanced property | | | | | | | | | e depreciation chedule) | (b) Other deductions (attach schedule) | | |
| (1) N/A | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | or of or allocable to debt-financed property | | | 6. Column 4 divided by column 5 | | | 1 | 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) | | | | | | % | | | | | | |
| Totals | | | | | | u | Part I, | line 7, | d on page 1, column (A). | | here and on page 1, line 7, column (B). | |
| Total dividends-received dedu | ictions included i | n column 8 | | 4- | | | · · · · · · · · · · · · · · · · · · · | | u | ·· \ | | |
| Schedule F - Interest, A | nnuities, Roy | aities, ar | <u>na Ken</u> | | | | | | s (see instruc | tions) | | |
| 4 Name of controlled | | 2 Familia | } | | xempt Controlled | o Org | janizatio | ns | 1 | | | |
| 1. Name of controlled 2. Employ organization identification | | identification r | | | Net unrelated income iss) (see instructions) | l . | 4. Total of specified payments made | | 5. Part of column 4 that is included in the controlling organization's gross inc. | | Deductions directly connected with income in column 5 | |
| (1) N/A | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| Nonexempt Controlled Orga | nizations | | | | | | | | | | | |
| Tremexempt Controlled Orga | THE CHIEF TO THE C | | | | | | | | | | | |
| 7. Taxable Income 8. Net unrelated (loss) (see instru | | | · | | | ind | 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) | | | | | | | | | | | | |
| | | | | | | | En | ter here ar | ns 5 and 10. nd on page 1, s, column (A). | Ente | dd columns 6 and 11. er here and on page 1, rt I, line 8, column (B). | |

Totals

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

| 1. Description of income | | 2. Amount o | of income | 3. Deductions directly connec (attach schedu | | et-asides schedule) | | 5. Total deductions and set-asides (col. 3 plus col.4) | |
|---|---|--|--|--|------------|---|---------------------|--|---|
| (1) N/A | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| (4) | | Inter here and Part I, line 9, | | | | | | | r here and on page 1, I, line 9, column (B). |
| Totals | | art i, iiio 7, | column (rij. | | | | | 1 411 | i, iiic 7, column (b). |
| Schedule I – Exploited Exer | mnt Activity Inc | come Ot | her Tha | n Advertising I | ncome | (see instr | uctions) | | |
| Correction Exploited Exer | | | 11101 | in Advertising i | | (300 111311 | | | |
| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Exp dire connect produc unrel business | ectly ted with ction of lated | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | from is no | 5. Gross income from activity that is not unrelated business income 6. Expe attributa column | | able to | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). |
| (1) N/A | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| | Enter here and on page 1, Part I, line 10, col. (A). | Enter her page 1 line 10, | , Part I, | | | | | | Enter here and on page 1, Part II, line 26. |
| Totals u | | | | | | | | | |
| Schedule J - Advertising In | | | | | | | | | |
| Part I Income From F | eriodicals Rep | orted on | a Cons | olidated Basis | • | | | | |
| 1. Name of periodical | 2. Gross advertising income | 3. D advertisii | | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | l . | 5. Circulation 6. Readersh income costs | | • | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
| (1) N/A | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | • |
| (4) | | | | | | | | | |
| | | | | | | | | | |
| Totals (carry to Part II, line (5)) u Part II Income From P 2 through 7 on a | • | | a Separ | rate Basis (For | each p | eriodical li | isted in F | Part II, fil | I in columns |
| Z tillough / on a | | | I | 4. Advertising | | | | | 7. Excess readership |
| 1. Name of periodical | 2. Gross advertising income | 3. D advertisii | | gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | l . | rculation ncome | 6. Readership costs | | costs (column 6 minus column 5, but not more than column 4). |
| (1) N/A | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Totals from Part I u | | | | | | | | | |
| | Enter here and on page 1, Part I, line 11, col. (A). | Enter her page 1, line 11, | | | | | | | Enter here and on page 1, Part II, line 27. |
| Totals, Part II (lines 1-5) u Schedule K - Compensatio | n of Officers 「 | Directors | and Tr | IISTARS (see insti | ructions' | <u> </u> | | | 1 |
| Schedule K – Compensation of Officers, Directors 1. Name | | | , and m | 3. Pe | | | me devoted to 1 . | | ensation attributable to related business |
| | | | | | | b | usiness | un | |
| (1) N/A | | | | | | | % | | |
| (2) | | | | | | | % | | |
| (3) | | | | | | | % | | |
| (4) | | | | | | | % | | |
| Total. Enter here and on page 1, Pa | rt II, line 14 | | | | | | u | | |

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172
2014

achment quence No. 179

Internal Revenue Service
Name(s) shown on return

THE NETTIE L AND CHARLES L WILEY

FOUNDATION Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions ... 5 (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 127 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2014 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (e) Convention (f) Method (a) Classification of property (business/investment use (g) Depreciation deduction service only-see instructions) 19a 3-year property b 5-year property C 7-year property 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs. S/L Residential rental 27.5 yrs. MM property MM S/L 27.5 yrs. MM Nonresidential real 39 yrs. S/L MM S/L Section C-Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/I b 12-year 12 vrs. S/I 40-year 40 yrs. MM S/L Summary (See instructions.) Part IV Listed property. Enter amount from line 28

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

127

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Federal Statements

FYE: 12/31/2014

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

| Name of Partnership or S-Corp | | Gross Income | Direct Deductions (Par | t. only) | Net Income |
|--|-----|-----------------------------|------------------------|----------|-----------------------------|
| BUCKEYE PARTNERSHIP ENBRIDGE PARTNERSHIP PLAINS ALL AMERICAN PSP | \$ | -3,002 11,577 -12,047 | \$ | \$ | -3,002 11,577 -12,047 |
| TOTAL | \$_ | -3,472 | \$ | 0 \$ | -3,472 |