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### Form 990-PF

# EXTENDED TO NOVEMBER 16, 2015 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/form990pf.

OMB No 1545-0052 Open to Public Inspection

Depa	rtmen		social security numbers on m 990-PF and its separate				Open to Public Inspection
		ndar year 2014 or tax year beginning	oo_i, a.a.io oopaidio	, and e		.,007/10/11/39/0/.	Орол то то опе
_	_	foundation		A Employer identification number			
		DE FAMILY FOUNDATION					
C	/0	ERIC RIAK - ATLANTIC T	RUST			04-6904949	i
Nur	nber a	nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
_1	00	FEDERAL STREET				617-927-57	00
		own, state or province, country, and ZIP or foreign p ${ m TON}$ , ${ m MA}$ 02110–1802	ostal code			C if exemption application is p	ending, check here
		all that apply: Initial return	Initial return of a fo	rmer public (	harity	D 1. Foreign organizations	s, check here
		Final return	Amended return				
		Address change	Name change			2. Foreign organizations me check here and attach co	mputation test,
H C	heck	type of organization: X Section 501(c)(3) ex				E If private foundation sta	tus was terminated
<u>_</u>	_		Other taxable private founda			under section 507(b)(1)	(A), check here
		arket value of all assets at end of year   J   Account		Accr	ual	F If the foundation is in a	
			ther (specify)		<del></del>	under section 507(b)(1)	(B), check here
	·\$	136,563,366.   Part I, colu					(d) Disbursements
Pa	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a1)	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., receied	3,853,088.			N/A	
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	1,055,588.		5,588.		STATEMENT 1
Revenue	4	Dividends and interest from securities	1,866,838.	1,86	6,838.		STATEMENT 2
	5a	Gross rents					<u> </u>
	Ι.	Net rental income or (loss)	2 124 025				<del> </del>
	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 3,134,935.	3,134,935.				<u> </u>
	_D	assets on line 6a		7 1 2	4,935.		
Æ	7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain			3,13	4,,,,,,		
	ľ	Income modifications				<u> </u>	
	10a	Gross sales less returns and allowances					<del></del>
		Less Cost of goods sold					1
	l .	Gross profit or (loss)					
	11	Other income	12,875.		2,875.		STATEMENT 3
	12	Total. Add lines 1 through 11 .	9,923,324.	6,07	0,236.		
	13	Compensation of officers, directors, trustees, etc.	0.		0.	<u> </u>	0.
	14	Other employee salaries and wages					<u> </u>
es	15	Pension plans, employee benefits	7				
	16a	Accounting fees NOV STMT 4	id   マ 39,930・	2	9,930.		0.
ğ	ן ו	Accounting fees STMT 4 Other professional fees STMT 5	39,930.	36	1,469.		758,206.
9	17		1,449.		$\frac{1,405.}{1,449.}$	l	0.
ativ	18	Interest STMT-6	49,358.		4,358.		0.
Operating and Administrative Expens	19	Depreciation and depletion	,	<u>_</u>			<del>                                     </del>
Ë	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
and	22	Printing and publications					
gu	23	Other expenses STMT 7	77,277.		7,277.		0.
rati	24	Total operating and administrative					750 000
å		expenses. Add lines 13 through 23	1,287,689.	50	4,483.	ļ	758,206.
_	23	Contributions, gifts, grants paid	8,860,487.				8,860,487.
	26	Total expenses and disbursements.	10 140 176		4,483.	1	9,618,693.
_	27	Add lines 24 and 25 Subtract line 26 from line 12:	10,148,176.	50	4,403.		3,010,033.
		•	<224,852.	L			
	Ι.	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	7224,032.		5,753.	<del> </del>	<del>                                     </del>
	l	Adjusted net income (if negative, enter -0-)	<u> </u>		2,,33.	N/A	
4235 11-2		LHA For Paperwork Reduction Act Notice, see	instructions.		-	<del></del>	Form <b>990-PF</b> (2014)

LINDE FAMILY FOUNDATION C/O ERIC RIAK - ATLANTIC TRUST 04-6904949 Form 990-PF (2014) Page 2 Part II Balance Sheets Attached schedules and amounts in the description Beginning of year End of year (c) Fair Market Value column should be for end-of-year amounts only (b) Book Value (a) Book Value 1 Cash - non-interest-bearing 4,473,457. 2,304,183. 4,473,457. 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 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 8,079,648. 10a Investments - U.S. and state government obligations STMT 10 8,079,648. 10,023,211. 88,069,841. 95,599,353. 95,599,353. STMT 11 b Investments - corporate stock 22,474,353. 22,474,353. 26,067,464. STMT 12 c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 13 6,188,835. 5,638,576. 5,638,57**6**. 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 349,863. 297,979. 297,979. STATEMENT 14) 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 133,003,397. 136,563,366. 136,563,366. instructions. Also, see page 1, item I) Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 600,019. 677,436. 22 Other liabilities (describe STATEMENT 15) 677,436. 23 Total liabilities (add lines 17 through 22) 600,019. ightharpoonup XFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 132,403,378. 135,885,930. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 132,403,378. 135,885,930. 30 Total net assets or fund balances 133,003,397. 136,563,366. 31 Total liabilities and net assets/fund balances

#### Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30					
	(must agree with end-of-year figure reported on prior year's return)			1	1	132,403,378.
2	Enter amount from Part I, line 27a			. [	2	<224,852.>
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT	9	3	3,707,404.
4	Add lines 1, 2, and 3				4	135,885,930.
5	Decreases not included in line 2 (itemize)		_	Ī	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	(b), line 30			6	135,885,930.

Form 990-PF (2014) C/O ERIC RIAK - ATLANTIC TRUST

Part IV | Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				( <b>b)</b>	How ac - Purc - Dona	nase į ·	c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a						_				
b SEE ATTACHED	STAT	EMENTS								
C										
d										
e										
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale			, <u>-</u>		ain or (loss (f) minus	
a		_ <del></del>								
b										
С		<del></del>								
d 2 124 025							<del></del>			2 124 025
e 3,134,935.		luma (b) and gurand but	h. f	10/01/00						3,134,935.
Complete only for assets showing									ol. (h) gaın ıot less tha	
(i) F.M.V. as of 12/31/69	(i) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any			osses	(from col. (	(h))				
<u>a</u>		<del> </del>								
<u>b</u>										
<u>c</u>							_			
<u>d</u>					_					2 124 025
e					_					3,134,935.
2 Capital gain net income or (net cap	oital loss)	If gain, also enter If (loss), enter -0-	n Part I, line In Part I, line	7 7	}	2				3,134,935.
3 Net short-term capital gain or (loss	s) as defin	ed in sections 1222(5) an	ıd (6):		ŢΙ					
If gain, also enter in Part I, line 8, c			. ,		Ŋ					
If (loss), enter -0- in Part I, line 8					<u>၂</u>	3			N/A	
Part V Qualification Un (For optional use by domestic private							ent Inco	me		
If section 4940(d)(2) applies, leave the  Was the foundation liable for the secti If "Yes," the foundation does not qualif  Enter the appropriate amount in ea	on 4942 ta fy under se	ux on the distributable am ection 4940(e). Do not co	mplete this pa	rL						Yes X No
(a)	1		1311 00110/13 001	- making any ci				ī	-	(d)
Base periód years Calendar year (or tax year beginnin	g ın)	(b) Adjusted qualifying dist		Net value of no		ıtable-			Distrit (col. (b) div	oution ratio
2013	<del></del>		5,851. 2,271.		<u> 44</u>	<u>, 69</u>	8,867. 1,599.	<b> </b>		.086816
2012								<del> </del>		
2011		4,34	2,810. 2,750.				7,627.	├		.037666
2010			8,300.				9,842. 7,229.		-	.043879
2009		4,01	0,300.		<u> </u>	, 5 /	1,445.	Ь т		.043673
2 Total of line 1, column (d)		married double the total of	line O hii C	h., th	_ 6			2		.268077
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years				3		.053615				
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5				4	13	1,597,101.				
5 Multiply line 4 by line 3				5		7,055,579.				
6 Enter 1% of net investment incomi	e (1% of P	art I, line 27b)						6		55,658.
7 Add lines 5 and 6								7		7,111,237
8 Enter qualifying distributions from	Part XII. li	ne 4					-	8		9,618,693
If line 8 is equal to or greater than See the Part VI instructions.	•		1b, and comp	lete that part usin	g a 19	% tax r	ate.	اا		
423521 11-24-14								_		Form <b>990-PF</b> (2014

LINDE FAMILY FOUNDATION

	m 990-PF (2014) C/O ERIC RIAK - ATLANTIC TRUST	<u>04-6</u>	904949	)	Page 4	
_	art VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - 9	see instr	uctio	ns)	
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1 1	5	55,6	58.	
	of Part I, line 27b					
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	i				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.	
	Add lines 1 and 2	3		55,6	58.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del></del>		0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		55,6	58.	
	Credits/Payments;					
	a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 57, 619.					
	b Exempt foreign organizations - tax withheld at source	.				
	c Tax paid with application for extension of time to file (Form 8868)  6c 50,000.	.				
	d Backup withholding erroneously withheld	.				
	Total credits and payments. Add lines 6a through 6d	7	1.0	7 6	19.	
8	<del>.</del>			7,0	19.	
9		8				
10		9		1 0	<u> </u>	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		1,9	61.	
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► 51,961. Refunded ► art VII-A   Statements Regarding Activities	11			<u>0.</u>	
			<del></del>	137	- N	
- 16	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Yes	No	
	any political campaign?	_	1a_		X	
'	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or			Ī	
	distributed by the foundation in connection with the activities.			ļ		
	Did the foundation file Form 1120-POL for this year?		10		Х	
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0.					
(	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1		
	managers. ► \$ 0.		1	]	•	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					
48	4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?					
	b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A					
5	5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?					
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?		6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	Х		
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MA		<del>-</del>		1	
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		<del>-</del>	1		
	of each state as required by General Instruction G? If "No," attach explanation					
9	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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	Ī	Х	
10			10		X	

#### LINDE FAMILY FOUNDATION

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

C/O ERIC RIAK - ATLANTIC TRUST 04-6904949 Form 990-PF (2014) Page 5 Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 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) 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ ERIC RIAK, ATLANTIC TRUST Telephone no. ▶ 617-927-5700 Located at ▶ 100 FEDERAL STREET, BOSTON, ZIP+4 ▶02110 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, Yes No X securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly); Yes X No (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) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available 🗌 Yes 🗶 No for the benefit or use of a disqualified person)? (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 Yes X No 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 15 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here 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 X before the first day of the tax year beginning in 2014? 10 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)); a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2014? If "Yes," list the years 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) to all years listed, answer "No" and attach N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b if "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, N/A Form 4720, to determine if the foundation had excess business holdings in 2014) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could propardize its charitable purpose that X

Form **990-PF** (2014)

. LINDE FAMILY FOUNDATION					
orm 990-PF (2014) C/O ERIC RIAK - ATLANTIC			04-6904	949	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` '/'		es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				
any voter registration drive?			es X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		[==]		
4945(d)(4)(A)? (see instructions)			es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		Tar 1		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	<u>-</u>	in Regulations	NT / 3		
section 53.4945 or in a current notice regarding disaster assistance (see instrui	,		N/A	5b	<del></del>
Organizations relying on a current notice regarding disaster assistance check his					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?		I/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53 4945	• •				İ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p a personal benefit contract?	ay premiums on		es X No	- 1	
•	eroonal boacht contract?	T	es Lal No	6Ь	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pull "Yes" to 6b, file Form 8870	ersonal benefit contract?			00	<del> -</del> -
7a At any time during the tax year, was the foundation a party to a prohibited tax st	nolter transaction?		es X No		ļ
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Truste		nagers Highly		70 }	<u></u>
Paid Employees, and Contractors	es, i odiladiloli ivia	magers, mgm	,		
List all officers, directors, trustees, foundation managers and their	compensation.				• • • •
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plan and deferred	. (6	Expense count, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	, ac	count, otner llowances
	·	,	o in pondado ii	1	
		•			
SEE STATEMENT 16		0.	0	.	0.
		1		<u> </u>	
		ĺ			
				.1	
		<u> </u>		<u>.                                    </u>	
2 Compensation of five highest-paid employees (other than those inc	<del></del>	enter "NONE."	(4)	<del></del>	15
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plan and deferred compensation	ac	e) Expense count, other
MONT	devoted to position		compensation	a	llowances
NONE					
· · · · · · · · · · · · · · · · · · ·		<b></b>		┼	
		:			
				+-	
			-	+	
		1			
		<del> </del>		+-	
<del></del>				1	

Total number of other employees paid over \$50,000

## LINDE FAMILY FOUNDATION C/O ERIC RIAK - ATLANTIC TRUST

Form 990-PF (2014) C/O ERIC RIAK - ATLANTIC TRUST	04-	-6904949 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)		
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
MOTT PHILANTHROPIC - PRUDENTIAL TOWER, 800		
BOYLSTON STREET, SUITE 1560, BOSTON, M	ADVISOR SERVICES	758,206.
ATLANTIC TRUST		
100 FEDERAL ST, 37TH FLOOR, BOSTON, MA 02110	INVESTMENT SERVI	CES   361,469.
DICICCO, GULMAN & COMPANY LLP - 150		
PRESIDENTIAL WAY, SUITE 510, WOBURN, MA 01801	ACCOUNTING SERVI	CES 39,930.
	-	
	1	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A   Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc.	
1 N/A		
	<del></del>	
2		
3		ŀ
		ļ
4		
Port IV P C.		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lir	200 1 and 2	Amount
1 N/A	ies i aliu z.	Amount
1 N/A		
2		····-
All other program-related investments. See instructions.		
3		
		1

0.

Total. Add lines 1 through 3

C/O ERIC RIAK - ATLANTIC TRUST Form 990-PF (2014) 04-6904949 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 130,882,525. a Average monthly fair market value of securities b Average of monthly cash balances 2,394,672. 1b 323,921. c Fair market value of all other assets 1c 133,601,118. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 133,601,118. Subtract line 2 from line 1d 3 2,004,017. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 131,597,101. Net value of noncharitable-use assets, Subtract line 4 from line 3, Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 6,579,855. Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 6,579,855. 55,658. 2a Tax on investment income for 2014 from Part VI, line 5 2a b Income tax for 2014. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 55,658. 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 6.524.197 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 6,524,197. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes; 9,618,693. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V. line 8, and Part XIII, line 4 9,618,693. 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2014)

6

55,658. 9,563,035.

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

Page 9

### LINDE FAMILY FOUNDATION

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

C/O ERIC RIAK - ATLANTIC TRUST

	<del></del>		<del></del>	
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,		Tours prior to 2010	2010	2014
line 7				6,524,197.
2 Undistributed income, if any, as of the end of 2014				0/022/22/
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
<b>b</b> From 2010				
c From 2011				
dFrom 2012 1,930,623.				
eFrom 2013 4,673,532.				
f Total of lines 3a through e	6,604,155.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$ 9,618,693.				
a Applied to 2013, 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.			
d Applied to 2014 distributable amount				6,524,197.
e Remaining amount distributed out of corpus	3,094,496.			
5 Excess distributions carryover applied to 2014	0.			0.
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,698,651.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	_	0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line			ا ۽	
4a from line 2a. Taxable amount - see instr.			0.	<del></del>
f Undistributed income for 2014. Subtract			}	
lines 4d and 5 from line 1. This amount must				0
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	<del></del>	<del></del>		
8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7  9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	9,698,651.			
10 Analysis of line 9;	3,030,0321			
a Excess from 2010		İ		
b Excess from 2011	İ			
c Excess from 2012 1,930,623.				
dExcess from 2013 4,673,532.				
e Excess from 2014 3,094,496.				
423581 11-24-14				Form <b>990-PF</b> (2014)

#### LINDE FAMILY FOUNDATION

423601 11-24-14

C/O ERIC RIAK - ATLANTIC TRUST Form 990-PF (2014) 04-6904949 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 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 2014, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2014 (b) 2013 (c) 2012 (d) 2011 (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 listed 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).) JOYCE LINDE 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 Fig. 1 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: MOTT PHILANTHROPIC, 617 927-5700 PRUDENTIAL TOWER, 800 BOYLSTON STREET, SUITE 1560, BOSTON, MA 02199 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: N/A

Form **990-PF** (2014)

Form 990-PF (2014)

C/O ERIC RIAK - ATLANTIC TRUST

04-6904949 Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE ATTACHED SCHEDULE 8,860,487. Total **▶** 3a 8,860,487. **b** Approved for future payment NONE Total **▶** 3b

Part XVI-A	Analysis of Income-Producing	Activities
I are very	Allalysis of income-Floddomg	VOUALITIES.

Enter grace amounts unless atherwise indicated	Unrelated	business income	Exclude	ed by section 512, 513, or 514	(2)
Enter gross amounts unless otherwise indicated.		(b)	(C)	(d)	(e)
4.0	(a) Business	Amount	sion	Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Tunction income
a	-		+		
b	-				
C	-	<del></del>	$\bot$		
d	-		1		
e	_				
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,055,588.	
4 Dividends and interest from securities			14	1,866,838.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			1		
b Not debt-financed property		<del></del>	+		
6 Net rental income or (loss) from personal		·	1		
property					
7 Other investment income	<del>                                     </del>		14	12,875.	
8 Gain or (loss) from sales of assets other	<del>                                     </del>		<del>  -  </del>	12,0/5	
than inventory			18	3,134,935.	
9 Net income or (loss) from special events	<del></del>		+ - 9	3,134,333.	
10 Gross profit or (loss) from sales of inventory	<del></del>		+	<del></del>	
• • • •	<del></del>		++		
11 Other revenue:			1 1		
<u> </u>	-				
b	-	<del></del>			
C	-	<u></u>			
d	-		+		
e			+		
12 Subtotal. Add columns (b), (d), and (e)		0	•	6,070,236.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	6,070,236.
(See worksheet in line 13 instructions to verify calculations.)					<del></del>
Part XVI-B Relationship of Activities	to the Accor	mplishment of E	empt	Purposes	
Explain below how each activity for which inc the foundation's exempt purposes (other tha			-A contribut	ted importantly to the accomp	distinent of
NOT APPLICABLE	in by providing rand	us for such purposes).			
NOT APPLICABLE					
				·- <del>-</del>	
				<del></del>	<del> </del>
				·	
		<del></del>			
<del></del>					
		· <del></del>			
423621 11-24-14					Form <b>990-PF</b> (2014

C/O ERIC RIAK - ATLANTIC TRUST

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the or	ganization directly or indi	rectly engage in any of t	the followin	ng with any other organization	n described in secti	on 501(c) of		Yes	No
	the Code	other than section 501(c)	)(3) organizations) or in	section 52	27, relating to political organi	zations?		1		
a	Transfers	from the reporting founda	ation to a noncharitable	exempt or	ganization of:				İ	
	(1) Cash							1a(1)		X
	(2) Other	assets						1a(2)		X
b	Other tran	•	•		•					
	(1) Sales	of assets to a noncharita	ble exempt organization	า				16(1)		Х
		ases of assets from a no						1b(2)		X
	٠,	il of facilities, equipment,	• -				••	1b(3)		X
		bursement arrangements						1b(4)		X
	• •	<u>-</u>		•				_		X
	•	s or loan guarantees					* *	1b(5)		X
		rmance of services or me						1b(6)		
	-	facilities, equipment, ma	* .		· ·			1c		X
d			•		edule. Column (b) should alw	•			ets,	
					ed less than fair market value	e in any transaction	or sharing arrangement, sl	now in		
		) the value of the goods, (				_				
(a)L	пе по	(b) Amount involved	(c) Name of no		e exempt organization	(d) Description	of transfers, transactions, and s	haring an	angeme	nts
				N/A						
				_						
			_			1				
							-			
						<del>                                     </del>				
			<del></del>	-		1				
						<del></del>	<del></del>		-	
					<del></del>	<del>                                     </del>				
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				-		<del> </del>	<del> </del>			
						<del>.  </del>				
						- <b> </b>				
							<del> </del>			
						l				
2a	Is the four	idation directly or indirect	ly affiliated with, or rela	ted to, one	or more tax-exempt organiz	ations described		_		_
	ın section	501(c) of the Code (other	than section 501(c)(3)	) or in sect	tion 527?		L	_ Yes	X	No
b	If "Yes," co	mplete the following sche	edule.							
		(a) Name of org	anızatıon		(b) Type of organization	(	c) Description of relationsh	ıp		
		N/A								
	_				-					
							<del></del>			
_		<del></del>			<del></del>		<del></del>			
	Under	penalties of perjury. I declare	that I have examined this re	turn, includin	ng accompanying schedules and s	statements, and to the I	pest of my knowledge			
Sig	l and he				n taxpayer) is based on all informa		has any knowledge Retui	the IRS on with th	e prepar	er
He			-4'		1711.10.15	TRUSTE		vn below		ר' ו
		- Joyn	Harry Com					Yes		J <b>N</b> o
	Sign	ature of officer or trustee			Date	Title	Chack   1 2 I DTIN			
		Print/Type preparer's na	ime P	reparer's s	ignature	Date	Check if PTIN			
D-				14	+ 1/11	11/4/15	self- employed			
Pa	_	STEPHEN CO		/dily	t A Coll	11111		538		
	parer	Firm's name ►DIC	ICCO, GULM	AN &	COMPANY, LLP		Firm's EIN ▶ 04-32	962	26	
Us	e Only									
		Firm's address ▶ 15	0 PRESIDEN'	TIAL	WAY, SUITE 5:	10				
		WO	BURN, MA 0	1801			Phone no. 781-93	<u>7-5</u>	300	
									- 55	1004 ::

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization

LINDE FAMILY FOUNDATION
C/O ERIC RIAK - ATLANTIC TRUST

Employer identification number

04-6904949

Organization type (check one)									
Filers o	Filers of: Section:								
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization							
		4947(a)(1) nonexempt charitable trust not treated as a private foundation							
		527 political organization							
Form 99	00-PF	S01(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
	•	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions							
Genera	Rule								
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions							
Special	Rules								
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
	year, contributions is checked, enter h purpose. Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year							
	-	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization LINDE FAMILY FOUNDATION C/O ERIC RIAK - ATLANTIC TRUST Employer identification number

04-6904949

Part I	Contributors	(see instructions).	Use duplicate copies	of Part I if	additional s	pace is needed
--------	--------------	---------------------	----------------------	--------------	--------------	----------------

(b) Name, address, and ZIP + 4	(c)	(d)
	Total contributions	Type of contribution
JOYCE G. LINDE  265 COUNTRY DRIVE  WESTON, MA 02493	\$\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
JOYCE G. LINDE  265 COUNTRY DRIVE  WESTON, MA 02493	\$\$	Person Payroll Oncash X (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
JOYCE G. LINDE  265 COUNTRY DRIVE  WESTON, MA 02493	\$ 981,084.	Person Payroli Noncash X (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
JOYCE G. LINDE  265 COUNTRY DRIVE  WESTON, MA 02493	\$ <u>388,750.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5-14	\$Schedule B / Form	Person Payroll Noncash (Complete Part II for noncash contributions.)
	265 COUNTRY DRIVE WESTON, MA 02493  (b) Name, address, and ZIP+4  JOYCE G. LINDE 265 COUNTRY DRIVE WESTON, MA 02493  (b) Name, address, and ZIP+4  JOYCE G. LINDE 265 COUNTRY DRIVE WESTON, MA 02493  (b) Name, address, and ZIP+4  JOYCE G. LINDE 265 COUNTRY DRIVE WESTON, MA 02493  (b) Name, address, and ZIP+4  MESTON, MA 02493	S

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)
Name of organization LINDE FAMILY FOUNDATION C/O ERIC RIAK - ATLANTIC TRUST

Employer identification number

04-6904949

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	13,489 SHARES OF DELAWARE GROWTH FUND		
		\$368,260.	12/31/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	5,200 SHARES OF VANGUARD INSTITUTIONAL INDEX FUND		
		\$ 981,084.	12/31/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	25,000 SHARES OF ATLANTIC TRUST DISCIPLINED EQUITY		
		\$ 388,750.	12/31/14
(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
		\$	90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number LINDE FAMILY FOUNDATION C/O ERIC RIAK - ATLANTIC TRUST
Part III Exclusively religious, charitable, etc., contribut 04-6904949 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee