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Department of the Treasury

Internal Revenue Service

#### DLN: 93491131024015

OMB No 1545-0052

Open to Public

Inspection

## **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014 A Employer identification number Name of foundation HALLENE FAMILY FOUNDATION INC 37-1335373 **B** Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 1903 GLENWOOD DRIVE (309) 762-3595 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code MOLINE, IL 61265 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% Address change Name change test, check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J** Accounting method I Fair market value of all assets at end **F** If the foundation is in a 60-month termination **▶** □ under section 507(b)(1)(B), check here of year (from Part II, col. (c), Other (specify) line 16)►\$ 4,193,377 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see for charitable expenses per books (cash basis only) Contributions, gifts, grants, etc , received (attach 169.415 Check ► ☐ If the foundation is **not** required to attach . . . . . . . . . . . . . . . Interest on savings and temporary cash investments 71,406 Dividends and interest from securities. . . 71,406 Gross rents . . . . . . . . . . . . Net rental income or (loss)\_ Net gain or (loss) from sale of assets not on line 10 128,588 Revenue Gross sales price for all assets on line 6a 472,017 Capital gain net income (from Part IV, line 2) . 128.588 Net short-term capital gain . . Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) 11 12 Total. Add lines 1 through 11 . . 369.409 199.994 13 Compensation of officers, directors, trustees, etc 0 14 Other employee salaries and wages . . Operating and Administrative Expenses 15 Pension plans, employee benefits . . 93 2.16 1.625 542 Legal fees (attach schedule). . . . 16a 匆 2.525 631 Accounting fees (attach schedule). 1.894 图 15,608 15,608 0 Other professional fees (attach schedule) **17** 囫 1.872 1.872 0 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion . 19 20 Travel, conferences, and meetings. 21 22 Printing and publications . . . . Other expenses (attach schedule) . . . 9 75 60 15 Total operating and administrative expenses. 24 Add lines 13 through 23 . . . . . 22.247 21,059 1,188 25 Contributions, gifts, grants paid. . . . 257,750 257,750 26 Total expenses and disbursements. Add lines 24 and 21,059 258,938 279,997 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 89.412 178,935 Net investment income (if negative, enter -0-) Adjusted net income (If negative, enter -0-)

Dа	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year			f year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Va	ılue	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	296,503		98,161	98,161
	3	Accounts receivable				
		Less allowance for doubtful accounts 🟲				
	4	Pledges receivable 🟲				
		Less allowance for doubtful accounts 🟲				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) 🕨				
		Less allowance for doubtful accounts 🟲				
2	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
Д3	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	1,495,799	<b>%</b> 1,	657,090	2,620,444
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans	4,015		1,988	2,237
		Investments—other (attach schedule)	1,309,638	<b>%</b> 1,	438,128	1,472,535
		Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe 🟲)				
	16	Total assets (to be completed by all filers—see the				
		instructions Also, see page 1, item I)	3,105,955	3.	195,367	4,193,377
	17	Accounts payable and accrued expenses	_,	-,		,,,,,,,,,,
	18	Grants payable				
S.	19	Deferred revenue				
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ā	21	Mortgages and other notes payable (attach schedule)				
		Other liabilities (describe				
		Total liabilities (add lines 17 through 22)	0		0	
	23		0			
S		Foundations that follow SFAS 117, check here F				
Fund Balances		and complete lines 24 through 26 and lines 30 and 31.				
<u> </u>	24	Unrestricted				
ă		Temporarily restricted				
핕	26	Permanently restricted				
Ŧ		Foundations that do not follow SFAS 117, check here				
ō		and complete lines 27 through 31.			_	
Assets	27	Capital stock, trust principal, or current funds	0			
15.5	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	_	0	
	29	Retained earnings, accumulated income, endowment, or other funds	3,105,955		195,367	
Net	30	Total net assets or fund balances (see instructions)	3,105,955		195,367	
	31	Total liabilities and net assets/fund balances (see instructions)	3,105,955	3,	195,367	
Pa	rt II	, ,				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree		
		, , , , ,		· · · · · · · · · · · · · · · · · · ·	1	3,105,955
2		Enter amount from Part I, line 27a		· · · ·	2	89,412
3		Other increases not included in line 2 (itemize)			3	0
4		Add lines 1, 2, and 3		· · · ·	4	3,195,367
5		Decreases not included in line 2 (itemize)			5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	art II, column (b), lı	ne 30 .	6	3,195,367

	0-PF (2014) Capital Gains a	and Los	ses for Tax on Inve	stment Incon	10		Page 3
GI C.	(a) List and describe	the kınd(	s) of property sold (e g , r common stock, 200 shs 1	(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr )	d (d) Date sold (mo , day, yr )	
1a	See Additional Data T	Table					
b							
c							
	) Gross sales price		(f) Depreciation allows (or allowable)	1	st or other basis expense of sale		ın or (loss) (f) mınus (g)
а	See Addıtıonal Data T	able	·	·	·		
b							
С							
d							
	mplata aply for accata s	howing a	aın ın column (h) and own	ad by the foundat	uon on 1 2 /2 1 /6 0	(D) G= /G	
		inowing g	(j) Adjusted basis		xcess of col (i)		ol (h) gaın mınus et less than -0-) <b>or</b>
(i)	FM V as of 12/31/69		as of 12/31/69		rcol (j), if any		from col (h))
а	See Additional Data T	able					
b							
С .							
d							
e							
2	Capital gain net incon	•		If (loss), enter -	er in Part I, line 7 0 - in Part I, line 7	2	128,588
3	Net short-term capita	ıl gaın or	(loss) as defined in sections (see instructions)	If (loss), enter - ons 1222(5) and	0 - ın Part I , lıne 7	3	128,588
3	Net short-term capita If gain, also enter in P in Part I, line 8	ol gain or Part I, lind	(loss) as defined in section	If (loss), enter - ons 1222(5) and outlines) if (loss)	0 - In Part I , line 7	3	128,588
3 Part	Net short-term capita If gain, also enter in P in Part I, line 8 .  Qualification U	al gain or Part I, lind • • •	(loss) as defined in sections as defined in sections as defined in sections as the sections as the sections as the section is a section as the section as th	If (loss), enter- ons 1222(5) and a uctions) If (loss) · · · ·	0- in Part I, line 7 (6) enter -0- n Net Investme	3 ent Income	128,588
3 Part	Net short-term capita If gain, also enter in P in Part I, line 8 .  Qualification U	ol gain or Part I, lind  Inder S	(loss) as defined in sections as defined in sections as defined in sections as defined in section (lose) in the section section subject to the sections subject to the sections as defined	If (loss), enter- ons 1222(5) and a uctions) If (loss) · · · ·	0- in Part I, line 7 (6) enter -0- n Net Investme	3 ent Income	128,588
3  Part  or opt  sections  as the	Net short-term capital If gain, also enter in P in Part I, line 8  V Qualification U ional use by domestic p ion 4940(d)(2) applies, lo	Il gain or Part I, line Inder S rivate for eave this e section	(loss) as defined in sections as defined in sections as defined in sections as defined in section (lose) in the section section subject to the sections subject to the sections as defined	If (loss), enter - ons 1222(5) and a uctions) If (loss) · · ·  Reduced Tax ( ection 4940(a) ta	0 - In Part I, line 7	3 ent Income	128,588
3  Part  or opt section as the "Yes,"	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U ional use by domestic p in 4940(d)(2) applies, lo foundation liable for the	Il gain or Part I, linder Solution of the section of qualify	(loss) as defined in section 28, column (c) (see instruction 4940(e) for 1 and ations subject to the section 4942 tax on the distribut	If (loss), enter- ons 1222(5) and a uctions) If (loss)  •••••  Reduced Tax (e) ection 4940(a) ta table amount of an	0 - In Part I, line 7 (6) enter -0 - on Net Investment ax on net investment by year in the base p	ant Income Income)	
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3 Part or opt sections the "Yes," 1 Ent	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U  Ional use by domestic p Ion 4940(d)(2) applies, lo foundation liable for the the foundation does not ter the appropriate amount (a) period years Calendar or tax year beginning in) 2013 2012 2011 2010 2009	Inder S Inder S Invate for eave this e section of qualify unt in eac	(loss) as defined in section 8, column (c) (see instricted as a column 4940(e) for Indations subject to the section 4940(e) Defined a column for each year, section 4940(e) Defined qualifying distributions  219,305 204,175 196,561 186,905	If (loss), enter- ons 1222(5) and ouctions) If (loss)  Reduced Tax (election 4940(a) to the constructions because the constructions because of nonconstructions of the constructions because the constructions of the constructions because the constructions of the constructions are constructed as the construction of the	o- in Part I, line 7  (6) enter -0- on Net Investment  ax on net investment  by year in the base part efore making any en  (c) haritable-use assets  3,898,069  3,612,979  3,501,660  3,382,392  3,115,653	ant Income tincome) tries (a	Yes No  Yes No  O 056260  O 056512  O 056134  O 055258  O 054813
3 Part Vor opt section as the "Yes,' 1 Ent Base year (co	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U  ional use by domestic p ion 4940(d)(2) applies, lo foundation liable for the 'the foundation does no ter the appropriate amou  (a) period years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column A verage distribution r	Inder S Inder S Inder S Invate for eave this e section of qualify unt in eac Adjust	(loss) as defined in section 8, column (c) (see instriction 4940(e) for I indations subject to the subject to t	If (loss), enter- ons 1222(5) and a uctions) If (loss)  Reduced Tax (exterior 4940(a) to a cable amount of are onet complete the exterior should be a complete the complete	o- in Part I, line 7  (6) enter -0-  on Net Investment  ax on net investment  by year in the base part efore making any en  (c) haritable-use assets  3,898,069  3,612,979  3,501,660  3,382,392  3,115,653  ine 2 by 5, or by	ant Income tincome tincome) tries (col (b) divide	Yes No  Yes No  0 056260 0 056512 0 056134 0 055258 0 054813 0 27897
3 Part or opt sections the "Yes," 1 Ent Base year (c	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U  Ional use by domestic p on 4940(d)(2) applies, lo foundation liable for the 'the foundation does no ter the appropriate amount  (a) penod years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column A verage distribution in the number of years the	Inder S  Inder S  Inder S  Invate for  eave this e section of qualify  unt in each  Adjust  n (d)  ratio for the foundate	(loss) as defined in section 8, column (c) (see instriction 4940(e) for 1 indations subject to the section 4940(e) for 1 indations subject to the section 4940(e) Defined qualifying distributions  (b) (c) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	If (loss), enter- ons 1222(5) and a uctions) If (loss)  Reduced Tax (exterior 4940(a) to ection 4940(a) to ection to not complete the eee instructions b  Net value of nonce evide the total on exterior 5 yes	o- in Part I, line 7  (6) enter -0-  on Net Investment  ax on net investment  by year in the base part  efore making any en  c) haritable-use assets  3,898,069  3,612,979  3,501,660  3,382,392  3,115,653   ine 2 by 5, or by ears	ant Income  Income  Income  Distribut (col (b) divide	Yes V No  No non ratio ed by col (c))  0 056260  0 056512  0 056134  0 055258  0 054813  0 27897
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3 Part or opt section as the "Yes," 1 Ent Base year (c	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U  Ional use by domestic p on 4940(d)(2) applies, lo foundation liable for the 'the foundation does no ter the appropriate amount  (a) period years Calendar or tax year beginning in)  2013  2012  2011  2010  2009  Total of line 1, column A verage distribution in the number of years the Enter the net value of Multiply line 4 by line Enter 1% of net inves	Inder S  Inder S  Inder S  Invate for eave this e section of qualify unt in each Adjust  In (d).  In (d). In (	(loss) as defined in section 8, column (c) (see instruction 4940(e) for 1 indations subject to the section 4940(e) for 1 indations subject to the section 4940(e) Defined qualifying distributions  (b) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	If (loss), enter- ons 1222(5) and a uctions) If (loss)  Reduced Tax (e) ection 4940(a) to able amount of an one complete the ee instructions b  Net value of nonce  vide the total on e if less than 5 ye from Part X, line controls  7b)	o- in Part I, line 7  (6) enter -0-  on Net Investment  ax on net investment  by year in the base part  efore making any en  c) haritable-use assets  3,898,069  3,612,979  3,501,660  3,382,392  3,115,653   ine 2 by 5, or by ears  255  255	ant Income tincome tincome tincome  tries  (col (b) divide  2  3  4  5  6	Yes V No  No  O 056260  O 056512  O 056134  O 055258  O 054813  O 278977  O 055799  4,152,309  231,678
3 Part or opt section as the "Yes," 1 Ent Base year (compared to the section as t	Net short-term capita  If gain, also enter in P in Part I, line 8  V Qualification U  Ional use by domestic p Ion 4940(d)(2) applies, lo Ional use by domestic p Ion 4940(d)(2) applies, lo Ional use by domestic p Ional use	Inder S Inder S Invate for eave this e section of qualify unt in each Adjust  In (d).	(loss) as defined in section 8, column (c) (see instricted as a column for last instricted as a column for last instricted as a column for each year, so (b) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	If (loss), enter- ons 1222(5) and ouctions) If (loss), ection 4940(a) to evalue amount of an onot complete the ection 4940(a) to evalue amount of an onot complete the ection 4940(a) to evalue amount of an onot complete the complete the evalue amount of an onot complete the evalue amo	o- in Part I, line 7  (6)  enter -0-  on Net Investment  ax on net investment  by year in the base part  efore making any en  (c)  haritable-use assets  3,898,069  3,612,979  3,501,660  3,382,392  3,115,653   ine 2 by 5, or by ears  255  255	ant Income Incom	Yes V No  Yes No  O 056260  O 056512  O 056134  O 055258

Form	990-PF (2014)		Р	age <b>4</b>
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the installand	structio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A"			
	on line 1			
	Date of ruling or determination letter(attach copy of letter if necessary-see			
h	instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check			1 700
b	, I <del> </del>			1,789
	here Frand enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
	enter -0-) <b>2</b>			0
3	Add lines 1 and 2		:	1,789
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			0
_	check o')			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			1,789
6	C redits/P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 513			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			513
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🗀 If Form 2220 is attached.			25
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		:	1,301
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt participate or intervene in any political campaign?	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file <b>Form 1120-POL</b> for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
•	(1) On the foundation $\Rightarrow$ \$0 (2) On foundation managers $\Rightarrow$ \$0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers $\blacktriangleright$ \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	,		No
2		- 2		No
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
Ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	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	Į		
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions	J	] .	
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
	and Part XV.	. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<u>▶</u> <u>IL</u>			
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	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	. 10		No

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►NONE			
14	The books are in care of ▶PHYLLIS WHALLENE Telephone no ▶(309)	762-	3595	
	Located at ▶ 1903 GLENWOOD DRIVE MOLINE IL ZIP+4 ▶ 61265			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		1	▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			,
16	- · · · · · · · · · · · · · · · · · · ·		v	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	16	Yes	No No
	a bank, securities, or other financial account in a foreign country?  See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		140
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Do	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Pal	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1-2	During the year did the foundation (either directly or indirectly)		163	110
14	(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)			
	a disqualified person?			
	(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? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes 🔽 No			
b	If 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		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2014?	<b>1</b> c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
_	any time during the year?			
Ь	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, <b>(2)</b> the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	21		
	If the foundation had excess business holdings in 2014.).	3b		<u>.</u> .
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	۸.		<b>.</b>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B Sta	tements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inued	')	1 age O
5a	During the year	did the foundation	n pay	or incur any amoun	t to						
	(1) Carry on pro	paganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	:)) <sup>?</sup>	√ No		
	(2) Influence th	e outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry			
	on, directly	or indirectly, any	voter	registration drive?.				<b>┌</b> Yes <b>┌</b>	√ No		
	(3) Provide a gi	ant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provide a gi	ant to an organiza	ition	other than a charita	ble,	etc , organization de	scrib	ped			
	ın section 4	945(d)(4)(A)? (s	ee ins	structions)				<b>┌</b> Yes <b>┌</b>	√ No		
	(5) Provide for a	any purpose other	than	religious, charitabl	e, sc	ientific, literary, or					
	educational	purposes, or for t	he pr	evention of cruelty t	to ch	ıldren or anımals?.		Yes 🔽	√ No		
b	If any answer is	"Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transad	tion	s fail to qualify unde	r the	exceptions described in			
	Regulations sec	tion 53 4945 or i	nac	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	
	O rganizations r	elyıng on a curren	t not	ice regarding disast	eras	sistance check her	e		- [		
С				4), does the foundat							
								T Yes [	- <sub>No</sub>		
				y Regulations section							
6a				ceive any funds, dire			prer	niums on			
									√ No		
ь	•							benefit contract?		6b	No
	If "Yes" to 6b, fi			,	•	., .			ŀ		-
7a	•		vas tl	ne foundation a party	v to a	nrohibited tax shel	lter ti	ransaction? <b>TYes F</b>	- No		
								the transaction?		7b	
								n Managers, Highly			ovees
Pa		Contractors			-,	ustees, i suitae			· u.u	р.	, , , ,
1	List all officers,	directors, trustee	s, foı	ındation managers a	nd t	heir compensation (	see i	nstructions).			
				Title, and average		c) Compensation		(d) Contributions to	(e) E:	xpense	account,
	(a) Name and	daddress	1	hours per week evoted to position	(1	(f not paid, enter -0-)		mployee benefit plans I deferred compensation			wances
See	Addıtıonal Data T	ahle		.voccu to position		• ,	una	deterred compensation			
	Additional Data 1	чыс	1								
			┨								
					_				-		
			-								
_2_	Compensation of	five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	ONE."	
<b>/</b>	<b>.</b> N			(b) Title, and aver	age			(d) Contributions to	(-) [		
(a		ss of each emplo nan \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred	1	•	account, wances
	<b>F</b>	····· + · · / · · · /		devoted to positi	on			compensation			
NON	1E										
				1							
									-		
								<u> </u>			
Tota	ı <b>l</b> number of other	employees paid o	vers	\$50,000					1		0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)						
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".					
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation				
NONE						
<b>Total</b> number of others receiving over \$50,000 for professional servi	ces	0				
Part IX-A Summary of Direct Charitable Activities						
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of					
organizations and other beneficiaries served, conferences convened, research paper		Expenses				
1						
2						
3						
4						
Part IX-B Summary of Program-Related Investmen		·				
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount				
1						
2						
All other program-related investments See instructions						
3						
Total. Add lines 1 through 3		0				

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. 1 purposes 1a 3.977.651 1h 237.887 1c 1d 4.215.538 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 4.215.538 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 63.233 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 4.152.305 5 207.615 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 207.615 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 1.789 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 2c 1.789 3 3 205.826 4 Λ 4 5 5 205.826 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 205.826 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . 1a 258.938 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 258,938 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,789 257,149 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

Р	art XIII Undistributed Income (see instr	uctions)			<b>y</b>
		(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7				205,826
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			0	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
	From 2013				
	<b>Total</b> of lines 3a through e	24,789			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 258,938				
	Applied to 2013, but not more than line 2a		_	0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election	0			
	required—see instructions)				205.926
	Applied to 2014 distributable amount	F2 112			205,826
	Remaining amount distributed out of corpus	53,112			
5	Excess distributions carryover applied to 2014	0			
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	77,901			
b	Prior years' undistributed income Subtract		0		
	line 4b from line 2b		U		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions		0		
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see			0	
£	Undistributed income for 2014 Subtract				
•	lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				(
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	0			
۰	be required - see instructions)				
0	applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2015.				
_	Subtract lines 7 and 8 from line 6a	77,901			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
C	Excess from 2012				
d	Excess from 2013 24,789				
е	Excess from 2014 53,112				

P	art XIV Private Operating Four	<b>ndations</b> (see ii	nstructions and P	art VII-A, questic	on 9)	
la	If the foundation has received a ruling or d		•			
	foundation, and the ruling is effective for 2	•	_		_	
	Check box to indicate whether the organization		perating foundation		on   4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	•	(e) Total
	investment return from Part X for each	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	
	year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt					
_	activities					
е	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon "Assets" alternative test—enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	<pre>investment income (interest,   dividends, rents, payments</pre>					
	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					
2a	rt XV Supplementary Information	n (Complete t	his part only if	the organizati	on had \$5.000	or more in
	assets at any time during					
	Information Regarding Foundation Manage		20/ 5/1			
а	List any managers of the foundation who habefore the close of any tax year (but only i					idation
	before the close of any tax year (but only )	end, nave doneria	racea more enan 45,	(555 555 55	55, (d)(L),	
	PHYLLIS W HALLENE					
b	List any managers of the foundation who over				lly large portion of t	he
	ownership of a partnership or other entity)	of which the found	ation has a 10% or	greater interest		
	Information Regarding Contribution, Grant	, Gift, Loan, Schol	arship, etc., Prograi	ms:		
	Check here ► If the foundation only mal	kes contributions t	o preselected char	ıtable organızatıons	and does not acce	pt
	unsolicited requests for funds If the found	atıon makes gıfts,	grants, etc (see in	structions) to indiv	ıduals or organızatı	ons under
	other conditions, complete items 2a, b, c,	and d				
			6.1			
а	The name, address, and telephone number	or e-mail address	s or tne person to wh	nom applications sh	iouid be addressed	
	PHYLLIS W HALLENE 1903 GLENWOOD DRIVE					
	MOLINE,IL 61265					
	(309) 762-3595					
b	The form in which applications should be s	ubmitted and infoi	rmation and materia	ils they should inclu	ıde	
	NO PARTICULAR FORM REQUIRED					
c	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or oth	er
	factors					
	DISTRIBUTIONS FOR CHARITABLE PUI	RPOSES DESCRIE	BED IN INTERNAL	REVENUE CODE S	ECTION 501(C)(3	)

Name and address (home or business)  And domp the year  See Additional Data Table  Total  Data Total  Approved for future payment	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Total		or substantial contributor	recipient		
		or substantial contributor	recipient		
	Total			<b>b</b> 3a	257 750
		<u> </u>	<del></del>		237,730

Form 990-	· · · · · · · · · · · · · · · · · · ·					Page <b>12</b>
	I-A Analysis of Income-Produci			<u> </u>	F12 F12 F14	(-)
-	s amounts unless otherwise indicated	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(e) Related or exempt function income (See instructions)
b c d e						
g Fees 2 Membe 3 Interes invest	and contracts from government agencies ership dues and assessments					
<ul><li>5 Net rer</li><li>a Debt-</li><li>b Not d</li><li>6 Net rer</li><li>proper</li></ul>	nds and interest from securities			14	71,406	
8 Gain or invent 9 Net inc	7 Other investment income			18	128,588	
b c d	revenue <b>a</b>					
12 Subtota 13 Total. A (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify ca	alculations )			199,994 <b>13</b>	
Line No.	Explain below how each activity for which the accomplishment of the foundation's instructions )	h income is re	ported ın column (	e) of Part XVI-A c	ontributed importa	

Form 990-P	F (2014)										Pa	ge <b>13</b>
Part XVI	I Information R Noncharitable					actio	ns and I	Relationships	With			
section 5	organization directly or 1501(c) of the Code (oth	ndirectly (	engage	ın any of	the following wit						Yes	No
organiza												
	s from the reporting fou											
	h									1a(1)		No
	erassets									1a(2)		No
<b>b</b> Other tra					-					41.74		
	es of assets to a noncha											No
	chases of assets from a											No
	tal of facilities, equipme											No
	nbursement arrangeme									1b(4)		No No
	ns or loan guarantees. ormance of services or r									1b(5)		
										1b(6)		No
	of facilities, equipment, swer to any of the above											No
	ods, other assets, or se ansaction or sharing ari (b) Amount involved	angement	, show	ın column		the god	ods, other		es receive	ed		nts
-												
	undation directly or ind	•		-	•		-	=				
	d in section 501(c) of t	•	other th	nan sectio	n 501(c)(3)) or	ın sectı	on 527?.			.Г <sub>Ү</sub> е	es I	' No
<b>b</b> If Yes,	complete the following (a) Name of organization			l a	<b>o)</b> Type of organiza	tion	1	(c) Descrit	otion of relati	onship		
				<u> </u>	, ,,			( )		•		
							_					
				<u> </u>								
	der penalties of perjury, best of my knowledge a											
ınfo	ormation of which prepa					<i>D</i> 00.0.	астоп от р	opurer (ether the	canpay c	.,	, da 011	<b></b>
Sign	*****				2015-05-08		*****			IRS disc	uss this	7
Here						<b>— )</b>				preparer	shown	
	Signature of officer or t	rustee			Date	r	Title		below (see ins	tr )? 🔽 <b>ነ</b>	∕es ⊏ ľ	No
	T		1			Date		Check if self-	PTIN	, j.		
	Print/Type preparer's DAVID E BECK	name	Prepa	arer's Sıgr	nature	Date		employed •		004507	765	
Paid	Firm's name F		1					Firm's EIN ► 42	2-071432	5		—
Preparer Use	MCGLADREY LLP											
Only	Firm's address 🕨											
Cilly	201 N HARRISON ST		ITE 30	00				Phone no (563	)888-400	0 0		
	DAVENPORT, IA 52	3011999										

#### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
PUBLICLY TRADED SECURITIES			
SECURITIES LITIGATION - MBIA	Р		2014-02-07
SECURITIES LITIGATION - PHARMACIA	Р		2014-03-27
SECURITIES LITIGATION - HEALTHSOUTH	Р		2014-08-28
SECURITIES LITIGATION - PHARMACIA	Р		2014-10-21
SECURITIES LITIGATION - DELL	Р		2014-11-04
SECURITIES LITIGATION - DELL	Р		2014-11-07
CAPITAL GAINS DIVIDENDS	Р		

## Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
438,561		343,429	95,132
5			5
89			89
100			100
22			22
42			42
42			42
33,156			33,156

## Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	ng gain in column (h) and owned	by the foundation on 12/31/69	(I) Gains (Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	( <b>k)</b> Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) <b>or</b> Losses (from col (h))
			95,132
			5
			89
_			100
			22
			42
			42
			33,156

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expense account, other allowances
			and deferred compensation	
PHYLLIS W HALLENE	PRESIDENT/SECRETARY	0	0	0
1903 GLENWOOD DRIVE MOLINE,IL 61265	1 00			
JOHN A SLOVER JR	ASSISTANT	0	0	0
506 15TH STREET SUITE 600 MOLINE,IL 61265	SECRETARY 1 00			
ALAN M HALLENE JR	TREASURER	0	0	0
2802 32ND AVENUE DRIVE 13 MOLINE,IL 61265	1 00			
CAROL H KING	DIRECTOR	0	0	0
8517 COUNTRY CLUB DRIVE BETHESDA,MD 20817	1 00			
JAMES N HALLENE	DIRECTOR	0	0	0
414 EAST 6TH STREET HINSDALE,IL 60521	1 00			
JANET H O'HERN	DIRECTOR	0	0	0
523 SIDE CREEK LANE ST AUGUSTINE,FL 32084	1 00			

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
ALL GOD'S CHILDREN INTERNATIONAL 3308 NE PEERLESS PLACE PORTLAND,OR 97232	NONE	EXEMPT ORG	GENERAL FUND	3,000
BY THE HAND CLUB PO BOX 10043 CHICAGO,IL 60610	NONE	EXEMPT ORG	GENERAL FUND	1,000
C S LEWIS INSTITUTE 8001 BRADDOCK ROAD SUITE 301 SPRINGFIELD, VA 22151	NONE	EXEMPT ORG	GENERAL FUND	1,500
CHILD EVANGELISM FELLOWSHIP 702 SOUTH GRACE STREET LOMBARD,IL 60148	NONE	EXEMPT ORG	GENERAL FUND	3,000
CHRISTIAN FRIENDLINESS 2707 11TH STREET ROCK ISLAND,IL 61201	NONE	EXEMPT ORG	GENERAL FUND	5,000
FOURTH PRESBYTERIAN CHURCH 5500 RIVER ROAD BETHESDA,MD 20816	NONE	EXEMPT ORG	GENERAL FUND	3,000
HOLTON-ARMS SCHOOL 7303 RIVER ROAD BETHESDA,MD 20817	NONE	EXEMPT ORG	HOLTON FUND & GALA	3,000
HORSE HAVEN RANCH 7333 CR 208 ST AUGUSTINE,FL 32092	NONE	EXEMPT ORG	GENERAL FUND	500
LANDON SCHOOL 6101 WILSON LANE BETHESDA,MD 20817	NONE	EXEMPT ORG	ANNUAL FUND & AZALEA FESTIVAL & FINANCIAL AID PRO GRAM	3,500
LOVE FOR L'ALLEMAND 2132 3RD STREET MOLINE,IL 61265	NONE	EXEMPT ORG	GENERAL FUND	2,500
MAYO FOUNDATION 200 1ST STREET SW ROCHESTER,MN 55905	NONE	EXEMPT ORG	GENERAL FUND	25,000
NATIONAL GALLERY OF ART 2000B SOUTH CLUB DRIVE LANDOVER,MD 20785	NONE	EXEMPT ORG	GENERAL FUND	3,000
PHILHARMONIC CENTER FOR THE ARTS 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE	EXEMPT ORG	UNDER WRITE BASS PLAYER - KEVIN MAULDIN & COMMITEE 1,000	30,000
PROJECT HOPEFUL PO BOX 1464 WHEATON,IL 60187	NONE	EXEMPT ORG	GENERAL FUND	2,500
QUAD CITIES SYMPHONY ORCHESTRA 327 NORTH BRADY STREET DAVENPORT,IA 52801	NONE	EXEMPT ORG	GENERAL FUND	25,000
	•	-	•	

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RON BURTON TRAINING VILLAGE PO BOX 2 HUBBARDSTON,MA 01452	NONE	EXEMPT ORG	GENERAL FUND	6,000
UNITED WAY OF THE QUAD CITIES 3247 EAST 35TH STREET COURT DAVENPORT,IA 52806	NONE	EXEMPT ORG	GENERAL FUND	1,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	ENGINEERING AT ILLINOIS FUND	500
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	JOSHUA LEE GRAFTON MEMORIAL SCHOLARSHIP FUND	1,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	JW BAYNE AWARD FUND	500
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	LIBRARY ANNUAL FUND	1,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	ALEXANDER MONTGOMERY HALLENE SCHOLARSHIP	82,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	GENERAL FUND	4,200
WELLNESS HOUSE 131 NORTH COUNTY LINE ROAD HINSDALE,IL 60521	NONE	EXEMPT ORG	GENERAL FUND	10,000
WORLD VISION 5001 WEST HARRISON STREET CHICAGO,IL 60644	NONE	EXEMPT ORG	2014 NYC MARATHON	2,500
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE,FL 32256	NONE	EXEMPT ORG	GENERAL FUND	1,000
YOUNG LIFE CARIBBEAN REGION 913 FIRST COLONIAL ROAD SUITE 102 VIRGINIA BEACH,VA 23454	NONE	EXEMPT ORG	GENERAL FUND	1,000
YOUNG LIFE ST AUGUSTINE CAPERNAUM 65 VALENCIA STREET ST AUGUSTINE,FL 32084	NONE	EXEMPT ORG	GENERAL FUND	7,500
HAZEL VAN ARSDALE FOUNDATION 852 MIDDLE ROAD 100 BETTENDORF,IA 52722	NONE	EXEMPT ORG	GENERAL FUND	2,100
HIGH MOUNTAIN INSTITUTE 531 COUNTY ROAD 5A LEADVILLE,CO 80461	NONE	EXEMPT ORG	GENERAL FUND	2,500
Total				257,750

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
THE CHICAGO FELLOWSHIP PO BOX 7212 CHICAGO,IL 60680	NONE	EXEMPT ORG	GENERAL FUND	6,000
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	NONE	EXEMPT ORG	JOHN STEVENS MEMORIAL SCHOLOARSHIP FUND	6,250
MOLINE HIGH SCHOOL 3600 AVENUE OF THE CITIES MOLINE,IL 61265	NONE	EXEMPT ORG	GENERAL FUND	3,500
TRINITY HEALTH FOUNDATION 2121 1ST STREET A MOLINE,IL 61265	NONE	EXEMPT ORG	COLOSTOMY SUPPLIES FOR THE NEEDY	3,200
WELLS 4 WELLNESS 1804 28TH AVENUE MOLINE,IL 61265	NONE	EXEMPT ORG	GENERAL FUND	4,000
NEW KINGDOM TRAILRIDERS 15711 13TH STREET MILAN,IL 61264	NONE	EXEMPT ORG	GENERAL FUND	500
Total				257.750

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As Filed Data -

DLN: 93491131024015

OMB No 1545-0047

OIVID INC 1343-0047

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

**Employer identification number** 

	ENE FAMILI FOUNDAT	10	NINC	37-1335373			
Organ	nization type (check on	e)					
Filers	of:	Se	ction:				
Form 9	990 or 990-EZ	Г	501(c)( ) (enter number) organization				
		Г	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	١			
		Г	527 political organization				
Form 9	990-PF	ᅜ	501(c)(3) exempt private foundation				
		Г	4947(a)(1) nonexempt charitable trust treated as a private foundation				
		Г	501(c)(3) taxable private foundation				
ন	other property) from ar		Form 990, 990-EZ, or 990-PF that received, during the year, contributions to one contributor. Complete Parts I and II. See instructions for determining a co				
Specia	al Rules						
Γ	under sections 509(a)(received from any one	(1) co	bed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% suppand 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part ntributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that			
Γ	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, of for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
Γ	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
HALLENE FAMILY FOUNDATION INC

Employer identification number 37-1335373

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	•	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF ALAN HALLENE 1903 GLENWOOD DRIVE  MOLINE, IL61265	\$166,87 <u>5</u>	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
HALLENE FAMILY FOUNDATION INC

Employer identification number

37-1335373

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

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2014)			Page <b>4</b>
	organization		Employer identification number	
IALLENE	FAMILY FOUNDATION INC		37-1335373	
Part III	that total more than \$1,000 for the year	r from any one contributo enter the total of exclusively instructions ) ►	or. Complete columns (a) through (e) and the following lire religious, charitable, etc., contributions of \$1,000 or less	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	ift (d) Description of how gift is he	ld
		(e) Transfer o	of aift	
-	Transferee's name, address, a	· •	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	ift (d) Description of how gift is he	Id
	Transferee's name, address, a	(e) Transfer o	of gift Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	ift (d) Description of how gift is he	ld
	Transferee's name, address, a	(e) Transfer o	of gift Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	ift (d) Description of how gift is he	Id
_				•
	Transferee's name, address, a	(e) Transfer o	of gift Relationship of transferor to transferee	
				<u> </u>

## **TY 2014 Accounting Fees Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MCGLADREY LLP	2,525	1,894		631

## **TY 2014 Investments Corporate Stock Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BAXTER INTERNATIONAL	51,450	78,713
BBH INTERNATIONAL EQUITY FUND	201,920	233,987
BED BATH & BEYOND	58,996	77,998
BERKSHIRE HATHAWAY	67,877	172,673
CALIFORNIA RESOURCES	976	1,378
CELANESE	27,000	37,475
СНИВВ	51,717	113,817
COMCAST	65,827	143,575
DENTSPLY INTERNATIONAL	8,707	18,645
DIAGEO	33,326	57,045
EBAY	11,102	33,896
EOG RESOURCES	43,356	87,466
GOOGLE	86,461	105,280
HENRY SCHEIN	13,140	27,230
JOHNSON & JOHNSON	0	0
LIBERTY INTERACTIVE	24,955	55,192
LONGLEAF PARTNERS SMALL CAP FUND	115,200	146,137
MICROSOFT	47,258	92,900
NESTLE	38,975	102,130
NOVARTIS	52,537	97,293
OCCIDENTAL PETROLEUM	27,021	50,381
ORACLE	72,905	83,195
PEPSICO	0	0
PRAXAIR	43,116	51,824
PROGRESSIVE	37,737	66,126
QUALCOMM	62,829	78,047
SCHLUMBERGER	47,169	53,381
SOUTHWESTERN ENERGY	54,629	40,935
TARGET	35,147	55,035
U S BANCORP	76,782	149,459

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UNILEVER	33,486	33,184
WAL-MART STORES	16,609	32,205
WASTE MANAGEMENT	23,558	44,546
WELLS FARGO & CO	64,681	113,752
ZOETIS	60,641	85,544

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## **TY 2014 Investments - Other Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AIT GLOBAL EMERGING MARKETS OPPORTUNITY FUND I	AT COST	282,900	264,136
BBH LIMITED DURATION FUND	AT COST	997,335	1,001,988
DODGE & COX INCOME FUND	AT COST	83,000	81,930
PIMCO TOTAL RETURN FUND	AT COST	0	0
T ROWE PRICE INST HIGH YIELD	AT COST	0	0
T ROWE PRICE NEW ASIA FUND	AT COST	74,893	74,481
THE PARADIGM PROJECT L3C	AT COST	0	50,000

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## TY 2014 Legal Fees Schedule

Name: HALLENE FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CALIFF & HARPER PC	2,167	1,625		542

## **TY 2014 Other Expenses Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
IL ANNUAL FILING FEE	15	0		15
INVESTMENT EXPENSES	13	13		0
ADR FEES	47	47		0

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## **TY 2014 Other Professional Fees Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROWN BROTHERS HARRIMAN	15,608	15,608		0

## **TY 2014 Taxes Schedule**

Name: HALLENE FAMILY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX ON DIVIDENDS	1,872	1,872		0

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## **TY 2014 IRSESPayment**

Name: HALLENE FAMILY FOUNDATION INC

**EIN:** 37-1335373

**Routing Transit Number:** 026004802

**Bank Account Number:** 1035000899

Type of Account: Checking

**Payment Amount in Dollars and** 1,800

Cents:

**Requested Payment Date: 2015-05-15** 

Taxpayer's Daytime Phone (309) 762-3595

Number: