

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



### Form 990-PF

**Return of Private Foundation** 

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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.lrs.gov/form990pf.

r cale	ndar year 2014 or tax year beginning		, and ending			
				A Employer identification number		
	LAGHER FAMILY FOUNDATIO		<del></del>	11-283453	2	
	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	400	
	WHITE HILL ROAD		<u> </u>	212-576-1		
-	own, state or province, country, and ZIP or foreign p D SPRING HARBOR, NY 11	0 2 4		G If exemption application is	s pending, check here	
	call that apply: Initial return	<del> </del>	ormer public charity	D 1. Foreign organizatio	ns check here	
Onco	Final return	Amended return	officer public charts	1. Toleigh organizatio	its, clieck field	
	Address change	Name change		Foreign organizations in check here and attach	meeting the 85% test, computation	
Check	type of organization: X Section 501(c)(3) ex			E If private foundation s	,	
□ se		Other taxable private founda		under section 507(b)		
Fair m	arket value of all assets at end of year   J   Accounting	ng method: X Cash	Accrual	F If the foundation is in	a 60-month termination	
	Part II, col. (c), line 16)	her (specify)		under section 507(b)(	1)(B), check here	
<b>►</b> \$	250,109. (Part I, colu	mn (d) must be on cash b	oasis)			
art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(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	70,830.		N/A		
2	Check Interest on savings and temporary	4.5				
3	cash investments	19.	19.		STATEMENT 1	
4	Dividends and interest from securities	5,331.	5,331.	<u> </u>	STATEMENT 2	
	Gross rents				<u>'</u>	
62	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	7,275.				
7	Gross sales price for all	,,2,3,				
7	Capital gain net income (from Part IV, line 2)		7,275.			
8	Net short-term capital gain					
9	Income modifications					
10a	Income modifications Gross sales less returns and allowances  RECEIVE				,_	
	Less Cost of goods sold	\ <b>(\O</b> )				
0	Gross profit or (loss) Other income Total. Add lines 1 through 97	112 /8/	<del></del>	····		
11	1201		12,625.			
12	Total. Add lines 1 through 11  Compensation of officers, directors, trustee CDEN  Other employee salaries and wages	UT 85,435.	12,625.	<del>-</del>	0.	
14	Other employee salaries and wages	0.	<u> </u>		•	
	Pension plans, employee benefits					
16a	Legal fees		-			
	Accounting fees STMT 3	3,198.	1,599.		1,599.	
C	Other professional fees		<del>-</del>			
17	Interest					
18	Taxes STMT 4	178.	0.		0.	
19	Depreciation and depletion					
20	Occupancy Travel, conferences, and meetings		· · · · · · · · · · · · · · · · · · ·		<del> </del>	
17 18 19 20 21 22 23 24 25 26	Printing and publications					
23	Other expenses STMT 5	185.	93.		92.	
24	Total operating and administrative					
	expenses. Add lines 13 through 23	3,561.	1,692.		1,691.	
25	Contributions, gifts, grants paid	32,900.			32,900.	
26	•					
-	Add lines 24 and 25	36,461.	1,692.		34,591.	
27		46 004				
i a	Excess of revenue over expenses and disbursements	46,994.	10,933.			
1	Net investment income (if negative, enter -0-)	ı <u> </u>	10,933.		- <del> </del>	
b	Adjusted net income (if negative, enter -0-)			N/A		

28,683.

215,358. Form **990-PF** (2014)

5 Decreases not included in line 2 (itemize) ► <u>ADJUSTMENT TO DONOR'S BASIS</u>

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Fo	rm 99	00-PF (2014) GALLAGHER FAMILY FOUNDA'I	<del></del>		1834532 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	year (c) Fair Market Value
	T 1	Cash - non-interest-bearing			
	1 .	Savings and temporary cash investments	44,272.	13,248.	13,248.
	1	Accounts receivable			
	•	Less, allowance for doubtful accounts			
	4	Pledges receivable ►		*	· <u></u> .
	'	Less; allowance for doubtful accounts			
	5	Grants receivable			· · · · · · · · · · · · · · · · · · ·
	1	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			·
	'	Less; allowance for doubtful accounts			
ιņ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	152,585.	201,920.	236,671.
	1	Land, buildings, and equipment basis	-		
		Less accumulated depreciation			
	15	Other assets (describe > SUNDRY RECEIVABLE )	190.	190.	190.
	1	Total assets (to be completed by all filers - see the			
	Ĺ	instructions. Also, see page 1, item I)	197,047.	215,358.	250,109.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Š	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
u^		and complete lines 24 through 26 and lines 30 and 31.			
Çet	24	Unrestricted			
lar	25	Temporarily restricted .			
1 Bg	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ä		and complete lines 27 through 31.			
ts c	27	Capital stock, trust principal, or current funds	0.	0.	
38e	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	197,047.	215,358.	
Š	30	Total net assets or fund balances	197,047.	215,358.	
			105 045	045 050	
_	31	Total liabilities and net assets/fund balances	197,047.	215,358.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30	0		· -
		st agree with end-of-year figure reported on prior year's return)		1	197,047.
2	•	r amount from Part I, line 27a		2	46,994.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	244,041.

Form 990-PF (2014) GAL	LAGHER FAMILY F	OUNDATI	ON			1	<u>1-2834</u>	1532	Page 3
Part IV Capital Gains a	and Losses for Tax on	Investmen	t Income						
	ibe the kind(s) of property sold (e rehouse; or common stock, 200 s			]`P-P	v acquired urchase onation	(c) Date a (mo., d		( <b>d</b> ) Dat (mo., d	
1a									
b SEE ATTACHED	STATEMENTS	. <u></u>							
<u>C</u>		- <del></del>							
<u>d</u>	<del> </del>								
_e	(f) Degree of a city of	4 ) 0		<u> </u>		42.0			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) (f) minus (i	g)	
						<del>.</del>			
<u>b</u>		+		-  -					
d d	·	<del>-</del>		-		···-			
e 205,933.	<del></del>	<del> </del>	198,65	g				7	,275.
	g gain in column (h) and owned b	v the foundation		•		I) Gains (C	ol. (h) gain i		12130
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any			l. (k), but n	ot less than (from col. (f	-0-) or	
a									
b									
C									
đ									
e			<del></del>					7	,275.
2 Capital gain net income or (net ca	pital loss) { If gain, also ent If (loss), enter -	er in Part I, line 0- in Part I, line	7 7	}				7	,275.
Net short-term capital gain or (los	s) as defined in sections 1222(5) a	and (6):							
If gain, also enter in Part I, line 8,		, ,							
If (loss), enter -0- in Part I, line 8	- d O ti 4040/-)	D. d	Tau an Nat	3			N/A		
	nder Section 4940(e) fo				tment inc	come			
For optional use by domestic private	foundations subject to the section	i 4940(a) tax on	net investment in	come.)					
f section 4940(d)(2) applies, leave th	is part blank.								
									X No
Was the foundation liable for the sect			•	1007				Yes	LA NO
f "Yes," the foundation does not quali Enter the appropriate amount in e	ach column for each year; see the			ntries					
(a)		mon denome bet	oro making any or					(d) ition ratio	
Base periód years Calendar year (or tax year beginnin	(b) Adjusted qualifying di	stributions	Net value of nor	(c) ncharitat	le-use assets	.   .	Dıstrıbı col. (b) dıvı	itión ratio ded by col	(c))
2013	19 111)	42,039.			08,785		(00). (0) 0141		01351
2012		34,801.			35,791		<u> </u>		47593
2011		30,669.			61,735				<del>17176</del>
2010		23,842.			88,116				82751
2009		40,725.			03,849				34030
			•		•				
2 Total of line 1, column (d)	_					2		. 6	82901
3 Average distribution ratio for the 5	i-year base period - divide the total	on line 2 by 5,	or by the number	of years					
the foundation has been in existen	ice if less than 5 years					3	<del>-</del>	.1	<u> 36580</u>
Enter the net value of noncharitable	le-use assets for 2014 from Part X	, line 5				4		266	,061.
Multiply line 4 by line 3			_			5		36	,339.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6			109.
7 Add lines 5 and 6						7		36	,448.
B Enter qualifying distributions from	Part XII line 4					8			,591.
· · · ·		a 1h and sam-	late that nad ware	n n 10/ 4	ıv rata	_ <u>J</u>			<u>, , , , , , , , , , , , , , , , , , , </u>
If line 8 is equal to or greater than See the Part VI instructions.	IIIIe 7, Check the box in Part VI, lin	e 10, and comp	nete that part using	ya 1% ta	ix raie.				

	AMILY FOUNDATION		<u> 11-283</u>			Page 4
Part VI Excise Tax Based on Inves	stment Income (Section 49	40(a), 4940(b), 4940(e), or	4948 - see	instru	ıctio	ns)
1a Exempt operating foundations described in section	ın 4940(d)(2), check here 🕨 🔲 and	enter "N/A" on line 1.				
Date of ruling or determination letter:	(attach copy of letter if n	ecessary-see instructions)				
b Domestic foundations that meet the section 4940	(e) requirements in Part V, check here	▶ ☐ and enter 1%	1		2	19.
of Part I, line 27b						_
c All other domestic foundations enter 2% of line 2	7b. Exempt foreign organizations enter 4	1% of Part I, line 12, col. (b). 丿				
2 Tax under section 511 (domestic section 4947(a)	(1) trusts and taxable foundations only.	Others enter -0-)	2			0.
3 Add lines 1 and 2			3		2	19.
4 Subtitle A (income) tax (domestic section 4947(a	)(1) trusts and taxable foundations only.	. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line	4 from line 3. If zero or less, enter -0-		5		2	19.
6 Credits/Payments:						
а 2014 estimated tax payments and 2013 overpaym	nent credited to 2014	6a				
b Exempt foreign organizations - tax withheld at soil	ırce	6b				
c Tax paid with application for extension of time to	file (Form 8868)	6c				
d Backup withholding erroneously withheld		6d				
7 Total credits and payments. Add lines 6a through	6d	<del></del>	7			0.
8 Enter any penalty for underpayment of estimated	tax. Check here if Form 2220 is at	ttached	8			
9 Tax due. If the total of lines 5 and 8 is more than	line 7, enter amount owed	<b>&gt;</b>	. 9		2	19.
10 Overpayment. If line 7 is more than the total of lin	nes 5 and 8, enter the amount overpaid		10			_
11 Enter the amount of line 10 to be: Credited to 201	5 estimated tax	Refunded -	11			
Part VII-A Statements Regarding	Activities	···				
1a During the tax year, did the foundation attempt to	influence any national, state, or local leg	gislation or did it participate or interve	ne in		Yes	No
any political campaign?				1a		X
b Did it spend more than \$100 during the year (eith	er directly or indirectly) for political purp	oses (see instructions for the definition	on)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a d	etailed description of the activities a	and copies of any materials publis	hed or			
distributed by the foundation in connection	with the activities					ļ
c Did the foundation file Form 1120-POL for this ye				1c		X
d Enter the amount (if any) of tax on political expen-	ditures (section 4955) imposed during t	he year:				
(1) On the foundation. > \$	0 . (2) On foundation manage	ers. ▶ \$0	•			}
e Enter the reimbursement (if any) paid by the foun	dation during the year for political expen	iditure tax imposed on foundation	_			
managers. ▶ \$0 .						
2 Has the foundation engaged in any activities that it	nave not previously been reported to the	IRS?		2		Х
If "Yes," attach a detailed description of the	activities					
3 Has the foundation made any changes, not previo	usly reported to the IRS, in its governing	g instrument, articles of incorporation	, or			
bylaws, or other similar instruments? If "Yes," at	ttach a conformed copy of the chan	ges	_	3		X
4a Did the foundation have unrelated business gross	income of \$1,000 or more during the ye	ear?		4a		Х
b If "Yes," has it filed a tax return on Form 990-T for	this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, of	or substantial contraction during the yea	r?		5		Х
If "Yes," attach the statement required by G	eneral Instruction T					
6 Are the requirements of section 508(e) (relating to	sections 4941 through 4945) satisfied	either:				
<ul> <li>By language in the governing instrument, or</li> </ul>					] !	
<ul> <li>By state legislation that effectively amends the g</li> </ul>	joverning instrument so that no mandate	ory directions that conflict with the sta	ite law			
remain in the governing instrument?				6	X	
7 Did the foundation have at least \$5,000 in assets a	at any time during the year? If "Yes," co	omplete Part II, col. (c), and Part )	(V	7	X	
8a Enter the states to which the foundation reports o	r with which it is registered (see instruct	ions) ►				
DE						
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				8b	x	
9 Is the foundation claiming status as a private oper	rating foundation within the meaning of	section 4942(j)(3) or 4942(j)(5) for ca	lendar			
year 2014 or the taxable year beginning in 2014 (			_	9		X
10. Did any nersons become substantial contributors	•	dula hatina than same and addresses		10		Y

Form	990-PF (2014) GALLAGHER FAMILY FOUNDATION 11-28:	34532	<u>:</u>	Page 5
	art VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	Τ.	Ι	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		<del> </del>	
	If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		1	
14	The books are in care of ► MBAF CPAS LLC  Telephone no. ►212-5	76-1	400	
17	Located at > 440 PARK AVENUE SOUTH 5TH FLOOR, NEW YORK, NY ZIP+4			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	.0010		<u>,</u>
15	and enter the amount of tax-exempt interest received or accrued during the year	N	[/A	L
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
10	securities, or other financial account in a foreign country?	16		X
	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	-10-	I	
	foreign country			
Ps	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
			Yes	No
٠.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
ıa	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
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 instructions)?  N/A	1b		
	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			
	before the first day of the tax year beginning in 2014?	1c		X
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 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014? Yes X No			
	If "Yes," list the years $\blacktriangleright$			
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			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year?			
þ	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after		Ì	
	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 2014.)  N/A	_3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b_		_X_
		Form <b>99</b> 0	0-PF	(2014)

Form 990-PF (2014) GALLAGHER FAMILY FOUNDAT Part VII-B   Statements Regarding Activities for Which	TION	Poguired (	11-28345	32 Pa	age <b>6</b>
· <del></del>	FORM 4/20 May be r	required (contin	uea)	1 " 7	
5a During the year did the foundation pay or incur any amount to:	- 40.45(-)\0		s X No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		. –	S LALINO		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire		s X No		
any voter registration drive?	•				
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption t	from the tax because it mainta	ıned			
expenditure responsibility for the grant?	N	I/A 📖 Ye	s L No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly	1	•	
List all officers, directors, trustees, foundation managers and their	compensation				
List all Officers, directors, a distess, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exper	nse
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, o	ther
JAMES G. GALLAGHER	PRES/DIRECTOR	4			
15 WHITE HILL ROAD	_				
COLD SPRING HARBOR, NY 11724	5.00_	0.	0.		0.
	1				
	-				
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."		1	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exper account, o allowance	ise ther
NONE	devoted to position		compensation	allowallo	65
NONE	1				
	-				
	<del> </del>	<del> </del>	_		
	-				
		ļ		-	
	-				
		ļ			
	]				
		<u> </u>		L	
Total number of other employees paid over \$50,000			<b>&gt;</b>		0

Form 990-PF (2014) GALLAGHER FAMILY FOUNDATION		<u> 2834532</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manager Paid Employees, and Contractors (continued)	s, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		· <del>-</del> -	<del></del>
(a) Name and address of each person paid more than \$50,000 (b)	Type of service	(c) Coi	mpensation
NONE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			<del></del>
Total number of others receiving over \$50,000 for professional services		<b>•</b>	
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information suc	h as the	-	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	1 43 116	Expense	es
1 N/A			
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amoun	t
1 <u>N/A</u>			
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	<b>•</b>		0.

Form **990-PF** (2014)

LP	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	33,442.
	Fair market value of all other assets	1c	236,671.
d	Total (add lines 1a, b, and c)	1d	270,113.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	O.
3	Subtract line 2 from line 1d	3	270,113.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,052.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	266,061.
6	Minimum investment return. Enter 5% of line 5	6	13,303.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	13,303.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	219.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,084.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	13,084.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	13,084.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	34,591.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	·····
3	Amounts set aside for specific charitable projects that satisfy the:		
	Surtability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	34,591.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	_5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,591.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies for th	e section

Form **990-PF** (2014)

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,		· · · · · · · · · · · · · · · · · · ·		
line 7				<u>13,084.</u>
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only	_	<u></u>	0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2014:		0.		<u>-</u>
a From 2009 26, 158.				
b From 2010 9, 438.				
c From 2011 17,634.				
d From 2012 23, 039.				
e From 2013 31,956.				
	108,225.			
f Total of lines 3a through e  4 Qualifying distributions for 2014 from	100,223.			- "
Part XII, line 4: >\$ 34,591.				
a Applied to 2013, but not more than line 2a			0.	
	-			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		- 0.		
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	0.			13,084.
e Remaining amount distributed out of corpus	21,507.			13,004.
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) )	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	129,732.		AP	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	T. T. 188 b	
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				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0
7 Amounts treated as distributions out of		<del></del>		0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
	0.			
may be required - see instructions)  8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7	26,158.			
9 Excess distributions carryover to 2015.	20,130.			
Subtract lines 7 and 8 from line 6a	103,574.			
10 Analysis of line 9:	100,0,40			
a Excess from 2010 9,438.				
b Excess from 2011 17,634.				
c Excess from 2012 23,039.				
d Excess from 2013 31,956.				
e Excess from 2014 21,507.				
423581 11-24-14	<u></u> , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	<del> </del>	Form <b>990-PF</b> (2014)

	ER FAMILY F		<del></del>		834532 Page 10
Part XIV   Private Operating F	oundations (see in	structions and Part VII	l-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	r 2014, enter the date of	the ruling	▶		
b Check box to indicate whether the found	dation is a private operation	ng foundation described i		4942(j)(3)_or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				_	
used directly for active conduct of					
exempt activities	,				
e Qualifying distributions made directly					
for active conduct of exempt activities.	:				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:	ł				
(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				1	
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					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
JAMES G. GALLAGHER					
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large port	tion of the ownership of a	partnership or
NONE	Ū				
2 Information Regarding Contributi	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation of				not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc.	-	•	-	•	
a The name, address, and telephone num	ber or e-mail address of t	he person to whom apple	cations should be addre	essed	_
<u> </u>					
b The form in which applications should b	e submitted and informa	tion and materials they sh	nould include:		
c Any submission deadlines:					
o Any Submission deauffics.					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year TELLURIDE ADAPTIVE SPORTS DUALIFIED DISABILITY THERAPEUTIC 568 MOUNTAIN VILLAGE BLVD #101 PUBLIC CHARITY RECREATIONAL MOUNTAIN VILLAGE, CO 81435 ACTIVITIES 600. ANDY BOVIN MEMORIAL FUND GENERAL SUPPORT QUALIFIED 26 UPPER OVERLOOK RD PUBLIC CHARITY 250. SUMMIT NJ 07902 PARALYSIS SUPPORT BUONICONTI FUND TO CURE PARALYSIS QUALIFIED PUBLIC CHARITY 1095 NW 14TH TERRACE MIAMI, FL 33136 3,000. HUNTINGTON CC SCHOLARSHIP FUND QUALIFIED EDUCATIONAL SUPPORT PUBLIC CHARITY 356 W. PARK DR. 100. HUNTINGTON, IN 46750 MILITARY SUPPORT QUALIFIED MARINE CORP LAW ENFORCEMENT PUBLIC CHARITY FOUNDATION P.O. BOX 11653 2<u>50.</u> PHILADELPHIA PA 19116 SEE CONTINUATION SHEET(S) ➤ 3a Total 32 900. **b** Approved for future payment NONE

**▶** 3b

Total

Part XVI-A	Analysis of Income-Producing	Activities
rail AVI-A	Analysis of income-reducing i	MCHAIRE2

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
<u> </u>	<u> </u>				<del> </del>
b					<del></del>
<u> </u>	<del>                                     </del>				
d	<del></del>				
e					
Top and contracts from accomment against		<del> ;</del>	-		
g Fees and contracts from government agencies		<del> </del>			
2 Membership dues and assessments 3 Interest on savings and temporary cash	<u> </u>				
			14	10	
investments 4 Dividends and interest from securities			14	19. 5,331.	· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate:		<del></del>	14		<del> </del>
				-	
a Debt-financed property					
b Not debt-financed property	<del></del>	<del>.</del>	<del> </del> -		
6 Net rental income or (loss) from personal			]		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			18	7 275	
than inventory			10	7,275.	
9 Net income or (loss) from special events				•	
10 Gross profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
11 Other revenue:					
a b					
C					
d					
12 Subtotal. Add columns (b), (d), and (e)	<del></del>	0.		12,625.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	0.	<u></u> !.	13	
(See worksheet in line 13 instructions to verify calculations.)				. 13	12,023.
· · · · · · · · · · · · · · · · · · ·		••••		_	
Part XVI-B Relationship of Activities to	tne Acco	emplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which incom	ne is reported ii	n column (e) of Part XVI-A	contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than b				, ,	•
				- · ·	
				•	
				<del>.</del>	
	·	· · · · · ·			

Part XVII	Information Re Exempt Organ		and Transactions a	nd Relationships With Nonch	aritable	В	<u> </u>
1 Did the o	organization directly or indir	ectly engage in any of the follow	ving with any other organizatio	in described in section 501(c) of		Yes	No
		(3) organizations) or in section					
•	·	ation to a noncharitable exempt	•				
(1) Casl		'	•		1a(1)		X
(2) Othe	•	• •			1a(2)		X
` '	nsactions;						
	s of assets to a noncharital	ble exempt organization			1b(1)		Х
		ncharitable exempt organization		-	1b(2)		X
	tal of facilities, equipment,			•	1b(3)		X
	nbursement arrangements	•	<del>-</del>		1b(4)		X
	ns or loan guarantees		• •		1b(5)		X
		mbership or fundraising solicita	tions		1b(6)		X
		iling lists, other assets, or paid e	•		10		Х
_		• •	· ·	ays show the fair market value of the goods	other as:	sets.	
				e in any transaction or sharing arrangement		•	
column (	<u> </u>	other assets, or services receive	· · · · · · · · · · · · · · · · · · ·				
(a) Line no	(b) Amount involved	(c) Name of noncharital	ble exempt organization	(d) Description of transfers, transactions, an	d sharing ar	rangeme	nts
		N/A					
						_	
		·					
ın sectior	-	ly affiliated with, or related to, or than section 501(c)(3)) or in se	• •	ations described	Yes	X	] No
<u> </u>	(a) Name of orga		(b) Type of organization	(c) Description of relation	ship		
	N/A						
-							
Sign Here	r penalties of perjury, I declare to belief, it is true, correct, and compared to the penalties of officer or trustee	hat I have examined this return, inclu- iplete Declaration or paper fother to	han taxpayer) is based on all informa	PRESIDENT	May the IRS of turn with the hown below X Yes	e prepare (see inst	er
	<u>/</u>	me <u>Preparer's</u>	Date	Title Check If PTIN			
	Print/Type preparer's na	ine <del>rep</del> arers	Signature	self-employed	i.		
Paid	MICHAEL H.	CD3 WAT		3/12/		F 0.4	
Preparer	EHRENPREIS		Jom		00236		
Use Only	Firm's name ► MBA	F CPAS, LLC		Firm's EIN ► 13-3	08427	44	
	Firm's address > 44		UTH				
	NET	W YORK, NY 100	16	Phone no. 212-5	<u>76-1 د</u>	<u>400</u>	

#### 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

2014

Name of the organization

**Employer identification number** 

G	ALLAGHER FAMILY FOUNDATION	11-2834532
Organization type (check o	· · · · · · · · · · · · · · · · · · ·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule  X For an organizatio	)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	\$5,000 or more (in money or
property) from any Special Rules	one contributor. Complete Parts I and II. See instructions for determining a contributor	s total contributions.
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II.	or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III.	•
year, contributions is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sexclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because it le, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc.,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fort the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

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

Name of organization

Employer identification number

#### GALLAGHER FAMILY FOUNDATION

11-2834532

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

Parti	Contributors (see instructions) use duplicate copies of Part I il additiona	ai space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES GALLAGHER  15 WHITE HILL ROAD  COLD SPRING HARBOR, NY 11724	\$ 70,830.	Person Payroll Noncash X (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 Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Name of organization

Employer identification number

#### GALLAGHER FAMILY FOUNDATION

11-2834532

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
1	1000 UNITS OF BUCKEYE PARTNERS, LP		
		\$70,830.	12/15/14_
(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
		  \$	
(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
		 _ _   _   \$	
423453 11-0	15-14	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2014

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Employer identification number Name of organization Part III 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 into 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 (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. (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTERE	ST ON SAV	INGS AND TEM	PORARY	CASH II	NVESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	ENUE NET INVE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
BANK OF NEW YORK-ME GOLDMAN SACHS	LLON		4. 15.	<u> </u>	4. 15.	
TOTAL TO PART I, LI		19.		19.		
FORM 990-PF	DIVIDENI	OS AND INTER	EST FRO	OM SECUE	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
GOLDMAN SACHS	5,365	3	4.	5,331	5,33	1.
TO PART I, LINE 4	5,365	5. 3	4.	5,331	5,33	1.
FORM 990-PF		ACCOUNTI	NG FEES	3		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN	3) NVEST- INCOME		
ACCOUNTING	_	3,198.		1,599.		1,599.
TO FORM 990-PF, PG	1, LN 16B =	3,198.		1,599.		1,599.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS		3) NVEST- INCOME	(C) ADJUSTED NET INCOM	
FEDERAL EXCISE TAXE	_ S	178.		0.		0.
TO FORM 990-PF, PG	_	178.		0.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FILING FEE AND MISCELLANEOUS	185.	<del>-</del>	93.	<del></del>	<del> </del>	92.
TO FORM 990-PF, PG 1, LN 23	185.		93.			92.
DESCRIPTION		LUATION ETHOD	воо	K VALUE	STATEMENT FAIR MARKE VALUE	 T
9882.686 GS CORE FIXED INCOME FUND INST SHARES 4966.763 GS STRATEGIC INCOME FUND INST SHARES 1000 BUCKEYE PARTNERS LP UNITS CMN 50 ALIBABA GROUP HOLDING LIMITED		COST COST COST COST		104,363. 52,010. 42,147.	104,7 51,0 75,6	58.
SPONSORED ADR CMN	160			3,400.	5,1	97.
TOTAL TO FORM 990-PF, PART II	, LINE 13			201,920.	236,6	71

11-2834532

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs, MLC Co. (mo., day, yr.) (mo., day, yr.) 1a GOLDMAN & SACHS - CAPITAL GAINS (SEE ATTACHED) 01/01/1412/31/14 P b 20.65 GS HIGH-YIELD FLOATING RATE FUND INSTITUTIO P 06/28/1311/10/14 c 29.61 GS HIGH-YIELD FLOATING RATE FUND INSTITUTIO P 09/30/1311/10/14 d 30.85 GS HIGH-YIELD FLOATING RATE FUND INSTITUTIO P 10/31/1311/10/14 e 31.23 GS HIGH-YIELD FLOATING RATE FUND INSTITUTIO P 07/31/1311/10/14 1 32.57 GS HIGH-YIELD FLOATING RATE FUND INSTITUTIO 06/30/1311/10/14 Ρ g 9910.80 GS HIGH-YIELD FLOATING RATE FUND INSTITUT 06/05/1311/10/14 P 04/11/1404/10/14 h 100 ENABLE MIDSTREAM PARTNERS, LP P 1 50 ARES MANAGEMENT LP P 05/02/14|05/01/14 100 FORESIGHT ENERGY LP P 06/18/1406/17/14 k 25 DOMINION MIDSTREAM PARTNERS P 10/15/1410/15/14 150 SHELL MIDSTREAM PARTNERS LP P 10/29/1410/29/14 m CAPITAL GAINS DIVIDENDS n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 90,574. 98,678 8,104. 207. 205. <2.> b 295. 297. <2.> C d 307. 311. <4.> 311. 316. <5.> е 324. 328. <4.> f 100,000. 98,612. <1,388.> g 2,135. 2,000. 135. h 950. 898. <52.> 907. 2,000. <9<u>3.</u>> 113. 638. 525. k 1,589. 1,150. 1 439. 34. 34. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (i) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 8,104. a <2.> b С <<u>2.</u>> d <4.> <5.> е <4.> <1,388.> g 135. h <52.> <93.> 113. 439. 34. m n { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) -2 7,275. Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient PUBLICATION WIKIMEDIA FOUNDATION QUALIFIED 149 NEW MONTGOMERY STREET, FLOOR 6 PUBLIC CHARITY 50. SAN FRANCISCO, CA 94105 ONE TO ONE QUALIFIED YOUTH SERVICES SUPPORT PO BOX 1574 PUBLIC CHARITY THROUGH MENTOR 7,500. TELLURIDE, CO 81435 RELATIONSHIPS SHERIDAN ARTS FOUNDATION QUALIFIED EXHIBITION 110 NORTH OAK ST. PUBLIC CHARITY TELLURIDE, CO 81435 21,000. TELLURIDE EMERGENCY MEDICAL SYSTEMS DUALIFIED FIRE PREVENTION, LIFE PUBLIC CHARITY SAFETY, AND RESCUE 131 W. COLUMBIA, PO BOX 1645 SERVICE SUPPORT 150. TELLURIDE CO 81435 28 700. Total from continuation sheets