

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

**52-1231771 FORM 990-PF ESTIMATES**

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  
**2016**

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	4,829
b	Enter the tax shown on the 2015 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	4,829
c	<b>2016 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	4,829

		(a)	(b)	(c)	(d)	
11	<b>Installment due dates</b> (see instructions) .....	11	05/16/16	06/15/16	09/15/16	12/15/16
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	1,225	1,225	1,225	1,225
13	<b>2015 Overpayment</b> (see instructions) .....	13	1,225	1,225	1,225	1,225
14	<b>Payment due</b> (Subtract line 13 from line 12) .....	14				

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2016)

Form **990-PF**

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

OMB No. 1545-0052

**2015**

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 2015 or tax year beginning , and ending

Name of foundation <b>THE NETTIE L AND CHARLES L WILEY FOUNDATION</b>		A Employer identification number <b>52-1231771</b>						
Number and street (or P.O. box number if mail is not delivered to street address) <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 <b>IRVINGTON VA 22480</b>		C If exemption application is pending, check here <input type="checkbox"/>						
G Check all that apply: <table style="display: inline-table; vertical-align: top; margin-left: 10px;"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity							
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return							
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change							
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <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 \$ 9,420,741</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <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, column (d) must be on cash basis.)								

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	42,800	42,800	42,800	
	4 Dividends and interest from securities	199,695	199,695	199,695	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	265,033			
	b Gross sales price for all assets on line 6a <b>1,170,445</b>				
	7 Capital gain net income (from Part IV, line 2)		265,033		
	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>	-19,311		-19,311		
12 <b>Total.</b> Add lines 1 through 11	488,217	507,528	223,184		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	35,500	11,833		23,667
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) <b>SEE STMT 2</b>	455	455		
	b Accounting fees (attach schedule) <b>STMT 3</b>	3,007	1,504		1,503
	c Other professional fees (attach schedule)				
	17 Interest	77	77		
	18 Taxes (attach schedule) (see instructions) <b>STMT 4</b>	39,326	5,640		
	19 Depreciation (attach schedule) and depletion <b>STMT 5</b>	255			
	20 Occupancy	1,800			1,800
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (att. sch.) <b>STMT 6</b>	16,214	5,124		10,975
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	96,634	24,633	0	37,945
	25 Contributions, gifts, grants paid	431,122			431,122
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	527,756	24,633	0	469,067	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-39,539				
b <b>Net investment income</b> (if negative, enter -0-)		482,895			
c <b>Adjusted net income</b> (if negative, enter -0-)			223,184		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

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	5,990	13,187	13,187
	2	Savings and temporary cash investments	517,988	786,808	786,808
	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>	4,643,720	3,786,971	5,781,742
		c Investments – corporate bonds (attach schedule) <b>SEE STMT 8</b>	1,935,121	2,484,876	2,461,997
	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> <b>141,664</b>				
	Less: accumulated depreciation (attach sch.) <b>u</b> <b>STMT 9</b> <b>12,297</b>	129,621	129,367	129,367	
15	Other assets (describe <b>u</b> <b>SEE STATEMENT 10</b> )	320,621	312,313	247,640	
16	<b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)	<b>7,553,061</b>	<b>7,513,522</b>	<b>9,420,741</b>	
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> <b>u</b> <input checked="" type="checkbox"/>				
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted	7,553,061	7,513,522	
	25	Temporarily restricted			
	26	Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here</b> <b>u</b> <input type="checkbox"/>				
	<b>and complete lines 27 through 31.</b>				
	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)	<b>7,553,061</b>	<b>7,513,522</b>		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	<b>7,553,061</b>	<b>7,513,522</b>		

**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	7,553,061
2	Enter amount from Part I, line 27a	2	-39,539
3	Other increases not included in line 2 (itemize) <b>u</b>	3	
4	Add lines 1, 2, and 3	4	7,513,522
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	7,513,522

**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 P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (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 (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (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 as of 12/31/69	(k) Excess of col. (i) 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 If (loss), enter -0- in Part I, line 7</span>			<b>2</b>	<b>265,033</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): 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) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	<b>440,846</b>	<b>9,636,346</b>	<b>0.045748</b>
2013	<b>419,281</b>	<b>9,014,716</b>	<b>0.046511</b>
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>
<b>2</b> Total of line 1, column (d)			<b>0.235082</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>0.047016</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			<b>9,494,639</b>
<b>5</b> Multiply line 4 by line 3			<b>446,400</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>4,829</b>
<b>7</b> Add lines 5 and 6			<b>451,229</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 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>469,067</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. 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 checked="" type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>	<b>4,829</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>4,829</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>4,829</b>
<b>6</b>	Credits/Payments:		
<b>a</b>	2015 estimated tax payments and 2014 overpayment credited to 2015	<b>6a</b>	<b>19,400</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>19,400</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>14,571</b>
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2016 estimated tax</b> <b>4,900</b> <b>Refunded</b>	<b>11</b>	<b>9,671</b>

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b>		<b>X</b>
<b>b</b>		<b>X</b>
<b>c</b>		<b>X</b>
<b>d</b>		
<b>e</b>		
<b>2</b>		<b>X</b>
<b>3</b>		<b>X</b>
<b>4a</b>		<b>X</b>
<b>4b</b>		
<b>5</b>		<b>X</b>
<b>6</b>	<b>X</b>	
<b>7</b>	<b>X</b>	
<b>8a</b>		
<b>8b</b>	<b>X</b>	
<b>9</b>		<b>X</b>
<b>10</b>		<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	Yes	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>u WWW.WILEYFDN.ORG</b>	13	X	
14	The books are in care of <b>u THE FOUNDATION</b> Telephone no. <b>u 804-438-5656</b> <b>P. O. BOX 126</b> Located at <b>u IRVINGTON</b> <b>va</b> 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"/> 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 2015, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <b>u</b>	16	Yes	No
				X

**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> 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 2015? <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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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. <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 2015 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 2015.) <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	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	X

**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 4945(d)(4)(A)? (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.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	8,515,214
b	Average of monthly cash balances	1b	661,987
c	Fair market value of all other assets (see instructions)	1c	462,026
d	<b>Total</b> (add lines 1a, b, and c)	1d	9,639,227
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	9,639,227
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	144,588
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,494,639
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	474,732

**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.)

1	Minimum investment return from Part X, line 6	1	474,732
2a	Tax on investment income for 2015 from Part VI, line 5	2a	4,829
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	4,829
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	469,903
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	469,903
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	469,903

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	469,067
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	469,067
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	4,829
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	464,238

**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) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7				<b>469,903</b>
<b>2</b> Undistributed income, if any, as of the end of 2015:				
<b>a</b> Enter amount for 2014 only			<b>453,726</b>	
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010				
<b>b</b> From 2011				
<b>c</b> From 2012				
<b>d</b> From 2013				
<b>e</b> From 2014				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4: <b>u</b> \$ <b>469,067</b>				
<b>a</b> Applied to 2014, but not more than line 2a			<b>453,726</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 2015 distributable amount				<b>15,341</b>
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2015 (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 2014. Subtract line 4a from line 2a. Taxable amount – see instructions				
<b>f</b> Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				<b>454,562</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) (Election may be required—see instructions)				
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2011				
<b>b</b> Excess from 2012				
<b>c</b> Excess from 2013				
<b>d</b> Excess from 2014				
<b>e</b> Excess from 2015				

**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 2015, 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)

	Tax year				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**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 (but only if they have contributed 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 corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
**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 <b>SEE STATEMENT 12</b>				<b>431,100</b>
<b>Total</b>			<b>u 3a</b>	<b>431,100</b>
<b>b</b> Approved for future payment <b>N/A</b>				
<b>Total</b>			<b>u 3b</b>	





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**Federal Statements**

FYE: 12/31/2015

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

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
BUCKEYE PARTNERSHIP	\$ -33	\$	\$ -33
BLACKSTONE	67		67
PLAINS ALL AMERICAN PSP	-19,345		-19,345
TOTAL	<u>\$ -19,311</u>	<u>\$ 0</u>	<u>\$ -19,311</u>

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
LEGAL FEES	\$ 455	\$ 455	\$	\$
TOTAL	<u>\$ 455</u>	<u>\$ 455</u>	<u>\$ 0</u>	<u>\$ 0</u>

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING	\$ 3,007	\$ 1,504	\$	\$ 1,503
TOTAL	<u>\$ 3,007</u>	<u>\$ 1,504</u>	<u>\$ 0</u>	<u>\$ 1,503</u>

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
REAL ESTATE TAXES	\$ 1,695	\$ 1,695	\$	\$
FOREIGN DIVIDEND TAX	3,945	3,945		
INCOME TAX	33,686			
TOTAL	<u>\$ 39,326</u>	<u>\$ 5,640</u>	<u>\$ 0</u>	<u>\$ 0</u>

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**Federal Statements**

FYE: 12/31/2015

**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	127	S/L	5	255			
TOTAL	\$ 13,188	\$ 12,042			\$ 255	\$ 0	\$ 0	

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
DUES	1,200			1,200
FIDUCIARY FEES	10,248	5,124		5,124
OFFICE	1,015			1,015
WEB SITE EXPENSE	1,750			1,750
NON DEDUCTABLE EXPENSES	115			
CONVENTION EXPENSES	1,886			1,886
TOTAL	\$ 16,214	\$ 5,124	\$ 0	\$ 10,975



## 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	\$ 4,643,720	\$ 3,786,971	COST	\$ 5,781,742
TOTAL	<u>\$ 4,643,720</u>	<u>\$ 3,786,971</u>		<u>\$ 5,781,742</u>

### 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	\$ 1,935,121	\$ 2,484,876	COST	\$ 2,461,997
TOTAL	<u>\$ 1,935,121</u>	<u>\$ 2,484,876</u>		<u>\$ 2,461,997</u>

### 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	\$ 1,145	\$ 13,188	\$ 12,297	\$ 891
LAND	128,476	128,476		128,476
TOTAL	<u>\$ 129,621</u>	<u>\$ 141,664</u>	<u>\$ 12,297</u>	<u>\$ 129,367</u>

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

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Fair Market Value</u>
ESTATE PERSONAL PROPERTY FOR SALE	\$ 3,960	\$ 3,960	\$ 3,960
PUBLICLY TRADED PARTNERSHIPS	316,661	308,353	243,680
TOTAL	\$ <u>320,621</u>	\$ <u>312,313</u>	\$ <u>247,640</u>

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**Federal Statements**

FYE: 12/31/2015

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

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
CATHARINE B MOORE PO BOX 126 IRVINGTON VA 22480	SECRETARY	2.00	6,000	0	0
GLORIA C CONLEY PO BOX 126 IRVINGTON VA 22480	VICE PRES.	2.00	6,000	0	0
B.H.B HUBBARD PO BOX 126 IRVINGTON VA 22480	TREASURER	2.00	5,500	0	0
THOMAS GOSSE PO BOX 126 IRVINGTON VA 22480	VICE PRES.	2.00	6,000	0	0
LESLIE FRANKLIN PO BOX 126 IRVINGTON VA 22480	PRESIDENT	2.00	6,000	0	0
PHILLIP WILLIAMS PO BOX 33 IRVINGTON VA 22480	HISTORIAN	2.00	6,000	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

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**Federal Statements**

FYE: 12/31/2015

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

<u>Name</u>	<u>Address</u>	<u>Relationship</u>	<u>Status</u>	<u>Purpose</u>	<u>Amount</u>
BETHEL UNITED METHODIST CHURCH LIVELY VA 22507	P. O. BOX 118 NONE	501C3		PRESCHOOL	10,000
MARY BALL WASHINGTON MUSEUM LANCASTER VA 22503	P. O. BOX 97 NONE	501C3		CHILDREN'S PROGRAMS	7,000
CHESAPEAKE ACADEMY IRVINGTON VA 22480	P. O. BOX 8 NONE	501C3		CHILDREN'S PROGRAMS	14,000
VIRGINIA COMMONWEALTH UNIVERSITY RICHMOND VA 23284	P. O. BOX 843026 NONE	501C3		SCHOLARSHIPS	5,000
NORTHERN NECK CONNECTION KILMARNOCK VA 22482	P. O. BOX 78 NONE	501C3		EDUCATION	3,500
LANCASTER COMMUNITY LIBRARY KILMARNOCK VA 22482	P. O. BOX 850 NONE	501C3		EDUCATION	130,000
LANCASTER COUNTY PUBLIC SCHOOLS KILMARNOCK VA 22482	P. O. BOX 2000 NONE	501C3		CHILDREN'S EDUCATION	50,800
NATIONAL CHILD SAFETY COUNCIL LANCASTER VA 22503	8293 MARY BALL ROAD NONE	501C3		CHILDREN'S PROGRAMS	500
NORTHERN NECK FAMILY YMCA KILMARNOCK VA 22482	P. O. BOX 1809 NONE	501C3		CHILDREN'S PROGRAMS	20,000
NORTHERN NECK FOOD BANK WARSAW VA 22572	P. O. BOX 735 NONE	501C3		CHILDREN'S HEALTH	10,000
NORTHERN NECK FREE HEALTH CLINIC KILMARNOCK VA 22482	P. O. BOX 1694 NONE	501C3		HEALTH	50,000
LYNCHBURG COLLEGE LYNCHBURG VA 24501	1501 LAKESIDE DRIVE NONE	501C3		SCHOLARSHIPS	2,000
BOYS & GIRLS CLUB OF THE NN KILMARNOCK VA 22482	P. O. BOX 564 NONE	501C3		CHILDREN'S EDUCATION	20,000
VIRGINIA UNION UNIVERSITY RICHMOND VA 23220	1500 NORTH LOMBARDY ST. NONE	501C3		SCHOLARSHIPS	5,000
FERRUM COLLEGE FERRUM VA 24088	P. O. BOX 1000 NONE	501C3		SCHOLARSHIPS	5,000
REACH OUT AND READ VIRGINIA RICHMOND VA 23233	12929 CHURCH ROAD NONE	501C3		CHILDREN'S EDUCATION	3,000
MIDDLE PENINSULA-NN CSB SALUDA VA 23149	P. O. BOX 40 NONE	501C3		CHILDREN'S HEALTH	15,300

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## Federal Statements

FYE: 12/31/2015

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

Name	Address	Relationship	Status	Purpose	Amount
UNIVERSITY OF MARY WASHINGTON FREDERICKSBURG VA 22401	1119 HANOVER STREET 501C3	NONE	501C3	SCHOLARSHIPS	3,000
VIRGINIA POLYTECHNIC INSTITUTE BLACKSBURG VA 24061	800 WASHINGTON ST. SW 501C3	NONE	501C3	SCHOLARSHIPS	14,000
LANCASTER COUNTY VA EDUCATION FDN. KILMARNOCK VA 22482	P. O. BOX 928 501C3	NONE	501C3	EDUCATION	11,000
RAPPAHANNOCK COMMUNITY COLLEGE WARSAW VA 22572	P. O. BOX 923 501C3	NONE	501C3	SCHOLARSHIPS	1,000
RAPPAHANNOCK COMMUNITY COLLEGE WARSAW VA 22572	P. O. BOX 923 501C3	NONE	501C3	EDUCATION	27,000
KIWANIS KIDS KILMARNOCK VA 22482	P. O. BOX 2073 501C3	NONE	501C3	CHILDREN'S PROGRAMS	1,000
STEAMBOAT ERA MUSEUM IRVINGTON VA 22480	P. O. BOX 132 501C3	NONE	501C3	CHILDREN'S PROGRAMS	5,000
THE HAVEN WARSAW VA 22572	P. O. BOX 1267 501C3	NONE	501C3	HEALTH	5,000
THE NEMOURS FOUNDATION JACKSONVILLE FL 32256	10140 CENTURION PKWY N 501C3	NONE	501C3	EDUCATION	13,000
TOTAL					<u>431,100</u>

Form **990-T**

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

OMB No. 1545-0687

**2015**

Department of the Treasury  
Internal Revenue Service

For calendar year 2015 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_  
**u** Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).

Open to Public Inspection for  
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).

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )</td> <td><input type="checkbox"/> 220(e)</td> </tr> <tr> <td><input type="checkbox"/> 408(e)</td> <td><input type="checkbox"/> 530(a)</td> </tr> <tr> <td><input type="checkbox"/> 408A</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 529(a)</td> <td></td> </tr> </table> <p><b>C</b> Book value of all assets at end of year <b>7,513,522</b></p>	<input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )	<input type="checkbox"/> 220(e)	<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)	<input type="checkbox"/> 408A		<input type="checkbox"/> 529(a)		<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>THE NETTIE L AND CHARLES L WILEY FOUNDATION</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO BOX 126</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code <b>IRVINGTON VA 22480</b></p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.) <b>52-1231771</b></p> <p><b>E</b> Unrelated business activity codes (See instructions.) <b>211110   211110</b></p>
<input checked="" type="checkbox"/> 501( <b>C</b> ) ( <b>3</b> )	<input type="checkbox"/> 220(e)									
<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)									
<input type="checkbox"/> 408A										
<input type="checkbox"/> 529(a)										
<p><b>F</b> Group exemption number (See instructions.) <b>u</b></p> <p><b>G</b> Check organization type <b>u</b> <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>										

**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
1a	Gross receipts or sales			
b	Less returns and allowances			
<b>c</b> Balance <b>u</b>		<b>1c</b>		
2	Cost of goods sold (Schedule A, line 7)	<b>2</b>		
3	Gross profit. Subtract line 2 from line 1c	<b>3</b>		
4a	Capital gain net income (attach Schedule D)	<b>4a</b>		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
c	Capital loss deduction for trusts	<b>4c</b>		
5	Income (loss) from partnerships and S corporations (attach statement) <b>SEE STMT 1</b>	<b>5</b>	-19,311	-19,311
6	Rent income (Schedule C)	<b>6</b>		
7	Unrelated debt-financed income (Schedule E)	<b>7</b>		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	<b>8</b>		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
10	Exploited exempt activity income (Schedule I)	<b>10</b>		
11	Advertising income (Schedule J)	<b>11</b>		
12	Other income (See instructions; attach schedule)	<b>12</b>		
13	<b>Total.</b> Combine lines 3 through 12	<b>13</b>	-19,311	-19,311

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.)			
14	Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
15	Salaries and wages	<b>15</b>	
16	Repairs and maintenance	<b>16</b>	
17	Bad debts	<b>17</b>	
18	Interest (attach schedule)	<b>18</b>	
19	Taxes and licenses	<b>19</b>	
20	Charitable contributions (See instructions for limitation rules)	<b>20</b>	
21	Depreciation (attach Form 4562)	<b>21</b>	
22	Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>	0
23	Depletion	<b>23</b>	
24	Contributions to deferred compensation plans	<b>24</b>	
25	Employee benefit programs	<b>25</b>	
26	Excess exempt expenses (Schedule I)	<b>26</b>	
27	Excess readership costs (Schedule J)	<b>27</b>	
28	Other deductions (attach schedule)	<b>28</b>	
29	<b>Total deductions.</b> Add lines 14 through 28	<b>29</b>	
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>30</b>	-19,311
31	Net operating loss deduction (limited to the amount on line 30)	<b>31</b>	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	<b>32</b>	-19,311
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>33</b>	1,000
34	<b>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>	-19,311

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here u [ ] See instructions and:
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
(1) \$ (2) \$ (3) \$
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$
(2) Additional 3% tax (not more than \$100,000) \$
c Income tax on the amount on line 34 35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: [ ] Tax rate schedule or [ ] Schedule D (Form 1041) 36
37 Proxy tax. See instructions 37
38 Alternative minimum tax 38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies 39

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
b Other credits (see instructions) 40b
c General business credit. Attach Form 3800 (see instructions) 40c
d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d
e Total credits. Add lines 40a through 40d 40e
41 Subtract line 40e from line 39 41
42 Other taxes. Check if from: [ ] Form 4255 [ ] Form 8611 [ ] Form 8697 [ ] Form 8866 [ ] Other (alt. sch.) 42
43 Total tax. Add lines 41 and 42 43 0
44a Payments: A 2014 overpayment credited to 2015 44a
b 2015 estimated tax payments 44b
c Tax deposited with Form 8868 44c
d Foreign organizations: Tax paid or withheld at source (see instructions) 44d
e Backup withholding (see instructions) 44e
f Credit for small employer health insurance premiums (Attach Form 8941) 44f
g Other credits and payments: [ ] Form 2439 [ ] Form 4136 [ ] Other Total u 44g
45 Total payments. Add lines 44a through 44g 45
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached u [ ] 46
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed u 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid u 48
49 Enter the amount of line 48 you want: Credited to 2016 estimated tax u Refunded u 49

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

1 At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here u Yes No X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. Yes No X
3 Enter the amount of tax-exempt interest received or accrued during the tax year u \$

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

1 Inventory at beginning of year 1
2 Purchases 2
3 Cost of labor 3
4a Additional sec. 263A costs (attach schedule) 4a
b Other costs (attach schedule) 4b
5 Total. Add lines 1 through 4b 5
6 Inventory at end of year 6
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 7
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

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.

Signature of officer u Date 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 Date 05/13/16
Check self-employed if PTIN P00188399
Firm's name } DEHNERT, CLARKE & CO., P.C.
Firm's EIN } 20-1212674
Firm's address } 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)		

**Total** Total (b) Total deductions.

**(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** Enter here and on page 1, Part I, line 6, column (B) **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)		%		

**Totals** Enter here and on page 1, Part I, line 7, column (A). Enter here and on page 1, Part I, line 7, column (B). **u**

**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)				

**Totals** 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). **u**

**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> .....		<b>u</b>		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> .....		<b>u</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)) ..		<b>u</b>				

**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>u</b>				
<b>Totals, Part II</b> (lines 1-5) .....		<b>u</b>		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)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....		<b>u</b>	

Form **4562**

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2015**

Department of the Treasury  
Internal Revenue Service (99)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562).

Attachment Sequence No. **179**

Name(s) shown on return **THE NETTIE L AND CHARLES L WILEY FOUNDATION**

Identifying number  
**52-1231771**

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.

1	Maximum amount (see instructions)	1	<b>500,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,000,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II 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)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>255</b>

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	<b>0</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2015 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> 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	22	<b>255</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2015)

**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 Income</u>	<u>Direct Deductions (Part. only)</u>	<u>Net Income</u>
BUCKEYE PARTNERSHIP	\$ -33	\$	\$ -33
BLACKSTONE	67		67
PLAINS ALL AMERICAN PSP	-19,345		-19,345
TOTAL	\$ <u>-19,311</u>	\$ <u>0</u>	\$ <u>-19,311</u>

Year Ending: December 31, 2015

52-1231771

THE NETTIE L AND CHARLES L WILEY  
FOUNDATION  
PO BOX 126  
IRVINGTON, VA 22480

### **NOL Carryback Election**

Under IRC Section 172(b)(3), the taxpayer elects to relinquish the entire carryback period with respect to any regular tax and AMT net operating loss incurred during the current tax year.