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# Form 990-PF

#### Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. DEC 19, 2014 DEC 31, 2014 For calendar year 2014 or tax year beginning , and ending Name of foundation A Employer identification number THE HALCYON FOUNDATION 30-6462100 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 501 RIVERSIDE AVENUE 600 904-356-2600 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here JACKSONVILLE, FL 32202 G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: | X | Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 2,000,000. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (b) Net investment (d) Disbursements (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 2,000,000 Contributions, gifts, grants, etc., received N/A 2 Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) SCANNED NOV 1 9 2015 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 2,000,000 0 0 Compensation of officers, directors, trustees, etc 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy OGIDEN 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Operating 24 Total operating and administrative expenses. Add lines 13 through 23 0 0 0 25 Contributions, gifts, grants paid 0. 26 Total expenses and disbursements Add lines 24 and 25 0 0. 27 Subtract line 26 from line 12: 2,000,000. 2 Excess of revenue over expenses and disbursements 0 . b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A

30-6462100

Page 2

Form **990-PF** (2014)

Form 990-PF (2014)

THE HALCYON FOUNDATION

Part IV   Capital Gains	and Losses for Tax on In	vestment	Income					
	cribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs			( <b>b)</b> I	How acquired - Purchase - Donation	(c) Date a	cquired iy, yr.)	(d) Date sold (mo., day, yr.)
a				<u> </u>				
b NO	NE			<u> </u>				
<u> </u>	o			ļ		ļ		. <del></del>
<u>d</u>				<u> </u>				
<u>e</u>	T			<del>ا</del>				<del></del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				in or (loss (f) minus (	
<u>a</u>								
b								
C								
<u>d</u>								· · · · · · · · · · · · · · · · · · ·
Complete and for secrets above	and the second second but	ha farradakan	on 10/01/00				1.41.	
Complete only for assets snowl	ng gain in column (h) and owned by t			-	,	(I) Gains (Cocol. (k), but n		
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (j), if any			Losses	from col. (	h))
a								
b								
C								
d						-		
e								
2 Capital gain net income or (net c	apital loss) { If gain, also enter If (loss), enter -0-			}	2			
Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an							
If gain, also enter in Part I, line 8		. ,-		J				
If (loss), enter -0- in Part I, line 8	1 1 0 11 10 10 1			ىلى	3			
	Jnder Section 4940(e) for	-				ncome		
For optional use by domestic privat	te foundations subject to the section 4	1940(a) tax on	net investment ii	ncome	e.)			N/A
If section 4940(d)(2) applies, leave	this part blank.							
								<u> </u>
	ction 4942 tax on the distributable am		•	Liog.5				☐ Yes ☐ No
	alify under section 4940(e). Do not co each column for each year; see the ii			ntripe	•			
<del></del>		ISH UCTIONS DE	Tore making any t					(d)
(a) Base period years Calendar year (or tax year beginn	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha	) ritable-use asse	ets	Distrit	(d) oution ratio vided by col. (c))
2013	ming m) , tayaataa qaamyinig ala					-	(cor. (b) air	nueu by coi. (c))
2013							_	
2012								
2010								·
2009								
2003_								
2 Total of line 1, column (d)						2		
• • • • • • • • • • • • • • • • • • • •	5-year base period - divide the total	on line 2 by 5.	or by the number	r of ve	ears	-		· · · · · · · · · · · · · · · · · · ·
the foundation has been in exist		on mio E <b>o</b> ,	or by the name	0. ,	5u.5	3		
and tourisation that boot in onloc	ones in loss than 5 years							<del></del> -
4 Enter the net value of noncharita	ble-use assets for 2014 from Part X,	line 5				4		
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6		
	,							
7 Add lines 5 and 6				•		7		
8 Enter qualifying distributions fro	m Part XII, line 4 in line 7, check the box in Part VI, line	th and some	alata that nort use	na n 1	10/ tay rata	8		
See the Part VI instructions.		i iu, anu com	JICIE MAN PAN USII	ny al				

THE HALCYON FOUNDATION

Form 990-PF (2014)

30-6462100 Page 3

	n 990-PF (2014) THE HALCYON FOUNDATION			462			age 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b)		946 -	see ir	IStru	CHOI	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line	i i					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instr						•
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and enter	1%	_1				0.
	of Part I, line 27b						
	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12	, col. (b). ノ					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
-	Add lines 1 and 2		3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
	Credits/Payments:						
a	2014 estimated tax payments and 2013 overpayment credited to 2014						
b	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868)		ŀ				
d	i Backup withholding erroneously withheld 6d 6d						
	Total credits and payments Add lines 6a through 6d		7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refunded >	11				
Pa	art VII-A Statements Regarding Activities						
1a	f a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pa	rticipate or intervene	ın	ĺ		Yes	
	any political campaign?			ļ	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructi	ons for the definition	)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	matenals publishe	ed or				
	distributed by the foundation in connection with the activities.				-		
C	Did the foundation file Form 1120-POL for this year?				1c		X
d	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.					
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	on foundation					
	managers. ▶ \$0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	es of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		N,	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			•	5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	conflict with the state	law				
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, c	ol. (c), and Part XV	′		7	X	
88	a Enter the states to which the foundation reports or with which it is registered (see instructions)						
	FL						
t	<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (	or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$	or 4942(j)(5) for cale	ndar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part X	(IV			9		X
10	Did any persons become substantial contributors during the tay year? It average a second letter than a second				ا ۱۸ ا		v

	990-PF (2014) THE HALCYON FOUNDATION 30-646	<u> 2100</u>	l	Page <b>5</b>
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14	The books are in care of ▶ ARTHUR FRIEDMAN, C.P.A. Telephone no.▶212-6			
	Located at ▶ 280 MADISON AVENUE - #1007, NEW YORK, NY ZIP+4 ▶1	<u>0016</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	1		
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		į	
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		Ì	İ
	ıf the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
ı	f any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ļ		
	before the first day of the tax year beginning in 2014?	1c	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):		}	
•	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1	ĺ
	before 2014?	ľ		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	۱.,		
	statement - see instructions.)  N/A	2b	-	
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3	· · · · · · · · · · · · · · · · · · ·			
	during the year?  Yes X No			
	b If 'Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	۱		
,	Form 4720, to determine if the foundation had excess business holdings in 2014)  N/A	3b	<del> </del>	•
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  b. Did the foundation make any investment in a prior year (but after December 31, 1960) that could incorrdize its charitable. Divisees that	4a	<del> </del>	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	1		X
	had not been removed from jeopardy before the mist day of the tax year beginning in 2014.	4b		┸~

. Form 990-PF (2014) THE HALCYON FOUNDATION			30-64621	00	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	.ed)		r ugo <b>O</b>
5a During the year did the foundation pay or incur any amount to:				T	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o					1
any voter registration drive?			s X No		ŀ
(3) Provide a grant to an individual for travel, study, or other similar purposes	7		s X No		ŀ
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No	- 1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations		ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	<i>y</i>	I/A 🗌 Ye	s No		- [
If "Yes," attach the statement required by Regulations section 53 4945	5-5 <i>(d).</i>		1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s 🗶 No 📙		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>(</i>		
List all officers, directors, trustees, foundation managers and their	companyation	<del></del>			
List all officers, directors, a disters, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) F	ynense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accour	xpense nt, other vances
WILLIAM H. WALTON III	TRUSTEE	,			
501 RIVERSIDE AVENUE - #600					
JACKSONVILLE, FL 32202	0.60	0.	0.		0.
THEODORA D. WALTON	TRUSTEE				
501 RIVERSIDE AVENUE - #600	]				
JACKSONVILLE, FL 32202	0.60	0.	0.		0.
		_	-		
O Compared to a first birth and a side and a section of the state of t	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- A - HNONE #			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) E	VDARCO
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	accour	xpense nt, other vances
NONE	autotou to position		compensation	4.101	<del></del>
	1				
				-	
	1				
				L	
					· ·
		<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000			▶		0

Form 990-PF (2014) THE HALCYON FOUNDATION	<u> </u>	<u>462100 F</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compen	nsation
NONE			
	<u> </u>		
	_		
	-		
	-		
	7		
Total number of others receiving over \$50,000 for professional services	<u> </u>	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti	ical information such as the	Funance	
number of organizations and other beneficiaries served, conferences convened, research papers produced	uced, etc.	Expenses	
NO DIRECT CHARITABLE ACTIVITIES			
			^
			0.
3			
4			
Part IX-B   Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2.	Amount	
NO PROGRAM-RELATED INVESTMENTS		<del>-</del>	
		<u> </u>	0.
2			
All other program related investments. Can instruction			
All other program-related investments. See instructions.			

 $\triangleright$ 

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; a Average monthly fair market value of securities 1a 153.846. b Average of monthly cash balances 1b Fair market value of all other assets 1c 153,846. Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 16 Acquisition indebtedness applicable to line 1 assets 846. Subtract line 2 from line 1d 3 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 .308. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 ,538. 5 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) 270. Minimum investment return from Part X, line 6 1 1 Tax on investment income for 2014 from Part VI, line 5 2a Income tax for 2014. (This does not include the tax from Part VI.) 2b b c Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 270. 5 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 0. 1a b Program-related investments - total from Part IX-B 0. 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 0. 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 0. 5 Adjusted qualifying distributions Subtract line 5 from line 4 6 0. Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
	Distributable amount for 2014 from Part XI, ine 7				270.
<b>2</b> L	Indistributed income, if any, as of the end of 2014				
a E	inter amount for 2013 only			0.	
bΤ	otal for prior years:		0.		
3 E	excess distributions carryover, if any, to 2014:		<u>U.</u>	<del></del>	
аF	rom 2009				
ЬF	rom 2010				
_	rom 2011				
d F	rom 2012				
	From 2013				
	Total of lines 3a through e	0.			
	Qualifying distributions for 2014 from				<u> </u>
	Part XII, line 4: ► \$0.				
	Applied to 2013, but not more than line 2a			0.	
	Applied to undistributed income of prior	<del></del>		<u>U•</u>	
	'''		0.		
	rears (Election required - see instructions)		<u>U•</u>		
	reated as distributions out of corpus	۱ ،			
	Election required - see instructions)	0.			
	Applied to 2014 distributable amount				0.
5 E	Remaining amount distributed out of corpus  Excess distributions carryover applied to 2014  If an amount appears in column (d), the same amount	0.			0.
п	nust be shown in column (a) )				
	nter the net total of each column as ndicated below:				
<b>a</b> 0	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> F	Prior years' undistributed income. Subtract		'		
ł	ne 4b from line 2b		0.		
u d ti	inter the amount of prior years' Indistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously issessed		0.		
d S	Subtract line 6c from line 6b. Taxable				
а	mount - see instructions		0.		
	Indistributed income for 2013. Subtract line				
4	la from line 2a. Taxable amount - see instr.			0.	
fl	Indistributed income for 2014. Subtract				
li	nes 4d and 5 from line 1. This amount must				
b	e distributed in 2015				270.
7 A	Amounts treated as distributions out of				
C	orpus to satisfy requirements imposed by				
S	ection 170(b)(1)(F) or 4942(g)(3) (Election				
П	nay be required - see instructions)	0.			
8 E	xcess distributions carryover from 2009				
п	ot applied on line 5 or line 7	0.			
9 E	excess distributions carryover to 2015.	-			
	Subtract lines 7 and 8 from line 6a	0.			
0 A	Analysis of line 9:				
	excess from 2010				
	excess from 2011	1			
	xcess from 2012				
	excess from 2013				
еE	xcess from 2014				
2358 1-24-	1				Form <b>990-PF</b> (2014)
					(2014)

	CYON FOUNDA				462100 Page 10
Part XIV   Private Operating Fo	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	it it is a private operating			
foundation, and the ruling is effective for	2014, enter the date of	the ruling	<b>▶</b> <u> </u>		
<b>b</b> Check box to indicate whether the found	ation is a private operat	ing foundation described	in section	4942(j)(3) or	4942())(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed				1	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly				† · <del>- · - · - · · · · · · · · · · · · · </del>	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the				<del></del>	
alternative test relied upon:					
a "Assets" alternative test - enter:     (1) Value of all assets					
• •			<del> </del>	<del> </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year			1		
listed			<u> </u>		
c "Support" alternative test - enter:			İ		
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundatio	n had \$5,000 or	more in assets
at any time during t	he year-see inst	tructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ntributions received by th	e foundation before the	close of any tax
year (but only if they have contributed n	ore than \$5,000). (See	section 507(d)(2).)			
WILLIAM H. WALTON II	I				
<b>b</b> List any managers of the foundation wh			ı (or an equally large por	tion of the ownership of	a partnership or
other entity) of which the foundation has	s a 10% or greater inter	est.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗶 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations	under other conditions,	complete items 2a, b, c,	and d.
a The name, address, and telephone num	ber or e-mail address o	f the person to whom app	lications should be addr	essed:	
		<del></del>			
<b>b</b> The form in which applications should b	e submitted and inform	ation and materials they	should include:		
c Any submission deadlines:					· — <del></del>
d Any restrictions or limitations on awards	s, such as by geographi	cal areas, charitable field:	s, kınds of institutions, o	r other factors:	<del></del>
			·		
		_ <del>_</del>			

Total		 <b>→</b> 3a	l 0,
<b>b</b> Approved for future payment			
NONE			
	;		

Total

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated		ea business income		ded by section 5 12, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a			$\perp$		
b				<u></u>	
C					
d					
e	l l	·			
t					
g Fees and contracts from government agencies				·	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
			+		
5 Net rental income or (loss) from real estate:			+		
a Debt-financed property			-	-	
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property					
7 Other investment income			<b></b>		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b			<del>  -</del>	-	
	1				
d			1		
			+		
6		0	<del>                                     </del>		
2 Subtotal. Add columns (b), (d), and (e)		<u> </u>	•	0.	
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)				. 13_	0
Part XVI-B  Relationship of Activities to the foundation's exempt purposes (other than	ome is reported	ın column (e) of Part XVI-			nplishment of
			-		

30-6462100 Page 13

Part	XVII	Information Re Exempt Organi		sfers To a	nd Transactions a	nd Relationsh	ips With Nonchar	itable	)	
4 D	d the ere			of the following	with any other organization	an described in section	on 501(c) of	T	Yes	No
	-	·	-		, with any other organization, relating to political organization.		JII 50 I(C) UI			<del></del>
	•	from the reporting founda	•			izations.				
	) Cash	Tom the reporting realist	mon to a nononanta	olo oxollipt org	unization of.			1a(1)		х
•	) Other	assets						1a(2)		X
•	•	sactions:						14(2)		
		of assets to a noncharital	ble exempt organizat	ion				16(1)		X
٠,٠	,	ases of assets from a nor						1b(2)		X
•	•	l of facilities, equipment,		•				1b(3)		X
(4	, I) Reimt	oursement arrangements						1b(4)		X
	•	or loan guarantees						1b(5)		X
(6	) Perfor	mance of services or me	mbership or fundrais	sıng solıcıtatıor	าร			1b(6)		_X_
c S	haring of	facilities, equipment, mai	iling lists, other asse	ts, or paid emp	oloyees			1c		X
d If	the ansv	ver to any of the above is	"Yes," complete the f	following sched	dule. Column (b) should alv	ways show the fair m	arket value of the goods, o	ther ass	sets,	
0	r services	s given by the reporting fo	oundation. If the four	ndation receive	d less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
C	<u></u> -	) the value of the goods,				<u>,</u>				
(a)Line	no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and s	sharing ar	rangeme	nts
				N/A						
	$-\vdash$					·				
	$\dashv$				<del></del>	<del></del>	<del></del>			
	-									
	-				<del></del>	<u> </u>			_	
	-						<del></del>			
	-	. <del>.</del> -		<del></del> -		<del></del>				
	-		<u> </u>		<u> </u>	<del> </del>				
	-	· <u> </u>				<del></del>				
	-	<del></del>	<del></del>				. <u></u> .			
	_	<del>-</del>					<del></del>		_	
	-				<del> </del>	<del></del>	<del></del>			
	$\neg$ $\vdash$									
2a 19	the four	idation directly or indirect	tly affiliated with, or r	related to, one	or more tax-exempt organi	zations described			_	
		501(c) of the Code (other			• •			Yes	X	] No
		mplete the following sch								
		(a) Name of org			(b) Type of organization	(	c) Description of relations	nıp		
_		N/A								
							<del>-</del>			
							<u> </u>			
										_
		penalties of perjury, I declare elief, it is true, correct, and cor-	that I have examined the	is return, includin enarer (other than	g accompanying schedules and n taxpayer) is based on all inforn	statements, and to the	has any knowledge May	the IRS	discuss	this
Sign	1	WHOOth					sho	rn with th wn below	e prepar (see ins	er :tr)?
Her	F_		·, ~		11/6/15	TRUSTE	<u>E</u> L	X Yes	; L.	_ No
	Sign	nature of officer or trustee		In	Date	Title	Observation of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Committee of the Comm			
		Print/Type preparer's na	ame	Preparer s sı	gnature	Date	Check if PTIN			
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-	Only	Firm's name ► ART	HUK FRIED	мами∥С	PA /		Firm's EIN ► 13-60	b176	56	
<del></del>	Çiny	Firm's address ▶ 28	O MADICON	7 77777777	E - #1007		<del></del>			
			W YORK, N				Dhana at 212 C	00 0	200	
		INE	M TOWN' W	1 TOOT	0-001		Phone no. 212-61	<u> </u>	400	

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	THE HALCYON FOUNDATION	30-6462100
Organization type (chec	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
·	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> . 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a co	
Special Rules		
sections 509(a any one contri	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the DEZ, line 1 Complete Parts I and II.	e 13, 16a, or 16b, and that received from
year, total con	ration described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive tributions of more than \$1,000 exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III	_
year, contribut is checked, en purpose Do n	ration described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive tions exclusively for religious, charitable, etc., purposes, but no such contributions the ter here the total contributions that were received during the year for an exclusively not complete any of the parts unless the <b>General Rule</b> applies to this organization but able, etc., contributions totaling \$5,000 or more during the year	totaled more than \$1,000. If this box y religious, chantable, etc ,
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not file So " on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	chedule B (Form 990, 990-EZ, or 990-PF),

Name of organization

Employer identification number

## THE HALCYON FOUNDATION

30-6462100\_\_\_\_

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

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	WILLIAM H. WALTON III  501 RIVERSIDE AVENUE - #600  JACKSONVILLE, FL 32202	\$ 2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

## THE HALCYON FOUNDATION

30-6462100

Part II	Noncash Property (see instructions) Use duplicate copies of Part	Il if additional space is needed	-
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

**Employer** identification number Name of organization <u>30-6462100</u> THE HALCYON FOUNDATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee