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## EXTENDED TO NOVEMBER 16, 2015

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public Inspection

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 and its instructions is at www.irs.gov/form990.

A F	or the	2014 calendar year, or tax year beginning and e	ending	·					
B Ci	heck if oplicable	C Name of organization		D Employer identific	ation number				
	Address change Name	THE HANGER CHARITABLE FOUNDATION		]	774716				
X	_change	Doing business as			374716				
	Initial return Final return/	(14gitibel alia dilect (s. 1 s.	Room/suite 3 0 0	E Telephone number 512-	777-3800				
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	93,598.				
	Amende	al AUSTIN, TX 78758		H(a) Is this a group re	turn				
	Applica	F Name and address of principal officer: JENNIFER BITTNER		for subordinates	? Yes X No				
	pending	SAME AS C ABOVE		H(b) Are all subordinates in	cluded <sup>9</sup> Yes No				
IT	ax-exe	mpt status. X 501(c)(3)	or 527	If "No," attach a	list. (see instructions)				
JV	Vebsite	WWW.HANGER-SABELFOUNDATION.ORG		H(c) Group exemption	n number 🕨				
KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2008 M	State of legal domicile: ${f DE}$				
Pa	rt I	Summary							
-	1 6	Briefly describe the organization's mission or most significant activities TO AI	DVANCE	OUR COMMUN	ITIES BY				
Governance	1 3	SUPPORTING 501C3 ORGANIZATIONS THAT HELP	PEOPI	E WITH PHYS	ICAL				
ř.	2	Check this box   if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	sets.				
OV6	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	4				
	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	4				
es	5 7	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0				
viti	6	Total number of volunteers (estimate if necessary)		6	14				
Activities &	7a 1	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	0.				
_	ы	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
	1		<u> </u>	Prior Year	Current Year				
Θ	8 (	Contributions and grants (Part VIII, line 1h)	- <b>-</b>	137,942.	93,598.				
ē		Program service revenue (Part VIII, line 2g)	<u> </u>	0.	0.				
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.				
_	I	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ļ						
	<del>1</del> — —	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		137,942. 84,469.	93,598.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	_	04,409.	25,000.				
		Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.				
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	0.	0.				
Expenses		Professional fundraising rees (Par-IX, column (A)) Ine 11e)	0.						
X	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	50,627.	52,621.				
_		Other expenses (Part X, column (A) Tines 11a-11at 11-24e)		135,096.	77,621.				
	18	Total expenses. Additines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	·	2,846.	15,977.				
<u>=8</u>	19	Hevenue less expenses. Subtraction 4 of from title 12	R	eginning of Current Year	End of Year				
C 55 E		Tabel assats (Dark V. Ing. 16)	- ا	555,835.	566,691.				
_ <u>\$\$@</u>	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	<b>-</b>	18,828.	13,707.				
Net Assets or Fund Balances	21 22	Net assets or fund balances. Subtract line 21 from line 20		537,007.	552,984.				
ν <sub>ι</sub> μέ	art II	Signature Block		<u> </u>					
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and stater	ments, and to the best of m	y knowledge and belief, it is				
		t, and complete. Deplatation of preparer (other than officer) is based on all information of wi							
<u>, —</u>									
Sig	ın	Signature of officer		Date 1112	2015				
Her		NICHOLAS DAWE - TR	<u>EASU</u>	RER 11/13	2015 .				
		Type or print name and title		•					
		Print/Type preparer's name  Preparer's signature	10	Date   Check   11/10/15   self-emotor	PTIN				
	parer	Firm's name REYNOLDS & FRANKE, P.C.  Firm's address 6850 AUSTIN CENTER BLVD., SUITE	100	Firm's EIN	14-7710717				
use	Only	AUSTIN, TX 78731	100	Phone no / 5	12) 206-3141				
1.7-			<u> </u>	Trilone no. ( 5	X Yes No				
Ma	y tne II	RS discuss this return with the preparer shown above? (see instructions)	<u> </u>		Laties L NO				

Form 990 (2014) THE HANGER C
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
_	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ü	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X		ľ	1
_	as applicable.			لعـا
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			<u></u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del>  '''-</del>	<del></del>	$\vdash$
120	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			$\Box$
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves " complete Schedule F. Parts Land IV.	14b	x	
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	<del>  ^</del>	<del>                                     </del>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
4-	1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		x
200	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	<del>                                     </del>	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		† <u> </u>
<u> </u>		<del></del>	~~~	(004.4)

Form 990 (2014) THE HANGER CHARITABLE FOUNDATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			ĺ
	any tax-exempt bonds?	24c		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			1
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			1
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		٠,	1
	instructions for applicable filing thresholds, conditions, and exceptions):			- == -
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	ļ	Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	l	i	v
•	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	۱		x
	If "Yes," complete Schedule N, Part I	31	-	_^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			X
22	Schedule N, Part II	32	-	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<u> </u>
34	Part V, line 1	24		x
250	······································	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330	$\vdash$	$\vdash \vdash$
<b>5</b> 0	If "Yes," complete Schedule R, Part V, line 2	36	1	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-30		<del>                                     </del>
<i>31</i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<del>  "</del>	$\vdash$	<del> </del>
~	Note. All Form 990 filers are required to complete Schedule O	38	х	
	receive and one and required to complete conjugate o		990	(2014
				,

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Form 990 (2014) THE HANGER CHARITABLE FOUNDATION
Part V Statements Regarding Other IRS Filings and Tax Compliance

	' Check if Schedule O contains a response or note to any line in this Part V								
		$\Box$	Yes	No					
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable								
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	$\mathbf{\bar{x}}$						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 0			,					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		, í					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х					
b	If "Yes," enter the name of the foreign country:								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b		L					
7	Organizations that may receive deductible contributions under section 170(c).	<u> </u>		X					
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?								
	If "Yes," indicate the number of Forms 8282 filed during the year	!		,					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f		7f		X					
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>					
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
_	sponsoring organization have excess business holdings at any time during the year?	8	-	<del>                                     </del>					
9	Sponsoring organizations maintaining donor advised funds.	9a	-						
	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<del>                                     </del>	$\vdash$					
10	Section 501(c)(7) organizations. Enter.	100		<del> </del>					
	Initiation fees and capital contributions included on Part VIII, line 12	ļ	ĺ						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	1		1					
11	Section 501(c)(12) organizations. Enter:	1	ļ						
	Gross income from members or shareholders	ļ	l						
	Gross income from other sources (Do not net amounts due or paid to other sources against	1							
_	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1							
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans	J	1						
С	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	1	1					

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Form 990 (2014) THE HANGER CHARITABLE FOUNDATION 26-3374716 Page Part VI Governance, Management, and Disclosure For each "Yes' response to lines 2 through 7b below, and for a "No" response

1 41	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions		, op on	,0					
	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
<del>500</del>	north deverting body and management	1	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 4								
	If there are material differences in voting rights among members of the governing body, or if the governing			t t					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			ŀ					
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2	X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?								
4									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		Î						
	more members of the governing body?	7a		<u> </u>					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		<u> </u>					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_ [		7.7					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
	District the standard of the s	40.	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?	10a							
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b							
110	and branches to ensure their operations are consistent with the organization's exempt purposes?								
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990  12a Did the organization have a written conflict of interest policy? If "No," go to line 13								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	ın Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			_					
а	The organization's CEO, Executive Director, or top management official	15a		X					
b	Other officers or key employees of the organization	15b		Х					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		ŀ	77					
	taxable entity during the year?	16a		<u>X</u>					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			-					
800	exempt status with respect to such arrangements? tion C. Disclosure	16b	I	Щ_					
17 18	List the states with which a copy of this Form 990 is required to be filed DE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only).	availah							
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a									
for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain in Schedule O)									
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, air									
.5	statements available to the public during the tax year	- 1111041	J.CII						
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	NICK DAWE - 512-777-3627								
	10910 DOMAIN DRIVE, NO. 300, AUSTIN, TX 78758								

E0.	000	(2014)	
rom	990	(2014)	

#### THE HANGER CHARITABLE FOUNDATION

26-3374716

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. individual trustees or directors; institutional trustees, officers; key employees, highest compensated employees; and former such persons.

X Check this box if neither the organization	nor any related	orga	anıza	ation	ı cor	mpe	nsat	ed any current officer, of	director, or trustee.	
(A) Name and Title	(B) Average hours per week	box offi	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) VINIT ASAR	1.00			,,			ŀ			
PRESIDENT	1.00	X		X	⊢	-		0.	0.	0.
(2) IVAN R. SABEL CHAIRMAN	1.00	X						0.	0.	0.
(3) ERIC GREEN	1.00	<u> </u>	₩	$\vdash$	$\vdash$	$\vdash$	$\vdash$	0.	0.	0 •
VICE CHAIRMAN	1.00	X						0.	0.	0.
(4) THOMAS KIRK	1.00	╁ <u>╌</u>	<del>                                     </del>	<del> </del>	<del>                                     </del>	<del>                                     </del>				
DIRECTOR		x	İ					0.	0.	0.
(5) DREW MORTON	1.00		l		T	T				
SECRETARY		1		Х				0.	0.	0.
(6) JENNIFER BITTNER (JUL - DEC)	1.00			1						
ASST. SECRETARY				X				0.	0.	0.
(7) DAVID ROE (JUL - DEC)	1.00					Γ				
INTERIM TREASURER				Х	上			0.	0.	0.
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	<u> </u>	<u> —</u>			—	1	_	ı	<u> </u>	<del></del>

	Section A. Officers, Directors, Trus	stees, ivey Lin	pioy	CCS	, aire	4 1 11	gne	31.0	ompensacea Employe	CS (CONTINICOS)				
	· (A)	(B)			((	-			(D)	(E)	ľ		(F)	
	Name and title	Average		not c		more	than		Reportable	Reportable			timate	
		hours per week					is bot or/trus		compensation from	compensation from related	<sup>ካ</sup>		iount c other	)†
		(list any	į						the	organizations	,		pensat	tion
		hours for	- dre				fed		organization	(W-2/1099-MIS	C)	fre	om the	÷
		related	stee o	rustee			pensa		(W-2/1099-MISC)			•	anızatı	
		organizations below	nal tru	onal t		ploye	E COM						d relate Inizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				uiga	ııızatıc	<i>J</i> I 13
		<u> </u>	=	-	٦	×	1 0	٣						
			L											
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				<u> </u>				L						
41.	Cult Andal	<u> </u>	<u> </u>	<u> </u>	<u> </u>	L_	1_		0.		0.			0.
	Sub-total  Total from continuation sheets to Part \	/II Section A							0.		0.			0.
	Total (add lines 1b and 1c)	ii, Section A							0.		0.			0.
_ <u>u</u>	Total number of individuals (including but	not limited to t	hose	liste	ed a	bov	/e) w	ho r	received more than \$10	0,000 of reportab	le			
	compensation from the organization													(
													Yes	No
3	Did the organization list any former office			e, k	ey e	mpl	oyee	, or	highest compensated	employee on				v
	line 1a? If "Yes," complete Schedule J for											3		Х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15									the organization		4		х
5	Did any person listed on line 1a receive or									vidual for services				
	rendered to the organization? If "Yes," con											5_		X
Sec	tion B. Independent Contractors												_	
1	Complete this table for your five highest of										npens	sation	from	
	the organization. Report compensation fo	r the calendar	year	ena	ing '	with	1 or v	vitni	n the organization's tax (B)	year.		((	C)	
	Name and busines	s address	N	ON	E				Description of	services	C		nsatio	'n
										·				
									1					
			_										_	
_	Takal an and an add and an add and an add and an	(mali dina bi d	no*	lura-4		٠.٠		lice-	d above) who received	more than				
2	Total number of independent contractors \$100,000 of compensation from the organ		TOI	m Till	eu (	o in	ose 0	ııste	above) who received	more trian				

Form 990 (2014) THE HANGE Part VIII Statement of Revenue

		Check if Schedule O contr	ains a response	or note to any line		75	(0)	76
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
tt si	1 a	Federated campaigns	1a					
들		Membership dues	1b					
الجَيْ	С		1c					1
اعظ		Related organizations	1d					
S,E	е	Government grants (contribut	ions) 1e					;
[S.C.]	f	All other contributions, gifts, grant						! !
Contributions, Gifts, Grants and Other Similar Amounts	_	similar amounts not included above		93,598.				, ,
55	g	Noncash contributions included in lines  Total. Add lines 1a-1f	ш-11 э		93,598.			
<del>-  </del>	•	Totali / Ida ii/ioo Ta Ti		Business Code	<u> </u>			
ا بو	2 a	ı						
اړځ	_ b							
S Z	c							
Program Service Revenue	d		-					
900	e							
בֿ	f	All other program service reve	nue					
1	o	Total. Add lines 2a-2f		<b>•</b>				
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		<b>▶</b> [				
	4	Income from investment of ta	x-exempt bond	proceeds 🕨				
	5	Royalties	-	▶				
1			(ı) Real	(ıı) Personal				,
	6 a	a Gross rents					_	
	t	Less: rental expenses					,	
ļ	c	Rental income or (loss)						
- 1	c	Net rental income or (loss)		. ▶				<u> </u>
	7 a	Gross amount from sales of	(i) Securities	(II) Other				,
l		assets other than inventory						1
	t	Less: cost or other basis					Į	:
ı		and sales expenses				İ	l	
	C	Gain or (loss)						
l	(	d Net gain or (loss)		<b>•</b>				
ē	8 8	a Gross income from fundraisin	g events (not			İ	1	
		including \$	of	1				<b>'</b>
Other Reven		contributions reported on line	1c). See					i
ē		Part IV, line 18	a	·				ŧ
됩		b Less. direct expenses	t	·				
		<ul> <li>Net income or (loss) from fund</li> </ul>				ļ		<del> </del>
ļ	9 a	a Gross income from gaming a	ctivities. See	]				
		Part IV, line 19	8					
		b Less: direct expenses	k	ـــــــــا	-	-		
İ		c Net income or (loss) from gan		<u> </u>				<b>-</b>
ŀ	10 a	<ul> <li>Gross sales of inventory, less</li> </ul>						1
		and allowances		·				
l		b Less: cost of goods sold		·		-		-
}	(	c Net income or (loss) from sale		. •		<del> </del>	<del> </del>	<del> </del>
		Miscellaneous Revenu		Business Code				
	11 :			ļ		<del> </del>	<del> </del>	
	l	b				<del> </del>		
	•	C						<del></del>
	•	d All other revenue	•				<del>                                     </del>	<del> </del>
		e Total. Add lines 11a-11d Total revenue. See instructions.			93,598	. 0.	0	. 0.
43200 11-07-	12	TOTAL TEACHING. SEC MISHINGHOUS.	•		79,350	- 0 •	<u>.                                    </u>	Form <b>990</b> (2014)

Form 990 (2014) THE HANGER CH
Part IX Statement of Functional Expenses

Section	on 50T(c)(3) and 501(c)(4) organizations must com			лпрівсе соійтіп (А).							
	Check if Schedule O contains a response or note to any line in this Part IX  (A) (B) (C) (D)										
7b, 8	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses						
	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21				and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t						
2	Grants and other assistance to domestic				ŧ						
	individuals See Part IV, line 22				<u> </u>						
3	Grants and other assistance to foreign			'	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de l						
	organizations, foreign governments, and foreign	25 000	25 000	·	i i						
	individuals. See Part IV, lines 15 and 16	25,000.	25,000.								
	Benefits paid to or for members										
5	Compensation of current officers, directors,										
_	trustees, and key employees										
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
_	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages										
8	Pension plan accruals and contributions (include										
^	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits										
10	Payroll taxes Fees for services (non-employees):										
11	Fees for services (non-employees):  Management		•								
a b	Legal										
	Accounting	30,630.		30,630.							
	Lobbying	20,000		22,000	· ·						
	Professional fundraising services. See Part IV, line 17										
f	Investment management fees										
	Other. (If line 11g amount exceeds 10% of line 25,										
9	column (A) amount, list line 11g expenses on Sch 0.)										
12	Advertising and promotion										
13	Office expenses	914.		914.							
14	Information technology	21,077.		21,077.							
15	Royalties .										
16	Occupancy										
17	Travel										
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest .										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization										
23	Insurance										
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
a				<del></del>							
b		<u> </u>	<del></del>		<del></del>						
C				-							
ď			<del>                                     </del>	<del>                                     </del>							
	All other expenses	77,621.	25,000.	52,621.	0.						
<u>25</u> 26	Joint costs. Complete this line only if the organization		25,000.	32,021.							
20	reported in column (B) joint costs from a combined			<b> </b>							
	educational campaign and fundraising solicitation.	:		1							
	Check here										

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 555,835. 566,691. Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets 7 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less, accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 555,835. 566,691. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 13,707. 18,828. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 18,828. 13,707. 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 501,268. 517,245. 27 Unrestricted net assets 27 35,739. 35,739 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 537,007. 552,984. 33 Total net assets or fund balances 33 555,835. Total liabilities and net assets/fund balances 566,691. 34

Form	990 (2014) THE HANGER CHARITABLE FOUNDATION	26-	3374716	Pag	e <b>12</b>			
Par	t XI Reconciliation of Net Assets							
	'Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,59				
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,63				
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	53	7,0	07.			
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses .	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	552	2,9	84.			
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		\	İ	1			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	، منقائد		**			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		, j	1			
	separate basis, consolidated basis, or both:		*	*	,			
	Separate basis Consolidated basis Both consolidated and separate basis		22.0	<u>.</u>	أمد			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basıs,	¥.,:	~ `]	* 1/21 * 1/21			
	consolidated basis, or both:		1,0		- in			
	Separate basis Consolidated basis Both consolidated and separate basis				1			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audıt,		4 - 4	Z <sup>*</sup>			
	review, or compilation of its financial statements and selection of an independent accountant?	-	2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1 1	1	,			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Aud	int	.	ار سو			
	Act and OMB Circular A-133?		3a		_X_			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured auc						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					
	•		Form	990 (	(2014)			

## **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THE HANGER CHARTTABLE FOUNDATION

**Employer identification number** 26-3374716

D-		Daniel Carlo Dalaire		"			<u></u>	0 3374710			
Pa	πı	Reason for Public (	narity Status (A	All organizations must co	mplete the	s part.) Se	e instructions.				
The	organ	zation is not a private found	ation because it is: (l	For lines 1 through 11, o	heck only	one box.)					
1	$\sqsubseteq$	A church, convention of ch	urches, or associatio	n of churches described	l ın sectio	n 170(b)(1	)(A)(i).				
2	$\square$	A school described in secti	on 170(b)(1)(A)(ii). (/	Attach Schedule E.)							
3	Ш	A hospital or a cooperative	hospital service orga	anization described in se	ction 170	(b)(1)(A)(ii	i).				
4		A medical research organiz	ation operated in coi	njunction with a hospital	described	in section	n 170(b)(1)(A)(iii). Enter	the hospital's name,			
		city, and state.									
5		An organization operated for	r the benefit of a co	llege or university owned	d or operat	ed by a go	overnmental unit describ	ped in			
		section 170(b)(1)(A)(iv). (C			•						
6			•	nental unit described in s	section 17	O(b)(1)(A)	'v).				
7	X	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in									
•		section 170(b)(1)(A)(vi). (Co		iniai part of ito capport	ioni a gov	on in ionical	unicor nom the general	pablic accombca iii			
8		A community trust describe		1VAVvil (Complete Bar	· II \						
	Ħ										
9	ш	An organization that norma	• • • • • • • • • • • • • • • • • • • •	•	•		•	•			
		activities related to its exen	•	•			• •	•			
		income and unrelated busin		(less section 511 tax) fro	om busine	sses acqu	ired by the organization	atter June 30, 1975.			
		See section 509(a)(2). (Cor	-								
10	片	An organization organized a									
11		An organization organized a			-		•	, ,			
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> o	r section s	509(a)(2).	See <b>section 509(a)(3).</b> C	Check the box in			
	_	lines 11a through 11d that				•					
а			nızatıon operated, s	upervised, or controlled	by its sup	ported org	anızatıon(s), typıcally by	giving			
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the direc	ctors or trustees of the s	upporting			
		organization. You must c	omplete Part IV, Se	ctions A and B.							
b	L	Type II. A supporting org.	anızatıon supervised	or controlled in connec	tion with it	s supporte	ed organization(s), by ha	ving			
		control or management o	f the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manage the sup	ported			
		organization(s). You mus						•			
С		Type III functionally inte	grated. A supporting	organization operated	ın connec	tion with, a	and functionally integrate	ed with.			
		its supported organization						•			
d		Type III non-functionally		,	•	=	•	zation(s)			
_		that is not functionally int	- · ·	- ·			•	, ,			
		requirement (see instruct	~ ·					IVEIICSS			
		Check this box if the orga	•	-	-						
е		•					r type i, type ii, type iii				
	F	functionally integrated, or		nany integrated support	ing organiz	zation.					
		er the number of supported of	-				•				
_ 9		ride the following information  Name of supported	i about the supporte		(iv) is the o	rganization	(v) Amount of monetary	(vi) Amount of			
		organization	(, 2 )	(described on lines 1-9	listed i	n vour	support (see	other support (see			
		<b>-</b>		above or IRC section	governing		Instructions)	Instructions)			
				(see instructions))	Yes	No	•	<u> </u>			
					·						
						· ·					
		<del></del>			1						
					l			l			

Schedule A (Form 990 or 990-EZ) 2014 THE HANGER CHARITABLE FOUNDATION 26-3374716 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

· (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organizati
fails to qualify under the tests listed below, please complete Part III.)

Ser	ction A. Public Support	, ,	,	•			
		(-) 0040	(h) 0044	(-) 0040	(4,0040	(-) 204 :	/n = · ·
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1,711,066.	412,677.	264,265.	137,942.	02 500	2 (10 540
_	include any "unusual grants ")	1,/11,000.	414,0//.	204,205.	137,942.	93,598.	2,619,548.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	4 744 055	410 677	264 265	127 042	02 500	- 414 - 14
	Total. Add lines 1 through 3	1,711,066.	412,677.	264,265.	137,942.	93,598.	2,619,548.
5	The portion of total contributions	-	•				
	by each person (other than a					, (	
	governmental unit or publicly				, ,		
	supported organization) included				·	•	
	on line 1 that exceeds 2% of the			İ	, , ,		
	amount shown on line 11,	•			**,*		
	column (f)						885,066.
	Public support. Subtract line 5 from line 4					_	1,734,482.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014 93, 598.	(f) Total
7	Amounts from line 4	1,711,066.	412,677.	264,265.	137,942.	93,598.	2,619,548.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10				-		2,619,548.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					<u>▶</u> □
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2014 (I	ine 6, column (f) d	vided by line 11, o	column (f))		14	66.21 %
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2014. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright X$
b	33 1/3% support test - 2013. If the o	organization did no	t check a box on l	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2014. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	his box and stop h	i <mark>ere. E</mark> xplain in Pai	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	d organization		. ▶□
ь	10% -facts-and-circumstances tes	_	•		-	17a, and line 15 is	10% or
	more, and if the organization meets th	•				•	
	organization meets the *facts-and-circ				,		ightharpoons
18	Private foundation. If the organization		_		- · · · · -		ıs 🕨 🗔
			, : =			dule A (Form 990	

# Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			·	•		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						]
	ınclude any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in	ļ					
	any activity that is related to the	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						1
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and	ļ					
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received					i	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year		<u> </u>				
•	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						<u>i</u>
	ction B. Total Support		<b>T</b>		···-		
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6		ļ				
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses					İ	
	acquired after June 30, 1975		<u> </u>		ļ		
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is						
10	regularly carried on			<del></del>			
12	Other income. Do not include gain or loss from the sale of capital						
40	assets (Explain in Part VI.)				<del> </del>	ļ	<del></del>
	Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>	1	1	504( )(0)	<u> </u>
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thii	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
50	check this box and stop here	lic Support De	rcentage				
_	Public support percentage for 2014 (			naluma (fl)		15	0/
16			•	column (i))		16	<u>%</u>
	ction D. Computation of Inve				· ·	] 10 ]	
	Investment income percentage for 20		<del> </del>			17	%
	Investment income percentage from	•	•	10, 00:01:11 (1))		18	
	a 33 1/3% support tests - 2014. If the			on line 14, and lin	e 15 is more than		
	more than 33 1/3%, check this box a	=					IS NO.
,	33 1/3% support tests - 2013. If the		=				and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization					=	
_						<u> </u>	

# Schedule A (Form 990 or 990-EZ) 2014 THE HANGER CHARITABLE FOUNDATION

## Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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	10b		<u></u>

		37471	6 Pa	ige <b>5</b>
Pai	t IV   Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	140
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			,
u	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above?/f "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			ر
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		i l	
	controlled the organization's activities. If the organization had more than one supported organization,		]	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ļ		·
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		L
Sec	tion C. Type II Supporting Organizations		1	
		F	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			] .
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
500	the supported organization(s). etion D. Type III Supporting Organizations	1 1	1	l
Sec	Citori D. Type in Supporting Organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1.00	110
1	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	1	1	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	4		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in part VI how		i	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
Ū	significant voice in the organization's investment policies and in directing the use of the organization's		1	ļ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			1
	supported organizations played in this regard	3		]
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instruction	s):		
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b				
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struction	s)	,
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	many transfer of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the		ĺ	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify		1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,		1	1
	how the organization was responsive to those supported organizations, and how the organization determined	1		
	that these activities constituted substantially all of its activities.	2a	<b>_</b>	1
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			[
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	
	activities but for the organization's involvement.	2b		╀—
3	Parent of Supported Organizations. Answer (a) and (b) below.	1	1	1
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	

За

trustees of each of the supported organizations? Provide details in Part VI.

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

	on-Functionally Integrated 509(a)(3) Supporti			<del>_</del>
	the organization satisfied the Integral Part Test as a qualify			uctions. All
other Type III	non-functionally integrated supporting organizations must of	complete S	ections A through E	
Section A - Adjusted Ne	t Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term cap	tal gain	1		
2 Recoveries of prior	year distributions	2		
3 Other gross income	e (see instructions)	3		
4 Add lines 1 through	13	4		
5 Depreciation and d		5		
6 Portion of operatin	g expenses paid or incurred for production or			
	income or for management, conservation, or			
•	operty held for production of income (see instructions)	6	<u>.</u>	
7 Other expenses (se		7		
	me (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum A			(A) Prior Year	(B) Current Year (optional)
Aggregate fair mar	ket value of all non-exempt-use assets (see	1,.		york, of the
	ort tax year or assets held for part of year):		· ' ',	
a Average monthly v		1a		
<b>b</b> Average monthly of		1b		
	f other non-exempt-use assets	1c	<del></del>	
d Total (add lines 1a		1d		
e Discount claimed		÷	, ,,,	, n
factors (explain in		<b>2005</b>	non the statement .	
	edness applicable to non-exempt-use assets	2	····	
3 Subtract line 2 from		3		
	I for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).		4		
	xempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .		6		
7 Recoveries of prio		7		
	mount (add line 7 to line 6)	8		
Section C - Distributab			\$ 	Current Year
1 Adjusted net incor	ne for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line		2		
	nount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of lin		4		`
5 Income tax impos		5	· ·	· [
	ount. Subtract line 5 from line 4, unless subject to			
	rary reduction (see instructions)	6	, ,	, ,
	If the current year is the organization's first as a non-function	nally-integra	ated Type III supporting o	rganization (see
instructions			_	

Sche Par	dule A (Form 990 or 990-EZ) 2014 THE HANGER CH	ARITABLE FOUND	ATION 2	6-3374716 Page 7
	on D - Distributions	(a)(a) capporting cigi	(continued)	Current Year
1	Amounts paid to supported organizations to accomplish exe	Our Circ Tour		
2	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	s	
	Amounts paid to acquire exempt-use assets			-
5	Qualified set-aside amounts (prior IRS approval required)	•		
6	Other distributions (describe in Part VI) See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	)	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	- <u>- "-</u> · · · · ·		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a	· · · · · · <del>- · ·</del>			
b			•	* »
С				
d	1			-
е	From 2013	* •		1
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u>   i                                 </u>	Carryover from 2009 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		,	,,,,,,,,,,,
4	Distributions for 2014 from Section D,			
	line 7. \$			
	Applied to underdistributions of prior years			t
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount	•		,
_	greater than zero, see instructions)			<u> </u>
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
_	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7.			<u> </u>
_ <u>a</u>				
<u>b</u>				

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d Excess from 2013
e Excess from 2014

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Part VI	Supplementa	I Information.	Provide the	explanations require	d by Part II, line 10, Pa	26-3374716 Page 8 rt II, line 17a or 17b; and Part III, line 12.
	Also complete the	s part for any addit	tional inform	ation. (See instruction	ns).	·
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### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE HANGER CHARITABLE FOUNDATION

**Employer identification number** 26-3374716

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)	· · ·	
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis-	ed funds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	<del>_</del>	
	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	or definer devider, or for any earler purpose	Yes No
Pa		panization answered "Yes" to Form 990. P	
1	Purpose(s) of conservation easements held by the organizati		
•	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space	1 10001 Valion of a conta	mod historio structuro
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.	ned conscivation contribution in the form	or a conservation easement on the last
	day of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
ď	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register	arter of 17700, and not on a historic structo	2d 2d
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the	
	year >	icasca, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	-	•
-	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	· ion easements in its revenue and expense	
	include, if applicable, the text of the footnote to the organization		
	conservation easements.		and organization of doods. Ming 107
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	-	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue staten	nent and balance sheet works of art.
	historical treasures, or other similar assets held for public exl		
	the text of the footnote to its financial statements that descri		,
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		·
	relating to these items.	,	
	(i) Revenue included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>\$</b>
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
-	the following amounts required to be reported under SFAS 1		- 31 Provido
•	Revenue included in Form 990, Part VIII, line 1	v o o o o y rolating to those items.	<b>~</b> ¢
-			

Sche	dule D (Form 990) 2014 THE HAN	GER CHARIT	ABLE	FOUND	ATION		:	26-33	7471	6 Page <b>2</b>
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, o	r Other				
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	following that	t are a sigi	nificant i	use of its	collection	n items
	(check all that apply):									
а	Public exhibition	d	·    :	Loan or excl	hange progra	ms				
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further tl	he organizatio	on's exem	pt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or othe	er sımılar a	ssets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered "	Yes" to Fo	orm 990	, Part IV,	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not in	ncluded		_	
	on Form 990, Part X?					٠.			」 Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table:						
									Amount	<u> </u>
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e_			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	unt liability	y?	L	J Yes	L∐ No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part				<del>,</del> - ·	
		(a) Current year	(b) P	rior year	(c) Two year	s back (d	i) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									,
b	Contributions									
С	Net investment earnings, gains, and losses				ļ					
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses				ļ					
g	End of year balance		L	,					<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as.					
а	Board designated or quasi-endowment	<del> </del>	_%							
b	Permanent endowment	%								
C	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c shou	•								
<b>3</b> a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	red for the	e organiz	zation		<u> </u>
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations		_		-		-		3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:						-		3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
LPai	Land, Buildings, and Equipm				\ <b>_</b>	D- 137.7				
	Complete if the organization answere			T		_		. 1		<del></del>
	Description of property	(a) Cost or o			t or other		cumulate		( <b>d</b> ) Boo	k value
	<del></del>	basis (investi	nent)	Dasis	(other)	aepr	eciation			
	Land .			ļ						
b	Buildings			<del> </del>						
С.	Leasehold improvements			<del> </del>	<del></del>	<del></del>				<del></del>
d	Equipment			<del> </del>						
	Other	Sound Form 000, David	V cate	mp (O) 4:55 1	100 \			<del>_</del>  -		
rota	I. Add lines 1a through 1e (Column (d) must e	quai ruiii 990, Pan	. A, COIUI	יוויו ( <i>ש), וו</i> ויפ	IUC.)					0.

	CHARITABLE	FOUNDATION	26-3374716 Page
Part VII Investments - Other Securities.			
'Complete if the organization answered "Yes	to Form 990, Part IV,		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation. Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u></u>		<u> </u>
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes		line 11c. See Form 990, Pa	rt X, line 13.
(a) Description of investment	(b) Book value	(c) Method of value	uation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	<u> </u>		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>		
Part IX Other Assets.			
Complete if the organization answered "Yes		line 11d. See Form 990, Pa	·····
	) Description		(b) Book value
(1)			
(2)	·		
(3)		<del></del>	
(4)		·	
(5)			
(6)			
(7)	···		
(8)	<del></del>		
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col (B) III Part X Other Liabilities.	<del> </del>		<u> </u>
Complete if the organization answered "Yes	to Form 990, Part IV,		90, Part X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
CTN			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

ightharpoons

(8)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

	dule D (Form 990) 2014 THE HANGER CHARITABLE FOUNDATION		74716 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return.	
	* Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	93,598.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1	
а	Net unrealized gains (losses) on investments	<b>↓</b>	
b	Donated services and use of facilities 2b	<b>」</b> │	
С	Recoveries of prior year grants 2c	1	
d	Other (Describe in Part XIII.)	<b>.</b>	_
е	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	93,598.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	]	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	93,598.
Par	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Return	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	77,621.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c	]	
đ	Other (Describe in Part XIII.)	] : [	
е	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	77,621.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	]	
b	Other (Describe in Part XIII.)	]	
С	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	77,621.
Pai	rt XIII Supplemental Information.		
lines	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  RT X, LINE 2:	e 4; Part X,	line 2; Part XI,
	E MOST SIGNIFICANT TAX POSITIONS OF THE FOUNDATION ARE ITS	S ASSI	ERTION
THA	AT IT IS EXEMPT FROM INCOME TAXES AND ITS DETERMINATION OF	F WHE	THER ANY
AMO	OUNTS ARE SUBJECT TO UNRELATED BUSINESS INCOME TAX (UBIT)	. MANA	AGEMENT
HAS	S DETERMINED THAT THE FOUNDATION HAD NO UBIT FOR THE YEAR	S ENDI	ED
DE	CEMBER 31, 2014 AND 2013 AND THEREFORE NO PROVISION HAS B	EEN I	NCLUDED IN
THI	ESE FINANCIAL STATEMENTS FOR ANY FEDERAL INCOME TAX LIABI	LITY.	ALL
SIC	GNIFICANT TAX POSITIONS HAVE BEEN CONSIDERED BY MANAGEMEN	T AND	IT HAS
BE	EN DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ALL PO	SITIO	NS WOULD
BE	SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES.		

Schedule D	(Form 990) 2014	THE HA	NGER	CHARITABLE	FOUNDATION	26-3374716	Page 5
Part XIII	(Form 990) 2014 Supplemental	Information (cor	ntınued)				
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## SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Inspection

Name of the organization

**Employer identification number** 

THE	HANGER CHAR	ITABLE F	OUNDATIO	N	26-337471	.6
Par				tside the United States. Comple		
	Form 990, Part IV			·	3	
1			maintain record	ds to substantiate the amount of its gra	ants and other assistance,	
	the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes X No
2	For grantmakers. Desc	ribe in Part V the	e organization's i	procedures for monitoring the use of it	s grants and other assistance outs	side the
	United States.					
_3_				an be duplicated if additional space is		<del></del>
	(a) Region		(c) Number of		(e) If activity listed in (d)	(f) Total expenditures
		offices	employees, agents, and	(by type) (e.g , fundraising, program services, investments, grants to	is a program service, describe specific type	for and
		ın the region	independent contractors	recipients located in the region)	of service(s) in region	investments
	<del></del>		ın region	rediplotte legated in the region,		in region
					HANDS ON MEDICAL	1
					EDUCATION & TRAINING,	ì
CENTRAL AMERICA AND		L	CLINICAL CARE & DONATED	05.000		
THE	CARIBBEAN	0	0	PROGRAM SERVICES	MEDICAL SUPPLIES	25,000.
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		}	}		}	1
3 a	Sub-total	0	0			25,000.
	Total from continuation					
	sheets to Part I	0	o	_		0.
С	Totals (add lines 3a					
	_and 3b)	c	0			25,000.
LHA	For Paperwork Reduct	tion Act Notice.	see the Instruc	ctions for Form 990.	Schedule F	(Form 990) 2014

26-3374716

Page 2

THE HANGER CHARITABLE FOUNDATION

Schedule F (Form 990) 2014

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance	0	:			xempt by
(e) Amount (f) Manner of of cash grant cash disbursement	СНЕСК				recognized as tax-e
(e) Amount of cash grant	25,000,CHECK				foreign country,
(d) Purpose of grant	)ISASTER RELIEF				Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by
(c) Region	CENTRAL AMERICA AND THE CARIBBEAN DISASTER RELIEF				ins listed above that are r
(b) IRS code section and EIN (if applicable)					recipient organizatio
1 (a) Name of organization					2 Enter total number of

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2014

26-3374716

Page 3

THE HANGER CHARITABLE FOUNDATION

Schedule F (Form 990) 2014 THE HANGER CHARITABLE FOUNDATION 26 – 33 74 7 16

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2014
(g) Description of non-cash assistance					Schedu
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Sched	ule F (Form 990) 2014 THE HANGER CHARITABLE FOUNDATION	26-3374716	Page 4
Part			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	. Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

## **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE HANGER CHARITABLE FOUNDATION

Employer identification number 26-3374716

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CHALLENGES LIVE LIFE AS FULLY AS POSSIBLE.
FORM 990, PART VI, SECTION A, LINE 2:
THE OFFICERS AND DIRECTORS OF THE FOUNDATION HAVE A BUSINESS RELATIONSHIP
WITH ONE ANOTHER AS THEY ARE EITHER DIRECTORS OR EMPLOYEES OF THE SAME
PUBLIC ENTITY.
FORM 990, PART VI, SECTION B, LINE 11:
THE ANNUAL TAX RETURN IS REVIEWED BY THE TREASURER WITH THE PREPARING CPA.
THE TAX RETURN IS DISTRIBUTED TO THE BOARD MEMBERS BEFORE FILING WITH THE
IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
FOLLOWING DISCLOSURES OF FINANCIAL INTEREST, THE BOARD REVIEWS ALL RELEVANT
INFORMATION AND VOTES ON THE EXISTENCE OF A CONFLICT OF INTEREST.
FORM 990, PART VI, SECTION C, LINE 19:
THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.