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Form ,990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

1	OMB No 1545-0052
	2011

ZUII

For	alen	dar year 2011 or tax year beginning OCT	1, 2011	, and ending	SEP 30, 2012	
Nan	ne of	foundation			A Employer identification	number
				'	_	
_T	HE	SHANLEY FAMILY FOUNDAT	ION		06-1548816	
		nd street (or PO box number if mail is not delivered to street	•	Room/suite	B Telephone number	
_ <u>C</u>	<u>/0</u>	CUMMINGS & LOCKWOOD LL	C BOX 2505		(203) 869-	1200
		own, state, and ZIP code			C If exemption application is p	ending, check here
		ENWICH, CT 06836				
G C	heck	all that apply Initial return		rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Foreign organizations me 2. check here and attach co	eeting the 85% test,
		Address change	Name change		2. check here and attach co	omputation
HC	_	type of organization X Section 501(c)(3) ex			E If private foundation sta	
<u> </u>			Other taxable private foundang method X Cash	ri T	under section 507(b)(1	
		·	ther (specify)	Accrual	F If the foundation is in a	
	om r ∙\$	Part II, col. (c), line 16) 3 , 913 , 523 . (Part I, colu		hasis)	under section 507(b)(1))(b), check liefe
	ert E				/a) Adjusted not	(d) Disbursements
	<u> </u>	(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	7,260.	, , , , , , , , , , , , , , , , , , ,	N/A	, , , , , , , , , , , , , , , , , , ,
	2	Check I if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	139,029.	139,029.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)			, , , , , , , , , , , , , , , , , , , ,	
ø	6a	Net gain or (loss) from sale of assets not on line 10	6.			<u> </u>
Š	b	Gross sales price for all assets on line 6a 44.				
Revenue	7	Capital gain net income (from Part IV, line 2)		6.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances	1	· · · · · · · · · · · · · · · · · · ·		
		Less Cost of goods sold				
	C	Gross profit or (loss)				
	11	Other income	146 205	120 025		
	12	Total. Add lines 1 through 11	146,295.	139,035.		0.
	13	Compensation of officers, directors, trustees, etc		0.		
	14	Other employee salaries and wages			<u> </u>	
es	15	Pension plans, employee benefits Legal fees STMT 2	2,975.	2,975.		0.
Fxpense	IOA	Legal fees STMT 2 Accounting fees	21313.	21313.		
5 ×		Other professional fees STMT 3	158.	158.		0.
Š å		Interest	1300		RECEIV	ED
CHNNACO nistrative Exper	18	Taxes STMT 4	20,560.	0.		0.
	19	Depreciation and depletion			NOV 2 6 2	1 18
Ē		Occupancy			NOV 2 6 2	₩12 Ģ
를 W	21	Travel, conferences, and meetings			Language Company	88
₫	100	Printing and publications			ÖGDEN	IT -
7107 8 0 Operating an	23	Other expenses				
Zitir	24	Total operating and administrative				
		expenses. Add lines 13 through 23	23,693.	3,133.	_	0.
~ 0	25	Contributions, gifts, grants paid	135,000.			135,000.
	26	Total expenses and disbursements.				
	$oxed{oxed}$	Add lines 24 and 25	158,693.	3,133.	ļ	135,000.
	27	Subtract line 26 from line 12				
		Excess of revenue over expenses and disbursements	<12,398.	105 005		
	1	Net investment income (if negative, enter -0-)		135,902.	37 / 3	
1236	C C	Adjusted net income (if negative, enter -0-)			N/A	000 05

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

THE SHANLEY FAMILY FOUNDATION

123511 12-02-11

Form 990-PF (2011)

06-1548816

Part IV Capital Gains a	and Lo	sses for Tax on In	vestmen	t Income					-	
		and(s) of property sold (e.g or common stock, 200 shs				How ac - Purc - Dona	quired hase ation	(c) Date (mo , d		(d) Date sold (mo , day, yr)
1a .66 DUKE ENERGY	Ž						P	01/1	7/01	07/23/12
b										
<u>C</u>			<u> </u>		ļ				<u>-</u>	
d					<u> </u>					
<u>e</u>				 	Щ		_			
(e) Gross sales price	(1)	Depreciation allowed (or allowable)	107	st or other basis expense of sale					ain or (loss s (f) minus	(g)
a 44.			_	3	8.					6.
b										<u> </u>
C d								·		
6									-	
Complete only for assets showing	g gain in	column (h) and owned by t	he foundation	on 12/31/69			() Gains (C	ol (h) gain	minus
		(i) Adjusted basis		cess of col. (I)				í (k), but r	iot less tha	n -0-) or
(i) F M.V. as of 12/31/69		as of 12/31/69		col (j), if any				Losses	(from col	(n))
a			·							6.
b										
С							_			
d										
<u>e</u>					_					
2 Capital gain net income or (net cap	pital loss	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				6.
3 Net short-term capital gain or (los	s) as def	ined in sections 1222(5) an	d (6)							
If gain, also enter in Part I, line 8,	column (c)			•	_			37/3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	-d C	Section 4940(e) for	Doduces	Toy on Not		3			N/A	<u> </u>
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation does not quality.	ion 4942 fy under	tax on the distributable am section 4940(e). Do not co	mplete this pa	ırt						Yes X No
1 Enter the appropriate amount in e	ach colu		ictions before	making any entri						(d)
(a) Base period years Calendar year (or tax year beginnir	ıg ın)	(b) Adjusted qualifying dist		Net value of no		rıtable-				bùtión ratio vided by col (c))
2010			0,000.		<u> 3</u>	, 09	5,420) •		.032306
2009			0,000. 8,814.				0,954 3,988			.033004
<u>2008</u> 2007			$\frac{6,014.}{4,345.}$				$\frac{3,960}{1,147}$.049888
2006			2,432.				$\frac{1}{8},892$.043183
						750	0,032	-		***************************************
2 Total of line 1, column (d)3 Average distribution ratio for the 5	-voar ba	ca parad - duuda tha tatal c	un lina 2 hy 5	or by the number	of va		•	2	_	.225420
the foundation has been in exister			iiiio 2 Uy 3,		. ye		••	3		.045084
4 Enter the net value of nonchantab	le-use as	sets for 2011 from Part X, I	ıne 5					4		3,669,007.
5 Multiply line 4 by line 3								5		165,414.
6 Enter 1% of net investment incom	ie (1% oi	f Part I, line 27b)						6		1,359.
7 Add lines 5 and 6								7		166,773.
8 Enter qualifying distributions from	ı Part XII	, line 4			_			8		135,000.
If line 8 is equal to or greater than See the Part VI instructions			1b, and comp	plete that part usin	ıg a 1	% tax	rate.			
122521 12 02 11										orm QQA_DE (2011)

_	1990-PF (2011) THE SHANLEY FAMILY FOUNDATION 06-154			Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling of determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		2,7	18.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		2,7	18.
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-		2,7	18.
6	Credits/Payments Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868).			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			61.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2,7	79.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 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 participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	10		Х
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers ▶ \$ 0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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?	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses	10		X

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Form 990-PF (2011) THE SHANLEY FAMILY FOUND			06-15488	16 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to			[17]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		s X No	
any voter registration drive?				
(3) Provide a grant to an individual for travel, study, or other similar purposes: (4) Provide a grant to an expenience other than a charteble, etc., expenience.	•	TE	S TT NO	
(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?	i describen ili sectioni	Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational numbers or f	· · · · —	is LALINU	
the prevention of cruelty to children or animals?	or educational purposes, or i		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc			13 <u>11</u> 110	
section 53 4945 or in a current notice regarding disaster assistance (see instru		ii riegulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	• •	ined	_	
expenditure responsibility for the grant?		/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal 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 s	helter transaction?	Y6	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors		nagers, Highly	<i>'</i>	
1 List all officers, directors, trustees, foundation managers and their	compensation.	I	L (-6) -	1
(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 6		0.	0.	0.
	-			
				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	l	<u>. </u>
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other
NONE				
				1
				<u> </u>
			L	
Total number of other employees paid over \$50,000			▶	0

0.

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average-monthly fair market value of securities	1a	3,629,851. 95,029.
þ	Average of monthly cash balances	1b	95,029.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,724,880.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,724,880.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	55,873.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,669,007.
6	Minimum investment return. Enter 5% of line 5	6	183,450.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	183,450.
2a	Tax on investment income for 2011 from Part VI, line 5 2,718.		
b	Income tax for 2011 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	2,718.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	180,732.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	180,732.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	180,732.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		125 000
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	135,000.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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	
b	Cash distribution test (attach the required schedule)	3b	125 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	135,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, tine 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	135,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7		,		180,732.
2 Undistributed income, if any, as of the end of 2011	, ,,, , , , ,			
a Enter amount for 2010 only			134,045.	
b Total for prior years		**		m-* , m-*
		0.		
3 Excess distributions carryover, if any, to 2011			, ,	/ man //m / / //////// /
a From 2006				
b From 2007				
c From 2008				
d From 2009 .				
e From 2010 .				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ►\$ 135,000.				
a Applied to 2010, but not more than line 2a			134,045.	, ₁ ,
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		, , , , , , , , , , , , , , , , , , ,
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				955.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	***************************************			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	***************************************	0.		
d Subtract line 6c from line 6b Taxable		***************************************		***************************************
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				·
lines 4d and 5 from line 1 This amount must				
be distributed in 2012				179,777.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.			·····
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				Farm 000 DE (0044)

Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		-	· · · · · · · · ·	14040(1)(0) [4040(4)(5)
b Check box to indicate whether the founda		ng toundation described i		4942(j)(3) or L	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	(b) 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(4) 2011	(8) 2010	(6) 2009	(u) 2000	(6) 10(8)
investment return from Part X for					
each year listed					· -
b 85% of line 2a				-	
c Qualifying distributions from Part XII,					
line 4 for each year listed .					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
afternative test relied upon:					
a "Assets" alternative test - enter					
(1) Value of all assets	•				
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) . b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed				-	
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on				ļ	
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				.	
(4) Gross investment income		l			
Part XV Supplementary Infor			if the foundatio	n had \$5,000 d	or more in assets
at any time during th	-	ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation who year (but only if they have contributed me			ributions received by th	e foundation before	the close of any tax
		Section 507 (u)(2))			
VILLIAM C. SHANLEY,			· · · · · · · · · · · · · · · · · · ·		
b List any managers of the foundation who other entity) of which the foundation has			or an equally large por	tion of the ownership	o of a partnership or
NONE	a 1070 of greater intere	Jt.			
2 Information Regarding Contribution			•		
Check here if the foundation or the foundation makes gifts, grants, etc. (ily makes contributions	to preselected charitable	organizations and does	not accept unsoliciti	ed requests for funds. If
	·			complete items za, o	, c, and u.
a The name, address, and telephone numb	er of the person to who	m applications should be	addressed		
SEE STATEMENT 7					
b The form in which applications should be	submitted and informa	ition and materials they st	nould include		
c Any submission deadlines					
	ough so by saccestic	al argae chambala field-	kindo of institutions of	r other feeters	
d Any restrictions or limitations on awards	, such as by geographic	ai areas, charitadie helds,	KINGS OF INSTITUTIONS, OF	other factors	
23601 12-02-11					Form 990-PF (20

Part XVI-A	Analysis of Income-Producing Activities
* *** * * * * * * * * * * * * * * * *	Aliaitala di lilogille i loggollia Adiltilea

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded b	y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
Program service revenue	code	Amount	code	Amount	function income
<u> </u>			+		
b	<u> </u>				
<u> </u>					
d			-		
e					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	139,029.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other		 -			
than inventory			18	6.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory		- "			
Other revenue					
a					
b					
C					
d		<u> </u>			
e				100 000	
Subtotal Add columns (b), (d), and (e)		(0.	139,035.	
Total. Add line 12, columns (b), (d), and (e)			•	. 13	139,03
ee worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt Po	ırposes	
ine No. Explain below how each activity for which inco	me is reported in c	olumn (e) of Part XV	'I-A contributed	importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than				•	

		_					
		-	-	 			
					 		
-							
		-			_		
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12-02-11

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Part XVII	Information	Regarding	Transfers To and	Transactions and	Relationships With No	oncharitable
	Exempt Org	ganizations			·	

1 Did	the org	janization directly or indir	rectly engage in any o	of the following	ng with any other organization	on described in sect	ion 501(c) of		Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Trai	isfers f	from the reporting founda	ation to a noncharitab	le exempt or	ganization of					
(1)	Cash							1a(n)	X
(2)	Other	assets .						1a(2)	X
b Oth	er trans	sactions								
(1)	Sales	of assets to a noncharital	ble exempt organizati	on				16(n l	X
		ases of assets from a noi			•			1b(*	X
		of facilities, equipment,	=	J	•	•		1b(*	X
		oursement arrangements			• •	• •		1b(X
		or loan guarantees				•		1b(X
		mance of services or me	mhershin or fundrais	ına salıcıtatir	nne .	•	•	1b(X
		facilities, equipment, ma	•	-				10	1	X
					iployees edule: Column (b) should alv	wave charm the four r	narkat value of the c			1 41
					ed less than fair market valu					
) the value of the goods, (ie ili aliy transactioi	i vi Silatiliy attaliye	illelit, silow i		
(a) Line no		(b) Amount involved			e exempt organization	(d) 0				
(u) Line in	<u>' </u>	(b) Amount involved	(6) Name of		e exempt organization	(u) Description	of transfers, transaction	ons, and snamng	arrangem	ents
_	+			N/A				_		
	+									
	-									
_										
_										
		.			7 1					
•										
					· · · · · · · · · · · · · · · · · · ·				_	
						<u> </u>				
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described										
		501(c) of the Code (other	•		· ·	zations described			. T	No
		mplete the following sche		(3/) 01 111 360	(1011 321)	•		··	S <u>L</u>	IVU
<u> </u>	6 5, CU	(a) Name of org			(b) Type of organization		(c) Description of re	lationehin		
		N/A	umention .		(b) Type of organization		(b) Description of te	nationamp	_	
_		N/A				<u>-</u>				
										
		<u> </u>								
				-						
	I Index	nenaltice of	that I have a	makes and the same						
٥.					ng accompanying schedules and in taxpayer) is based on all inform			May the IF	S discuss	this
Sign		1.7.	X1	0	ه وأسمى الها	.		return with shown bel	w (see in:	str)?
Here		W C	- I have	MIN.	(,> 1)9	TRUST	EE	_ X Y	es L	_ No
	Sign	ature of officer or trustee	r		Date	Title				
		Print/Type preparer's name		Preparer's s	ignature	Date	Check if	PTIN		
						self- employed				
Paid		ALBERT C. RUA			c/be			P0046		<u> </u>
Prepa	rer	Firm's name ► CUM	MINGS & L	OCKWOO	D LLC		Firm's EIN ► 06-0312590			
Use C	nly					1				
		Firm's address ▶ P.O. BOX 2505								
		GR	EENWICH,	CT 068	136		Phone no 2	03-869	-120	0
Form 990-										

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Employer identification number

Organization type (check one): Filers of: Section:	
Filers of Section:	
There is a second in	
Form 990 or 990-EZ 501(c)() (enter number) organization	
4947(a)(1) nonexempt charitable trust not treated as a private foundation	
527 political organization	
Form 990-PF X 501(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as a private foundation	
501(c)(3) taxable private foundation	
Check if your organization is covered by the General Rule or a Special Rule . Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	le. See instructions.
General Rule	
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m contributor. Complete Parts I and II.	oney or property) from any one
Special Rules	
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or edit the prevention of cruelty to children or animals. Complete Parts I, II, and III.	
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not to lif this box is checked, enter here the total contributions that were received during the year for an exclusive purpose. Do not complete any of the parts unless the General Rule applies to this organization because it religious, charitable, etc., contributions of \$5,000 or more during the year.	tal to more than \$1,000. Ely religious, charitable, etc.,
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B	I, line 2 of its Form 990-PF, to

Name of organization

Employer identification number

THE SHANLEY FAMILY FOUNDATION

06-1548816

Part | Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM C. SHANLEY, III C/O CUMMINGS & LOCKWOOD LLC, BOX 2505 GREENWICH, CT 06836	\$7,260.	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

Name of organization

Employer identification number

-	HANLEY FAMILY FOUNDATION		6-1548816
Part II	Noncash Property (see instructions). Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organ	ization		Employer identification number			
THE SHA	ANLEY FAMILY FOUNDATION	N	06-1548816			
Part III .	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	idual contributions to section 501(c) ne following line entry. For organizatio c, contributions of \$1,000 or less for)(7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III. enter			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I			(L) Cost. plan. o. not girt to not			
-		(e) Transfer of gift	t			
_	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_		(e) Transfer of giff				
	Transferee's name, address, ar	-	Relationship of transferor to transferee			
 - -						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_		(e) Transfer of giff				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, ar	10 ZIP + 4	Relationship of transferor to transferee			
			Cabadula D (Farm 000 000 F7 000 DF) (000			

FORM 990-PF D	IVIDENDS A	ND INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
SOURCE			GROSS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT		
MERRILL LYNCH CUSTODY	ACCOUNT		139,029.		0.	139,0	139,029.	
TOTAL TO FM 990-PF, PAI	RT I, LN 4		139,029.		0.	139,0	29.	
FORM 990-PF		LEGAL	FEES			STATEMENT	2	
DESCRIPTION		(A) PENSES R BOOKS		EST-				
CUMMINGS & LOCKWOOD, LI ACCOUNTING AND TAX PREPARATION FEES	EGAL	2,975.	2,	,975.			0.	
TO FM 990-PF, PG 1, LN	16A	2,975.	2,	,975.			0.	
FORM 990-PF	ОТНЕ	R PROFES	SIONAL FI	EES		STATEMENT	3	
DESCRIPTION		(A) PENSES R BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	CHARITA		
MERRILL LYNCH CMA FEE		158.		158.			0.	
TO FORM 990-PF, PG 1, 1	LN 16C	158.		158.			0.	
FORM 990-PF		TAX	ES	 -		STATEMENT	4	
DESCRIPTION		(A) PENSES R BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM			
U.S. TREASURY, EXCISE S	rax	20,560.		0.			0.	
TO FORM 990-PF, PG 1,	LN 18	20,560.		0.			0.	
	=						=	

FORM 990-PF CO	DRPORATE STOCK		STAT	EMENT		
DESCRIPTION		BOOK VALUE		MARKET ALUE		
2,100 SHS DOMINION RES INC. NEW VA	-	119,44	0.	222,348		
1,866 SHS DUKE ENERGY CORP. NC NEW		108,12		120,898		
3,500 SHS INTEL CORP.		5,53		79,293		
8,000 SHS ALTRIA GROUP INC.		45,91		267,120		
5,100 SHS MICROSOFT CORP.		128,47		151,776		
5,000 SHS M & T BANK CORPORATION 2,800 SPECTRA ENERGY		25,647. 77,970.		475,800		
20,500 SHECTRA ENERGY 20,500 SHS PHILIP MORRIS INTL INC		972 , 40		82,208 843,770,		
9,000 PFIZER INC.		158,60		223,650		
4,800 SOUTHERN COMPANY		189,21		221,232		
5,000 AMERN ELEC PWR CO		199,02		219,700		
TOTAL TO FORM 990-PF, PART II, LIN	NE 10B	2,030,34	3	,907,795		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE			
WILLIAM C. SHANLEY, III	· · · · · · · · · · · · · ·			EXPENSE		
WILDIAM C. DHANDEL, III	CHATDMAN/DDECT		CONTRIB			
	CHAIRMAN/PRESID					
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830	CHAIRMAN/PRESID					
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 GRACE R. SHANLEY		DENT	CONTRIB	ACCOUNT		
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830	0.00	DENT	CONTRIB	ACCOUNT 0		
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 GRACE R. SHANLEY C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 WILLIAM C. SHANLEY, IV	0.00 VICE PRESIDENT	DENT 0.	CONTRIB 0.	ACCOUNT 0		
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 GRACE R. SHANLEY C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 WILLIAM C. SHANLEY, IV C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505	0.00 VICE PRESIDENT 0.00	DENT 0.	CONTRIB 0.	ACCOUNT 0		
C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505 GREENWICH, CT 06830 GRACE R. SHANLEY C/O CUMMINGS & LOCKWOOD LLC P.O. BOX 2505	0.00 VICE PRESIDENT 0.00 VICE PRESIDENT	O. O.	O.	ACCOUNT 0		

GREENWICH, CT 06830

THE SHANLEY FAMILY FOUNDATION				06-1548	816
EDWARD F. RODENBACH C/O CUMMINGS & LOCKWOOD LLC P.O.	TREASURER AND	SECRETARY			
BOX 2505 CREENWICH, CT 06830	0.00	(0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII		<u> </u>	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EDWARD F. RODENBACH CUMMINGS & LOCKWOOD LLC PO BOX 2505 GREENWICH, CT 06836

TELEPHONE NUMBER

203-869-1200

FORM AND CONTENT OF APPLICATIONS

WRITTEN REQUESTS, WITH DETAILED INFORMATION REGARDING ENTITY REQUESTING FUNDS AND DETAILED INFORMATION REGARDING THE CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY OR EDUCATION USE TO WHICH THE FUNDS WILL BE PUT.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

RESTRICTIONS - AWARDS FOR CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES. LIMITATIONS - TRUSTEE'S SOLE DISCRETION AS TO AMOUNT AND/OR ANY RECIPIENT.