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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Nar	no of four						
	ile oi iou	ndation			A Emplo	yer identification number	
		·				1500000	
		MAHLEY FAMILY FOUNDATION	· r 27			-1589308	
		street (or P O box number if mail is not delivered to street address) 5 42ND STREET SOUTH	Ro	om/suite		none number (see instructions $6-857-6450$)
		state or province, country, and ZIP or foreign postal code	L		1		
-	FTO				C If exen	nption application is pending,	check here
GC	heck a	all that apply Initial return Initial return	rn of a former public ch	narity	D 1 Fo	reign organizations, check he	re 🕨
		Final return Amended	return	· ·	2 Fo	reign organizations meeting th	ne
		Address change Name cha	nge		1	% test, check here and attach	
Н С	heck t	ype of organization X Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was term	anated under
			e private foundation			n 507(b)(1)(A), check here	▶ □
		ket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	oundation is in a 60-month te	rmination
		ear (from Part II, col (c), Other (specify)			1	section 507(b)(1)(B), check h	_
	e 16) l		be on cash basis)				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inco		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	24,950				
	2	Check if the foundation is not required to attach Sch B	16		16		
	3	Interest on savings and temporary cash investments	14,830		14,830		
	4	Dividends and interest from securities	14,630		14,650		
	5a	Gross rents					
ne	b	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 STMT 1	148,946				
en/	6a b	Gross sales price for all assets on line 6a 218, 415	140,340				
Revenue	7	Capital gain net income (from Part IV, line 2)		1	52,538		
ш.	8	Net short-term capital gain				0	
	9	Income modifications RECEIVED					
	10a	Gross sales less returns and allowances	~~~~~				
	ь	Less Cost of goods soft					
	С	Gross profit or (loss) (after h someoula) 9 2015					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 1 OGDEN LIT	188,742	1	67,384	0	
S	13	Compensation of officers, directors, trustees, etc	0				
enses	14	Other employee salaries and wages					
	15	Pension plans, employee benefits		_			
X S	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 2	1,800		1,800		
: :	С	Other professional fees (attach schedule)					
Operating and Administrative	17	Interest					
_is	18	Taxes (attach schedule) (see instructions) STMT 3	258		258		
Ē	19	Depreciation (attach schedule) and depletion				<u> </u>	
Ad	20	Occupancy					
Ď	21	Travel, conferences, and meetings		·			
a	22	Printing and publications	255		155		
ng	23	Other expenses (att sch) STMT 4	255		133		· · · · · · · · · · · · · · · · · · ·
ä	24	Total operating and administrative expenses.	2,313		2,213	0	o
Je.	25	Add lines 13 through 23	62,100		2,213	<u> </u>	62,100
õ	25	Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25	64,413		2,213	0	62,100
	26 27	Subtract line 26 from line 12	04,413		2,213		02,100
	a a	Excess of revenue over expenses and disbursements	124,329				
	b	Net investment income (if negative, enter -0-)			65,171		
	c	Adjusted net income (if negative, enter -0-)				0	

1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts recreasible ▶ Less allowance for doubtful accounts ▶ Less allowance for allowance for allowance for less and the formation of the less a	1	Part II	Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End o	f year
2 Savengs and temporary cash investments 3 According receivable ▶ Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ Contains receivable ↑ Receivables due from officers, directors, frustees, and other disqualified persons (attach schedule) (see instructions) 7 Oher loss are businessed att schedule) (see instructions) 8 Prepade operance and objective of the schedule) SEE STMT 5 8 Prepade operance and objective of the schedule of the schedu		r ait ii	should be for end-of-year amounts only (See instructions)		(a) Book Value	(b) Book Value	(c) Fair Market Value
Accounts receivable ► Loss allowance for doubtful accounts ► Prediges receivable ► Loss allowance for doubtful accounts ► Grants receivable Receivables due from officers, directors, trustees, and other disqualided persons (statch schedule) (see instructions) 7 Cilibrards and ownserware (st. smooth) ► Less allowance for doubtful accounts ► Less allowance for doubtfu	ı	1	Cash – non-interest-bearing				
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Less allowence for doubtful accounts Grants recorable Recewables due from officers, directors, itustees, and other disqualided persons (attach schedule) (see instructions) Total receive department of the schedule of t			Less allowance for doubtful accounts ▶				
5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Cher netice allowance for doubtful accounts ► 20 Inventiones for sale or the comparison of the compar	- 1	4	Płedges receivable ▶				
Reconvables due from officers, directors, fusitees, and other disqualified persons (attack schedule) (see instructions) Power of the control of the con			Less allowance for doubtful accounts ▶				
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1		7	Other notes and loans receivable (att. schedule)	_			
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Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	8	26	Permanently restricted				
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	Š		Foundations that do not follow SFAS 117, check here	•			
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	ᆫ		and complete lines 27 through 31.				
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	000	27	Capital stock, trust principal, or current funds				
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	ğ	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	ĄŠ.	29	Retained earnings, accumulated income, endowment, or other funds				
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	늉	30	Total net assets or fund balances (see instructions)		658,290	743,316	
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 7 5 39,304	Z	31	Total liabilities and net assets/fund balances (see				
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 3 11 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	\Box				658,290	743,316	
end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 7 5 39,304	_	Part II	Analysis of Changes in Net Assets or Fund Balance	es			
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6 3 1 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 7 5 39,304	1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30 (mu	st agree with		_
3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304		end-c	f-year figure reported on prior year's return)			1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	2		· · · · · · · · · · · · · · · · · · ·	_			
5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5 39,304	3	Other	increases not included in line 2 (itemize) ► SEE STATEMENT	6		3	
						4	
	5		· ·				
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 743,316	6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, co	lumn (b), line 30	6	743,316

Part IV Capital Gains and	<u>Losses for Tax on Investme</u>	nt Income	· · · · · · · · · · · · · · · · · · ·		
	ne kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acqui (mo , day, yr	1 ' '
1a SEE ATTACHED SCHE	DULE		P	VARIOU	S VARIOUS
	DULE		P	VARIOU	
	DULE		P	VARIOU	
	DULE		P	VARIOU	
	RIBUTIONS			.	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	other basis nse of sale		h) Gain or (loss)) plus (f) minus (g)
a 4,380		•	4,484	h-	-104
b 24,675			19,570		5,105
c 183,149			35,869		147,280
d 3			, , , ,		3
e 254					254
Complete only for assets showing ga	in in column (h) and owned by the fo	undation on 12/31/6	59	(I) Gai	ns (Col. (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of cot (i) (j), if any	col (k),	but not less than -0-) or sses (from col (h))
a					-104
b					5,105
С					147,280
d					3
е			_		254
2 Capital gain net income or (net capital	al loss) If gain, also enter in lift (loss), enter -0- in lift (loss)	Part I, line 7		2	152,538
3 Net short-term capital gain or (loss) a		_			
If gain, also enter in Part I, line 8, col	umn (c) (see instructions) If (loss), e	nter -0- ın			
Part I, line 8		J		3	
Part V Qualification Under	r Section 4940(e) for Reduc	ed Tax on Net	Investment Inco	me	
(For optional use by domestic private fou	ndations subject to the section 4940	a) tax on net invest	ment income)		
If section 4940(d)(2) applies, leave this p	art blank				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Was the foundation liable for the section		• •	base period?		Yes X No
If "Yes," the foundation does not qualify the					
1 Enter the appropriate amount in each	column for each year, see the instru	ictions before makii	ng any entries		(A)
(a) Base period years	(b) Adjusted qualifying distributions	Net value	(c) e of noncharitable-use asset		(d) Distribution ratio
Calendar year (or tax year beginning in)	, , , , ,				col (b) divided by col (c))
2013		903	647,3	205	0.086359
2012		866	595,9		0.075291
2011		400	562,		0.068259
2010		127	496,3		0.078837
2009		. 577	457,4	±12	0.077779
0. Tatal after 4. anterna (d)					0.386525
2 Total of line 1, column (d)	and have accorded advantage that the testing is	O by E by th-		2	0.366323
3 Average distribution ratio for the 5-ye		ne ∠ by 5, or by the			0.077305
number of years the foundation has t	peen in existence if less than 5 years			3	0.011303
4 Enter the net value of noncharitable-	use assets for 2014 from Part X, line	5		4	718,318
5 Multiply line 4 by line 3				5	55,530
6 Enter 1% of net investment income (1% of Part I, line 27b)			6	1,652
	. ,				_
7 Add lines 5 and 6				7	57,182
8 Enter qualifying distributions from Pa If line 8 is equal to or greater than lin	rt XII, line 4 e 7, check the box in Part VI, line 1b,	and complete that	part using a 1% tax r	8 ate See the	62,100
Part VI instructions		•	. •		

Form	990-PF (2014) THE MAHLEY FAMILY FOUNDATION 16-158930					P	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see inst	ructions	<u>s)</u>	···			
1a	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 instruct	ons)				_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	1_1_	-		1,	<u>652</u>
	here and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	ا					
	Part I, line 12, col (b)						_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	<u> </u>			0
3	Add lines 1 and 2		3	ļ		1,	<u>652</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	ļ			0
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-		5	ļ		1,	652
6	Credits/Payments		_				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	177	7				
b	Exempt foreign organizations – tax withheld at source		4				
С	Tax paid with application for extension of time to file (Form 8868) 6c		4				
d	Backup withholding erroneously withheld 6d 6d						
7	Total credits and payments Add lines 6a through 6d		7				<u> 177</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			1,	<u>475</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	>	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refun	ded 🕨	11	į			
Pa	rt VII-A Statements Regarding Activities				··········		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No
	participate or intervene in any political campaign?				1 <u>a</u>		X
b	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						
	published or distributed by the foundation in connection with the activities						
С	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (i	c), and P	art XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	NY						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	X	
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	n 1					
	complete Part XIV	-			9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	STMT	8		10	X	

31 041	23/2010 10 14 All					
	1990-PF (2014) THE MAHLEY FAMILY FOUNDATION 16-158930	8		<u>-</u>	Р	age 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 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					l <u></u>
	person had advisory privileges? If "Yes," attach statement (see instructions)			12	<u> </u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications and exemption applications are set of the public inspection requirements for its annual returns and exemption applications.	ition?		13	X	L
	Website address ► N/A		716 0	- -	CAE	
14		hone no 🕨	716-8	5/-	643	U
	1961 WEHRLE DRIVE, SUITE 5		1 4001			
	Located at Duffalo NY	ZIP+4 ▶	14221	•		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	. 1	1			▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	▶ [15		ı	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority			1	Yes	No
	over a bank, 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			İ		
	"Yes," enter the name of the foreign country			<u> </u>		<u> </u>
_Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				1	I
_	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)	<u> </u>	(T.F)	•		
	(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	•		
	(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?	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)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No	•		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulat	ions	/-	•		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		ļ
	Organizations relying on a current notice regarding disaster assistance check here			•		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		37 / P	•		
_	were not corrected before the first day of the tax year beginning in 2014?		N/A	1c		
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 ▶ 20 , 20 , 20 , 20			•		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			l		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		37 / B	l '		
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b	-	-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1		
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		T			
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			1	1	l .

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

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

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?

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)

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4a

X

N/A

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Pa	art VII-B Statements Regarding	Activities for Which Form	4720 May Be R	Required (cont	inued)			
5a	During the year did the foundation pay or inc	cur any amount to						
	(1) Carry on propaganda, or otherwise atter	mpt to influence legislation (section	4945(e))?	\ \	∕es X No			
	(2) Influence the outcome of any specific po	ublic election (see section 4955), or	to carry on,		_			
	directly or indirectly, any voter registration	on drive?		<u> </u>	res 🗓 No			
	(3) Provide a grant to an individual for trave	el, study, or other similar purposes?		\\	∕es X No			
	(4) Provide a grant to an organization other	than a charitable, etc , organization	n described in					
	section 4945(d)(4)(A)? (see instructions)		\\	res 🛚 X No			
	(5) Provide for any purpose other than relig	ious, charitable, scientific, literary, o	or educational					
	purposes, or for the prevention of cruelt	y to children or animals?		\\	res 🛚 X No			
b	If any answer is "Yes" to 5a(1)–(5), did any	of the transactions fail to qualify und	der the exceptions d	lescribed in				
	Regulations section 53 4945 or in a current	notice regarding disaster assistance	e (see instructions)?	>	N/A	5b		
	Organizations relying on a current notice reg	garding disaster assistance check h	ere		▶ 📗			
С	If the answer is "Yes" to question 5a(4), doe	. —						
	because it maintained expenditure responsi	N/A 📗	res No					
	If "Yes," attach the statement required by Re	egulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to p	ay premiums					
	on a personal benefit contract?				res X No			
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a pe	ersonal benefit conti	ract?		6b		X
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the fou	ndation a party to a prohibited tax s	helter transaction?		res X No			
b	If "Yes," did the foundation receive any proc	eeds or have any net income attribi	utable to the transac	ction?	N/A	7b		
Pa	art VIII Information About Offic	ers, Directors, Trustees, Fo	oundation Mana	agers, Highly	Paid Employe	es,		
	and Contractors							
1 1	ist all officers, directors, trustees, founda	tion managers and their compen	sation (see instruc	tions).				
			(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Fun		
	(a) Name and addre	ess	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		ense acc r allowan	
			devoted to position	enter-0-)	compensation			
MA	ARY K MAHLEY	AFTON	PRESIDENT			1		
14	995 42ND ST SOUTH	MN 55001	0.00	0	0	<u> </u>		0
RA	CHEL K KING	CABIN JOHN	V PRESIDENT					
80	009 SPRING RD	MD 20818	0.00	0	0	L		0
RC	SS B KENZIE	DERBY	TREASURER					
69	75 SWEETLAND RD	NY 14047	0.00	0	0			0
						1		
						L		
2	Compensation of five highest-paid emplo	oyees (other than those included	on line 1 - see ins	tructions). If non	e, enter			
	"NONE."			1				
			(b) Title, and average		(d) Contributions to	(a) Eva	ense acc	oount
	(a) Name and address of each employee paid	more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		allowan	
			devoted to position		compensation			
NC	ONE]]		
				1		1		
						Ь—		
				•				
				1		1		
	<u> </u>							
	- ·· ····							
						<u> </u>		
Tota	I number of other employees paid over \$50,0	00				•		0
		-			F	orm 99 (0-PF	(2014)

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Part VIII Info	rmation About Officers, Directors, Trustees, Fo	oundation Managers, Highly Paid Er	nployees,
and	Contractors (continued)		
3 Five highest-paid	d independent contractors for professional services (see	instructions) If none, enter "NONE"	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE .			
•			
Total number of others	receiving over \$50,000 for professional services		>
Part IX-A Su	mmary of Direct Charitable Activities	***	
Fait IA-A Su	minary of Direct Chantable Activities		
	est direct charitable activities during the tax year. Include relevant statistical inform	nation such as the number of	5
	ficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A			
2			
3			
4			
············			
Part IX-B Su	mmary of Program-Related Investments (see in	nstructions)	
	ram-related investments made by the foundation during the tax year on lines 1 an	d 2	Amount
1 N/A			
			
2			
			
All other program-related inve	estments See instructions		
3			

Form **990-PF** (2014)

Total Add lines 1 through 3

Form **990-PF** (2014)

62,100

<u>1,652</u> 60,448

3b

4

4 5 Cash distribution test (attach the required schedule)

Adjusted qualifying distributions Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Enter 1% of Part I, line 27b (see instructions)

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Pa	rt XIII Undistributed Income (see instruction	is)			
	D 4 h 4 H 2 H 2 O 4 4 4 H 2 H 2 H 2 H 2 H 2 H 2 H 2 H 2 H	(a) Corpus	(b)	(c) 2013	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
_	line 7				34,264
2	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only				
3	Total-for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014 From 2009 12, 92	2			
	From 2010 14,52	_			
	From 2011 10,50				
	From 2012 15,33	-			
	From 2013 23, 93				
	Total of lines 3a through e	77,218			
4	Qualifying distributions for 2014 from Part XII,	77,210			
7	line 4 ▶ \$ 62,100				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
Ŭ	required – see instructions)				
d	Applied to 2014 distributable amount			······································	34,264
	Remaining amount distributed out of corpus	27,836		·	31,231
5	Excess distributions carryover applied to 2014	,			
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	105,054			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount see				
	instructions				
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 corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)			······	
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	12,922			
9	Excess distributions carryover to 2015				
	Subtract lines 7 and 8 from line 6a	92,132			
10	Analysis of line 9	_			
а	Excess from 2010 14,52	-			
b	Excess from 2011 10,50	 1 3			
С	Excess from 2012 15,33				
d	Excess from 2013 23, 93	-			
<u>e</u>	Excess from 2014 27,83	6			000 DE

<u>Pa</u>	irt XIV Private Operating Fou	indations (see in	structions and Par	t VII-A, question 9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ting		
	foundation, and the ruling is effective for 2	2014, enter the date o	of the ruling		-	·
b	Check box to indicate whether the foundation	ition is a private opera	ating foundation descri	bed in section 49	942(j)(3) or 4942	(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	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					
С	Qualifying distributions from Part XII,					_
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities				1	
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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					
С	"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)				İ	
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	art XV Supplementary Inform	nation (Complete	this part only if	the foundation ha	ad \$5.000 or more	in assets at
	any time during the ye	• •	•		, . ,	
1	Information Regarding Foundation Ma		•			
а	List any managers of the foundation who	•	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only				-	
	N/A	•	•			
b	List any managers of the foundation who	own 10% or more of t	he stock of a corporat	on (or an equally large	portion of the	
	ownership of a partnership or other entity) of which the foundat	ion has a 10% or grea	ter interest		
	N/A					
2	Information Regarding Contribution, G	irant, Gift, Loan, Sch	olarship, etc., Progra	ams:		
	Check here ► X if the foundation only	makes contributions	to preselected charitat	ole organizations and d	oes not accept	
	unsolicited requests for funds. If the found	dation makes gifts, gra	ants, etc. (see instruct	ions) to individuals or c	organizations under	
	other conditions, complete items 2a, b, c,	and d				
а	The name, address, and telephone numb	er or e-mail address of	of the person to whom	applications should be	addressed	
	N/A					
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include		
	N/A	-				
C	Any submission deadlines					· ——
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kinds of institution	ns, or other	
	factors					
	N/A					

Form 990-PF (2014) THE MAHLEY FAMILY FOUNDATION

Part XV Supplementary Information (co	ontinued)			
Part XV Supplementary Information (co 3 Grants and Contributions Paid During the		uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	ļ	
a Paid during the year SEE · STATEMENT 9	or substantial contributor			62,100
Total	Γ	<u>T </u>	▶ 3a	62,100
b Approved for future payment N/A				
Total			▶ 3h	

Part XVI-A An Inter gross amounts unle	alysis of Income-Producing A		d business income	Excluded b	y section 512, 513, or 514	<u>-</u> .
-		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program setvice rever						(See Histiactions)
a		_			+	
p		_				
				 		
			•			
f				1		
g Fees and contract	ts from government agencies				-	
2 Membership dues and	d assessments					
3 Interest on savings an	d temporary cash investments			14	16	
4 Dividends and interest	t from securities			14	14,830	
5 Net rental income or (loss) from real estate					
 a Debt-financed pro 	perty				.,	
b Not debt-financed				<u> </u>		
6 Net rental income or (loss) from personal property					
7 Other investment inco				10	110 010	
	les of assets other than inventory			18	148,946	
9 Net income or (loss) fi						
Office and the control of the contro	· · · · · · · · · · · · · · · · · · ·		· · · -			
1 Other revenue a _		_ 				· <u></u>
		_				.
						
<u> </u>		— 		1		
e						
e2 Subtotal Add columns	s (b), (d), and (e)				163,792	0
e2 Subtotal Add columns 3 Total Add line 12, col			(0	163,792 13	163,792
2 Subtotal Add columns 3 Total Add line 12, col			(0		
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13	lumns (b), (d), and (e)	Accomplishm			13	
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792
2 Subtotal Add columns 3 Total Add line 12, col See worksheet in line 13 Part XVI-B Re Line No. Explain accomp	lumns (b), (d), and (e) instructions to verify calculations) lationship of Activities to the below how each activity for which inco	me is reported in co	ent of Exempt F	Purposes	13ted importantly to the	163,792

		lafamatian Dam				TO-IJO		(l. M t		Pag	ge 13	
Part)			_	ansters to an	a i ransactio	ns and Relations	nips wii	th Noncharitable	е			
		Exempt Organiza								1		
	-			-	= -	other organization desc				Yes	No	
			er than section	on 501(c)(3) organ	izations) or in se	ction 527, relating to p	olitical				İ	
org	anızatior	157									ĺ	
a Tra	insfers fr	om the reporting found	ation to a no	oncharitable exemp	pt organization o	f					Í	
(1)	Cash								1a(1)		X	
(2)	Other a	ssets							1a(2)		Х	
	ner transa											
	_	f assets to a noncharit	able evemnt	organization					1b(1)		x	
			•	-	0.0			T T			X	
		ses of assets from a no		. •	OH			T T	1b(2)		_	
	(3) Rental of facilities, equipment, or other assets							F	1b(3)		X	
	(4) Reimbursement arrangements								1b(4)		<u>X</u>	
		r loan guarantees							1b(5)		X	
(6)	Perform	ance of services or me	embership o	r fundraising solici	tations				1b(6)		Х	
c Sh	aring of f	acilities, equipment, m	ailing lists, o	other assets, or pa	id employees				1c		X	
d If th	ne answe	er to any of the above is	s "Yes," com	plete the following	schedule Colu	mn (b) should always s	how the fa	ıır market				
val	ue of the	goods, other assets, o	r services g	iven by the reporti	ng foundation If	the foundation receive	d less thar	n fair market				
val	ue in any	transaction or sharing	arrangemei	nt, show in column	(d) the value of	the goods, other asset	s, or servi	ces received				
(a) Lir		(b) Amount involved		e of noncharitable exem				ansactions, and sharing arra	ingeme	nts		
N/A							-					
,					· · · · · · · · · · · · · · · · · · ·							
										•		
						<u>- · · · · · · · · · · · · · · · · · · ·</u>						
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				• •								
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	-		 									
		<u> </u>	L									
		•	•			-exempt organizations		-		(==)	4	
des	scribed in	section 501(c) of the	Code (other	than section 501(c)(3)) or in sectio	n 527?		Ĺ	Ye	s X	No	
b If "	Yes," cor	nplete the following sc	nedule									
		a) Name of organization		(b) Type of c	organization		(c) Descrip	tion of relationship				
N/2	A											
										-		
- 1	Under per	nalties of periury. I declare th	at I have examır	ned this return, including	g accompanying sche	edules and statements, and to	the best of	my knowledge and belief, i	is true			
]						which preparer has any know						
				•				May the IRS discus with the preparer s				
Sign	• 1			<i>i</i> ()				(see instructions)?		Yes	¬ No .	
lere	. 1/	11/1/1/	Ma	WOLL	16/	' $'$ $'$						
		VWVV -	1000	vac	12/ (0/13	PRES	IDENT				
	Signa	ature of officer or Justee			Date	·	Title					
	Print/Ty	pe preparer's name			Preparer's signatur	e		Date	Ĩ	Charle	$\overline{\neg}$.	
	'				-				Į	Check	lil ployed	
aid	PAUL	E KIEL			PAUL E KI	EL		04/29	/15		-,	
reparer	Firm's n		KI AND	COMPANY	, LLP		I	PTIN POO		468		
lse Only	, 	400 0		RD STE 30				10				
	Firm's a						}					
	<u> </u>	WEST	SENECA	2, NI 14	224		1	Phone no 716-681-6367				

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

THE MAHLEY F	AMILY FOUNDATION	16-1589308
Organization type (check of	one)	
Filers of.	Section [.]	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundary	tion
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule (7), (8), or (10) organization can check boxes for both the General Rule and	d a Special Rule See
X For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributor property) from any one contributor. Complete Parts I and II. See instruction contributions.	-
Special Rules		
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 if that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 (c)	o or 990-EZ), Part II, line s of the greater of (1)
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reflection to the year, total contributions of more than \$1,000 exclusively for religious, chall purposes, or for the prevention of cruelty to children or animals. Completing the children or animals.	haritable, scientific,
contributor, during t contributions totaled during the year for a	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rehe year, contributions exclusively for religious, charitable, etc., purposes, but more than \$1,000. If this box is checked, enter here the total contributions in exclusively religious, charitable, etc., purpose. Do not complete any of these to this organization because it received nonexclusively religious, charital fore during the year.	out no such s that were received he parts unless the
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not fil tust answer "No" on Part IV, line 2, of its Form 990, or check the box on lin to certify that it does not meet the filing requirements of Schedule B (Form	ne H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

PAGE 1 OF 1

age 2

Name of organization
THE MAHLEY FAMILY FOUNDATION

Employer identification number 16-1589308

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 RBK, LLC Person 1961 WEHRLE DRIVE, SUITE 5 Payroll 24,950 X Noncash **BUFFALO** NY 14221 (Complete Part II for noncash contributions) (a) (b) (c) No Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

PAGE 1 OF 1

ane 3

Name of organization
THE MAHLEY FAMILY FOUNDATION

Employer identification number 16-1589308

Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed Part II (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) 100 SHARES PUMA BIOTECH STOCK 1 19,950 07/31/14 \$ (a) No (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$

Federal Statements

16-1589308 FYE: 12/31/2014 Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	Net Gain / Loss	\$ -3,592	\$ -3,592
	Depreciation	vs-	\$
	Expense	10	0
	Cost	9,546 \$	9,546 \$
How Received	Sale Price	PURCHASE 5,954 \$	5,954 \$
	Date Sold	VARIOUS \$	<i>₩</i>
Description	Date Acquired	9/23/11 VARIOUS	
De	Whom Sold	2100 ISHARES SILVER	TOTAL

Fees
unting
o - Acc
art I, Line 16b -
11
ட
990-PF, I
· Form
ent 2 -
Statem

Charitable Purpose	φ.	0
Adjusted Net	₹7-	0
Net ivestment	1,800	1,800
<u>=</u>	ςŷ	S.
Total	1,800	1,800
	φ.	₩.
Description	ACCOUNTING FEES	TOTAL

Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	\$	\$
Adjusted Net		0
Adju	တ	₩
Net nvestment	258	258
Inve	৵	w.
Total	258	258
 	\$	₩.
Description	FOREIGN TAX	TOTAL

					<u> </u>	
4/29/2015 10.14 AM	, Charitable Purpose	\$		Fair Market Value \$ 621,742 \$ 621,742		4-5
	enses Adjusted Net	\$	k Investments	Basis of Valuation MARKET		
nents	Line 23 - Other Exp Net Investment		Part II, Line 10b - Corporate Stock Investments	End of Year \$ 621,742		
Federal Statements	Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses Net Ad Total Investment	100 155 255 8		Beginning of Year 628, 236 628, 236		
IDATION	Statement 4 - Fo	у	Statement 5 - Form 990-PF,	' w' w"		
437 THE MAHLEY FAMILY FOUNDATION 16-1589308 FYE. 12/31/2014	Description	FEE SES	Statem	Description MERRILL		
437 THE MAHLE 16-1589308 FYE. 12/31/2014	Ŏ	EXPENSES NYS FILING FEE BANK CHARGES TOTAL		INVESTMENTS - TOTAL		

437 THE MAHLEY FAMILY FOUNDATION
16-1589308 Federal Statements
FYE 12/31/2014

4/29/2015 10:14 AM

Statement 6 - Form	990-PF,	Part III,	Line 3 -	- Other Increases

. Description		Amount		
ROUNDING		\$	1	
TOTAL		\$	1	

Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount		
UNREALIZED LOSS ON SECURITIES	\$_	39,304	
TOTAL	\$_	39,304	

4/29/2015 10.14 AM

437 THE MAHLEY FAMILY FOUNDATION

Federal Statements

16-1589308 FYE: 12/31/2014

Statement 8 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name RBK, LLC

Address

1961 WEHRLE DRIVE, SUITE 5

City, State, Zip
BUFFALO NY 14221

atement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

RESTORE MARTIN HOUSE
СПВЕВП
THE THE CALL
N/A

8-9

437 THE MAHLEY FAMILY FOUNDATION FYE. 12/31/2014 16-1589308

Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Ac	Address		
Address	Re	Relationship	Status	Purpose	Amount
SPECIAL OLYMPICS OF MINNE MINNEAPOLIS MN 55415	N/A	400 SOUTH 4	4TH STREET PUB. CHARITY	SPORTS FOR MEDICAL RETARDATION	1,500
MINNESOTA PUBLIC RADIO		45 7TH STREET	<u> </u>))
ST. PAUL MN 55101	N/A		PUB. CHARITY	SUPPORT PUBLIC RADIO PROGRAMMING	3,000 .
ALLEGHENY COLLEGE		520 NORTH M	01		
MEADVILLE PA 16335 METRO MENIS ON WHERIS	N/A	[NOOL WASHIN	PUB. CHARITY	SUPPORT WOMEN IN COLLEGE ATHLETICS	1,000
MINNEAPOLITS MN 55214	N / D		3 / T/	SIKEM SHOTHEREN HES SMITHELDS GIED	· 004 1
THE SAINT PAUL CHAMBER OR	¢ /vi	408 SAINT P		SHOI-INS GEI NOIKIILOOS	00C'T
ST. PAUL MN 55102	N/A		PUB. CHARITY	SUPPORT PERFORMANCES, EDUCATION PROG	500
C.R.O.W.		PO BOX 150			
SANIBEL FL 33957	N/A		PUB. CHARITY	SUPPORT WILDLIFE RESCUE HOSPITAL	3,000
J DAVID GLADSTONE FOUNDAT		1650 OWENS	STREET		
SANFRANCISCO CA 94158	N/A		PUB. CHARITY	SUPPORT RESEARCH IN HEALTH	7,000
GALAPAGOS CONSERVANCY		1150 FAIRFA	IRFAX BLVD STE 4	408	
FAIRFAX VA 22030	N/A		PUB. CHARITY	SUPPORT ENVIRONMENTAL SCIENTIFIC RES	1,500
TUBMAN FAM ALLIANCE		3111 FIRST	AVE. SOUTH		
MINNEAPOLIS MN 55408	N/A		PUB. CHARITY	SUPPORT FAMILIES DEALING WITH VIOLEN	1,000
_		625 MAIN ST	STREET		
L .	N/A		PUB. CHARITY	FUND THEATRICAL PRODUCTIONS	200
VALLEY CHAMBER CHORALE		PO BOX 352			
STILLWATER MN 55082	N/A		PUB. CHARITY	FUND FOR MUSIC PROGRAMS	500
WISHES & MORE		961 HILLWIN	LWIND RD		
MINNEAPOLIS MN 55432	N/A	I	PUB. CHARITY	FUND TERMINAL CHILD WISHES	2,500
VALLEY OUTREACH		1911 CURVE	CREST BLVD WES	ES	
STILLWATER MN 55082	N/A	I	PUB. CHARITY	SUPPORT RESIDENCE IN NEED	200
MINNESOTA HUNDRED CLUB		PO BOX 18784	4		
MINNEA	N/A	I	PUB. CHARITY	SUPPORT SURVIVING FAMILIES OF PUBLIC	
THE PHIPPS CENTER FOR ART		109 LOCUST	STREET		
HUDSON WI 54016	N/A	1	PUB. CHARITY	SUPPORT PERFORMANCES, EXHIBITIONS ET	1,100
		170 EAST CO	COTATI AVENUE		
ATI CA 94931	N/A		PUB. CHARITY	PROTECT ANIMAL RIGHTS	1,000
		PO BOX 709			
YORKTOWN HEIGHTS NY 10598	N/A	I	PUB. CHARITY	ASSIST VISUALLY IMPARRED MEN & WOMEN	1,000

437 THE MAHLEY FAMILY FOUNDATION 16-1589308 FYE. 12/31/2014

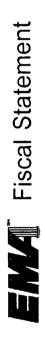
Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

HOLFALO ST COLLEGE KENZIE SCHOLAR 1300 ELIMWOOD AVENUE BUFFALO ST COLLEGE KENZIE SCHOLAR 1300 ELIMWOOD AVENUE BUFFALO ST COLLEGE KENZIE SCHOLAR 1300 ELIMWOOD AVENUE BUFFALO ST COLLEGE KENZIE SCHOLAR 1300 ELIMWOOD AVENUE ST. PAUL MN 55108 ANGEL ACRES HORSE HAVEN RESCUE GLENVILLE PA 17329 M/A MINNESOTA RETIRED RACEHORSE PROJECT 10045 240TH ST. EAST LAKEVILLE MN 55044 N/A ROBOX 62 GLENVILLE PA 17329 M/A ROBOX 62 GLENVILLE PA 17329 M/A ROBOX 62 GLENVILLE PA 17329 M/A PO BOX 62 FUB. CHARITY POB. CH	Name	-	H	Address		
LO ST COLLEGE KENZIE SCHOLAR L HUMANE SOCIETY L HUMANE SOCIETY N/A 1115 BEULAH LANE ACRES HORSE HAVEN RESCUE L ACRES HORSE HAVEN RESCUE SOTA RETIRED RACEHORSE PROJECT LAKEVILLE PA 17329 SOTA RETIRED RACEHORSE PROJECT ACRES HORSE HAVEN RESCUE N/A SOTA RETIRED RACEHORSE PROJECT LO BOX 62 PUB. CHARITY HORSE RESCUE FROM SLAUGHTER PUB. CHARITY HORSE RESCUE FROM SLAUGHTER PUB. CHARITY REHAB & PLACEMENT OF RETIRED RA STILLWATER MN 55082 N/A PO BOX 1056 L'S ANGELS INC. PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY HEALING THROUGH NATURAL MEDICIN RESTMINSTER MD 21158 N/A STO WEST 12TH ST N/A PUB. CHARITY HEALING THROUGH NATURAL MEDICIN RESTMINSTER MD 21158 N/A STO WEST 12TH ST N/A PUB. CHARITY HEALING THROUGH NATURAL MEDICIN RESTMINSTER MD 21158 N/A STO WEST 12TH ST N/A PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY HEALING THROUGH NATURAL MEDICIN RESTMINSTER MD 21158 N/A STO WEST 12TH ST N/A PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY HEALING THROUGH NATURAL MEDICIN RESTMINSTER MD 21158 N/A STO WEST 12TH ST REMARKAN STO WEST 12TH ST STO WES	Address	Rel	ationship	Status	Purpose	Amount
BUFFALO NY 14222 N/A PUB. CHARITY FUND SCHOLARSHIPS FOR MINORITIES AL HUMANE SOCIETY AL HUMANE SOCIETY ST. PAUL MN 55108 N/A PUB. CHARITY CREATE A MORE HUMANE WORLD FOR PUB. CHARITY CREATE A MORE HUMANE WORLD FOR CLENVILLE PA 17329 N/A PUB. CHARITY HORSE RESCUE FROM SLAUGHTER ASS CENTER FOR HEALING N/A PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY INVESTIGATORS IMPROVING FARM AN SS 082 N/A PUB. CHARITY INVESTIGATORS IMPROVING FARM AN SS IN AMERICA N/A PUB. CHARITY ST ST ILLH ST CHEST SANCTUARIES & RESCUE FOR HEALING N/A PUB. CHARITY INVESTIGATORS IMPROVING FARM AN SS IN AMERICA N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MESTAND 21158 N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AS SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FOR MINAMENTER AND ST 12TH ST PUB.	ALO ST COLLEGE KENZIE SCF	HOLAR	1300 ELMWO	OD AVENUE		,
AL HUMANE SOCIETY ST. PAUL MN 55108 N/A L ACRES HORSE HAVEN RESCUE CLENVILLE PA 17329 ESOTA RETIRED RACEHORSE PROJECT LAKEVILLE MN 55082 N/A AL'S ANGELS INC. N/A PUB. CHARITY CREATE A MORE HUMANE WORLD FOR CHARITY CREATE A MORE HUMANE WORLD FOR BUB. CHARITY HORSE RESCUE FROM SLAUGHTER PUB. CHARITY HORSE RESCUE FROM SLAUGHTER PUB. CHARITY REHAB & PLACEMENT OF RETIRED RA PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY HEALING THROUGH NATURAL MEDICIN PUB. CHARITY INVESTIGATORS IMPROVING FARM AN PUB. CHARITY INVESTIGATORS IMPROVING FARM AN NEST NAMERICA N/A PO BOX 1056 WEST 12TH ST N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FROM SLAUGHTERS & RESCUE FROM S	BUFFALO NY 14222	N/A		PUB. CHARITY	FUND SCHOLARSHIPS FOR MINORITIES	2,000
ST. PAUL MN 55108 N/A CLENVILLE PA 17329 ESOTA RETIRED RACEHORSE PROJECT LAKEVILLE MN 55044 ASS CENTER FOR HEALING STILLWATER MN 55082 N/A N/A ASS CENTER FOR HEALING AL'S ANGELS INC. NEW YORK NY 10014 N/A PO BOX 1056 N/A PUB. CHARITY CREATE A MORE HUMANE WORLD FOR FORD FORD CHARITY REHAB & PLACEMENT OF RETIRED RAPING THROUGH NATURAL MEDICING FARM AND PUB. CHARITY INVESTIGATORS IMPROVING FARM AND PUB. CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FORD SANCTUARIES & RESCUE FROM SLAUGHTER WORLD FORD CHARITY SUPPORT TIGER SANCTUARIES & RESCUE FORD FORD FORD FORD FORD FORD FORD FORD	AL HUMANE SOCIETY		1115 BEULA	H LANE		
L ACRES HORSE HAVEN RESCUE L ACRES HORSE HAVEN RESCUE N/A ESOTA RETIRED RACEHORSE PROJECT 10045 240TH ST. EAST LAKEVILLE MN 55044 ASS CENTER FOR HEALING STILLWATER MN 55082 N/A N/A PUB. CHARITY REHAB & PLACEMENT OF RETIRED RACEMENT OF RETIRED RACEMENT ST PUB. CHARITY HEALING THROUGH NATURAL MEDICINAL ST N/A PO BOX 1056 WESTMINSTER MD 21158 N/A 250 WEST 12TH ST NEW YORK NY 10014 N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RES	ST. PAUL MN 55108	N/A		PUB. CHARITY	CREATE A MORE HUMANE WORLD FOR ANIMA	2,000
GLENVILLE PA 17329 N/A PUB. CHARITY HORSE RESCUE FROM SLAUGHTER ESOTA RETIRED RACEHORSE PROJECT 10045 240TH ST. EAST LAKEVILLE MN 55044 N/A PUB. CHARITY REHAB & PLACEMENT OF RETIRED RASS CENTER FOR HEALING ASS CENTER FOR HEALING AL'S ANGELS INC. N/A PO BOX 1056 WESTMINSTER MD 21158 N/A PUB. CHARITY INVESTIGATORS IMPROVING FARM AN RS IN AMERICA N/A 250 WEST 12TH ST NEW YORK NY 10014 N/A PUB. CHARITY SUPPORT TIGER SANCTUARIES & RES	L ACRES HORSE HAVEN RESCL	JE				
ESOTA RETIRED RACEHORSE PROJECT 10045 240TH ST. EAST LAKEVILLE MN 55044 ASS CENTER FOR HEALING STILLWATER MN 55082 N/A WESTMINSTER MD 21158 N/A RS IN AMERICA N/A N/A PUB. CHARITY REHAB & PLACEMENT OF RETIRED RIPED GLENVILLE PA 17329	N/A		PUB. CHARITY	HORSE RESCUE FROM SLAUGHTER	1,000	
116 EAST CI EALING 116 EAST CI 5082 N/A PO BOX 105 21158 N/A 250 WEST 1:	ESOTA RETIRED RACEHORSE E	PROJECT	10045 240T	H ST. EAST		
EALING 116 EAST CHESTNUT ST 5082 N/A PUB. CHARITY 21158 N/A PUB. CHARITY 250 WEST 12TH ST 14 N/A PUB. CHARITY	LAKEVILLE MN 55044	N/A		PUB. CHARITY	REHAB & PLACEMENT OF RETIRED RACEHOR	200
5082 N/A PUB. CHARITY 21158 N/A PUB. CHARITY 250 WEST 12TH ST 14 N/A PUB. CHARITY	ASS CENTER FOR HEALING		116 EAST C	HESTNUT ST		
PO BOX 1056 21158 N/A PUB. CHARITY 250 WEST 12TH ST 14 N/A PUB. CHARITY	STILLWATER MN 55082	N/A		PUB. CHARITY	HEALING THROUGH NATURAL MEDICINE	750
D 21158 N/A PUB. CHARITY 250 WEST 12TH ST N/A PUB. CHARITY	AL'S ANGELS INC.			9		
250 WEST 12TH ST N/A PUB. CHARITY	WESTMINSTER MD 21158	N/A		PUB. CHARITY	INVESTIGATORS IMPROVING FARM ANIMAL	1,000
N/A PUB. CHARITY	RS IN AMERICA			2TH ST		
	NEW YORK NY 10014	N/A		PUB. CHARITY	SUPPORT TIGER SANCTUARIES & RESCUES	1,500

62,100

TOTAL



CURRENT PORTFOLIO SUMMARY

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Est Annual Income		25 92	25 92		Est Annual Income	ı		624 00	632 00	289 00	100 00	1,188 00	361 00		351 00	175 00	
Est Accrued Interest					Unrealized Gain or (Loss)			9,318 40	29,306 92	15,159 36	5,117 30	26,222 01	13,091 08	7,849 54	5,999 89	(230 47)	
Unrealized Gain or (Loss)			Th Fi	טראני. ה	14hle 990-pr	=	9 4 1	+ _	158 11-	- B	08	v(e	S٦	ect Fa:	-5 -a r	ሳልላሂ	er Valve
Fiscal Year Value 12/31/14		474 95 129,599 00	130,073 95	\RY	Fiscal Year Value 12/31/14			24,436 00	31,858 00	25,011 00	8,945 00	38,225 00	24,765 00	26,960 00	19,570 00	9,785 00	
Total/Adj Cost Basis	Cash and Money Funds	474 95 129,599 00	130,073 95	CURRENT PORTFOLIO SUMMARY	Total/Adj Cost Basis		Equities	15,117 60	2,551 08	9,851 64	3,827 70	12,002 99	11,673 92	19,110 46	13,570 11	10,015 47	
Date Acquired	Cash	12/31/13	ı	CURRENT	Date Acquired			08/17/11	01/16/95	10/21/04	08/17/11	12/28/04	03/04/03	05/20/14	05/18/12	05/22/13	rriod Account No 12/31/14 723-04F66
Security Description		CASH ML BANK DEPOSIT PROGRAM	Total Cash and Money Funds		Security Description			AFLAC INC COM	AMGEN INC COM PV \$0 0001	AUTOMATIC DATA PROC	BANK OF AMERICA CORP	CMS ENERGY CORP	CAPITAL ONE FINL	COMMUNITY HEALTH SYS NEW	CHESAPEAKE ENERGY OKLA	CHESAPEAKE ENERGY OKLA	PLEASE SEE REVERSE SIDE Page Statement Period 5 of 21 Year Ending 12/31/14
Quantity		C 129,599 N	_		Quantity			400 A	200 A	300 A	9 009	1,100 C	300 0	200 0	1,000 C	2009	66666666 X



CURRENT PORTFOLIO SUMMARY

Quantity	Security Description	Date Acquired	Total/Adj Cost Basis	Fiscal Year Value 12/31/14	Unrealized Gain or (Loss)	Est Annual Income
			Equities			·
66	CDK GLOBAL INC SHS	10/21/04	1,411 17	4,035 24	2,624 07	48 00
	(9999 FRACTIONAL SHARE)	10/21/04	14 25	40 76	26 51	1 00
	(0001 FRACTIONAL SHARE)	10/07/14		00 0		
304	DST SYSTEMS INC DEL	03/04/03	8,213 48	28,621 60	20,408 12	365 00
200	GILEAD SCIENCES INC COM	06/23/14	16,389 70	18,852 00	2,462 30	
1,300	HMS HLDGS CORP	10/31/00	668 34	27,482 00	26,813 66	
1,167	HCP INC	08/14/00	21,91361	51,383 01	29,469 40	2,545 00
33	HCP INC	05/07/14	1,428 34	1,452 99	24 65	72 00
100	INTL BUSINESS MACHINES CORP IBM	06/24/94	2,827 84	16,044 00	13,216 16	441 00
556	KINDER MORGAN INC DEL	11/19/12	14,569 08	23,524 36	8,955 28	979 00
က	KINDER MORGAN INC DEL	05/17/13	96 41	126 93	30 52	009
2	KINDER MORGAN INC DEL	11/18/13	59 22	84 62	25 40	4 00
2	KINDER MORGAN INC DEL	02/19/14	58 57	84 62	26 05	4 00
514	KINDER MORGAN INC DEL	06/23/14	15,483 83	21,747 34	6,263 51	905 00
_	KINDER MORGAN INC DEL	11/18/14	38 20	42.31	4 11	2 00
+	KINDER MORGAN INC DEL	12/08/14		42.31		2 00

PLEASE SEE REVERSE SIDE Page Statement Period 6 of 21 Year Ending 12/31/14

Account No 723-04F66

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CURRENT PORTFOLIO SUMMARY

Est Annual Income			1,403 00	280 00			820 00	300 00	1,887 00	10 00	14,394 00	
Unrealized Gain or (Loss)			32,136 89	10,930 12	14,618 66	(672.75)	17,308 21	20,088 80	20,718 31	(7 22)	337,304 79	
Fiscal Year Value 12/31/14			25,596 00	21,258 00	18,927 00	26,740 00	32,864 00	20,218 00	42,804 90	215 10	621,742 09	colona C
Total/Adj Cost Basis	L	Ednines	23,459 11	10,327 88	4,308 34	27,412 75	15,555 79	129 20	22,086 59	222 32	284,394 99	PArt II Line 10 b colum C
Date Acquired			08/14/00	12/22/08	10/10/13	10/08/14	01/03/06	04/09/90	08/13/07	05/07/14		FORM 990-PF, PA
Security Description			NOVARTIS ADR	NEXTERA ENERGY INC SHS	PUMA BIOTECH INC	SOLARCITY CORP COMMON STOCK	3M COMPANY	UNITEDHEALTH GROUP INC	VENTAS INC REIT	VENTAS INC REIT	Total Equities	
Quantity			009	200	100	200	200	200	265	က		

PLEASE SEE REVERSE SIDE
Page Statement Period
7 of 21 Year Ending 12/31/14

Account No 723-04F66

2014 ANNUAL STATEMENT SUMMARY

the following sections are provided to facilitate your review and the preparation of your return.

securities when the purchase date of the security occurred within the following timeline. Equites acquired on or after January 1, 2011, Mutual Funds acquired on or after January 1, 2014. Legislation requires reporting the gross proceeds of the sales of "covered" and "noncovered" securities and the adjusted cost basis for "covered securities." Any sale of a security that is considered a "noncovered security" will still be included in this section with the adjusted cost basis (where available) but the adjusted to the IRS. The 2014 Proceeds from Broker and Barter Exchange Transactions section includes both sales of positions for "covered securities" and "noncovered securities" A covered security includes

distributed from a retirement account reflect the tax basis on the date of distribution. Other methods for calculating gain (boss) are available. The cost basis for most Original Issue Discount ("OID") In calculating gain (loss), unless otherwise noted, it was assumed that the oldest position was liquidated lifst, and that you have made an election to amortize the premium paid on the purchase of taxable bonds. Under the Cost Basis Reporting Regulations, brokers need not track wash sale activity for substantially identical securities, transactions across accounts, or between covered and noncovered securities. However, you as a taxpayer still have to track and report wash sales as you have in the past which would include all of the aforementioned transaction types. Securities obligations includes the accretion of OID.

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

399T	1099-B	2014 PROCEEDS		BROKER &	BARTER EXCH	FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
2	1a Description of Property	1b. Date of 1c Date of S. Acquisition or Exchange	Ic Date of Sale or Exchange	1d. Amount	1e Cost Basis	1f IRS Code 1g. Adjustments	Gain or {Loss}	Remarks
	SHORT TERM CAPITAL GAINS AND LOSSES - 1099-B Line 2	10 LOSSES - 1095	-B Line 2					
	COVERED TRANSACTIONS-1099-B Line 3, Cost basis reported to IRS (Code A)	Line 3, Cost bas	is reported to I	RS (Code A)				
<-	MARKET VECTORS ETF TR 50 0000 Sale	CUSIP Number 09/23/13	57061R544 06/23/14	2 072 40	2,090 50	00'0	(18 10)	
	JOHNSON AND JOHNSON COM 9.0000 Sale	CUSIP Number 478160104 05/07/14	. 478160104 06:23/14	938 38	935 24	0.00	3 14	
859	<i>ORACLE CORP \$0 01 DEL</i> 35.0000 Sale	CUSIP Number 05/07/14	. <i>68389X105</i> 09:22 [;] 14	1,369 70	1,458 45	0.00	(88 75)	
95- 1 62-	Covered Short Term Capital Gains and Losses Subtotal	and Losses Subt	otal	4,380.48	4,484.19	0.00	(103.71)	
-888	NET SHORT TERM CAPITAL GAINS AND LOSSES	S AND LOSSES		4,380.48	4,484.19	0.00	(103.71)	
35	LONG TERM CAPITAL GAINS AND LOSSES - 1099-B Line 2) LOSSES - 1099-	B Line 2					
10:	COVERED TRANSACTIONS-1099-B Line 3, Cost basis reported to IRS (Code D)	Line 3, Cost bas	is reported to I	RS (Cade D)				
11 9	FREEPRT-MCMRAN CPR & GLD 200.0000 Sale	CUSIP Number 35671D857 12/20/11 06/23/14	. 35671D857 06/23/14	7,026.94	7,436.00	00:0	(409.06)	

Merrill Lynch

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Account No. 723-04F66

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Taxpayer No. 16-1589308

THE MAHLEY FAMILY FOUNDATION	DATION						
		2014	INNUAL STA	2014 ANNUAL STATEMENT SUMMARY	WMARY		
1099-B	2014 PROC	CEEDS FROM	A BROKER &	BARTER EXCH	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	٨s	
la. Description of Property	1b Date of 1 Acquisition 0	tc Date of Sale or Exchange	าd Amount	1e Cost Basis	1f IRS Code 1g Adjustments	Gain or (Loss)	Remarks
SEVENTY SEVEN ENERGY INC	CUSIP Number	818097107					
37.3 71.0000 Sale 36.0000 Sale	05/18/12 05/22/13	07/30/14 07/30/14	1,607.62	822.91 613.54	000	784.71 201.60	
Security Subtotal			2,422.76	1,436.45	00'0	986.31	
SILVER WHEATON CORP 300 0000 Sale	CUSIP Number 06/10/11	828336107 07/08/14	7,793 83	9,710 55	00 0	(1,916 72)	
WPX ENERGY INC	CUSIP Number	98212B103					
CLASS A COMMON STUCK 16,0000 Sale 300,0000 Sale	01,06/12 01.06/12	05/07/14	331 73 7,099 82	49.98 937 16	0.00	281 75 6.162.66	
Security Subtotal			7,431.55	987.14	00:00	6,444.41	
	,	,					

overed Long Term Capital Gains and Losses Subtotal	24,675.08	19,570.14	0.00	5,104.94
NONCOVERED TRANSACTIONS-1099-B Line 5, Cost basis not re	Cost basis not reported to IRS (Code E)	(:		

< -	NONCOVERED TRANSACTIONS-1099-B Line 5, Cost basis not reported to IRS (Code E)	9-B Line 5, Cost	basis not repor	ted to IRS (Code E)			
	AUTCMATIC DATA PROC 61 6060 Sale	CUSIP Number 053015103 10/21:04 05/07/14	<i>053015103</i> 05/07/14	4,55881	2,293.01	0.00	2,365 80	
89	CMS ENERGY CORP 26 0000 Sale	CUSIP Number 125896100 12/28/04 05/07/14	125896100 05/07/14	755 38	283.71 ✓	000	472 67	
i9S- ⊁6	CAPITAL ONE FINI 28 0000 Sale	CUSIP Number 03/04/03	<i>14040H105</i> 05/07/14	2 091 10	1,089 57	0000	1,001 53	
5Z-888	CISCO SYSTEMS INC COM 1000 0000 Sale 500 0000 Sale	CUSIP Number 10,12:92 10,12:92	17275R102 09,22,14 09,22,14	24.710.94 12.355.48	897.22 448 51	0.00	23,813,72 11,905,8 <u>7</u>	
91	Security Subtotal			37,066.42	1,345 83	000	35,720.59	
: ZØ:	INTL BUSINESS MACHINES	CUSIP Number 459200101	459200101					
11	9 0000 Sale	06/24/94	05/07/14	1.675.01	254.51	0.00	1,421 50	
STØZ	JOHNSON AND JOHNSON COM 391,0000 Sale	CUSIP Number 478160104 08/14/00 06/23/14	478160104 06:23:14	40,767 29	20,179 55	0.00	20 587 74	

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Merrill Lynch	Merrill Lynch Bank of America Corporation		Account No. 723-04F66	No. 66	<u>Taxpayer No.</u> 16-1589308			, Page 9 of 16 '
THE MAHLEY F	THE MAHLEY FAMILY FOUNDATION	NOI						ľ
			2014 AI	NNUAL STA	2014 ANNUAL STATEMENT SUMMARY	WARY		
1099-B	. •	2014 PROC	EEDS FROM	BROKER &	BARTER EXCHA	2014 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	NS	
1a. Description of Property		10 Date of 10 Acquisition or	1c. Date of Sale or Exchange	1d Amount	1f 1e Cost Basis C	1f IRS Code 1g Adjustments	Gain or (Loss)	Remarks
NOVARTIS ADR 7 0000 Sale		CUSIP Number 08/14/00	66987V109 05/07/14	588 49	273.59	00 0	314 80	The second secon
NEXTERA ENERGY INC SHS 15 0000 Sale		CUSIP Number 12/22/08	65339F101 05,07/14	1 452 82	774 59	00 0	678 23	
ORACLE CORP \$0 01 D	<i>13</i> (CUSIP Number 03/15/94	68389X105 09i22/14	37,764 43	2,169 34	00 0	35,595 09	
<i>3M COMPANY</i> 28 0000 Sale		CUSIP Number 01/03/06	88579Y101 05/07/14	3,878 82	2,177,81	0.00	1,701 01	
UNITEDHEALTH GROUP INC 3 0000 Sale		CUSIP Number 04/09/90	91324P102 05/07/14	212 67	1.94	00 00	210 73	
WILLIAMS COMPANIES DEL 23 DOO Sale 900 DOO Sale		CUSIP Number 03/04/03 03/04/03	969457100 05/07/14 09/22/14	989 77 49 802 01	108.51 4,246.01	00 O	881 26 45,556 00	
Secu	Security Subtotal			50,791.78	4,354.52	000	46,437.26	
WT05 17KINDER MORGAN WI		CUSIP Number	49456B119					
799 0000 Sale		03/07/03	05/07/14	1,443 53	670.39	0.00	772.64	
Noncovered Long Term Capital Gains and Losses Subtota	n Capital Gains a	and Losses Su	ubtotal	183,148.55	35,868.96	0.00	147,279.59	
NET LONG TERM CAPITAL GAINS AND LOSSES	ITAL GAINS AND	COSSES		207,823.63	55,439.10	0.00	152,384.53	
OTHER TRANSACTIONS-1099-B Line 5, Cost basis not reported to IRS (Code X)	(S-1099-B Line 5,	Cost basis n	ot reported to I	IRS (Code X)				
SEVENTY SEVEN ENERGY INC		CUSIP Number	818097107					
SHS SHS		07/06/14	07/09/1/	2 50		000	3.50 Bire	

Other Transactions Subtotal

3.50 W

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07/09/14

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AFFIDAVIT OF PUBLICATION

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State of New York County of Erie. City of Buffalo

LEGAL NOTICE

The annual return of The Mahley Family Foundation for the calendar year ended December 31, 2014 is available at its principal office located at 1961 Wehrle Drive, Suite 5, Buffalo, NY 14221 (857-6450), for inspection during regular business hours by any citizen who requests it within 180 days hereof Treasurer of the Foundation is

apr6

Ross B Kenzie: 15-0547

City of Buffalo	
Bo Sunshine	being duly sworn,
deposes and says, that he is Principal Cler	k of the Buffalo Law Journal,
a newspaper published in said City; that th	e notice, of which the annexed
printed slip taken from said newspaper is a	copy, was inserted and published
therein once on April 6, 2015	<u> </u>
(SIGNED) <u>Poo Dunch</u>	<u></u>
Sworn to before me this 6th day of	April 2015.
1 (1	J. Ichalle ry Public

KIMBERLY J SCHAUS Notary Public State of New York Qualified in Erie County My Commission Expires February 8, 2018