

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



SCANNED AND THE 2016

Form **990-P.F**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ 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/form990of. OMB No 1545-0052

For	alen	dar year 2013 or tax year deginning		, and ending		
		foundation	MADE M		A Employer identification	number
		AMANDA O HARMELING AND MELING FAMILY FOUNDATIO			57-1192624	
		nd street (or P O box number if mail is not delivered to street		Room/suite	8 Telephone number	
С	/0	AMANDA HARMELING 8 SWA	978-664-24	32		
		own, state or province, country, and ZIP or foreign p	ostal code	<u> </u>	C if exemption application is p	ending, check here
_		OVER, MA 01810				_
G C	heck	all that apply: Initial return		rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2. Foreign organizations me check here and attach co	eting the 85% test.
		Address change	Name change		check here and attach co	mputation
H (_	type of organization: X Section 501(c)(3) ex		.	E If private foundation sta	
		ction 4947(a)(1) nonexempt charitable trust // rket value of all assets at end of year // J Accounti	Other taxable private foundang method: X Cash	·	under section 507(b)(1)	• •
		· I —	ther (specify)	Accrual	F If the foundation is in a (under section 507(b)(1)	_ [
(<i>''</i>			mn (d) must be on cash t	nasis)	under section 507(0)(1)	(b), check here
	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	1,646.	 –		<u>`</u>
		Check X if the foundation is not required to attach Sch B	, , , , , , , , , , , , , , , , , , ,			
	3	Interest on savings and temporary cash investments				
Revenue	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				-
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a				
ě	7	assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gam RECEIVED	P	0	•	
4	8	Net short-term capital gam RECLI	/8/			
	9	Income modifications Gross sales less returns	100			
	10a	and allowances	4 102			
		Less Cost of goods sold	105	. <u> </u>		
		Gross profit or (loss) Other income OGDEN	U			
	11	Other income OGDL	1 646		1	
	12	Total. Add lines 1 through 11	1,646.	0		0.
	13	Compensation of officers, directors, trustees, etc	0.	<u></u>	• •	· · · · · · · · · · · · · · · · · · ·
	14	Other employee salaries and wages				
S	15	Pension plans, employee benefits Legal fees			- 	
enses	l h	Accounting fees STMT 1	1,320.		. 0.	0.
Exp	ء ا	Other professional fees STMT 2	15.		0.	0.
ě	17	Interest				
Operating and Administrative	18	Taxes				
ist	19	Depreciation and depletion				
Ē	20	Occupancy			-	
Ą	21	Travel, conferences, and meetings			-	
ğ	22	Printing and publications				
ng 8	23	Other expenses				
äţ	24	Total operating and administrative				
ğ		expenses. Add lines 13 through 23	1,335.	0	0.	0.
0	25	Contributions, gifts, grants paid	28,436.			28,436.
	26	Total expenses and disbursements.				
_	L	Add lines 24 and 25	29,771.	0	0.	28,436.
	27	Subtract line 26 from line 12:				
	Į.	Excess of revenue over expenses and disbursements	<28,125.			
	ŀ	Net investment income (if negative, enter -0-)		C		
3235 10-1	01 -	Adjusted net income (if negative, enter -0-)	inchustics:		0.	Form 990-PF (2013)
10-1	3-13	LHA For Paperwork Reduction Act Notice, see	เกอเเนตเซกิซิ.			rum 330-17 ((2013)

For	m 99	0-PF (2013) HARMELING FAMILY FOUNDAT		57-1	.192624 Page 2
Boot II Balance Sheets Attached schedules and amounts in the description		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Coldina Sundra de loi ello-di-yeal amounts omy			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	33,249.	5,124.	5,124.
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 560 •			
		Less: allowance for doubtful accounts ▶	560.	560.	560.
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S and state government obligations			
		Investments - corporate stock			· -
		Investments - corporate bonds			
	١	_ _			
	' '	Investments - land, buildings, and equipment basis			
	12	Less accumulated depreciation			···
		Investments - mortgage loans Investments - other			
	13				
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	•	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	22 000	E 604	E 601
_	<u> </u>	instructions. Also, see page 1, item 1)	33,809.	5,684.	5,684.
	i i	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	1		
10		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
an	25	Temporarily restricted			
Ba	26				
Fund Balanc		Foundations that do not follow SFAS 117, check here			
Į		and complete lines 27 through 31.	j		
s of	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	33,809.	5,684.	
Net Assets	30	Total net assets or fund balances	33,809.	5,684.	
_		[
	31	Total liabilities and net assets/fund balances	33,809.	5,684.	
		Analysis of Changes in Net Assets or Fund Ba	alancee		
	art	Allarysis of Offariges in Net Assets of Fund Bo			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(mu	st agree with end-of-year figure reported on prior year's return)	•	1	33,809.
2	Ente	er amount from Part I, line 27a	2	<28,125.>	
3	Othe	er increases not included in line 2 (itemize)	•	3	0.
4	Add	lines 1, 2, and 3		. 4	5,684.
		reases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	5,684.
_					Form 990-PF (2013)

	MELING FAMILY				57-119	2624 P	age 3
Part IV Capital Gains	and Losses for Tax or	n Investmen	t Income				
	ribe the kind(s) of property sold irehouse; or common stock, 200			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sol (mo., day, yi	
1a							
b NO	NE				-		
С							
d							
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (loss (e) plus (f) minus		
a							
b							
C							
d							
е			•				
Complete only for assets showing	ig gain in column (h) and owned	by the foundation	n on 12/31/69		(I) Gains (Col. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any	,	col. (k), but not less that Losses (from col.		
a			-				
b					· ·		
С				1			
d							
e							
2 Capital gain net income or (net ca		enter in Part I, line er -0- in Part I, line		} 2			
	. (,,		•	/ 			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		o) and (6):		۱ ۱			
If (loss), enter -0- in Part I, line 8	column (c).			} a			
Part V Qualification U	nder Section 4940(e)	for Reduced	Tax on Net	Investment li	ncome		
(For optional use by domestic private							
(1 of optional use by domestic private	o roundations subject to the seed	1011 4040(4) 142 01	i ilot iiivostiiiciit ii	1001110.7			
If section 4940(d)(2) applies, leave the	his part blank.						
Was the foundation liable for the sec	tion 4942 tay on the distributable	e amount of any v	ear in the hase ne	rind?		Yes X	l No
If "Yes," the foundation does not qua			•	1104		.00	
1 Enter the appropriate amount in				entries.	· · · · · · · · · · · · · · · · · · ·		
(a)	(b)		T	(c)		(d)	
Base periód years Calendar year (or tax year beginni	Advioted avaliting	distributions	Net value of no	ncharitable-use asse		bùtión ratio vided by col. (c))	
2012	ing in / · · · · ·	· · · · · · · · · · · · · · · · · · ·			(cor. (b) divided by cor. (c))		
2012					- 		
2010				 			
2009					- 		
2008							
2006	·				-		
2 Total of line 1, column (d)					2		
3 Average distribution ratio for the	5-year hase period - doude the to	ntal on line 2 by 5	or by the number	of years			
the foundation has been in existe		Jiai on line 2 by J,	or by the number	OI years	3		
the loundation has been in existe	nce ii iess man 5 years						
4 Enter the net value of noncharitat	ple-use assets for 2013 from Par	t X, line 5			4		
5 Multiply line 4 by line 3					5		
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)				6		
7 Add lines 5 and 6					7		
8 Enter qualifying distributions from	n Part XII, line 4				8		
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI,	, line 1b, and com	plete that part usin	ng a 1% tax rate.			

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

MA 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

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Form **990-PF** (2013)

By language in the governing instrument, or

remain in the governing instrument?

•				
	THE AMANDA O HARMELING AND MARK M			
-	n 990-PF (2013) HARMELING FAMILY FOUNDATION, INC. 57-119	<u> 2624</u>		Page 5
Pa	art 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		X
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?	13	X	
	Website address ► N/A		100	
14	The books are in care of ► AMANDA O HARMELING Telephone no. ► 978-6			
	Located at ▶ 8 SWAN LANE, ANDOVER, MA ZIP+4 ▶0	1810		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	•
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
n.	country	Щ_		
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		N/	N
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
33	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	- {		1
				ŀ
	(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)? Yes X No			
	. ,	Ì		ľ
	(6) Agree to pay money or property to a government official? (Exception, 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.) Yes X No	ł		
ı	termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	
,	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here	<u> </u>		\vdash
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2013?	10		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	- · · ·		<u> </u>
_	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013? Yes X No	ļ		İ
				1
	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	-	1	l
	statement - see instructions) N/A	2b		
	c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
			}	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	}		
	during the year?	1	1	
	b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			

X

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2013.)

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

		1			
2	Compensation of five highest-paid employees (other than those in	icluded on line 1). 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, othe allowances
	NONE		1		
		4			
	· · · · · · · · · · · · · · · · · · ·		 		
		-			ı
	 			†	
_		7		ŀ	ı
To	tal number of other employees paid over \$50,000			•	·

Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(2) 1) 10 10 10 10 10 10 10 10 10 10 10 10 10	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the iced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on \mathbb{N}/A	nes 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
3	-	
	>	0.
Total. Add lines 1 through 3		Form 990-PF (2013)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions.)
<u> </u>	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	0.
	Average of monthly cash balances	1b	27,482.
	Fair market value of all other assets	1c	
đ		1d	27,482.
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	0.
3	Subtract line 2 from line 1d	3	27,482.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	412.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	27,070.
6	Minimum investment return. Enter 5% of line 5	6	1,354.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	1,354.
	Tax on investment income for 2013 from Part VI, line 5		
	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,354.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,354.
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	1,354.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	20 436
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	28,436.
	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:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	35	28,436.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	20,430.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	•	0.
	Income. Enter 1% of Part I, line 27b	6	28,436.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualines for tr	IR 26011011

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	· · · · · · · · · · · · · · · · · · ·	·.		
line 7				1,354.
2 Undistributed income, if any, as of the end of 2013			_	
a Enter amount for 2012 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2013:		0.		
a From 2008				
b From 2009				
c From 2010 27,872.				
dFrom 2011 37,143.				
e From 2012 42,529.				
f Total of lines 3a through e	107,544.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ►\$ 28,436.	j			
a Applied to 2012, but not more than line 2a			0.	
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.			1 354
d Applied to 2013 distributable amount	27,082.			1,354.
e Remaining amount distributed out of corpus	27,082.			0.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u>0.</u>
6 Enter the net total of each column as indicated below;				,
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	134,626.			
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		0		
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract			•	
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
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 2008				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.	404 404			
Subtract lines 7 and 8 from line 6a	134,626.			
10 Analysis of line 9:				
a Excess from 2009				1
b Excess from 2010 27,872. c Excess from 2011 37,143.				
d Excess from 2011 37, 143. d Excess from 2012 42, 529.				
e Excess from 2013 27, 082.				
21,70021				Form QQ0_DF (2013)

THE AMANDA O HARMELING AND MARK M HARMELING FAMILY FOUNDATION, INC. 57-1192624 Form 990-PF (2013) Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2013 (b) 2012 (c) 2011 (d) 2010 (e) Total income from Part I or the minimum 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 Complete 3a, b, or c for the alternative 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 c "Support" alternative test - enter-(1) Total support other than gross investment income (interest. dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see instructions.) 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).) 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. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔀 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;
- b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
CYSTIC FIBROSIS FOUNDATION				
220 NORTH MAIN STREET, SUITE 104				
NATICK, MA 01760				25,000.
PENN STATE DANCE MARATHON				
210 HUB				
UNIVERSITY PARK, PA 16802				200.
CONGREGATIONAL CHURCH OF TOPSFIELD				
9 E COMMON ST				
TOPSFIELD, MA 01983				1,100.
SUPPORTIVE LIVING INC				
400 W CUMMINGS PARK				
WOBURN, MA 01801				200.
UNITED CHURCH OF CHRIST				
700 PROSPECT AVE E				
CLEVELAND, OH 44115			<u> </u>	200.
	TINUATION SHEE	ET(S)	▶ 3a	28,436.
b Approved for future payment				
NONE				
				-
	 	-		
		1		
Total	<u> </u>		▶ 3b	0.
10(4)	·			<u> </u>

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue.	code		code	74770411	
a			╂		
b			+		
<u> </u>			+		
<u> </u>			+		
e			+		
Total and analysis from any analysis and analysis from the same and analysi			+		
g Fees and contracts from government agencies			+-		
2 Membership dues and assessments			+		· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate.					
a Debt-financed property			Ι		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a			}		
b					
C					
d		•			
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	
_		
_		
KANEAT .		
323621 10-10-13	Form 990-PF (2	2013

HARMELING FAMILY FOUNDATION, INC. Form 990-PF (2013)

Part XVII	Information Re Exempt Organ		sfers To a	and Trans	actions a	nd Relations	hips With Non	charitabl	е	
1 Did the o	rganization directly or indi		of the followin	g with any other	er organizatio	n described in secti	on 501(c) of		Yes	No
	(other than section 501(c									
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
(1) Cast				9				1a(1)		X
(2) Othe								1a(2)		X
b Other trai								1:3(5/		
	s of assets to a noncharita	ble exempt organizat	tion					16(1)	i '	X
• •	hases of assets from a no	• •						1b(2)		<u> </u>
•	al of facilities, equipment,	•	, gamzanon					1b(3)	 	X
- •	bursement arrangements							1b(4)		X
	is or loan guarantees							1b(5)		X
	ormance of services or me	mhership or fundrag	sına salıcıtatın	ne				1b(6)		X
	of facilities, equipment, ma	· ·	-					1c		$\frac{1}{X}$
-	wer to any of the above is	-			(h) should alw	avs show the fair m	narket value of the oc		sets	
	es given by the reporting for		_				_		JO 13,	
	d) the value of the goods,			00 1000 111011 101	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o in any mandadition	or onering arrangem	,		
(a)Line no	(b) Amount involved			e exempt organ	ization	(d) Description	of transfers, transaction	s. and sharing a	rangeme	nts
``		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A			1				
										
						· · · · · · · · · · · · · · · · · · ·		······································		
					•	-				
										-
						 				
						1				
		· · · -								
		·				 				
					· · ·	·				
					·		 			
+		-								
	·									
2a Is the for	indation directly or indirec	tly affiliated with or	related to one	or more tax-ex	cempt organiz	rations described		81		
	n 501(c) of the Code (othe	•			tompt or game			Yes	X	No
	complete the following sch	,)(0)) or in 300.	HOH DET						
100, c	(a) Name of org		·	(b) Type of o	rganization		(c) Description of rel	ationship		
	N/A			1,7,21			· · · · · · · · · · · · · · · · · · ·			
				 						
										
				 		- ·				
		· -				 				
	r penalties of perjury, I declare							May the IRS	dicouce	thie
Sign and t	pelief, it is true, correct, and cor	mplete Declaration of pr	eparer (other tha	ın taxpayer) is bas	ed on all inform	ation of which prepare	r has any knowledge	return with the	ne prepai	er
Here	amiad	1 dels h	me l	ind 8	1/1/14	PRESI	DENT	X Yes		No
Sig	nature of officer or trustee	1400	,,,,,,	Date	1:1:1	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature /		Date	Check if	PTIN		
				. (_	1 1	self- employed			
Paid	THOMAS W.	GOODWIN	The	w /In	A 🔪	1/27/14		P01257	168	
Preparer	Firm's name ► GOC		NERS L	LP		+ -·/·/	Firm's EIN ► 20			
Use Only									-	
•	Firm's address ▶ 20	0 WHEELER	RD. 2	ND FLO	OR		† · · · · · · · · · · · · · · · · · · ·			
	BURLINGTON MA 01803						Phone no 781	-328-4	312	

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				
· Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MA CONFERENCE UNITED CHURCH OF CHRIST				
ONE BADGER ROAD				
FRAMINGHAM, MA 01702				200
CONTARE CON VIVO				
1611 TELEGRAPH AVE STE 801				
OAKLAND, CA 94612				200
PMC JIMMY FUND				
77 4TH AVENUE				
NEEDHAM, MA 02494				150
BOSTON UNIVERSITY				
745 COMMONWEALTH AVE				
BOSTON, MA 02215				500
PIEDMONT GARDENS				
110 41 ST				
OAKLAND, CA 94611				200
UNIVERSITY OF CHICAGO				
1427 EAST 60THE STREET SUITE 120				
CHICAGO, IL 60637				100
UNION CONGREGATIONAL CHURCH OF NORTH			ļ	
READING	İ			
148 HAVERHILL STREET				
NORTH READING, MA 01864				186
uso				
8-2, 427 COMMERCIAL STREET				
BOSTON, MA 02109				100
HEIFER INTERNATIONAL				
1 WORLD AVENUE				
LITTLE ROCK, AR 72202				100
Total from continuation sheets		<u> </u>		1,736

FORM 990-PF	ACCOUNTING FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	•	CHARITABLE	
	1,320.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16B	1,320.	0.	0.	0.	
FORM 990-PF C	OTHER PROFESSIONAL FEES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE	
FILING FEES	15.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	15.	0.	0.	0.	

	LIST OF OFFICERS, I AND FOUNDATION MANA		STAT	EMENT 3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
AMANDA O. HARMELING 8 SWAN LANE ANDOVER, MA 01810	PRESIDENT, CLE	ERK & DIRECTO	OR 0.	0.
MARK M. HARMELING 8 SWAN LANE ANDOVER, MA 01810	TREASURER & DI	RECTOR 0.	0.	0.
TAYLOR O. HARMELING 8 SWAN LANE ANDOVER, MA 01810	DIRECTOR 0.00	0.	0.	0.
ASHLEY A. HARMELING 8 SWAN LANE ANDOVER, MA 01810	DIRECTOR 0.00	0.	0.	0.
RACHEL D. HARMELING 8 SWAN LANE ANDOVER, MA 01810	DIRECTOR 0.00	0.	0.	0.
EVAN G. HARMELING 8 SWAN LANE ANDOVER, MA 01810	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	0.	0.	0.

Form **8868** (Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs gov/form8868 •

OMB No. 1545-1709

						
•	are filing for an Automatic 3-Month Extension, complete	-				► X
•	are filing for an Additional (Not Automatic) 3-Month Ex	-				
	omplete Part II unless you have already been granted a					_
	ic filing (e-file). You can electronically file Form 8868 if y					
•	to file Form 990 T), or an additional (not automatic) 3-moi		=			
	of lie any of the forms listed in Part I or Part II with the exc	•				
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details	on the elec	tronic filing	of this form,
	rirs gov/efile and click on e-file for Chanties & Nonprofits					
Part I						
•	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		. —
Part I onl						▶ □
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and ti	rusts must use Form 7004 to reques			
				Enter filer's identifying number		
ype or	Name of exempt organization or other filer, see instru		34	Employer identification number (
orint	THE AMANDA O HARMELING AND			F7 1102624		
ile by the	HARMELING FAMILY FOUNDATION			57-1192624		
lue date for	Number, street, and room or suite no. If a P.O. box, s			Social security number (SSN)		per (SSN)
ling your eturn See	C/O AMANDA HARMELING 8 SWAI					
nstructions	51.77 to 11.1 51 post 511.150; 51.115 21.1 5555 1 51 a 16	oreign add	ress, see instructions			
	ANDOVER, MA 01810					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
s For		Code	Is For			Code
om 990	or Form 990-EZ	01	Form 990-T (corporation)			07
orm 990)-BL	02	Form 1041-A			08
orm 47	20 (individual)	03	Form 4720 (other than individual)			09
orm 99)-PF	04	Form 5227			10
	O-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
orm 99	D-T (trust other than above)	06				12
	AMANDA O HARMEI		01010			
• The b	ooks are in the care of 8 SWAN LANE - 2	ANDOV.	ER, MA 01810			*****
Telep	hone No ▶ 978-664-2432		Fax No 🕨			
	organization does not have an office or place of busines		•			▶ □
If this	is for a Group Return, enter the organization's four digit	٦.				
oox 🕨			ach a list with the names and EINs o		ers the exte	ension is for.
1 re	equest an automatic 3-month (6 months for a corporation	•	•			
	AUGUST 15, 2014, to file the exemp	t organiza	tion return for the organization nam	ed above	The extens	ion
	for the organization's return for					
	X calendar year 2013 or					
	tax year beginning	, an	nd ending		_ ·	
2 If t	he tax year entered in line 1 is for less than 12 months, o	heck reas	ion: L. Initial return L.	Final retur	n	
<u> </u>	Change in accounting period			,		
3a If t	his application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			_
	nrefundable credits. See instructions.			3a	\$	0.
b If t	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			_
es	timated tax payments made. Include any prior year over	oayment a	llowed as a credit.	3b	\$	0.
c Ba	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,			-		
	using EFTPS (Electronic Federal Tax Payment System).			3c_	\$	<u> </u>
	. If you are going to make an electronic funds withdrawal	(direct de	ebit) with this Form 8868, see Form	8453-EO a	nd Form 88	79-EO for payment
instruction	ons					