

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



DLN: 93491317010454

OMB No 1545-0052

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. By law, the IRS cannot redact the information on the form.
► Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2013, or tax year beginning 01-(01-2013 , and	end	ding 12-31-	2013 entification number	or .
		TON FOUNDATION INC				entineation number	3
%	тім мс	KEON			75-1212458		`
		street (or P O box number if mail is not delivered to street address FON NORTHBELT PLAZA 2	Room/suite			mber (see instruction	15)
		M HOUSTON PARKWAY E Suite			(713) 839-4818	3	
		, state or province, country, and ZIP or foreign postal code X 77032			C If exemption	application is pendin	g, check here 🕨 🦵
— с	heck a	Ill that apply	f a former public chai	ity	D 1 . Foreian oi	ganizations, check h	ere 🕨 🗖
		Final return Amended return		,		rganizations meeting	• •
		Address change Name change			1	e and attach comput undation status was t	ation '
		pe of organization Section 501(c)(3) exempt priva				n 507(b)(1)(A), chec	. –
		4947(a)(1) nonexempt charitable trust Other taxa set value of all assets at end J Accounting method	Cash Acci		F 16 4b - 6d		L 4
of	ear (f	rom Part II, col. (c),	r casii r Acci	uai		ation is in a 60-mont n 507(b)(1)(B), chec	
line	e 16) F :	\$ 21,575,387 (Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,000,000				
	2	Check F if the foundation is not required to attach					
	3	Sch B Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	159,939		159,939		
	5a	Gross rents	205,505		103,303		
	ь	Net rental income or (loss)					
Ф	6a	Net gain or (loss) from sale of assets not on line 10	340,908				
Reveilue	ь	Gross sales price for all assets on line 6a 7,276,874					
Ð.	7	Capital gain net income (from Part IV, line 2)			340,908		
_	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and					
		allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	2,500,847		500,847		
	12	Total. Add lines 1 through 11	2,300,647		300,847		
	13 14	Other employee salaries and wages	3				
yr.	15	Pension plans, employee benefits					
ž		Legal fees (attach schedule)					
Expenses		Accounting fees (attach schedule)					
		Other professional fees (attach schedule)	9,364		9,364		
Admını strative	17	Interest					
trai	18	Taxes (attach schedule) (see instructions)	2,000				
Ξ	19	Depreciation (attach schedule) and depletion					
틀	20	Occupancy					
Ā	21	Travel, conferences, and meetings					
pue	22	Printing and publications					
ĺά	23	Other expenses (attach schedule)	39,000				
Operating	24	Total operating and administrative expenses.					
ğ		Add lines 13 through 23	50,364		9,364		0
0	25	Contributions, gifts, grants paid	3,251,242		_		3,251,242
	26	Total expenses and disbursements. Add lines 24 and 25	3,301,606		9,364		3,251,242
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-800,759				
	b	Net investment income (if negative, enter -0-)			491,483		
	l c	Adjusted net income (if negative, enter -0 -)					I

		Palane Charte Attached schedules and amounts in the description column	Beginning of year	End o	f year
Pa	rt II	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	599,005	156,434	156,434
	2	Savings and temporary cash investments			_
	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			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts -			
ای	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
ማዘ	_	Investments—U S and state government obligations (attach schedule)			
]		Investments—corporate stock (attach schedule)			
		Investments—corporate bonds (attach schedule)			
		Investments—land, buildings, and equipment basis			
	11	Less accumulated depreciation (attach schedule)			
	40	Investments—mortgage loans			
		,	16,164,753	4 15 906 165	21 419 052
		Investments—other (attach schedule)	16,164,755	15,806,165	21,418,953
	14	Land, buildings, and equipment basis ▶		I	
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
_		instructions Also, see page 1, item I)	16,763,758	15,962,599	21,575,387
	17	Accounts payable and accrued expenses	400		
	18	Grants payable			
IEI es	19	Deferred revenue			
┋╽	20	Loans from officers, directors, trustees, and other disqualified persons			
[ap	21	Mortgages and other notes payable (attach schedule)			
╼╽	22	Other liabilities (describe 🟲)			
_	23	Total liabilities (add lines 17 through 22)	400	0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Л		and complete lines 24 through 26 and lines 30 and 31.			
or Fund Balances	24	Unrestricted			
티	25	Temporarily restricted			
8	26	Permanently restricted			
힏		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ā		and complete lines 27 through 31.			
히	27	Capital stock, trust principal, or current funds	10,913,764	10,913,764	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds	5,849,594	5,048,835	
	30	Total net assets or fund balances (see page 17 of the			
₹		ınstructions)	16,763,358	15,962,599	
_	31	Total liabilities and net assets/fund balances (see page 17 of			
		the instructions)	16,763,758	15,962,599	
Pa	rt II				
			(a) line 30 (- I	
1		Total net assets or fund balances at beginning of year—Part II, column			16 762 250
_		with end-of-year figure reported on prior year's return)			16,763,358
2		Enter amount from Part I, line 27a			-800,759
3		Other increases not included in line 2 (itemize)			
4		Add lines 1, 2, and 3			15,962,599
5		Decreases not included in line 2 (itemize)		_ 5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), li		15,962,599

Form 99	90-PF (2013)							Page 3
Part 1	V Capital Gains a	nd Losses for Tax on Inve	estme	nt Income				
		he kınd(s) of property sold (e g , ı use, or common stock, 200 shs			(b) How acquire P—Purchase D—Donation	(c) L	ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1 a	VANGUARD TOTAL B	SOND MARKET INDVANGUARD	тот вс	O MKT I				
b	S&P 500 NON QUALI	FIED CTF	F					
С С	VANGUARD TOTAL B	SOND MARKET INDVANGUARD	тот вс	O MKT I				
d	VANGUARD TOTAL B	SOND MARKET INDVANGUARD	тот вс) MKT I				
e	VANGUARD TOTAL B	SOND MARKET INDVANGUARD	ТОТ В	O MKT I				
(e) Gross sales price	(f) Depreciation allow (or allowable)	ed		or other basis pense of sale			or (loss)) mınus (g)
a		1,780		•	1,70	59		11
b	1,53	3,624			1,238,79	97		294,827
С С		1,873			1,7	17		126
d	5,739	9,597			5,675,2	52		64,345
е					18,40)1		-18,401
	mplete only for assets sh	nowing gain in column (h) and own	ned by tl	he foundation	on 12/31/69	+ ,	D Gains (Col	(h) gain minus
	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Exc	ess of col (ı) ol (j), ıf any		l (k), but not l	less than -0-) or om col (h))
a								11
b								294,827
с								126
d								64,345
е								-18,401
2	Capital gain net incom	e or (net capital loss)			n Part I, line 7 in Part I, line 7	. 2		340,908
3	Net short-term capital	gain or (loss) as defined in secti	ons 122	22(5) and (6)			†	·
Part	ın Part I, line 8 .	art I, line 8, column (c) (see instr · · · · · · · · · · · · · · · · · · ·				} 3 ent Ir	ncome	
Was the If "Yes,	" the foundation does not	eave this part blank section 4942 tax on the distribut t qualify under section 4940(e) E nt in each column for each year, s	Oo not c	omplete this	part			┌ Yes ┌ No
	(a) period years Calendar	(b)	T	(c)			(d) Distribution	
	or tax year beginning in)	Adjusted qualifying distributions	Net v	alue of nonchar	itable-use assets		(col (b) divided	by col (c))
	2012	2,660,372			18,160,802			0 14649
	2011	2,527,722			16,083,783			0 15716
	2010	1,977,409			13,570,436			0 145714
	2009	1,855,046			10,718,396			0 173071
	2008	2,861,925			11,177,056			0 256054
2	Total of line 1, column	(d)				2		0 878489
3	A verage distribution ra	atıo for the 5-year base perıod—d	livide th	e total on line	e 2 by 5, or by			
	the number of years th	e foundation has been in existend	ce if les	s than 5 year	·s	3		0 175698
4	Enter the net value of	noncharitable-use assets for 201	.3 from	Part X, line 5		4		20,485,806
5	Multiply line 4 by line	3				5		3,599,315
6	Enter 1% of net invest	tment income (1% of Part I, line 2	27b).			6		4,915
7	Add lines 5 and 6					7		3,604,230
8		outions from Part XII, line 4 greater than line 7, check the box			L	8 t part u	 sing a 1% tax	3,251,242 crate See
	the Part VI instruction			-, ····- ,		, u	70 147	

	990-PF (2013) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio		age 4
		Tuctio	115)	
1a	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see ; instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		9	9,830
	here Fand enter 1% of Part I, line 27b			<u> </u>
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-)			
3	Add lines 1 and 2		9	9,830
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		9	9,830
6	C redits/P ayments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 2,000			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c 8,000			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		10	,000
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached. 🕏 🔒			80
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 • 10			90
11	Enter the amount of line 10 to be Credited to 2014 estimated tax 90 Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign? 🕏	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of			
	the instructions for definition)?	1b		No
	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?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\blue{\textbf{k}} \blue{} \t			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.	-		110
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ча b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		.10
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
•	If "Yes," attach the statement required by General Instruction T.	 		-110
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
J	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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and			
-	Part XV.	7	Yes	
Ва	Enter the states to which the foundation reports or with which it is registered (see instructions) TX			
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	Yes	
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	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	10		No

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			110
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶_			
			2674	
14	The books are in care of ►TIM MCKEON Telephone no ►(281)			
	Located at ►3000 N SAM HOUSTON PARKWAY E HOUSTON TX ZIP+4 ►77032			
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			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the			
	foreign country 🕨			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	l		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🔽 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon 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 🔽 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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?	1 c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
	If "Yes," list the years > 20, 20, 20			
b	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)	26		Na.
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2-	▶ 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation			
U	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2013.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
ъ b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	141		.10
,	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		No
	, produced the second s		, ,	

Pa	rt VII-B	Statements Rega	rding Activ	ities for W	hich Form 4720	May	Be Required (cont	inued)		
5a		e year did the foundation				-				
	(1) Carry	on propaganda, or other	wise attempt t	o influence le	gıslatıon (section 49	45(e)) [?]	√ No		
	(2) Influe	nce the outcome of any	specific public	election (see	section 4955), or to	carı	-y			
							\ Yes \	√ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc , organization described									
	ın sec	tion 509(a)(1), (2), or (3	3), or section 4	1940(d)(2)? (see instructions).		Yes	√ No		
	(5) Provid	de for any purpose other	than religious	, charıtable, s	cientific, literary, or					
	educa	itional purposes, or for t	he prevention	of cruelty to c	hildren or animals?.		Yes 🖟	√ No		
b	b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in									
	Regulatio	ns section 53 4945 or i	n a current not	ice regarding	dısaster assıstance	(see	ınstructions)?	:	5b	
	O rganızat	tions relying on a curren	t notice regard	ling disaster a	ssistance check her	e	▶↑	-		
c	If the ans	wer is "Yes" to question	5a(4), does t	ne foundation	claim exemption from	n the				
	tax becau	ise it maintained expend	iture responsi	bility for the g	ırant?		Yes	- No		
	If "Yes," a	attach the statement requi	red by Regulati	ons section 5.	3.4945-5(d).					
6a	Did the fo	undation, during the yea	r, receive any	funds, directl	y or indirectly, to pay	pren	niums on			
	a persona	Il benefit contract?					Yes	√ No		
b	Did the fo	undation, during the yea	r, pay premiun	ns, directly or	ındırectly, on a pers	onal l	penefit contract?	.	5b	No
	If "Yes" to	6b, file Form 8870.								
7a	At any tin	ne during the tax year, w	as the foundat	ion a party to	a prohibited tax she	lter tı	ransaction? TYes F	√ No		
b	If yes, did	the foundation receive	any proceeds	or have any n	et income attributabl	e to t	he transaction?	. ;	7b	
		Information About	Officers, D	Directors,	rustees, Founda	atio	n Managers, Highly	Paid E	mplo	yees,
Pa	rt VIII	and Contractors		•					•	<u> </u>
1	List all off	icers, directors, trustees	l							
	(a) Na	me and address	(b) Title, and hours per		(c) Compensation	1	(d) Contributions to mployee benefit plans	(e) Exp	ense	account,
	(a) Ivai	ille alla address	devoted to		(If not paid, enter -0-)		deferred compensation	othe	allow	ances
See	A ddıtıonal	Data Table			·		·			
	C	tion of five biobook world		<u> </u>	as included an line 1		instructions). If none, e		NIT "	
	compensa	tion of Tive nignest-paid	<u> </u>			-see	(d) Contributions to	ler NO	NE.	
(a)	Name and	address of each employ		, and average s per week	(c) Compensation	. n	employee benefit	(e) Exp	ense	account,
	paid n	nore than \$50,000		d to position	(c) Compensation	J11	plans and deferred	othe	allow	ances
							compensation			
Tota	I number of	f other employees paid o	ver \$50,000							

Information About Officers, Directors, Trust	ees, Foundation Managers, Hig	jhly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro-		of Expenses
1	uuceu, etc	
2		
3		
4	(
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during		A mount
1	,	77777
2		
All other program-related investments See page 24 of the instruction	ıs	
3		
Total. Add lines 1 through 3		•

	990-PF (2013) TTX Minimum Investment Return (All domestic foundations must complete this part. Fo	reign	Page 8 foundations,
	see instructions.)	1	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
_	purposes		20 245 274
a	Average monthly fair market value of securities	1a	20,245,374
b	Average of monthly cash balances	1b	552,399
С	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	20,797,773
е	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	20,797,773
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	311,967
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	20,485,806
6	Minimum investment return. Enter 5% of line 5	6	1,024,290
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operacertain foreign organizations check here F and do not complete this part.)	atıng	foundations and
1	Mınımum ınvestment return from Part X, line 6	1	1,024,290
2a	Tax on investment income for 2013 from Part VI, line 5 2a 9,830		
Ь	Income tax for 2013 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	9,830
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,014,460
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,014,460
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,014,460
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,251,242
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	0
3	A mounts set aside for specific charitable projects that satisfy the		

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Cash distribution test (attach the required schedule).

5

0

3,251,242

3,251,242

За

3b

4

5

	art XIII Olidisti ibuted Tilcollie (see ilistic	ictions)			
		(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1	Distributable amount for 2013 from Part XI, line 7	Corpus	rears prior to 2012	2012	1,014,460
	Undistributed income, if any, as of the end of 2013				
	Enter amount for 2012 only				
	Total for prior years 2011, 2010, 2009				
	Excess distributions carryover, if any, to 2013 From 2008 2,888,457				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	Total of lines 3a through e	11,909,006			
	Qualifying distributions for 2013 from Part				
7	XII, line 4 \$ 3,251,242				
а	Applied to 2012, but not more than line 2a				
	Applied to undistributed income of prior years				
b	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2013 distributable amount				1,014,460
е	Remaining amount distributed out of corpus	2,236,782			
5	Excess distributions carryover applied to 2013				
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,145,788			
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 instructions				
е	Undistributed income for 2012 Subtract line				
	4a from line 2a Taxable amount—see				
_	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) (see				
_	Instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	2,888,457			
9	Excess distributions carryover to 2014.				
9	Subtract lines 7 and 8 from line 6a	11,257,331			
10	Analysis of line 9				
	Excess from 2009 1,855,046				
	Excess from 2010 1,977,409				
c	Excess from 2011 2,527,722				
d	Excess from 2012 2,660,372				
е	Excess from 2013 2,236,782				

P	art XIV Private Operating Four	ndations (see ir	nstructions and P	art VII-A, questic	on 9)	
a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2				•	
b	Check box to indicate whether the organiza	ation is a private o	perating foundatior	n described in sectio	on Г 4942(j)(3) o	r Г 4942(j)(5
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	investment return from Part X for each year listed		, ,		, ,	
b	85% of line 2a					
	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c					
(Complete 3a, b, or c for the					
•	alternative test relied upon					
l	"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					
	of minimum investment return shown in Part X, line 6 for each year listed					
	"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					
	rt XV Supplementary Information	n (Complete t	his nart only if	the organization	n had \$5 000 (or more in
-	assets at any time during			the organization	on naa 45,000 (31 III 01 C III
	Information Regarding Foundation Manage		-			
	List any managers of the foundation who habefore the close of any tax year (but only i					dation
	NONE					
	List any managers of the foundation who ov				ly large portion of th	ne
	ownership of a partnership or other entity)	of which the founda	atıon has a 10% or	greater interest		
	NONE					
	NONE	City City				
	Information Regarding Contribution, Grant					
	Check here if the foundation only mal	kes contributions t	o preselected char	itable organizations	and does not accep	ot
	unsolicited requests for funds. If the found other conditions, complete items 2a, b, c		grants, etc (see in	structions) to indivi	auais or organizatio	ns under
_	other conditions, complete items 2a, b, c,	anu u				
_	The many adds 100 to 10		- 6 Ll	L		
3	The name, address, and telephone number	r or e-mail address	of the person to w	nom applications sh	ould be addressed	
	BRINDA MAXWELL					
	10200 BELLAIRE BLVD HOUSTON,TX 77072					
	(281) 575-3558					
<u> </u>	The form in which applications should be s	submitted and infor	mation and materia	als they should incli	ıde	
•	APPLICATION SHOULD BE MADE BY LE			· ·	. 	
_		I. I EN AND INCLU	DE THE AROUNT			
•	Any submission deadlines NO DEADLINE APPLICANTS ARE NOTI	FIED OF APPROV	/AL OR DECLINE :	IN 3 MONTHS		
-	Any restrictions or limitations on awards,				institutions or othe	 er
	factors	, guogiu	, 3.020, 011411	and the state of t		
	CEE ATTACHED CTATEMENT					

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7.1110 4110
a Paid during the year See Additional Data Table	or substantial contributor			
Total				3,251,24
b Approved for future payment INTERNATIONAL SCHOLARSHIP AND TUITION SERVICE INC 1321 MURFREESBORO PIKE STE 800 NASHVILLE, TN 37217			EDUCATION	172,50
Total		1	h 2h	172.50

	-PF (2013) T-A Analysis of Income-Produc	ina Activitie				Page 1 2
	ss amounts unless otherwise indicated		usiness income	Excluded by sectio	n 512, 513, or 514	(e)
	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See instructions)
2 Memb	and contracts from government agencies ership dues and assessments est on savings and temporary cash					
	tments					
4 Divide	ends and interest from securities					159,93
5 Netre	ental income or (loss) from real estate					
	t-financed property					
6 Netre	debt-financed property ental income or (loss) from personal erty					
	investment income					
8 Gain	or (loss) from sales of assets other than tory					340,90
9 Netin	come or (loss) from special events					310,50
. 0 Gross	profit or (loss) from sales of inventory					
	revenue a					
2 Subto	tal Add columns (b), (d), and (e).					500,84
	Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify c			:	13	500,847
Line No.	Explain below how each activity for whith the accomplishment of the foundation's instructions.					
	HALLIBURTON FOUNDATION INC AC MAKING CHARITABLE GIFTS AND GRAP PROGRAM-RELATED INVESTMENTS A RECEIVED BY THE FOUNDATION THAT PURPOSE OF THE ORGANIZATION	NTS AND DOI	ES NOT CONDUC EPORTED REPRE	T ANY CHARITAE SENTS INVESTMI	BLE ACTIVITIES ENT INTEREST A	OR MAKE ND DIVIDENDS
	HALLIBURTON FOUNDATION INC AC MAKING CHARITABLE GIFTS AND GRAPROGRAM-RELATED INVESTMENTS A FOUNDATION THAT CONTRIBUTE IMPORGANIZATION	NTS AND DOI	ES NOT CONDUC EPORTED REPRE	T ANY CHARITAE SENTS GAINS OR	BLE ACTIVITIES LOSSES RECEI	OR MAKE VED BY THE
	_					
	+					
	•					

rait	VATT	Noncharitable			nizations	actions	allu Kelati	onsinps with			
		ganızatıon dırectly or ı	ndırectly en	ngage	ın any of the following wit 01(c)(3) organizations) oı					Yes	No
org	anızatı	ons?									
a Tra	nsfers	from the reporting four	ndatıon to a	nonc	harıtable exempt organıza	tion of					
(1)	Cash								1a(1)		No
(2)	Other	rassets							1a(2)		No
b Oth	er trar	sactions									
(1)	Sales	of assets to a noncha	rıtable exer	mpt or	rganızatıon				1b(1)		No
(2)	Purch	nases of assets from a	noncharital	ble ex	empt organization				1b(2)		No
(3)	Renta	ıl of facılıtıes, equipme	nt, or other	asset	ts				1b(3)		No
(4)	Reıml	bursement arrangemer	nts						1b(4)		No
(5)	Loans	s or loan guarantees.							1b(5)		No
(6)	Perfor	mance of services or n	nembership	or fur	ndraising solicitations				1b(6)		No
c Sha	ring of	facilities, equipment,	mailing lists	s, oth	er assets, or paid employe	ees			1c		No
of t	he goo ny trar	ds, other assets, or se	rvices give angement, s	n by t show i	ete the following schedule the reporting foundation I in column (d) the value of naritable exempt organization	the found the good:	dation received s, other assets	l less than fair mark	et value ed		nte
(u) Line		(b) Amount involved	(c) Name o	THOTICI	iantable exempt organization	(4) 50	scription or transi	ers, transactions, and she	aning ana	ngemer	103
des	crıbed		he Code (ot schedule		(th, or related to, one or notes an section 501(c)(3)) or	ın section			. FYe	ıs F	No
							+				
							1				
Sign	the b		and belief, it	ıs tru	have examined this return ue, correct, and complete as any knowledge						
Here	 k				2014-11-13	- k			IRS discuss preparer sh		
	7 9	Signature of officer or t	rustee		Date	— ┍ ╷	ıtle	(see inst	r)? Ye	s No)VV
		Print/Type preparer's	s name	Prep	arer's Signature	D	ate	Check if self- employed ▶ P	ΓIN	_ _	_ _
Paid Prepa Use (Firm's name 🕨						Firm's EIN ►			
JJC (J.111 y	Firm's address 🕨						Phone no			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
D J LESAR	TRUSTEE	0	0	0
3000 N SAM HOUSTON PKWY E HOUSTON,TX 77032	0 1			
LAWRENCE POPE	TRUSTEE 0 1	0	0	0
3000 N SAM HOUSTON PKWY E HOUSTON,TX 77032				
BRINDA MAXWELL	ADMINISTRATOR 0 1	0	0	0
10200 BELLAIRE BLVD HOUSTON,TX 77072				
TIM MCKEON	TREASURER	0	0	0
3000 N SAM HOUSTON PKWY E HOUSTON,TX 77032	0 1			
JEFF MILLER	TRUSTEE	0	0	0
3000 N SAM HOUSTON PKWY E HOUSTON,TX 77032	0 1			
CINDY BIGNER	VP AND SECRETARY	0	0	0
3000 N SAM HOUSTON PKWY E HOUSTON.TX 77032	0 1			

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALLEY THEATRE 615 TEXAS AVE HOUSTON,TX 77002			EDUCATION	100,000
ATLANTIC UNIVERSITY 215 67TH ST			EDUCATION	11,642
VIRGINIA BEACH, VA 23451				
AWTY INTERNATIONAL SCHOOL 7455 AWTY SCHOOL LN HOUSTON,TX 77055			EDUCATION	1,000
BAYLOR UNIVERSITY DIR OF GIFTINVESTMENT ACCTG PO BOX 97050 WACO,TX 76798			EDUCATION	40,000
BELOIT COLLEGE 700 COLLEGE ST BELOIT,WI 53511			EDUCATION	11,000
BIG PASTURE ELEMENTARY PO BOX 167 RANDLETT,OK 73562			EDUCATION	50
BRIARWOOD SCHOOL 12207 WHITTINGTON DRIVE HOUSTON,TX 77077			EDUCATION	1,000
CALIF ST POLY UNIV-POMONA DIRECTOR OF DEVELOPMENT 3801 W TEMPLE AVE BLDG 1 211 PONOMA,CA 91768			EDUCATION	1,000
CALIFORNIA INSTITUTE OF TECHNOLOGY ASST TREASURER 1200 E CALIFORNIA BLVD M/S 5- 32 PASADENA,CA 91125			EDUCATION	1,000
CARNEGIE LIBRARY OF PITTSBURGH 4400 FORBES AVE PITTSBURGH,PA 15213			EDUCATION	100,000
CASE WESTERN RESERVE UNIVERSITY DIR-DEVELOPMENT 10950 EUCLID AVE 212 CLEVELAND,OH 44106			EDUCATION	600
CHANDLER PUBLIC SCHOOL 901 S CHS ST CHANDLER,OK 74834			EDUCATION	1,000
COLORADO SCHOOL OF MINES FOUNDATION INC PO BOX 4005 GOLDEN,CO 80401			EDUCATION	296,680
COLORADO STATE UNIVERSITY FOUNDATION 502 UNIVERSITY SERVICES CENTER FORT COLLINS,CO 80523			EDUCATION	25,000
COMANCHE ELEMENTARY 1030 ASH COMANCHE,OK 73529			EDUCATION	1,000
Total				3,251,242

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CORBELL ELEMENTARY 11095 MONARCH DR FRISCO,TX 75033			EDUCATION	100
CORNELL COLLEGE 600 FIRST ST SW MOUNT VERNON,IA 52314			EDUCATION	30,000
CORNELL UNIVERSITY ALUMNI AFFAIRS AND DEV INFO SVC 130 E SENECA ST STE 400 ITHACA,NY 14850			EDUCATION	2,000
CSTEM TEACHER AND STUDENT SUPPORT SERVICES INC 3226 ALABAMA ST HOUSTON,TX 77004			EDUCATION	15,000
DARTMOUTH COLLEGE GIFT RECORDING ACCOUNTING 6066 DEVELOPMENT OFFICE HANOVER,NH 03755			EDUCATION	20,000
DAVIDSON COLLEGE 209 RIDGE RD DAVIDSON,NC 28035			EDUCATION	500
DICKINSON CATHOLIC SCHOOLS PO BOX 1177 DICKINSON,ND 58602			EDUCATION	1,000
DOUGLAS COUNTY EDUCATIONAL FOUNDATION 620 WILCOX ST CASTLE ROCK, CO 80104			EDUCATION	500
DUCHESNE ACADEMY OF THE SACRED HEART 10202 MEMORIAL HOUSTON,TX 77024			EDUCATION	500
DUKE UNIVERSITY FINANCIAL ANALYST BOX 90581 DURHAM,NC 27708			EDUCATION	5,000
DUNCAN PUBLIC SCHOOLS PO BOX 1548 DUNCAN,OK 73534			EDUCATION	1,080
EAST END CHAMBER OF COMMERCE FOUNDATION 550 GULFGATE CENTER MALL HOUSTON,TX 77087			EDUCATION	15,000
EMERY WEINER SCHOOL 9825 STELLA LINK HOUSTON,TX 77025			EDUCATION	1,000
FALL CREEK ELEMENTARY 14435 MESA DR HUMBLE,TX 77396			EDUCATION	1,000
FARIBAULT LUTHERAN SCHOOL 526 NW FOURTH ST FARIBAULT,MN 55021			EDUCATION	500
Total				3,251,242

Office 3 - Gra			c real of ripproteater	· atare rayment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FLORIDA A&M UNIVERSITY FOUNDATION INC 1601 MARTIN LUTHER KING BLVD TALLAHASSEE,FL 32301			EDUCATION	1,000
FOXCROFT SCHOOL 22407 FOXCROFT RD MIDDLEBURG,VA 20117			EDUCATION	1,000
GENESEO FOUNDATION INC 1 COLLEGE CIRCLE ERWIN 202 GENESEO,NY 14454			EDUCATION	6,000
GENESYS WORKS HOUSTON 601 JEFFERSON AVE HOUSTON,TX 77002			EDUCATION	15,000
GEORGETOWN COLLEGE 400 E COLLEGE ST GEORGETOWN,KY 40324			EDUCATION	20,000
GRACELAND UNIVERSITY VP INSTITUTIONAL ADVANCEMENT 1 UNIVERSITY PLACE LAMONI,IA 50140			EDUCATION	4,000
HARVEY MUDD COLLEGE 301 PLATT BLVD CLAREMONT,CA 91711			EDUCATION	50,000
HESSTON COLLEGE DIRECTOR OF DEVELOPMENT BOX 3000 HESSTON,KS 67062			EDUCATION	2,000
HOLY SPIRIT EPISCOPAL SCHOOL 12535 PERTHSHIRE RD HOUSTON,TX 77024			EDUCATION	1,000
HOUSTON CHRISTIAN HIGH SCHOOL 2700 W SAM HOUSTON PKWY N HOUSTON,TX 77043			EDUCATION	2,000
INCARNATE WORD ACADEMY 609 CRAWFORD HOUSTON,TX 77002			EDUCATION	200
INTERNATIONAL SCHOLARSHIP Schirshp TUITION SERVICE 1321 MURFREESBORO PIKE STE 800 NASHVILLE,TN 37217			EDUCATION	135,000
IOWA STATE UNIVERSITY FOUNDATION 2505 UNIVERSITY BLVD AMES,IA 50010			EDUCATION	17,200
ITHACA COLLEGE ALUMNI HALL RM 245 RT 96B ITHACA,NY 14850			EDUCATION	20,000
JAMES E TAYLOR HIGH SCHOOL 20700 KINGSLAND BLVD KATY,TX 77450			EDUCATION	1,000
Total				3,251,242

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	тестрієпс		
a Paid during the year				
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK,NY 10027			EDUCATION	500
JOHN PAUL II CATHOLIC SCHOOL 1400 PARKWAY PLAZA DR HOUSTON,TX 77077			EDUCATION	1,000
JUNIOR ACHIEVEMENT OF SOUTHEAST TEXAS INC 2115 E GOVERNERS CIRCLE HOUSTON,TX 77092			EDUCATION	25,000
KANSAS STATE UNIVERSITY FOUNDATION DIR CORPFND RE 2323 ANDERSON AVE STE 500 MANHATTAN,KS 66502			EDUCATION	44,100
KANSAS UNIVERSITY ENDOWMENT ASSOCIATION PO BOX 928 LAWRENCE,KS 66044			EDUCATION	30,000
KINKAID SCHOOL 201 KINCAID SCHOOL DR HOUSTON,TX 77024			EDUCATION	1,000
KIPP HOUSTON 10711 KIPP WAY HOUSTON,TX 77099			EDUCATION	15,000
KNOX COLLEGE ADVANCEMENT OPS COORDINATOR 2 E SOUTH ST GALESBURG, IL 61401			EDUCATION	600
LOUISIANA STATE U FOUNDATION PRESIDENTCEO 3838 W LAKESHORE DR BATON ROUGE, LA 70808			EDUCATION	60,500
MARYMOUNT CALIFORNIA UNIVERSITY 30800 PALOS VERDES DR E RANCHO PALOS VERDES,CA 90275			EDUCATION	50,100
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 238 MAIN ST STE 200 CAMBRIDGE,MA 02142			EDUCATION	22,000
MCCOMBS SCHOOL OF BUSINESS ANNUAL FUND PO BOX 8424 AUSTIN,TX 78713			EDUCATION	300,000
MCNEESE STATE UNIV FOUNDATION EXECUTIVE VICE PRES PO BOX 90775 LAKE CHARLES, LA 70609			EDUCATION	32,000
MEREDITH COLLEGE 3800 HILLSBOROUGH ST RALEIGH,NC 27607			EDUCATION	1,000
MICHIGAN TECHNOLOGICAL UNIVERSITY 1400 TOWNSEND DR HOUGHTON,MI 49931			EDUCATION	500
Total				3,251,242

			• •	•
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MIDWESTERN STATE UNIVERSITY 3410 TAFT BLVD WITCHITA FALLS,TX 76308			EDUCATION	668
MISSOURI S AND T 112 CAMPUS SUPPORT FACILITY ROLLA,MO 65409			EDUCATION	21,500
MONTANA STATE UNIVERSITY FOUNDATION PO BOX 172750 BOZEMAN,MT 59717			EDUCATION	21,000
MONTANA TECH FOUNDATION 1300 W PARK ST BUTTE, MT 59701			EDUCATION	8,000
NEW MEXICO STATE UNIVERSITY FOUNDATION INC PO BOX 3590 LAS CRUCES,NM 88003			EDUCATION	10,000
NORTHWESTERN UNIVERSITY MATCHING GIFTS COORDINATOR 2020 RIDGE AVE RM 230 EVANSTON,IL 60208			EDUCATION	100,000
OFFSHORE ENERGY CENTER 200 N DAIRY ASHFORD STE 6220 HOUSTON,TX 77079			EDUCATION	12,689
OKLAHOMA STATE UNIVERSITY FOUNDATION PO BOX 1749 STILLWATER,OK 74076			EDUCATION	50,800
PENNSYLVANIA STATE UNIVERSITY DIRECTOR-ADM SERVICE ONE OLD MAIN UNIVERSITY PARK,PA 16802			EDUCATION	23,520
PRINCETON UNIVERSITY ONE NASSAU HALL PRINCETON,NJ 08544			EDUCATION	1,000
PURDUE FOUNDATION 101 N GRANT STE B-50 WEST LAFAYETTE,IN 47906			EDUCATION	15,000
REGIS SCHOOL OF THE SACRED HEART 7330 WESTVIEW DR HOUSTON,TX 77055			EDUCATION	500
RICE UNIVERSITY MATCHING GIFT PROGRAM 6100 MAIN ST-MS81 HOUSTON,TX 77005			EDUCATION	14,000
RICHMOND ELEMENTARY 201 W RICHMOND RD STILLWATER,OK 74075			EDUCATION	100
RIVERFIELD COUNTRY DAY SCHOOL 2433 W 61ST ST TULSA,OK 74132			EDUCATION	400
Total				3,251,242

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SAINT AGNES ACADEMY MATCHING GIFTS 9000 BELLAIRE BLVD HOUSTON,TX 77036			EDUCATION	100
SAINT MARYS COLLEGE 110 LE MANS HALL NOTRE DAME,IN 46556			EDUCATION	1,000
SAM HOUSTON STATE UNIVERSITY BOX 2537 HUNTSVILLE,TX 77341			EDUCATION	500
SECOND BAPTIST SCHOOL FOUNDATION 6410 WOODWAY HOUSTON,TX 77057			EDUCATION	1,000
SOUTH TEXAS COLLEGE OF LAW 1303 SAN JACINTO HOUSTON,TX 77002			EDUCATION	2,050
SOUTHERN METHODIST UNIVERSITY MGR OF GIFT PROCESS PO BOX 750402 DALLAS,TX 75275			EDUCATION	8,100
SOUTHERN NAZARENE UNIVERSITY VP FINANCIAL AFFAIRS 6729 NW 39 EXPWY BETHANY,OK 73008			EDUCATION	3,000
ST CECILIA CATHOLIC SCHOOL 11740 JOAN OF ARC HOUSTON,TX 77024			EDUCATION	100
ST JOHNS COLLEGE PO BOX 2800 ANNAPOLIS, MD 21404			EDUCATION	500
ST JOHNS SCHOOL 2401 CLAREMONT LANE HOUSTON,TX 77019			EDUCATION	500
ST LAURENCE CATHOLIC SCHOOL 2630 AUSTIN PKWY SUGAR LAND,TX 77479			EDUCATION	1,200
ST PIUS X HIGH SCHOOL 811 W DONOVAN HOUSTON,TX 77091			EDUCATION	1,000
STEPHEN F AUSTIN STATE UNIVERSITY PO BOX 13032 SFA STATION NACOGDOCHES,TX 75962			EDUCATION	1,000
STRAKE JESUIT COLLEGE PREPARATORY 8900 BELLAIRE BLVD HOUSTON,TX 77036			EDUCATION	100
SUSQUEHANNA UNIVERSITY 514 UNIVERSITY AVE SELINSGROVE,PA 17870			EDUCATION	100,000
Total			🕨 3a	3,251,242

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	Тестріспе		
a Paid during the year				
TEXAS A & M FOUNDATION VICE PRESIDENT & CONTROLLER 401 GEORGE BUSH DR COLLEGE STATION,TX 77840			EDUCATION	276,389
TEXAS ALLIANCE FOR MINORITIES IN ENGINEERING (TAME UT PICKLE CAMPUS R9200 AUSTIN,TX 78758			EDUCATION	15,000
TEXAS STATE UNIVERSITY - SAN MARCOS 601 UNIVERSITY D SAN MARCOS,TX 78666			EDUCATION	15,000
TEXAS TECH UNIVERSITY FOUNDATION PO BOX 45025 LUBBOCK,TX 79409			EDUCATION	69,500
TRINITY UNIVERSTIY MATCHING GIFT COORDINATOR ONE TRINITY PLACE 49 SAN ANTONIO,TX 78212			EDUCATION	500
TX A&M HSC FDN RANGEL COLLEGE OF PHARMACY MSC 131 - 1010 W AVE B KINGSVILLE,TX 78363			EDUCATION	1,000
UNIVERSITY OF ARKANSAS FOUNDATION INC MGR OF MATCH 300 UNIVERSITY HOUSE FAYETTEVILLE,AR 72701			EDUCATION	39,790
UNIVERSITY OF COLORADO FDN 4740 WALNUT ST BOULDER,CO 80301			EDUCATION	31,000
UNIVERSITY OF HOUSTON FOUNDATION 4543 POST OAK PLACE STE 250 HOUSTON,TX 77027			EDUCATION	79,126
UNIVERSITY OF IDAHO FOUNDATION INC ADVANCEMENT SVC PO BOX 443147 MOSCOW,ID 83844			EDUCATION	4,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 W GREEN ST URBANA,IL 61801			EDUCATION	8,000
UNIVERSITY OF KENTUCKY STURGILL DEVELOPMENT BUILDING LEXINGTON,KY 40506			EDUCATION	20,500
UNIVERSITY OF LA AT LAFAYETTE ASST VP FINANCIAL SV PO BOX 40400 LAFAYETTE, LA 70504			EDUCATION	6,000
UNIVERSITY OF MIAMI STE 300 UM GABLES ONE TOWER CORAL GABLES,FL 33146			EDUCATION	3,000
UNIVERSITY OF NEW ORLEANS FOUNDATION 2021 LAKESHORE DR STE 420 NEW ORLEANS, LA 70122			EDUCATION	1,170
Total			🕨 3a	3,251,242

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	'		
a Paid during the year				
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL PO BOX 309 CHAPEL HILL,NC 27514			EDUCATION	2,000
UNIVERSITY OF NORTH TEXAS FOUNDATION INC 1155 UNION CIRCLE 311250 DENTON,TX 76203			EDUCATION	1,500
UNIVERSITY OF NOTRE DAME VP UNIVERSITY RELATIONS 1100 GRACE HALL NOTRE DAME,IN 46556			EDUCATION	3,000
UNIVERSITY OF OKLAHOMA FOUNDATION INC 100 TIMBERDELL RD NORMAN,TX 73019			EDUCATION	103,224
UNIVERSITY OF PIKEVILLE COLLEGE 147 SYCAMORE ST PIKEVILLE, KY 41501			EDUCATION	6,000
UNIVERSITY OF ROCHESTER DIRECTOR GIFT OFFICE PO BOX 270032 ROCHESTER,NY 14627			EDUCATION	500
UNIVERSITY OF SCRANTON VP OF INSTITUTIONAL ADVANCE PO BOX 1385 SCRANTON,PA 18501			EDUCATION	700
UNIVERSITY OF SOUTHERN MISSISSIPPI FOUNDATION 118 COLLEGE DR 10026 HATTIESBURG,MS 39406			EDUCATION	4,044
UNIVERSITY OF TENNESSEE SR ASSOCIATE VP 600 ANDY HOLT TOWER KNOXVILLE,TN 37996			EDUCATION	16,800
UNIVERSITY OF TEXAS - PAN AMERICAN (UTPA) 1201 W UNIVERSITY DR EDINBURG,TX 78541			EDUCATION	30,000
UNIVERSITY OF TEXAS AT ARLINGTON DEVELOPMENT FUNDS PO BOX 19198 ARLINGTON,TX 76019			EDUCATION	500
UNIVERSITY OF TEXAS AT AUSTIN MGR OF GIFT ADMINIST PO BOX 7458 AUSTIN,TX 78713			EDUCATION	34,720
UNIVERSITY OF TEXAS AT EL PASO ASST VP-INST ADV 500 W UNIVERSITY KELLY HALL 6TH FL EL PASO,TX 79968			EDUCATION	115,600
UNIVERSITY OF TEXAS AT SAN ANTONIO ONE UTSA CIRCLE SAN ANTONIO,TX 78249			EDUCATION	45,000
UNIVERSITY OF TEXAS FOUNDATION EXECUTIVE DIRECTOR PO BOX 250 AUSTIN,TX 78767			EDUCATION	75,000
Total				3,251,242

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF WISCONSIN MADISON FOUNDATION PO BOX 8860 MADISON, WI 53708			EDUCATION	500
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVE MADISON,WI 53708			EDUCATION	100,000
UNIVERSITY OF WYOMING FDN DIR DEVELOPMENT FINANCE 1200 E IVINSON LARAMIE, WY 82070			EDUCATION	30,000
URSULINE ACADEMY OF DALLAS INC 4900 WALNUT HILL LANE DALLAS,TX 75229			EDUCATION	1,000
UWMC FOUNDATION 518 SOUTH 7TH AVE WAUSAU,WI 54401			EDUCATION	500
VILLANOVA UNIVERSITY 800 LANCASTER AVE VILLANOVA,PA 19085			EDUCATION	100,000
WAKE FOREST UNIVERSITY BOX 7227 REYNOLDA STATION WINSTON SALEM,NC 27109			EDUCATION	10,000
WAURIKA PUBLIC SCHOOLS 600 E FLORIDA AVE WAURIKA,OK 73573			EDUCATION	1,000
WAYNE STATE UNIVERSITY 5475 WOODWARD AVE DETROIT, MI 48202			EDUCATION	1,000
WELLESLEY COLLEGE MGR-GIFT ADMINISTRATION 106 CENTRAL ST WELLESLEY, MA 02481			EDUCATION	600
WEST BRIAR MIDDLE SCHOOL 13733 BRIMHURST DR HOUSTON,TX 77077			EDUCATION	500
WEST VIRGINIA UNIVERSITY FDN OPERATIONS MANAGER PO BOX 1650 MORGANTOWN, WV 26507			EDUCATION	35,000
WESTERN ACADEMY 1511 BUTLERCREST ST HOUSTON,TX 77080			EDUCATION	1,000
WESTSIDE HIGH SCHOOL 14201 BRIAR FOREST HOUSTON,TX 77077			EDUCATION	500
WILLOW CREEK ELEMENTARY 2002 WILLOW TERRACE KINGWOOD,TX 77345			EDUCATION	400
Total				3,251,242

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
YALE UNIVERSITY ASSOC DIR- CONTRIBUTIONS PO BOX 2038 NEW HAVEN, CT 06508			EDUCATION	1,700
YELLOWSTONE ACADEMY INC 3000 TRULLEY ST HOUSTON,TX 77004			EDUCATION	15,800
VELMA-ALMA SCHOOL PO BOX 8 VELMA,OK 73491			EDUCATION	1,000
Total				3,251,242

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491317010454

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2013

Name of the organization **Employer identification number** HALLIBURTON FOUNDATION INC

			75-1212458
Organ	nization type (check o	ne)	
Filers	of:	Se	ection:
Form 9	990 or 990-EZ	Γ	501(c)() (enter number) organization
		Г	4947(a)(1) nonexempt charitable trust not treated as a private foundation
		Г	527 political organization
Form 9	990-PF	굣	501(c)(3) exempt private foundation
		Г	4947(a)(1) nonexempt charitable trust treated as a private foundation
		Γ	501(c)(3) taxable private foundation
Į√.			Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or ontributor Complete Parts I and II
	For a section 501(c)(under sections 509(a greater of (1) \$5,000 For a section 501(c)(during the year, total scientific, literary, or	or (2 7), (8 cont	ganization filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the 2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 3), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, ributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, ational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and
Γ	during the year, contr not total more than \$1 the year for an exclu applies to this organiz	ributi 1,000 s <i>i vei</i> zatioi	B), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, ons for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did if this box is checked, enter here the total contributions that were received during by religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule in because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or more

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization HALLIBURTON FOUNDATION INC

Employer identification number

75-1212458

Part I	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	HALLIBURTON COMPANY 3000 N SAM HOUSTON PARKWAY E HOUSTON, TX77032	\$2,000,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	noncash contributions) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization HALLIBURTON FOUNDATION INC

Employer identification number

75-1212458

Part II	Noncash Property (see instructions) Use duplicate copies of Part 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
		\$	

tification number
0) organizations entry \$
iption of how gift is held
or to transferee
iption of how gift is held
or to transferee
iption of how gift is held
or to transferee
iption of how gift is held
or to transferee

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491317010454

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2013 Depreciation Schedule

Name: HALLIBURTON FOUNDATION INC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491317010454

TY 2013 Investments - Land Schedule

Name: HALLIBURTON FOUNDATION INC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491317010454

TY 2013 Investments - Other Schedule

Name: HALLIBURTON FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
OTHER INVESTMENTS	AT COST	15,806,165	21,418,953	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491317010454

TY 2013 Land, Etc. Schedule

Name: HALLIBURTON FOUNDATION INC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491317010454

TY 2013 Other Expenses Schedule

Name: HALLIBURTON FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SCHOLARSHIP ADMINISTRATION FEE	39,000			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491317010454

TY 2013 Other Professional Fees Schedule

Name: HALLIBURTON FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	9,364	9,364		

TY 2013 Taxes Schedule

Name: HALLIBURTON FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	2,000			

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

► File a separate application for each return.

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

OMB No 1545-1709

	u are filing for an Additional (Not Automatic) 3-M t complete Part II unless you have already been g					8868
a corp 8868 t Return	onic filing (e-file). You can electronically file Form oration required to file Form 990-T), or an addition or request an extension of time to file any of the for Transfers Associated With Certain Personations) For more details on the electronic filing of t	nal (not auto forms liste al Benefit (omatic) 3-month extension of time. You od d in Part I or Part II with the exception of Contracts, which must be sent to the I	an ele of Forr RS in	ectronicall m 8870, l i paper fo	ly file Form nformation ormat (see
Part	Automatic 3-Month Extension of Time	e. Onlv su	bmit original (no copies needed).			
	poration required to file Form 990-T and reque		<u> </u>	is bo	x and co	mplete
All oth	er corporations (including 1120-C filers), partnersh	nips, REMIC	Cs, and trusts must use Form 7004 to red	quest a	an extens	ion of time
to file i	ncome tax returns.					
			Enter filer's identifyir	ng nun	nber, see i	nstructions
Туре	Name of exempt organization or other filer, see i	nstructions	Employer identification	າ numb	oer (EIN) or	
print	Halliburton Foundation, Inc.		75.	-12124	58	
File by th	Number, street, and room or suite no If a P O b	ox, see ınstr	uctions Social security number	r (SSN)	
due date	for 1900 St James Place, Suite 700					
filing you return S		or a foreign a	ddress, see instructions			
instruction						
Enter t	he Return code for the return that this application	ıs for (fıle a	separate application for each return) .			0 4
Appli	cation	Return	Application			Return
ls Fo		Code	Is For			Code
Form	990 or Form 990-EZ	01	Form 990-T (corporation)			07
	990-BL	02	Form 1041-A			08
Form	4720 (ındıvıdual)	03	Form 4720 (other than individual)			09
	990-PF	04	Form 5227			10
Form	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
Telep • If the • If this for the	cooks are in the care of ► Tim McKeon, 10200 Bell ohone No ► 281.575.3674. The organization does not have an office or place of be a significant of the organization	Fousiness in ur digit Gro it is for par sion is for	ax No ▶the United States, check this box up Exemption Number (GEN)t of the group, check this box	▶ [- If this ☐ and att	
	until	mpt organı	zation return for the organization named a	above		
	►	, 20	, and ending		, 20	
2		months, ch	eck reason 🔝 Initial return 🔲 Final retu	rn		
	Change in accounting period				T	
3a	If this application is for Forms 990-BL, 990-PF, 99	90-T, 4720,	or 6069, enter the tentative tax, less any			
_	nonrefundable credits See instructions			3a	\$	10,000
b	If this application is for Forms 990-PF, 990-T,	•		۲.	*	
	estimated tax payments made Include any prior			3b	\$	2,000
С	Balance due. Subtract line 3b from line 3a Include	de your pay	ment with this form, if required, by using			

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Re	v 1-2014)						Page 2
• If you are	filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Pa	rt II and check the	s box	×	
	complete Part II if you have already been gran			on on a previously	filed	Form 8	868
	filing for an Automatic 3-Month Extension, o						
Part II	Additional (Not Automatic) 3-Month E	xtension					
	Name of account agreement on a state of files and or			ter filer's identifying			
Type or print	Name of exempt organization or other filer, see in			ployer identification	numb	er (EIIN) (or
File by the due date for	Number, street, and room or suite no If a P O bo	ox, see instri	uctions Soc	cial security number	(SSN))	
filing your return See instructions	City, town or post office, state, and ZIP code For	r a foreign ad	ddress, see instructions				
Enter the R	eturn code for the return that this application i	s for (file a	separate application for	each return)			
Application	n	Return Code	Application Is For				Return Code
Form 990	or Form 990-EZ	01					
Form 990-	BL	02	Form 1041-A				08
Form 4720) (ındıvıdual)	03	Form 4720 (other than	ındıvıdual)			09
Form 990-	PF	04	Form 5227				10
Form 990-	T (sec 401(a) or 408(a) trust)	05	Form 6069				11
Form 990-	T (trust other than above)	06	Form 8870				12
If this is for the who list with the 4 I req 5 For 6 6 If the	anization does not have an office or place of bor a Group Return, enter the organization's fou	usiness in the digit Ground is for until	the United States, checkup Exemption Number (continued to the group, check the group, check the group, 20 , and group, an	GEN), 20, and ending	► [and a	nis is ttach a, 20
b If th estir	s application is for Forms 990-BL, 990-PF, 99 refundable credits. See instructions is application is for Forms 990-PF, 990-T, mated tax payments made. Include any priorunt paid previously with Form 8868.	4720, or 6	069, enter any refunda	able credits and	8a 8b	\$	
	nce due. Subtract line 8b from line 8a Include your tronic Federal Tax Payment System) See instruc		t with this form, if required	l, by using EFTPS	8c		
Under penal	Signature and Verifica		•	-	nts, a	nd to th	e best of my
	nd belief, it is true, correct, and complete, and that						•
Signature ►		Title ▶		Da	te ►		
					F	orm 886	8 (Rev 1-2014)

(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

• If you	u are f	iling for an Automatic 3-Month Extension, o	omplete o	only Part I and chec	k this box			. ▶ 🔲
• If you	u are f	iling for an Additional (Not Automatic) 3-Mo	nth Exten	sion, complete only	Part II (on page 2 of	f this	form).	
		plete Part II unless you have already been g						8868.
a corp 8868 t Return	oratio to requal or for	iling (e-file). You can electronically file Form n required to file Form 990-T), or an additiona- uest an extension of time to file any of the fi ransfers Associated With Certain Personal . For more details on the electronic filing of th	al (not auto orms listed Benefit C	omatic) 3-month extend of in Part I or Part II Contracts, which mu	ension of time. You ca with the exception o ust be sent to the If	an ele f Forr RS in	ectronical m 8870, I n paper fo	ly file Form Information ormat (see
Part	П	Automatic 3-Month Extension of Time	Only sub	omit original (no co	pies needed).		**************************************	
A corp		on required to file Form 990-T and reques				s bo	x and co	mplete
		porations (including 1120-C filers), partnershi	ps, REMIC	Ss, and trusts must u	ise Form 7004 to req	uest a	an extens	ion of time
to file i	incom	e tax returns.						
		**************************************			Enter filer's identifyin			
Type o	or	Name of exempt organization or other filer, see in	structions.		Employer identification	numt	oer (EIN) or	•
File by th due date		Number, street, and room or suite no. If a P.O. bo	x, see instru	uctions.	Social security number	(SSN)	
filing you return S instruction	ur See	City, town or post office, state, and ZIP code. For	a foreign ac	ddress, see instructions	5.			
Enter t	the Re	turn code for the return that this application is	s for (file a	separate application	for each return) .			
Appli	cation)	Return	Application				Return
Is Fo	r		Code	Is For				Code
Form	990 o	r Form 990-EZ	01	Form 990-T (corpo	ration)			07
Form			02	Form 1041-A	orm 1041-A			08
		(individual)	03		orm 4720 (other than individual)			09
Form	***********		04	Form 5227				10
		(sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-1	(trust other than above)	06	Form 8870	***************************************			12
• The I	books	are in the care of ▶					_	
Telep	phone	No. ►			***************************************			
If the	orga	nization does not have an office or place of but a Group Return, enter the organization's fou	isiness in t	the United States, ch	eck this hov			
for the	whole	group, check this box	t is for part	t of the group, check	this box	▶ [and att	ach
a list w	vith the	e names and EINs of all members the extension	on is for.				_	
1	I requ	est an automatic 3-month (6 months for a co						
	until		npt organiz	zation return for the o	organization named a	bove.	. The exte	nsion is
		e organization's return for:						
		calendar year 20 or						
	▶ □	tax year beginning	, 20	, and ending			, 20	··
	if the	tax year entered in line 1 is for less than 12 m	nonths, che	eck reason: 🔲 Initia	l return	rn		
		ange in accounting period						
3a		application is for Forms 990-BL, 990-PF, 990	D-T, 4720,	or 6069, enter the te	ntative tax, less any		_	
L		offundable credits. See instructions.	4700 0	2000	and all and all and all and all and all all and all all and all all all all all all all all all al	3a	\$	
b		s application is for Forms 990-PF, 990-T, 4 ated tax payments made. Include any prior ye				3b	\$	
		nce due. Subtract line 3b from line 3a. Include			if required, by using			
	EFTP	S (Electronic Federal Tax Payment System). S	See instruc	tions.		3с	\$	

14	(Rev 1-2014) are filing for an Additional (Not Automatic) 3-M	andla Eudan	nian assuniate ast D	net II and abact the	- he:		Page 2
-	nly complete Part II if you have already been grain		• •				
	are filing for an Automatic 3-Month Extension ,			on on a previously	mea	ronn c	0000.
Par II		-		original (no copi	es ne	eded)	_
				iter filer's identifying			
Type or	Name of exempt organization or other filer, see ii	nstructions		nployer identification			
rint	Halliburton Foundation, Inc.			75-1	2124	58	
ile by the	Number, street, and room or suite no. If a P.O b	ox, see instr	uctions So	cial security number	(SSN)		
lue date fo	(15 = 11 + 11 + 11 + 11 + 11 + 11 + 11 +			***************************************	B	***************************************	
ling your eturn See	City, town or post office, state, and ZIP code Fo	r a foreign a	ddress, see instructions.				
struction	Houston, TX 77056						
nter the	e Return code for the return that this application	is for (file a	separate application for	r each return) .			. 0 4
Applica	· ·	Return					Return
Application is For	ition	Code	Application Is For				Code
	90 or Form 990-EZ	01	1010			*******	
Form 9		02	Form 1041-A				08
	720 (individual)	03	Form 4720 (other than	undividual)		······································	09
Form 9	·	04	Form 5227				10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			~3ma.a	11
Form 0	90-T (trust other than above)	06	Form 8870				12
LOUII 9							
	o not complete Part II if you were not already or	anted an a	utomatic 3-month exten	sion on a previous	lv file	d Form	8868
STOP! D	o not complete Part II if you were not already gr			sion on a previous	ly file	d Form	n 8868.
The bo	oks are in the care of ► Tim McKeon, 2107 Citywe	est Blvd, Ho	uston, TX 77042	sion on a previous	ly file	d Form	n 8868.
The bo	oks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674.	est Blvd, Ho	ouston, TX 77042				n 8868.
The bo	oks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. organization does not have an office or place of b	est Blvd, Ho Fax ousiness in	nuston, TX 77042 No. ► the United States, chec	k this box			. ▶□
The bo	one No. ► 281.575.3674. In a granization does not have an office or place of be soon a Group Return, enter the organization's for	est Bivd, Ho Fax business in ur digit Gro	uston, TX 77042 No. ► the United States, chec up Exemption Number (k this box	* *	 . If t	. ▶ □
The bo Teleph If the o	oks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Inganization does not have an office or place of be soft a Group Return, enter the organization's for whole group, check this box ► If	Fax Fax ousiness in ur digit Gro	uston, TX 77042 No. ► the United States, chec up Exemption Number (k this box	***	 . If t	. ▶ □
The bo Teleph If the o	one No. ► 281.575.3674. In a granization does not have an office or place of be soon a Group Return, enter the organization's for	Fax Fax ousiness in ur digit Gro	uston, TX 77042 No. ► the United States, chec up Exemption Number (k this box	***	 . If t	. ▶ □
The bo Teleph If the co If this or the wast with	one No. ► 281.575.3674. In a granization does not have an office or place of be soft a Group Return, enter the organization's for those group, check this box ►	Fax business in ur digit Gro it is for par n is for.	nuston, TX 77042 No. ► the United States, checup Exemption Number (to fit the group, check the	k this box (GEN) is box		 . If t and a	. ▶ ☐ this is attach a
The bo Teleph If the co If this or the wast with	one No. ► 281.575.3674. In a granization does not have an office or place of be soft a Group Return, enter the organization's for those group, check this box ►	Fax business in ur digit Gro it is for par n is for.	nuston, TX 77042 No. ► the United States, checup Exemption Number (to fit the group, check the	k this box (GEN) is box		 . If t and a	. ▶ ☐ this is attach a
The bo Teleph If the collection of the wast with	oks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Inganization does not have an office or place of be soft a Group Return, enter the organization's for whole group, check this box ► If	est Blvd, Ho Fax susiness in ur digit Gro it is for pai n is for. until	the United States, checup Exemption Number (t of the group, check th	k this box . (GEN) is box , 20 14 and ending	> [. If t and a	. ▶ ☐ this is attach a
The bo Telepholf the cool ff this coor the with	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be for a Group Return, enter the organization's for whole group, check this box ► If the names and EINs of all members the extension request an additional 3-month extension of time or calendar year 2013, or other tax year beginning the content of t	est Blvd, Ho Fax susiness in ur digit Gro it is for pai n is for. until	the United States, checup Exemption Number (t of the group, check th	k this box . (GEN) is box , 20 14 and ending	> [. If t and a	. ▶ ☐ this is attach a
The bo Telepholf the cool ff this or the wist with	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be for a Group Return, enter the organization's for whole group, check this box ► If the names and EINs of all members the extension request an additional 3-month extension of time for calendar year 2013, or other tax year beginning the tax year entered in line 5 is for less than 12 in the ta	est Blvd, Ho Fax business in or digit Gro it is for par n is for. until ng months, ch	the United States, check up Exemption Number (at of the group, check the November 15 , 20 , eck reason: ☐ Initial re	k this box (GEN) is box	▶ [. If t	. ► □ this is attach a
The both Telepholist fithe contract with the con	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be for a Group Return, enter the organization's for whole group, check this box ►	est Blvd, Ho Fax business in air digit Gro it is for par n is for. until ng months, ch	the United States, check up Exemption Number (t of the group, check the November 15, 20, 10, 10, 10, 10, 10, 10, 10, 10, 10, 1	k this box . (GEN) is box , 20 14 and ending turn Final retur	► [If t and a	his is attach a
The bot Teleph of the color the wist with	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of best for a Group Return, enter the organization's for thole group, check this box ► If the names and EINs of all members the extension request an additional 3-month extension of time for calendar year 2013, or other tax year beginning the tax year entered in line 5 is for less than 12 in Change in accounting period tate in detail why you need the extension.	est Blvd, Ho Fax susiness in ur digit Gro it is for pai n is for. until ng months, ch	the United States, checup Exemption Number (t of the group, check th November 15 , 20 , eck reason: Initial reserved in the production is typically the production is typically the production is typically the production in the production is typically the production is typically the production in the production is typically the production is typically the production in the production is typically the production in the production in the production is typically the production in the production in the production is typically the production in the	k this box . (GEN) Is box , 20 14 and ending turn Final return prepared by the integrating this tax prep	► [If t and a and a tax dep	his is attach a
The both Telepholist With Telepholist With Telepholist With Telepholist With Telepholist With Telepholist Telephol	ooks are in the care of ► Tim McKeon, 2107 Citywoone No. ► 281.575.3674. Irganization does not have an office or place of best for a Group Return, enter the organization's for thole group, check this box ►	est Blvd, Ho Fax susiness in ur digit Gro it is for par n is for. until ng months, ch return for th the departir irn require d accurate	the United States, check up Exemption Number (at of the group, check the November 15, 20, eck reason: Initial reference Foundation is typically tent has been significant more time to analyze the manner. An extension of	k this box . (GEN) Is box	► [n ernal paratic	If t and a and a tax dep on seaso ble in o	his is attach a
The both Telepholist with st with 15 F 6 III 7 S	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be soften a Group Return, enter the organization's for whole group, check this box ►	est Blvd, Ho Fax susiness in ur digit Gro it is for par n is for. until ng months, ch return for th the departir irn require d accurate	the United States, check up Exemption Number (at of the group, check the November 15, 20, eck reason: Initial reference Foundation is typically tent has been significant more time to analyze the manner. An extension of	k this box . (GEN) Is box	rn ernal aratic	and a	his is attach a , 20 artment of on The order to quested
The both Teleph of the color the wist with 15 F 6 III 7 S 8 Ball III 1 III III 1 III III 1 III III III 1 III III 1 III IIII	request an additional 3-month extension of time or calendar year 2013, or other tax year entered in line 5 is for less than 12 is Change in accounting period tate in detail why you need the extension. The resonnel responsible for the completion of this returns the the return is completed in a thorough an this application is for Forms 990-BL, 990-PF, 95 onrefundable credits.	est Blvd, Ho Fax Jusiness in Jur digit Gro Jut is for par Juntil Jung Juntil Ju	the United States, checup Exemption Number (t of the group, check th November 15 , 20 , eck reason: Initial reference Foundation is typically tent has been significant more time to analyze the manner. An extension of or 6069, enter the tental	k this box . (GEN) Is box	► [n ernal paratic	and a	his is attach a
The bore Telephore If the control of the wist with Telephore If this is or the wist with Telephore If the control of the wist with Telephore III Telephore I	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be so for a Group Return, enter the organization's for whole group, check this box ► If the names and EINs of all members the extension request an additional 3-month extension of time or calendar year 2013, or other tax year beginning the tax year entered in line 5 is for less than 12 is Change in accounting period tate in detail why you need the extension. The inalliburton Company. The compliance workload of the ersonnel responsible for the completion of this returnsure that the return is completed in a thorough and this application is for Forms 990-PF, 990-PF, 990-II, 990-PF, 990-II, application is for Forms 990-PF, 990-T,	est Blvd, Ho Fax susiness in ur digit Gro it is for pai n is for. until ng months, ch return for th the departm irn require d accurate 00-T, 4720,	the United States, check up Exemption Number (at of the group, check the November 15, 20, eck reason: Initial reference Foundation is typically tent has been significant more time to analyze the manner. An extension of or 6069, enter the tental	k this box . (GEN) Is box	rn ernal aratic	and a	his is attach a , 20 artment of on The order to quested
The both Teleph of the color the wist with 4 5 6 11 7 5 6 12 8a 11 b 16 16	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be for a Group Return, enter the organization's for whole group, check this box ►	est Blvd, Ho Fax susiness in ur digit Gro it is for pai n is for. until ng months, ch return for th the departm irn require d accurate 00-T, 4720,	the United States, check up Exemption Number (at of the group, check the November 15, 20, eck reason: Initial reference Foundation is typically tent has been significant more time to analyze the manner. An extension of or 6069, enter the tental	k this box . (GEN) Is box	rn ernal aratic availa spect	tax depon seasoble in of	his is attach a 20 artment of on The order to quested 9,830
The bore Telephore If the control of the wast with the control of the	ooks are in the care of ► Tim McKeon, 2107 Citywe one No. ► 281.575.3674. Irganization does not have an office or place of be so for a Group Return, enter the organization's for whole group, check this box ► If the names and EINs of all members the extension request an additional 3-month extension of time or calendar year 2013, or other tax year beginning the tax year entered in line 5 is for less than 12 is Change in accounting period tate in detail why you need the extension. The inalliburton Company. The compliance workload of the ersonnel responsible for the completion of this returnsure that the return is completed in a thorough and this application is for Forms 990-PF, 990-PF, 990-II, 990-PF, 990-II, application is for Forms 990-PF, 990-T,	est Blvd, Ho Fax business in or digit Gro it is for par n is for. until ng months, ch return for th the departm irn require d accurate 00-T, 4720, 07 year ove	the United States, checking Exemption Number (at of the group, check the November 15, 20, eck reason: Initial reference Foundation is typically then that been significant more time to analyze the manner. An extension of or 6069, enter the tental 6069, enter any refunderpayment allowed as a	k this box . (GEN) Is box , 20 14 and ending turn Final retur prepared by the interpreted by the interp	rn ernal aratic	tax depon seasoble in of	his is attach a , 20 artment of on The order to quested

Under penalties of perjury, I declare that I	have examined this form,	including accompanying	schedules and	statements, and	d to the l	best of my
knowledge and belief, it is true, correct, and	complete, and that I am aut	thorized to prepare this for	m.			

•		•	•		, .	
Signature ▶	Jin	Ma		Title ►	Treasurer	Date ▶ 8/13/14
						Form 8868 (Rev. 1-2014)

HALLIBURTON FOUNDATION, INC.

EIN: 75-1212458

FORM 990-PF, PART XV - SUPPLEMENTARY INFORMATION

LINE 2D, ANY RESTRICTIONS OR LIMITATIONS ON AWARDS, SUCH AS BY GEOGRAPHICAL AREAS, CHARITABLE FIELDS, KINDS OF INSTITUTIONS, OR OTHER FACTORS:

PURPOSE

Established in 1965, the Halliburton Foundation, Inc. (the "Foundation") supports education at all levels and charitable organizations through employee matching gifts, direct grants and scholarships. The Foundation is a domestic foundation.

FOUNDATION GIVING GUIDELINES

The Foundation will accept grant proposals from U S based non-profit organizations that serve the following areas

- Education
- Health
- Social Services (health-related)

In order to be considered for a corporate grant from the Foundation, an organization must

- Provide evidence of I R C § 501 (c) (3) tax exempt status as granted by the Internal Revenue Service, or of a political subdivision (schools, municipal foundations, etc.)
- Demonstrate that supporting the request will be of benefit to the company, employees, the community and customers
- Indicate how many people will be impacted by the project
- Provide a summary of the how the program or project will be accomplished and the expected results
- Provide a timeline for the project
- Provide budget information and other sources of funding for the project
- Provide a list of its Board of Directors noting their business affiliations
- Submit its most recent audited financial statement or Form 990

The Foundation will not consider providing support to the following

- Individuals
- Organizations that do not have I R C § 501(c)(3) or equivalent status
- Religious, fraternal or veterans organizations
- Athletic organizations
- Trips, sporting events, tours and transportation
- Advertising, film or video projects
- Projects in locations not geographically aligned with Halliburton Company facilities and operations or company goals
- Political or union organizations

POLICY

All grant proposals are subject to approval by the Trustees of the Foundation The Trustees of the Foundation have sole discretion regarding when, how, if and to whom funds are dispersed The

Foundation reserves the right to modify or suspend any aid program at any time. The types of aid that may be granted by the Foundation include matching contributions and non-matching grants.

Matching Contributions (Matching Gift Plan)

There are three possible sources of contributions that may be matched by the Foundation

- (1) Active or retired employees of Halliburton Company or its subsidiaries
- (2) Active or retired Halliburton Company Directors
- (3) Personal Charitable Organizations* established by any of the persons named in (1) or (2) above

For each eligible contribution actually made (not merely pledged) that constitutes a direct personal gift to an accredited U S elementary or secondary (public or private) school (K-12) or to an accredited U S junior college, college or university (not an alumni association or athletic department/club), or charitable or not-for-profit hospital or medical foundation in the United States, the Foundation makes a contribution in an amount at 2 25 the amount contributed by the individual donor or Personal Charitable Organization, subject to the approval of the Trustees and providing the contribution meets the following criteria

- (1) Maximum annual aggregate Combined contributions by an individual donor and his/her Personal Charitable Organization are eligible for match under this policy up to the following maximum aggregate amount, as applicable, per calendar year
- For contributions with respect to any active Director, \$50,000, and for contributions with respect to any retired Director, \$20,000
- For contributions with respect to any active employee, \$20,000, and for contributions with respect to any retired employee, \$10,000
- For contributions to U S elementary and secondary (K-12) schools, \$500
- (2) Contributions must meet/exceed minimum amounts to be considered for a match
- For contributions to U S junior colleges, colleges, and universities, \$250
- For contributions to U S elementary and secondary (K-12) schools, \$25
- For contributions to charitable or not-for-profit hospitals or medical foundations in the United States, \$5.000
- (3) Contributions may be made in cash or in securities having a quoted market value, or both

Types of Non-Matching Grants

Educational Institutions and Charitable or Not-for-Profit Hospitals or Medical Foundations Grants

Grants will be made to accredited U S junior colleges, colleges, universities, charitable or not-for-profit hospitals or medical foundations, and similar institutions selected on the basis of past and anticipated benefits to society and performance in the fields of education and research beneficial to mankind. These grants may vary in size and duration and may be designated to be used for a particular department or specific purpose consistent with the objective of the Foundation

Grants to Selected Charities

Grants of a non-routine nature will be made to selected organized U.S.-based charities on the basis of past and anticipated benefits to society. These grants may vary in size and duration and may be designated to be used for a particular purpose consistent with the objectives of the Foundation.

DEFINITIONS

* Personal Charitable Organizations are charitable giving vehicles administered by a third party and created for the purpose of managing charitable donations on behalf of an organization, family, or individual