

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS 59-6147133 label. The Galloway Foundation Otherwise, Telephone number (see page 10 of the instructions) print Number and street (or P O box number if mail is not delivered to street address) Room/suite 407-677-0740 or type. 1330 Palmetto Ave If exemption application is pending, check here See Specific City or town, state, and ZIP code D 1. Foreign organizations, check here Instructions. Winter Park FL 32789 2. Foreign organizations meeting the H Check type of organization | X | Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here I Fair market value of all assets at end J Accounting method X Cash | Accrual of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 22,080,206 (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here line 16) ▶ \$ Analysis of Revenue and Expenses (The Part i (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net expenses per for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal books ıncome income purposes the amounts in column (a) (see page 11 of the instructions) ) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ► X if the foundation is **not** required to attach Sch B 2 73,565 73,565 3 Interest on savings and temporary cash investments 517,667 517,667 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) b RECEIVED -2,942,066 6a Net gain or (loss) from sale of assets not on line 10 O (1) Gross sales price for all assets on line 6a 13,493,782 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications OGDEN Operating and Administrative Expenses | CENNNEDS 10a Gross sales less returns & allowances Less Cost of goods sold C Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 -2,350,834 591,232 Total. Add lines 1 through 11 49,500 29,700 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) See Stmt 1 8,718 16a Stmt 2 5,700 Accounting fees (attach schedule) Stmt 3 118,275 118,275 Other professional fees (attach schedule) Taxes (attach schedule) (see page 14 of the instructions) Stmt 4 -33,114 6,159 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Stmt 5 8,844 23 Other expenses (att sch) Total operating and administrative expenses. 157,923 124,434 29,700 Add lines 13 through 23 1,003,102 1,003,102 25 Contributions, gifts, grants paid 124,434 0 1,032,802 1,161,025 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 -3,511,859 Excess of revenue over expenses and disbursements 466,798 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
_	. 411	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	118,209	234,099	234,099
	2	Savings and temporary cash investments	5,928,211	1,085,197	1,085,197
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	_	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		1	
		disqualified persons (attach schedule) (see page 16 of the			
	_	instructions)			<del></del>
	7	Other notes and loans receivable (att schedule)			
S		Less allowance for doubtful accounts			· · · · · · · · · · · · · · · · · · ·
Assets	8	Inventories for sale or use	50,400	5,600	5,600
155	9	Prepaid expenses and deferred charges Investments—U.S. and state government obligations (attach schedule)	30,400	3,800	3,600
1	10a b	Investments—corporate stock (attach schedule)  See Stmt 6	13,193,223	9,486,660	10,581,754
	C	Investments—corporate stock (attach schedule)  See Start 7	5,013,676	9,980,304	10,381,734
	11	Investments—land, buildings, and equipment basis	3,013,070	3,380,304	10,173,330
	'''	Less accumulated depreciation (attach sch.)	1		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		······································	
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch )	İ		
	15	Other assets (describe ▶ )			·····
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	24,303,719	20,791,860	22,080,206
	17	Accounts payable and accrued expenses		, ,	······································
/۵	18	Grants payable			
ië	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iak	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶ )			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ▶			
ces		and complete lines 24 through 26 and lines 30 and 31.			
nc	24	Unrestricted			
ala	25	Temporarily restricted			
B	26	Permanently restricted			
Net Assets or Fund Balan		Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31.			
卢	27	Capital stock, trust principal, or current funds	24,303,719	20,791,860	
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund		· · · · · · · · · · · · · · · · · · ·	
set	29	Retained earnings, accumulated income, endowment, or other funds			
As	30	Total net assets or fund balances (see page 17 of the			
et '		instructions)	24,303,719	20,791,860	
Z	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	24,303,719	20,791,860	
	Part I	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 (mu	ust agree with		
	end-c	f-year figure reported on prior year's return)		1	24,303,719
2	Enter	amount from Part I, line 27a		2	-3,511,859
3	Other	ncreases not included in line 2 (itemize) ▶		3	
4		nes 1, 2, and 3		4	<u>20,791,860</u>
5		eases not included in line 2 (itemize)		5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (	(b), line 30		20,791,860

Part IV Capital Gains a	<u>nd Losses for Tax on Investm</u>	ent Income				
(a) List and describ 2-story brick ware	pe the kind(s) of property sold (e.g., real estate ehouse, or common stock, 200 shs MLC Co)	,	(b) How acquired P—Purchase D—Donation	(c) Date ad (mo , day		(d) Date sold (mo , day, yr )
1a See Worksheet						
b						
С						
d	<del></del>			<del></del>		
<u>e</u>		r				<del> </del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale	(	(h) Gain ( (e) plus (f)	
_a					· · · · · · · · · · · · · · · · · · ·	
<u>b</u>				<del></del>		
<u> </u>				· -		<del></del>
<u>d</u>						· · · · · · · · · · · · · · · · · · ·
Complete only for assets showin	g gain in column (h) and owned by the f	undation on 12	/31/69			
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	Excess of col (i) er col (j), if any	col (k		(h) gain minus ess than -0-) <b>or</b> m col (h))
a				<del></del>		
b						
c						·
d						
е						
2 Capital gain net income or (net c	apital loss) If gain, also enter in		}	2	_	-2,942,066
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (	_	<b>-</b>			
• • •	, column (c) (see pages 13 and 17 of the	·	ı l			
If (loss), enter -0- in Part I, line 8			<u> </u>	3	_	2,951,263
	nder Section 4940(e) for Redu	ced Tax on N	let Investment Inco	me		
If "Yes," the foundation does not qua	ction 4942 tax on the distributable amountilify under section 4940(e) Do not compleach column for each year, see page 18	lete this part		s X No	-	
(a)		or the instruction				(d)
Base period years Calendar year (or tax year beginning			(c) ralue of noncharitable-use assi		Distril (col (b) di	butión ratio vided by col (c))
2008		,897	21,903,3			0.043915
2007	1,003	,845	23,570,4 20,886,1			0.042583 0.041982
2006	870	,645	20,000,1	183		0.041962
2005		<del></del>				
2 Total of line 1, column (d)				2		0.128480
<u> </u>	5-year base period—divide the total on has been in existence if less than 5 year	• • •	the	3		0.042827
4 Enter the net value of noncharita	ble-use assets for 2009 from Part X, line	e 5		4	1	.9,989,599
5 Multiply line 4 by line 3				5		856,095
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)			6		4,668
7 Add lines 5 and 6	. ,			7		860,763
8 Enter qualifying distributions from	n Part XII line 4			8		1,032,802
	n line 7, check the box in Part VI, line 1b	o, and complete	that part using a 1% tax ra		;	
r art vi instituctions on page 10		· <del></del> · · · · ·	· · · · · · · · · · · · · · · · · · ·		F	orm <b>990-PF</b> (2009)

orm	990-PF (2009) The Galloway Foundation 59-6147133			P	age 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruct	tions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			4,	668
	here X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2			4.	<del>668</del>
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-			4	668
	<del> </del>				000
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009  6a 5,600				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)  6c				
ď	Backup withholding erroneously withheld 6d 6d			_	
7	Total credits and payments Add lines 6a through 6d			5,	<u>600</u>
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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				932
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 932 Refunded ▶ 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?	Ī	1a		$\overline{\mathbf{x}}$
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	Ī			
-	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		-12		
	published or distributed by the foundation in connection with the activities				
		ľ	40		X
C	Did the foundation file Form 1120-POL for this year?	ŀ	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers  \$		- 1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	/A [	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	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	Ī	7	X	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	ŀ			
-	instructions)   None				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
J		ŀ	, l	x	
۵	(or designate) of each state as required by General Instruction G? If "No," attach explanation	-	8b_	А	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	j	1		
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				v
	27)? If "Yes," complete Part XIV	-	9		<u> </u>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				v
	names and addresses		10	\ DE	X
		For	m ササI	ノーピト	(2009)

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

foundation had excess business holdings in 2009)

Form **990-PF** (2009)

X

3b

4a

N/A

orm	990-PF (2009) The Galloway			147133			Page <b>6</b>
Pa	rt VII-B Statements Regarding	g Activities for Which Forn	<u>n 4720 May Be F</u>	Required (con	tinued)		
5a	During the year did the foundation pay or in	ncur any amount to					
	(1) Carry on propaganda, or otherwise atte	empt to influence legislation (section	n 4945(e))?		Yes 🔀 No		
	(2) Influence the outcome of any specific p	public election (see section 4955), o	or to carry on,	_	_		
	directly or indirectly, any voter registrat	ion drive?			Yes X No		
	(3) Provide a grant to an individual for trav	el, study, or other sımılar purposes	?		Yes 🔀 No		
	(4) Provide a grant to an organization other	r than a charitable, etc , organizati	on described in				
	section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see page 22 of the in	structions)		Yes 🗓 No		
	(5) Provide for any purpose other than relig	gious, charitable, scientific, literary,	, or educational	_			
	purposes, or for the prevention of cruel	ty to children or animals?			Yes 🗓 No		
þ	If any answer is "Yes" to 5a(1)-(5), did any	of the transactions fail to qualify ur	nder the exceptions d	escribed in			
	Regulations section 53 4945 or in a current	t notice regarding disaster assistan	ce (see page 22 of th	e instructions)?	_N/A	5b	
	Organizations relying on a current notice re	garding disaster assistance check	here		▶ 📙		
С	If the answer is "Yes" to question 5a(4), do	es the foundation claim exemption	from the tax				
	because it maintained expenditure respons	ibility for the grant?		N/A 🗌	Yes 📗 No		
	If "Yes," attach the statement required by F	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 X No		
b	Did the foundation, during the year, pay pre	emiums, directly or indirectly, on a	personal benefit conti	ract?		6b	X
	If "Yes" to 6b, file Form 8870				_		
7a	At any time during the tax year, was the for	undation a party to a prohibited tax	shelter transaction?		Yes X No		
b	If yes, did the foundation receive any proce	eds or have any net income attribu	table to the transacti	on?	N/A	7b	
Pa	rt VIII Information About Offic	ers, Directors, Trustees, F	Foundation Man	agers, Highly	Paid Employe	ees,	
	and Contractors						
1 L	st all officers, directors, trustees, founda	tion managers and their compen	sation (see page 22	of the instructio	ns).	,	
	(a) Name and add	dress	(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		ense account, allowances
Jei	re F Daniels Jr	Maitland	Trustee		-		<del></del>
	0 Shawnee Trail	FL 32751	8.00	16,500	ه ا		0
	e F Daniels	Winter Park	Trustee				
133	30 Palmetto Avenue	FL 32789	8.00	16,500	0		0
Rol	pert C Klettner	Winter Park	Trustee				
PO	Box 2889	FL 32790	8.00	16,500	o		0
				_	l		
2	Compensation of five highest-paid emplo	oyees (other than those included	on line 1—see page	23 of the instruc	ctions).		
	(a) Name and address of each employe	e 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		ense account, allowances
NON	TE .						
							<del></del>
otal	number of other employees paid over \$50,0	000				<u> </u>	

Form 990-PF (20	09) The Galloway Foundation	59-6147133	Page 7
Part VIII	Information About Officers, Directors, Trustees, For and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services (see pages)	ge 23 of the instructions). If none, enter "NO	NE."
	(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		<b>•</b>
Part IX-A	Summary of Direct Charitable Activities		
organizations and	n's four largest direct charitable activities during the tax year. Include relevant stat I other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page 1)	age 24 of the instructions)	
	largest program-related investments made by the foundation during the tax year of		Amount
1 N/A			
2			
All other program-	-related investments See page 24 of the instructions		

•

Total. Add lines 1 through 3

orm	1 990-PF (2009) The Galloway Foundation 59-614/133		Page <b>8</b>
Pa	Minimum Investment Return (All domestic foundations must complete this part Fore	eign fo	undations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	i	
	purposes		00 050 000
а	Average monthly fair market value of securities	1a	20,058,009
b	Average of monthly cash balances	1b	236,000
C	Fair market value of all other assets (see page 24 of the instructions)	1c	00 004 000
d	Total (add lines 1a, b, and c)	1d	20,294,009
е	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	00 004 000
3	Subtract line 2 from line 1d	3	20,294,009
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		204 440
	the instructions)	4	304,410 19,989,599
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	19,989,599
6	Minimum investment return. Enter 5% of line 5	6	999,480
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	]
	foundations and certain foreign organizations check here   and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	999,480
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )	]	
С	Add lines 2a and 2b	2c	4,668 994,812
3	Distributable amount before adjustments Subtract line 2c from line 1	3	994,812
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	994,812
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	994,812
Pa	urt XII Qualifying Distributions (see page 25 of the instructions)		
		г	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4.	1,032,802
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,032,002
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		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	1 022 002
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,032,802
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	A CC0
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	4,668
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,028,134
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the founda-	ation	

qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2009)

Pa	rt XIII Undistributed Income (see page 26 of	the instructions)			
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				994,812
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			386,815	
ь	Total for prior years 20 , 20 , 20				<u> </u>
3	Excess distributions carryover, if any, to 2009				
	From 2004				
	From 2005				
	From 2006				
	From 2007				
_	From 2008				
f	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part XII,				
4	line 4 ▶ \$1,032,802				
_				386,815	
	Applied to 2008, but not more than line 2a			380,813	······································
D	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
_	required—see page 26 of the instructions)				645 000
	Applied to 2009 distributable amount				645,987
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009	<del></del>			
	(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				·····
b	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 page 27 of the instructions		}		
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions		1		
f	Undistributed income for 2009 Subtract lines			,	
	4d and 5 from line 1. This amount must be				
	distributed in 2010				348,825
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
U					
	applied on line 5 or line 7 (see page 27 of the				
^	Instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	1			
10	Analysis of line 9				
	Excess from 2005				
b	Excess from 2006				
С	Excess from 2007			į	
d	Excess from 2008				
е	Excess from 2009				

Pa	rt XIV Private Operating Fou	ındations (see p	age 27 of the inst	ructions and Part	VII-A, question 9	
1a	If the foundation has received a ruling or					<u> </u>
	foundation, and the ruling is effective for	2009, enter the date of	of the ruling	•		
b	Check box to indicate whether the foundation			bed in section 4	942(j)(3) or 494	2(J)(5)
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for	(-,	(-,	(-)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	each year listed					
b	85% of line 2a	-				
c	Qualifying distributions from Part XII,		-			
C	line 4 for each year listed					
-	Amounts included in line 2c not used directly					
d	for active conduct of exempt activities					
_	Qualifying distributions made directly				_	<u> </u>
е	' '					
	for active conduct of exempt activities		ļ			
_	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) "Endowment" alternative test—enter 2/3				<del> </del>	<del>, ,</del> .
b	of minimum investment return shown in					
			Ì			
_	Part X, line 6 for each year listed "Support" alternative test—enter					,
С	(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			1		
	organizations as provided in			ļ.		
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from			}		
	an exempt organization	·				
	(4) Gross investment income art XV Supplementary Inform	nation /Complete	this part only if	the foundation h	ad \$5 000 or mor	o in accete at
Г	any time during the ye	•			au \$5,000 or mor	e III assets at
1	Information Regarding Foundation Mai		o or the metractic	7110.7		
a	List any managers of the foundation who	-	re than 2% of the total	contributions received	by the foundation	
u	before the close of any tax year (but only				=	
	N/A	,		(444 444 444	• • • • • • • • • • • • • • • • • • • •	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporal	ion (or an equally larg	e portion of the	<del></del>
	ownership of a partnership or other entity			· · · · · · · · · · · ·		
	N/A	,				
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Prograi	ns:		
	<del>-</del> -		-	ble organizations and	does not accept	
	unsolicited requests for funds. If the foun	dation makes gifts, gi	rants, etc (see page 2	8 of the instructions) to	o individuals or	
	organizations under other conditions, cor			ŕ		
а	The name, address, and telephone numb			ld be addressed		
	Jere Daniels 407-677					
	1330 Palmetto Ave Wi		FL 32789			
b	The form in which applications should be	submitted and inform	nation and materials th	ey should include		
	See Foundation Appli					
С	Any submission deadlines					
	None					
d	Any restrictions or limitations on awards,			ields, kinds of institutio	ons, or other factors	
	Must be 501(c)(3) Or	ganization				

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year See Statement 8 1,003,102 1,003,102 ▶ 3a Total **b** Approved for future payment N/A ▶ 3b Total

Part XVI-A Analysis of Income-Producing Activities

59-6147133

Page **12** 

Enter gross amo	ounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
1 Program se						the instructions )
		_		<del>                                     </del>		
D		-		<del>  </del>		
d		-		+ +		
	<del></del>			+		
f		-		<del>                                     </del>		
	nd contracts from government agencies	-		+		<del></del>
-	dues and assessments					
	savings and temporary cash investments			1 1		73,565
	nd interest from securities					517,667
	come or (loss) from real estate		·····			
	anced property					
	t-financed property					
6 Net rental in	ncome or (loss) from personal property					
7 Other invest						
8 Gain or (los	s) from sales of assets other than inventory					-2,942,066
9 Net income	or (loss) from special events					
10 Gross profit	or (loss) from sales of inventory					
11 Other reven	ue <b>a</b>					
d		_				·- ·
e		_				
	dd columns (b), (d), and (e)			0		-2,350,834
	ine 12, columns (b), (d), and (e)				13	-2,350,834
	in line 13 instructions on page 28 to verify calcular		and of Evament I	3		
Part XVI-B	····					
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur	ne is reported in co	blumn (e) of Paπ XV	I-A CONTRIDI	uted importantly to the	of the
•	instructions )	poses (other than	by providing funds i	or such pu	iposes) (oce page 2.	, or the
N/A						
					•	· · · · · · · · · · · · · · · · · · ·
<del></del>						
					_	
-						
						·
						-
					- <del></del>	
<del></del>				<del></del>		
	<u> </u>					

P	art XVII	Information Regardate  Exempt Organization		ansfers To and Ti	ransactions	and Relationships Wit	h Noncharit	able		
1	Did-the o			e in any of the following	ng with any othe	er organization described			Yes	No
•					- •	on 527, relating to political				
	organiza			on our (o)(o) organizatio	2110, 01 III 00000	on one, relating to pointour				ĺ
а	•	from the reporting found	ation to a no	oncharitable exempt or	nanization of					į
_	(1) Cash	•		ononantable exempt of	jamzanon or			1a(1)		x
	(2) Othe							1a(2)		X
h	Other tra							150-71	_	
_		s of assets to a noncharita	able exempt	organization				1b(1)	ĺ	X
		hases of assets from a no						1b(2)		X
	• •	al of facilities, equipment,		, ,				1b(3)		X
	• •	bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		X
		ormance of services or me	embership o	r fundraising solicitation	ns			1b(6)		X
С		of facilities, equipment, m.		-				1c		X
	_	• •	-	•		(b) should always show the fa	ır market			
				•		foundation received less than				
						goods, other assets, or service				
	(a) Line no	(b) Amount involved		of noncharitable exempt or		(d) Description of transfers, trai		aring arrange	ments	
1/	A									
	•									
		-				-				
						·				
2a		ndation directly or indirec	•	·		, ,				
		d in section 501(c) of the		than section 501(c)(3))	or in section 5	27?		Ye	s X	No
D	it "Yes,"	complete the following sci	redule	(h) Tuno of organ		(a) Danset				
	N/A	(a) Name of organization		(b) Type of organi	zation	(c) Descripti	ion of relationship			
	N/A	<del></del>					<del> </del>			
		·				<del></del>	<del></del>			
						····				
			<del></del> -			,-,				
						<del></del>		<del> </del>		
						edules and statements, and to the t based on all information of which p				
		Λ	•		14150	tra 1 The	7			
	Signa	ture of officer or trustee		- COM DA	1 9 1 3 0	Title	vee			—
	, Olgila	tare or officer or trustee	4	<u> </u>	Date	1 (	Pro	eparer's identify	/IDO	
		D	001	2 11		Date Check if	nu	mber (see Sıgı	nature d	
	پر چ ج	Preparer's signature	00 R			self-empl		ge 30 of the ins		
ר ו	Paid Preparer's Use Only		P 1 2	n Common	• DA	04/26/10		00547	04/	<del></del>
	۽ Fe ا	Tillio hame for yours it		n & Company			- E	0_220	<b>1 E O</b>	<b>F</b>
	-	self-employed), address, and ZIP code		N Park Ave S er Park, FL	32789-	2252		9-229 07-62		
		7	MINTE	EL Falk, PL		4333	Phone no 4	Form 990		
								rurm <b>ラブし</b>	)-r r	(2009)

Form 990-PF	Capital Gains and Losses	for Tax on Investme	nt Income	2009
	For calendar year 2009, or tax year beginning	, and en	ding	
lame ·		· · · · · · · · · · · · · · · · · · ·	Employer Ide	entification Number
The Galloway	Foundation		59-614	7133
	t and describe the kind(s) of property sold, e.g., real estatory brick warehouse, or common stock, 200 shs. MLC (	ate, (b) How ac	<del></del>	(d) Date sold (mo , day, yr )
) UBS #07558		D-Dona D	Various	Various
UBS #27457		P	Various	Various
UBS #54498		P	Various	Various
UBS #54499		P	Various	Various
) UBS # 5449		P	Various	Various
UBS #54496		P	Various	Various
UBS #54502	<del></del>	P	Various	Various
UBS #54501	· · · · · · · · · · · · · · · · · · ·	P	Various	Various
UBS #54503		P	Various	Various
0) UBS #54500		P	Various	Various
	ells Fargo Securities	P	Various	Various
2) CNL (Fidel		P	Various	Various
	Class Actions	P	Various	Various
	CIASS ACCIONS		Validus	Various
<b>4</b> ) 5)				
(0) Constant	(f) Decreased allowed	(m) Cook or other house	(h) Co	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) plus	ın or (loss) (f) minus (g)
73,51	0	75,973		-2,463
570,00		570,000		
292,90		364,631		-71,726
		294,408		86,131
		248,350		-53,466
222		1,044,719		-52,576
0.64 4.4		374,505		-10,311
0.40		276,702		-26,802
		316,825		-1,527
<del></del>				
$\frac{301,13}{1,000,01}$		334,765		-33,627
1,982,91		2,165,899		182,980
2) <b>7,938,3</b> 8		10,369,071	-2,4	130,690
3) 1,03				1,036
4) 9,19 5)	97			9,197
		·		
(i) FMV as of 12/31/6	ts showing gain in column (h) and owned by the		(i) Gains (	Col (h) gain minus less than -0-) <b>or</b> om col (h))
	69 (j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Losses (fr	····
				-2,463
)				
)				-71,726
)			-	-86,131
)			-	-53,466
				-52,576
)				-10,311
)				-26,802
)				-1,527
/ 0)				-33,627
0) 1)				82,980
2)		<del> </del>		130,690
	<del></del>	<u> </u>	<u>- , - , - , - , - , - , - , - , - , - ,</u>	1,036
3) 4)		<del> </del>	<del></del>	9,197
			<del></del>	9,191
5)			<u></u>	

GALFOU10 The Galloway Foundation 59-6147133 FYE: 12/31/2009	Federal S	Federal Statements		4/26/2010 4:54 PM
	Statement 1 - Form 990-PF	Form 990-PF, Part I, Line 16a - Legal Fees	Fees	•
	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirectl Legal Expenses Total	\$ 8,718	0             	о "	0 % %
Sta	Statement 2 - Form 990-PF, Pa	m 990-PF, Part I, Line 16b - Accounting Fees	ing Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting and Tax Total	\$ 5,700 \$ 5,700	0 0 0 0	0 w w	0 % %
Staten	Statement 3 - Form 990-PF, Part I.	90-PF, Part I, Line 16c - Other Professional Fees	sional Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Investment fees Total	\$ 118,275 \$ 118,275	\$ 118,275	o o	0 % %
	Statement 4 - Form 990.	4 - Form 990-PF, Part I, Line 18 - Taxes	Sa	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Excise tax 990PF -2008 Refund Foreign income tax	\$ -39,273	\$ 6,159	φ.	
Total	\$ -33,114	\$ 6,159	\$	\$
				1-4

### GALFOU10 The Galloway Foundation Federal Statements

FYE: 12/31/2009

### Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

	Description					
	_	Beginning of Year	End of Year	Basis of Valuation	_	Fair Market Value
Held in UBS,	Fidelity & Wachovia					
	\$_	13,193,223 \$	9,486,660	Cost	\$_	10,581,754
Total	\$=	13,193,223 \$	9,486,660		\$_	10,581,754

### Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description		<u></u>				
		Beginning of Year	End of Year	Basis of Valuation	_	Fair Market Value
Held in UBS, Fidelity & V	Wachovia					
,	\$	5,013,676 \$	9,980,304	Cost	\$_	10,173,556
Total	\$	5,013,676 \$	9,980,304		\$ <u></u>	10,173,556

>
₫
$\mathbf{Q}$
0
2
_
0
_
$\circ$
Ñ
7
2
4

## GALFOU10 The Galloway Foundation 59-6147133 FYE: 12/31/2009

### Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

		Year		
Name	Address			
Address	Relationship	Status	Purpose	Amount
	338 E Lyman Avenue			,
Winter Park FL 32789	None	Exempt	Charitable	20,000
Alzheimer Resource Center	Highland	Drive		(
Orlando FL 32803	None	Exempt	Charitable	23, 932
American Heart Assoc	237 E Marks St.			
Orlando FL 32803	None	Exempt	Charitable	10,000
Bach Festival Society WP	1000 Holt Avenue			
Winter Park FL 32789		Exempt	Charitable	10,000
BETA Center	4680 Lake Underhill	Road		
	None	Exempt	Charitable	150,000
Children Home Society	1600 W. 5th Street,	#20		
Sanford FL 32771	None	Exempt	Charitable	35,000
Christian Help Foundation	450 Seminola Blvd			
Casselberry FL 32707	None	Exempt	Charitable	10,000
Christian Service Center	808 West Central Blv	Ą		
Orlando FL 32805	None	Exempt	Charitable	2,500
Central FL Boy Scouts	1951 S. Orange Bloss	Blossom Tr		
Apopka FL 32703	, (1)	Exempt	Charitable	17,500
Destiny Foundation	150 West Michigan St	reet		
Orlando FL 32806	None	Exempt	Charitable	45,000
Dommerich Elem PTA	1900 Choctaw Trail	ı		
Maitland FL 32751	None	Exempt	Charitable	1,000
Fast Start Management	1140 Whitesell Drive			
Winter Park FL 32789	None	Exempt	Charitable	2,500
Florida Vision Quest	720 West Clolnial Dr	Drive		
Orlando FL 32804	None	Exempt	Charitable	25,000
Fresh Start Ministries	4436 Edgewater Drive			
Orlando FL 32804	None	Exempt	Charitable	2,000
Friends of Mead Gardens	P.O. Box 1227			
Winter Park FL 32790	None	Exempt	Charitable	1,500
Friends of WP Police & Fi	P.O. Box 1240			
Winter Park FL 32790	None	Exempt	Charitable	10,000
	605 Montgomery Road			1
FL		Exempt	Charitable	3,000
	225 S Interlachen Ave	ē		1
Winter Park FL 32789	None	Exempt	Charitable	2,000

ω

_
2
₾
Ŋ
ö
$\Xi$
5
0
$\simeq$
ò
$\tilde{\sim}$
_
$\sim$
$\mathcal{Q}$
4

# GALFOU10 The Galloway Foundation 59-6147133 FYE: 12/31/2009

### Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)
---

Name	Address			
Address	Relationship	Status	Purpose	Amount
Junior Acheivement	2121 Camden Road	Fxemnt	Charitable	18,200
Justice & Peace Office In	52 E. Main Street		) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Apopka FL 32703	None	Exempt	Charitable	2,500
Lighthouse Central Fl	/ Hampsh	ire St		( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
Orlando FL 32804	None	Exempt	Charitable	000's
Maitland Telephone Museum	221 West Packwood Avenue	venue		C C L
Maitland FL 32751	None	Exempt	Charitable	005'/
Make a Wish Foundation	1053 N Orlando Avenue None	ùe F⊻emnt	(hari table	49,000
Mary DePugh Nurshing Home	550 West Morse Blvd.			•
Winter Park FL 32789	None	Exempt	Charitable	40,831
Orange East Rotary Found	P O Box 1566	•		
Winter Park FL 32792	None	Exempt	Charitable	10,000
Orlando Day Nursery	626 Lake Dot Circle			
	None	Exempt	Charitable	2,000
Orlando Shakespeare Theat	812 East Rollins St			1
Orlando FL 32803	None	Exempt	Charitable	25,000
	P.O. Box 531125		-	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
Orlando FL 32853	None	Exempt	Charitable	000,57
Rollins College	1000 Holt Avenue			1 1
Winter Park FL 32789	None	Exempt	Charitable	15,000
Ronald McDonald House	2201 Alden Road			1
Orlando FL 32803	None	Exempt	Charitable	2,000
	3955 W Colonial Dri	Drive		
Orlando FL 32808	None	Exempt	Charitable	45,000
The Church of the Resurec	160116			
Orlando FL 32816	None	Exempt	Charitable	13,000
Welbourne Day Nursery	450 W. Welbourne Av	Avenue		1 1
Winter Park FL 32789	None	Exempt	Charitable	25,939
Winter Park Day Nursery	741 S. Pennsylvania	nia Ave		
Winter Park FL (	None	Exempt	Charitable	94,400
ool Hall	2100 Summerfield Rd			0
Winter Park FL 32792	None	Exempt	Charitable	005'7
Library	ew Engla	nd Ave		000
Winter Park FL 32/89	None	rxembr	cnaritable	000 (03

ω

_
2
5:02
$\circ$
╌.
വ
0
$\overline{}$
$\circ$
/20
_
Ø
4/2

## GALFOU10 The Galloway Foundation 59-6147133 FYE: 12/31/2009

## Federal Statements

and Contributions Paid During the	
a - Grants	•
XV, Line 3	,
990-PF, Part	
_	
Statement	

Year (continued)

Name	Address			
Address	Relationship	Status	Purpose	Amount
 Winter Park Rotary Founda P.O. Box 1416 Winter Park FL 32790 None	.O. Box 1416 None	Exempt	Charitable	30,000
	P.O. Box 597 None	Exempt	Charitable	22,300
	1201 N. Lakemont Av None	Avenue Exempt	Charitable	25,000
 WP/Maitland Habitat for H P.O. Box 1196 Winter Park FL 32790 None	.O. Box 1196 None	Exempt	Charitable	20,000
 Young Life Heart of Orlan 338 E Lyman Avenu- Winter Park FL 32789 None	338 E Lyman Avenue None	Exempt	Charitable	2,000
 Total				1,003,102



### Contribution Request for Program/Project Support

Please complete this form in its entirety.

If a question does not apply, please indicate so by N/A (not applicable).

Criteria for Consideration: Organization must have a 501(c)(3) IRS Determination Letter that reads the same as the organization's name. A copy of the Determination Letter must be attached. Name of Organization: Street Address: Mailing Address: City, State, Zip Code County, Telephone, Fax Telephone Fax Number County E-mail\_\_\_\_\_ Organization Executive: Purpose of Organization: Purpose of Request:

1

Total cost of project: \$	Amount Requeste	:d: \$		
Total pledged toward project at this time.				
**** If we supported your organization lathis form. ****	ist year please at	tach h	ow we v	vere recognized to
List at least five recent contributors towards	this program/pro	ject:		
(Names, Amounts and Dates)				
List three largest contributors' names & amo	ounts in last year	toward	this pro	gram/project:
List any government grants, other support a program/project:	nd/or United Way	y contri	butions	toward this
Does your organization receive funding from	m United Way ? _			\$
Have you ever received funding from the U	nited Way?	Yes	No	Amount
Is this the first request to The Galloway For	undation?	Yes Yes	No No	
Where will the funds be expended? (City, S	State, Region):		<del>-,</del>	
Amount of funds provided going to a nation	nal organization?			

List top three salaries, titles and to whom passealed envelope if necessary):		•
(Requests will not be considered if the ab	ove information is not i	ncluded.)
Total number of paid employees:	Average number of	volunteers:
Estimated cost to operate per month: \$		
Who approves the expenditures of funds? _		
How old is your organization?	Members/Clients Serv	ved Annually:
If applicable: Approximant number of Men	nber/Clients; Daily	Monthly
I have answered the above questions to the hereby certify the 501(c)(3), to the best of k		
Signed by:	Title:	Date:
Telephone:		
Please type or print the name of person pre-	paring request:	
	Title:	