Form **990-PF**

EXTENDED TO DECEMBER 15, 2015 Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf

| Ī | or c | alen | idar year 2014 or tax year beginning MAY | 1, 2014 | , and ending | APR 30, 2015 | |
|----------------|--------------------|-----------|--|--|---|--|--|
| - | Nan | ne of | foundation | | | A Employer identification | number |
| | \mathbf{T} | ΗE | HALLINGBY FAMILY FOUND | ATION, INC. | | 06-1516271 | |
| • | Num | ber a | and street (or P.O. box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| | C | /0 | PAUL HALLINGBY-7 GRACI | E SQUARE | 10A | 212-628-49 | 23 |
| | City | or to | own, state or province, country, and ZIP or foreign p | ostal code | | C if exemption application is pe | ending, check here |
| _ | N | EW | YORK, NY 10028 | | | | . — |
| (| G C | heck | all that apply Initial return | D 1 Foreign organizations | , check here | | |
| | | | Final return | Amended return | | 2 Foreign organizations mee | eting the 85% test. |
| | | | Address change Address change Extype of organization X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year J Accounting | Name change | | 2 Foreign organizations mee check here and attach cor | mputation |
| ഇ | <u> </u> | heck า | type of organization X Section 501(c)(3) ex | | | E If private foundation stat | |
| 20 | 느 | J Se | ction 4947(a)(1) nonexempt charitable trust | Other taxable private foundating method X Cash | | under section 507(b)(1)i | |
| တ | | | 1 = - | her (specify) | Accrual | F If the foundation is in a 6 under section 507(b)(1): | 1 |
| € | (Ir | | Part II, col (c), line 16) 01 1 , 186 , 536 . (Part I, colu | mn (d) must be on cash | basis) | under section 307 (b)(1) | (b), check here |
| ر ر | | rt I | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for charitable purposes (cash basis only) |
| \Box | | 1 | Contributions, gifts, grants, etc., received | | | | |
| SCANNED | / | 2 | Check \(\bigcup \bigc | . , | | 40 | COMP DEPARTMENT 4 |
| Z | | 3 | cash investments | 40. | 40. | 40. | STATEMENT 1 |
| $\ddot{\circ}$ | | 4 | Dividends and interest from securities | | | | |
| (C) | | | Gross rents | | | 2.2 | 4 4 |
| | | | Net rental income or (loss) | 541,053. | 2 | | |
| | ne | | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,361,149. | 341,033. | , | | |
| | Revenue | 7 | assets on line 6a 1, 301, 145. Capital gain net income (from Part IV, line 2) | | 541,053 | | |
| | Re | 8 | Net short-term capital gain | | 3117033. | | , , , |
| | | 9 | Income modifications | - 3 / /- | | | |
| | | 10a | Gross sales less returns | ,= , = | | | |
| | | b | Less Cost of goods sold | | | 1, 2, 2, 5, 2, 2 | |
| | | C | Gross profit or (loss) | | 2 7, 7, 2, 7 | | |
| | | 11 | Other income | | | ļ | |
| | | 12 | Total Add lines 1 through 1 | 541,093. | 541,093 | | |
| | | 13 | Compensation of officers duectors interest the Compensation of officers duectors interest the Compensation of the Compensation | 0. | 0, | 0. | 0. |
| | | 14 | Other employee and wages | <u> </u> | | | |
| | S | 13 | Pelision plans, entroyeequenents | 2/4,165. | 0. | 0. | 0 |
| | use | | Legal fees STMT 3 | $\frac{3}{2}, \frac{4}{625}$ | 0. | | 0. |
| | Expense | | Other professional fees OEN | $\frac{2}{2}$, $\frac{4,165}{2,625}$. | 0. | | |
| | Б П | 17 | Interest | 1 | | | |
| | and Administrative | 18 | Taxes | | | | |
| | ıstr | 19 | Depreciation and depletion | | | | 2017 F 3 5 - 1 - |
| | Ē | 20 | Occupancy | | | | |
| | Ad | 21 | Travel, conferences, and meetings | | | | |
| | and | 22 | Printing and publications | | | | |
| | gu | 23 | Other expenses STMT 4 | 155. | 0. | . 0. | 0. |
| | ratı | 24 | Total operating and administrative | | | | |
| | Operating | | expenses Add lines 13 through 23 | 6,945. | 0. | | 0. |
| | J | | Contributions, gifts, grants paid | 169,550. | <u> </u> | | 169,550. |
| | | 26 | Total expenses and disbursements | 176 405 | _ | 0. | 169,550. |
| | | 07 | Add lines 24 and 25 | 176,495. | 0. | | 105,330. |
| | | | Subtract line 26 from line 12 | 364,598. | | | |
| | | | Net investment income (if negative, enter -0-) | 304,390. | 541,093 | | |
| | | | Adjusted net income (if negative, enter -0-) | | 341,000 | 40. | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | 12350 | | Aujustica net maonie (meganie, emer-o-) | 1 | | | 5 000 PE (0014) |

| For | m 99 | 00-PF (2014) THE HALLINGBY FAMILY FO | | 06 | -1516271 Page 2 |
|-----------------------------|-------|---|---------------------------------------|--|--|
| P | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | | of year |
| _ | L | COMMINI SHOULD BE NOT SHOUTH OF ASSUMING ONLY | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 1,842. | <u>1,186,536</u> | 1,186,536. |
| | 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 | | | |
| | 7 | Other notes and loans receivable | · · · · · · · · · · · · · · · · · · · | | |
| | | Less allowance for doubtful accounts | | | |
| Assets | 1 | Inventories for sale or use | | | |
| ASS | 9 | Prepaid expenses and deferred charges | | | |
| _ | ł | Investments - U S and state government obligations | | | |
| | | Investments - corporate stock | | | |
| | | Investments - corporate bonds | | * * | |
| | 11 | Investments - land, buildings, and equipment basis | | - | |
| | 10 | Less accumulated depreciation | | | |
| | | Investments - mortgage loans Investments - other | 820,096. | | |
| | 13 | 1 | 820,090. | | |
| | 14 | Land, buildings, and equipment basis Less accumulated depreciation | | • | |
| | 15 | Other assets (describe) | | | |
| | 1 | Total assets (to be completed by all filers - see the | | | |
| | 10 | Instructions Also, see page 1, item I) | 821 938 | 1,186,536 | 1,186,536. |
| | 17 | Accounts payable and accrued expenses | 021,930. | 1,100,550 | 1,100,550. |
| | 18 | Grants payable | | | |
| 10 | 19 | Deferred revenue | | | |
| Liabilities | 20 | | 19,582. | 19,582 | |
| ₫ | 21 | Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable | 15,502. | 17,302 | • |
| Ľ | 1 | Other liabilities (describe) | | | |
| | | Cities indomines (deserted | - | | |
| | 23 | Total liabilities (add lines 17 through 22) | 19,582. | 19,582 | |
| | | Foundations that follow SFAS 117, check here | 197302. | 13,302 | |
| | | and complete lines 24 through 26 and lines 30 and 31 | | | |
| es | 24 | Unrestricted | | | |
| and | 25 | Temporarily restricted | | ,, | |
| Bal | | Permanently restricted | | ······································ | 计设定等的 5.44 .24 |
| Net Assets or Fund Balances | | Foundations that do not follow SFAS 117, check here | | | |
| F | | and complete lines 27 through 31 | | | |
| ō | 27 | Capital stock, trust principal, or current funds | 1,025,625. | 1,025,625 | |
| šets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0 | |
| Ass | 29 | Retained earnings, accumulated income, endowment, or other funds | -223,269. | 141,329 | |
| let et | 1 | Total net assets or fund balances | 802,356. | 1,166,954 | |
| _ | | | | | |
| | 31 | Total liabilities and net assets/fund balances | 821,938. | 1,186,536 | a land to the second of |
| _ | | | | =7=007000 | *************************************** |
| P | art | Analysis of Changes in Net Assets or Fund Ba | аіапсеѕ | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | | t agree with end-of-year figure reported on prior year's return) | | 1 | 802,356. |
| | | amount from Part I, line 27a | | 2 | |
| | | increases not included in line 2 (itemize) | | 3 | |
| | | ines 1, 2, and 3 | | 4 | 4 4 4 4 4 4 |
| | | eases not included in line 2 (itemize) | | 5 | T |
| | | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | luma (b) line 30 | | 1 166 954. |

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Form 990-PF (2014) THE HALLINGBY FAMILY FOUNDATION, INC.

| | | | 1210 | | | age 4 |
|----|---|-------------|----------|----------|-----------|-------------|
| | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | 940 - | · see ii | istru | cuoi | 15) |
| 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 instructions) | | · - | ٠. | - - 4. | |
| þ | Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% | 1 | _ | | 5,4 | 11. |
| | 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) | - | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | <u> </u> | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | <u>:</u> | 5,4 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0. |
| 5 | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 5, 4 | 11. |
| 6 | Credits/Payments | - | | | | |
| a | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 537. | | | | - | ` |
| b | Exempt foreign organizations - tax withheld at source | | ' ' | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c 7,500. | | - | • • | | |
| d | Backup withholding erroneously withheld 6d | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | { | 3,0 | 37. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached | 8 | | | | |
| 9 | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | 2.6 | 26. |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax 2,626 • Refunded | 11 | | | | 0. |
| | rt VII-A Statements Regarding Activities | | <u> </u> | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | in. | | | Yes | No |
| | any political campaign? | | - | 1a | | X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition) | 17 | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe | | } | - | | |
| | distributed by the foundation in connection with the activities | u 0, | | - 1 | | î. |
| c | Did the foundation file Form 1120-POL for this year? | | | 1c | | х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | -10 | | |
| u | (1) On the foundation \blacktriangleright \$ 0. (2) On foundation managers \blacktriangleright \$ 0. | | | ` | | - , |
| | | | ŀ | | -, - (| |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | : | | , |
| 0 | managers > \$ | | | | | v |
| Z | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | ŀ | 2 | | <u>X</u> |
| | 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, o | r | j | £ - 1 | - | 7.5 |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N | I/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 | | | | , n | |
| | By language in the governing instrument, or | | | . 57 | · *: | 1 |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state | law | | = : | | |
| | remain in the governing instrument? | | | 6 | _X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | | | 7 | X | |
| | | | | z' , | 7 | 10.00 |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) NONE | | | , | . ' . | |
| | | | | · | | - 3 |
| 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) | | | , i | | 7 |
| | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | Х | L |
| 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 | ļ | | | , |
| | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 10 | | X |
| | | | Forn | 990 | PF (| |

| | 990-PF(2014) THE HALLINGBY FAMILY FOUNDATION, INC. 06-1510 | <u> 5271</u> | | Page 5 |
|-----|--|------------------|---------------------------------------|-----------|
| Pa | rt 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 5.12(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? | | | |
| | 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 | Х | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ PAUL HALLINGBY Telephone no ▶ (212) | 628- | -49 | 23 |
| | Located at ▶ 7 GRACIE SQUARE, NEW YORK, NY | | | |
| 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 | х | |
| | 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 | | | |
| | foreign country BERMUDA | - | | |
| Pa | irt 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) | 7. | - | ` |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | 1 | . (| - |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | - | ا تا تا | |
| | a disqualified person? | - , | - 1 | , , |
| | (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 X No | | - | , |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | - 7 | | |
| | for the benefit or use of a disqualified person)? | , , | · _ · | - () |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" | £ . | 4, 4 | - : |
| | If the foundation agreed to make a grant to or to employ the official for a period after | | | : |
| | termination of government service, if terminating within 90 days) Yes X No | 200 | , , , , , , , , , , , , , , , , , , , | • |
| | | | | _ |
| U | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | 2 | 37 |
| _ | before the first day of the tax year beginning in 2014? | 1c | A (- | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | J., | | |
| | defined in section 4942(j)(3) or 4942(j)(5)) | 7.54 | ئى بەر ^ى ت رىقار | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | · |
| | before 2014? Yes X No. | 2.00 | ž., '\'. | -1.25 st. |
| | If "Yes," list the years > | | <u>.</u> 3 | ٠., ١ |
| þ | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | 1,- | 1.71 |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | 14.47 | - L. | ٠, |
| | 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 | 3.74 | امور امارا | |
| | > | 1 4 3 | i en e | 7.3 |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | " | | |
| | during the year? | | `v : 0 ≥5. 8 | - |
| 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 | 1.30 | -14 - 1 | |
| | 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 | 12. | 7-7- | ` = |
| | 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, | | 7 | |
| | Form 4720, to determine if the foundation had excess business holdings in 2014) N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | ,- ' | 1 |
| | had not been removed from egnardy before the first day of the tax year beginning in 20142 | 45 | 1. | v |

Form **990-PF** (2014)

| Part VII-B Statements Regarding Activities for Which | | Required (contin | <u>U6-15162</u> ued) | / 1 | Page 6 |
|--|---|--------------------------------|--|--------------|---------------------|
| 5a During the year did the foundation pay or incur any amount to | | (00///// | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (sect | tion 4945(e))? | Ye | s X No | | |
| (2) Influence the outcome of any specific public election (see section 4955) | ` '' | | | . 1 | |
| any voter registration drive? | | Y6 | s X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purpos | ses? | Ye | s X No | 1 | 1 |
| (4) Provide a grant to an organization other than a charitable, etc., organiza | tion described in section | | | | - |
| 4945(d)(4)(A)? (see instructions) | | Ye | es X No | • | 1 |
| (5) Provide for any purpose other than religious, charitable, scientific, litera | ry, or educational purposes, or | for | | - | _ |
| the prevention of cruelty to children or animals? | | Ye | es X No | - 2 | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify t | under the exceptions described | I in Regulations | | 7. | |
| section 53 4945 or in a current notice regarding disaster assistance (see ins | tructions)? | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check | k here | | ▶ □ / | | - |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption | n from the tax because it maint | ained | | | |
| expenditure responsibility for the grant? |] | N/A 🗌 Yo | es No | | |
| If "Yes," attach the statement required by Regulations section 53 49 | 945-5(d) | | | | - |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, | to pay premiums on | | | } | |
| a personal benefit contract? | | Ye | es X No | | |
| ${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on | a personal benefit contract? | | | 6b | X |
| If "Yes" to 6b, file Form 8870 | | | - | 1 | - |
| 7a At any time during the tax year, was the foundation a party to a prohibited ta | x shelter transaction? | Y | es 🗶 No 📙 | 7- | |
| b If "Yes," did the foundation receive any proceeds or have any net income attr | ibutable to the transaction? | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trus | stees, Foundation M | anagers, Highl | y | | |
| Paid Employees, and Contractors | | | | | |
| 1 List all officers, directors, trustees, foundation managers and the | <u> </u> | (-) Companyation | (d) Contributions to | T | |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | accou | xpense nt, other |
| PAUL L. HALLINGBY | to position | `enter-0-) | compensation | allov | wances |
| 7 GRACIE SQUARE-SUITE 10A | PRESIDENT | | | | |
| NEW YORK, NY 10028 | 15 00 | 0. | 0. | | 0 |
| JULIA H. HALLINGBY | 15.00 VICE PRESIDE | | . 0. | | 0. |
| 7 GRACIE SQUARE-SUITE 10A | - VICE PRESIDE | N ₁ | | | |
| NEW YORK, NY 10028 | 7 00 | | _ | | ^ |
| | 7.00 | 0. | 0. | | 0. |
| THOMAS P. SPELLANE 116 RIDGE ACRES ROAD | SECY/TREASUR | EK | | | |
| | 7 00 | | _ | | 0 |
| DARIEN, CT 06820 | 7.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employees (other than those i | ncluded on line 1). If none | enter "NONE " | | l | |
| | (b) Title, and average | , | (d) Contributions to employee benefit plans | (e) F | xpense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | l and deterred | accou | nt, other |
| NONE | devoted to position | | compensation | аноч | vances |
| TAOTATE | - | | | | |
| | | | | | |
| | - | | | | |
| | | | | | · |
| | | | | | |
| | - | | | | |
| | - | | | İ | |
| | | | | | |
| | - | | | | |
| Total number of other employees paid over \$50,000 | | | | L | 0 |
| 1 Ocal manipur or other employees paid over \$50,000 | | | | | |

| Porm 990-PF (2014) THE HALLINGBY FAMILY FOUNDATION, Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued) | INC. 06-1 tion Managers, Highly | L516271 Page 7 |
|---|--|------------------|
| 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) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | <u> </u> |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers process. N/A | lical information such as the duced, etc | Expenses |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on | lines 1 and 2 | Amount |
| 1 N/A | | |
| 2 | | |
| All other program-related investments. See instructions | | |
| Total Add Long the control of | | |

Form **990-PF** (2014)

4940(e) reduction of tax in those years

THE HALLINGBY FAMILY FOUNDATION, INC. 06-1516271 Page 9 Part XIII Undistributed Income (see instructions) (a) (d) (b) (c) Corpus Years prior to 2013 2013 2014 1 Distributable amount for 2014 from Part XI, line 7 49,755. 2 Undistributed income, if any, as of the end of 2014 0 a Enter amount for 2013 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2014 84,780. a From 2009 43,751. **b** From 2010 62,055. c From 2011 77,179. d From 2012 101.734 e From 2013 369,499 f Total of lines 3a through e 4 Qualifying distributions for 2014 from 169,550 Part XII, line 4 ►\$ 0 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 49,755. d Applied to 2014 distributable amount 119,795 e Remaining amount distributed out of corpus 0. 0 5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below 489,294 8 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 d Subtract line 6c from line 6b Taxable amount - see instructions 0 e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instr 0

0

84,780

404,514

- f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015.
- 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)
- 8 Excess distributions carryover from 2009 not applied on line 5 or line 7
- 9 Excess distributions carryover to 2015 Subtract lines 7 and 8 from line 6a

| 10 | Analysis | of | line | 9 |
|----|----------|----|------|---|
|----|----------|----|------|---|

| 7 Tallary 515 Of Illie 5 | |
|--------------------------|--------|
| a Excess from 2010 | 43,751 |
| b Excess from 2011 | 62,055 |
| c Excess from 2012 | 77,179 |
| | |

101,734

119,795

d Excess from 2013 e Excess from 2014 423581 11-24-14 0.

| Part XIV Private Operating For | | LY FOUNDAT: structions and Part VI | | N/A | 16271 Page |
|--|------------------------|---------------------------------------|-------------------------------|----------------------------|---------------------------------------|
| 1 a If the foundation has received a ruling or d | | | | | · · · · · · · · · · · · · · · · · · · |
| foundation, and the ruling is effective for 2 | | _ | • | | |
| b Check box to indicate whether the foundat | | | in section | 4942(j)(3) or 4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities | | | | | |
| Subtract line 2d from line 2c | | | | | <u> </u> |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets" alternative test - enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter | | | | | |
| (1) Total support other than gross investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | 1 | <u> </u> |
| Part XV Supplementary Inform | nation (Comple | te this part only | if the foundation | had \$5,000 or m | ore in assets |
| at any time during the | e year-see insti | ructions.) | | • | |
| 1 Information Regarding Foundation a List any managers of the foundation who had | nave contributed more | | tributions received by the | foundation before the clo | ose of any tax |
| year (but only if they have contributed mor | e than \$5,000) (See s | ection 507(d)(2)) | | | |
| PAUL L. HALLINGBY b List any managers of the foundation who c | own 10% or more of th | e stock of a corporation | (or an equally large ports | on of the ownership of a r | partnership or |
| other entity) of which the foundation has a | | | to an equally large point | | our moromp or |
| NONE | | | | | |
| 2 Information Regarding Contribution Check here ► X if the foundation only | makes contributions | to preselected charitable | organizations and does r | | |
| the foundation makes gifts, grants, etc. (se a The name, address, and telephone number | | | | | u u |
| a The hame, address, and telephone number | or e-man address or i | не регоон то многи аррг | ications should be addres | sseu | |
| b The form in which applications should be s | submitted and informa | tion and materials they s | hould include | | |
| c Any submission deadlines | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| d Any restrictions or limitations on awards, s | uch as by geographic | al areas, charitable fields | , kinds of institutions, or o | other factors | |

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ANIMAL HAVEN N/A 501(C)(3) ANIMAL WELFARE 251 CENTRE STREET NEW YORK, NY 10013 100. ANIMAL MEDICAL CENTER N/A VETERINARY CARE FOR 501(C)(3) 510 EAST 6ND STREET ANIMALS NEW YORK, NY 10065 500. ASPCA N/A 501(C)(3) ANIMAL WELFARE PO BOX 96929 WASHINGTON, DC 20077 500. N/A AUDUBON OF NYC 501(C)(3) PROTECTS WILD BIRDS 71 WEST 23RD STREET #1523 AND HABITATS IN THE NEW YORK, NY 10010 FIVE BOROUGHS 2,250. BEST FRIENDS ANIMAL SOCIETY N/A 501(C)(3) ANIMAL WELFARE 5001 ANGEL CANYON ROAD KANAB __UT 84741 1,000 SEE CONTINUATION SHEET(S) **▶** 3a Total 169 550. b Approved for future payment NONE Total <u>3b</u>

| Part XVI-A | Analysis of Income | e-Producin | g Activities |
|------------|--------------------|------------|--------------|
| | | | |

| Enter gross amounts unless otherwise indicated | Unrelated | business income | | by section 512, 513, or 514 | (e) |
|---|-----------------------|-----------------------|-----------------------|-----------------------------|---------------------------------------|
| • | (a) Business | (b) | (C) Exclu- sion | (d) | Related or exempt |
| 1 Program service revenue | code | Amount | code | Amount | function income |
| a | - | | | | |
| b | | | | | |
| cd | | | | | |
| de | | | | | |
| f | _ | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | 40. |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate | | | | ٠ , - | - |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | 541,053. |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | ···· | | | |
| 11 Other revenue | | | | | |
| a | - | | | | |
| b | 1 1 | | | | |
| C | 1 | | | | |
| d | | | | | |
| e | | | . - | | F 41 002 |
| 2 Subtotal Add columns (b), (d), and (e) | | |). | 0. | 541,093. 541,093. |
| 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) | | | | 13 | 341,093. |
| | | | | | |
| Part XVI-B Relationship of Activities | to the Accon | nplishment of | Exempt F | urposes | |
| Line No Explain below how each activity for which inc | come is reported in a | column (e) of Part XV | I-A contribute | d importantly to the accor | nplishment of |
| the foundation's exempt purposes (other that | n by providing fund | s for such purposes) | | | |
| 1 N/A | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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Form 990-PF (2014) THE HALLINGBY FAMILY FOUNDATION, INC. 06-1516271 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash Х 1a(1) (2) Other assets Х 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization X 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) X X (4) Reimbursement arrangements 16(4) X (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalt ed this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this and belief, this tru (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? Sign Here PRESIDENT X Yes No Signature of officer or trustee Title Print/Type preparer's name Date Check PTIN

Form **990-PF** (2014)

P00962062

Firm's EIN $\triangleright 46 - 5082756$

Phone no 212-695-5771

self- employed

Paid

Preparer

Use Only

DAVID WEISS

Firm's name ► DAVID WEISS CPA, PLLC

Firm's address ► 183 MADISON AVE SUITE 803

NEW YORK, NY 10016-4403

| 3 Grants and Contributions Paid During th | e Year (Continuation) | | | |
|--|--|----------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | - Contribution | ··· |
| | | | | |
| BOWERY MISSION | N/A | 501(C)(3) | SERVES HOMELESS AND | |
| AURRAY HILL STATION PO BOX2000 | | | HUNGRY NEW YORKERS. | |
| NEW YORK, NY 10156 | | | | 250 |
| | | | | |
| BRILAND ANIMAL RESCUE | N/A | 501(C)(3) | RESCUES ANIMALS IN | |
| PO BOX EL 27139 | | | DISTRESS | |
| HARBOUR ISLAND, BAHAMAS, BAHAMAS | | | | 3,500 |
| and a same of | | 524 (5) (2) | | |
| BROOKS SCHOOL | N/A | 501(C)(3) | EDUCATIONAL-ANNUAL | |
| 1160 GREAT POND ROAD N. ANDOVER MA 01845 | | | GIVING & CAPITAL CAMPAIGN | 100,000 |
| N. ANDOVER, MA 01045 | | | CAMPAIGN | 100,000 |
| CARE | N/A | 501(C)(3) | UITMANITMATANI | |
| PO BOX 1870 | N/A | 301(C)(3) | HUMANITAIAN | |
| MERRIFIELD, VA 22116 | | | | 1,000 |
| | | | | |
| CARL SCHURZ PARK ASSOCIATION | N/A | 501(C)(3) | PROGRAMS FOR THE | |
| 1562 FIRST AVENUE | | | PRESERVATION AND | |
| NEW YORK, NY 10028 | | | ENJOYMENT OF CITY | 2 500 |
| | | | PARKS | 2,500 |
| CENTRAL PARK CONSERVANCY | N/A | 501(C)(3) | CONSERVATION | |
| CHURCH STREET STATION PO BOX 4004 | N/A | 501(0)(3) | CONSERVATION | |
| NEW YORK NY 10277 | | | | 500 |
| | | | | |
| CHILDRENS AIDE SOCIETY | N/A | 501(C)(3) | PROVIDES HELP FOR | |
| PO BOX 4009 | | | CHILDREN IN POVERTY TO | |
| NEW YORK, NY 10277 | | | SUCEED AND THRIVE. | 500 |
| | | | | |
| CITY HARVEST | N/A | 501(C)(3) | PROVIDES FOOD TO THE | |
| 6 EAST 32ND ST 5TH FL | | | HOMELESS. | |
| NEW YORK, NY 10016 | | | | 500 |
| STAN ADDING ON LINDS | | 502 (2) (2) | | |
| CITY MEALS ON WHEELS | N/A | 501(C)(3) | DELIVERS MEALS TO HOME | |
| CHURCH STREET STATION PO BOX 5560 NEW YORK, NY 10087 | | | BOUND ELDERLY NEW YORKERS | 250 |
| 100 100 1 | | | LONKEND | 230 |
| COLUMBIA BUSINESS SCHOOL | N/A | 501(0)(3) | EDICATIONAL | |
| 33 W.60TH STREET | N/A | 501(C)(3) | EDUCATIONAL | |
| NEW YORK, NY 10023 | | | | 15,000 |
| Total from continuation sheets | | | | 165 200 |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, · Recipient Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient HUMANITARIAN 501(C)(3) COMMUNITY MENTAL HEALTH AFFILIATES N/A 270 JOHN DOWNEY DR 500. NEW BRITAIN CT 06051 ADDS VALUE TO PEOPLES CONNECTICUT PUBLIC BROADCASTING N/A 501(C)(3) LIVES THROUGH PROGRAMS NETWORK AND SERVICES THAT PO BOX 416096 BOSTON, MA 02241 INFORM, EDUCATE, ENTERTAIN, AND 350. DOE FUND N/A 501(C)(3) CONSERVATION 232 E.84TH STREET 1,000. NEW YORK, NY 10028 RESUCUES ANIMALS IN FARM SANCTUARY N/A 501(C)(3) PO BOX 58 NEED 250. BUFFALO, NY 14205 501(C)(3) CONSERVATION FRESH AIR FUND N/A 633 THIRD AVENUE 1,000. NEW YORK, NY 10017 N/A 501(C)(3) PROVIDES ASSISTANCE GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS RD FOR BLIND AND VISUALLY IMPARIED PEOPLE WITH YORKTOWN HEIGHTS, NY 10598 TRAINED GUIDE DOGS 250. PROVIDES HOUSING FOR HABITAT FOR HUNMANITY N/A 501(C)(3) 111 JOHN STREET 23RD FLOOR NEEDY FAMILIES IN NEW 500. NEW YORK, NY 10038 YORK METROPLOITAN AREA N/A 501(C)(3) PROVIDES ASSISTANCE TO HALE HOUSE 152 WEST 122ND STREET NEEDY FAMILIES BUILDING BETTER NEW YORK, NY 10027 FUTURES FOR CHILDREN 500. AND FAMILIES. N/A 501(C)(3) HUMANITARIAN HUMANE SOCIETY 306 EAST 59TH STREET 500. NEW YORK, NY 10022 501(C)(3) CHARITABLE LITTLE GUILD OF ST FRANCIS N/A 285 SHARON GOSHEN TURNPIKE 2,500. WEST CORNWALL, CT 06796 Total from continuation sheets

| Part XV Supplementary Information | | | | |
|--|--|----------------------|--|--------|
| 3 Grants and Contributions Paid During the | | | | |
| . Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| | | | | |
| MARCH OF DIMES | N/A | 501(C)(3) | RESEARCH | |
| 1275 MAMARONECK AVENUE | | | | 1 000 |
| WHITE PLAINS, NY 10605 | | | | 1,000. |
| METROPOLITAN MUSEUM | N/A | 501(C)(3) | CULTURAL | |
| 1000 FIFTH AVENUE | | 501(0)(3) | COBTOIGIS | |
| NEW YORK, NY 10028 | | | | 500. |
| | | | | |
| MUSEUM OF MODERN ART | N/A | 501(C)(3) | CULTURAL | |
| 11 WEST 53RD STREET | | | | |
| NEW YORK, NY 10019 | | <u> </u> | | 500. |
| | | | | |
| NEUE GALERIE NEW YORK | N/A | 501(C)(3) | CULTURAL | |
| 1048 5TH AVENUE | | | | |
| NEW YORK, NY 10028 | | | | 500. |
| | | | | |
| NEW LIFE FELLOWSHIP 8210 QUEENS BOULEVARD | N/A | 501(C)(3) | HUMANITARIAN | |
| QUEENS NY 11373 | | | | 1,000. |
| | | | | |
| NORTHSHORE ANIMAL LEAGUE | N/A | 501(C)(3) | ANIMAL WELFARE | |
| POST OFFICE BOX 1631 | | | | |
| PORT WASHINGTON, NY 11050 | | | | 500. |
| | | | | |
| POLICE ATHLETIC LEAGUE | N/A | 501(C)(3) | RECREATIONAL PROGRAMS | |
| 34 EAST 12TH STREET | | | | |
| NEW YORK, NY 10003 | | | | 1,000. |
| | | | | |
| PRIME TIME HOUSE 836 MAIN STREET | N/A | 501(C)(3) | ASSISTING ADULTS WITH SERIOUS MENTAL ILLNESS | |
| TORRINGTON, CT 06790 | | | SERIOUS MENTAL ILLNESS | 250. |
| | | | | |
| RONALD MCDONALD HOUSE NEW YORK | N/A | 501(C)(3) | PROVIDE STABILITY AND | |
| PO BOX 2489 | [" | | RESOURCES FOR FAMILIES | |
| NEW YORK, NY 10131 | | | WITH SICK CHILDREN | 500. |
| | | | | |
| SALISBURY VISITING NURSE ASSOCIATION | N/A | 501(C)(3) | PROVIDES HEALTH CARE | |
| 30A SALMON KILL ROAD | | | | |
| SALISBURY, CT 06068 | | L | | 250. |
| Total from continuation sheets | | | <u></u> | |

| Part XV Supplementary Information | | | | |
|--|---|--------------------------------------|---------------------------------------|-------------|
| 3 Grants and Contributions Paid During the Y | | | | |
| 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 | Amount |
| SAVE THE CHILDREN | N/A | 501(C)(3) | PROMOTES CHILDREN'S | |
| PO BOX 9160 | | | RIGHTS, PROVIDES | |
| CHELSEA, MA 02150 | | | RELIEF AND HELPS | |
| | | | SUPPORT CHILDREN IN | |
| | ļ | | DEVELOPING COUNTRIES | 1,50 |
| SHARON DAY CARE | N/A | 501(C)(3) | FOSTERS THE PHYSICAL, | |
| PO BOX 1031 | | | SOCIAL INTELLECTUAL, | |
| SHARON, CT 06069 | | | AND EMOTIONAL | |
| | | | DEVELOPMENT OF YOUNG | |
| | | | CHILDREN THROUGH THE | 10 |
| SHARON GREEN PRESERVATION SOCIETY | N/A | 501(C)(3) | CONSERVATION | |
| 18 MAIN STREET | | | | |
| SHARON, CT 06069 | | | | 100 |
| | | | | |
| SHARON HISTORICAL SOCIETY | N/A | 501(C)(3) | CULTURAL | |
| .8 MAIN STREET | | | | 1.0 |
| SHARON, CT 06069 | | | | 10 |
| SHARON LAND TRUST | N/A | 501(C)(3) | CONSERVATION | |
| P.O.BOX 1027 | | | | |
| SHARON, CT 06069 | | | | 2,50 |
| | | | | |
| SHELTER OUR SISTERS | N/A | 501(C)(3) | ASSIST WOMEN AND | |
| 105 STATE STREET | | | CHILDREN WHO ARE ABUSE | 5.0 |
| HACKENSACK, NJ 07601 | NT / 7 | 501 (0) (2) | VICTIMS | 50 |
| T JUDE CHILDREN'S RESEARCH HOSPITAL OI ST JUDE PLACE | N/A | 501(C)(3) | RESEARCH AND TREATMENT | |
| EMPHIS, TN 38105 | | | FACILITY FOR CATOSTROPHIC DISEASES | |
| | | | IN CHILDREN PRIMARILY | |
| | | | PEDIATRIC CANCERS. | 1,00 |
| | | | | |
| SUSAN B. ANTHONY PROJECT | N/A | 501(C)(3) | AID TO DOMESTIC | |
| 79 WATER STREET | | | VIOLENCE VICTIMS | |
| ORRINGTON, CT 06790 | | | | 50 |
| NAD NOMONATURA TERRESA | | E01 (5) (2) | | |
| CHE HOTCHKISS LIBRARY | N/A | 501(C)(3) | EDUCATION | |
| 0 UPPER MAIN STREET HARON, CT 06069 | | | | 25 |
| manon, or occop | | | | 25 |
| RIARTS CENTER | N/A | 501(C)(3) | CULTURAL | |
| 7 MAIN STREET | | | | |
| HARON, CT 06069 | | | < | 2,50 |

THE HALLINGBY FAMILY FOUNDATION, INC. 06-1516271

Part XV | Supplementary Information

| Part XV Supplementary Information | | | | |
|--|---|---------------------|------------------------------------|--------|
| 3 Grants and Contributions Paid During the | | , | | |
| · Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | A 1 |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| | | | | |
| UNICEF | N/A | 501(C)(3) | HUMANITARIAN | |
| PO BOX 27780 | | | | |
| NEWARK, NJ 07101 | | | | 1,000 |
| | | | | |
| UNITED WAY OF NORTHWEST CT | N/A | 501(C)(3) | HUMANITARIAN | |
| 16 BIRD STREET-SUITE 1 | | | | |
| TORRINGTON, CT 06790 | | | | 1,250 |
| | | | | |
| UNIVERSITY OF PA | N/A | 501(C)(3) | EDUCATION | |
| 3451 WALNUT STREET | | | | |
| PHILADELPHIA, PA 19104 | | | | 5,000 |
| | | | | |
| USO | N/A | 501(C)(3) | PROVIDE ENTERTAINMENT | |
| P.O.BOX 96322 | | | AND RECREATION TO THE | |
| WASHINGTON, DC 20090 | | | ARMED FORCES. | 500 |
| VETERANS OF FOREIGN WARS OF UNITED | N/A | 501(C)(3) | PROVIDES BENEIFITS FOR | |
| STATES | | | VETERANS | |
| PROCESSING CENTER PO BOX8942 | | | | |
| TOPEKA, KS 66608 | | | | 500 |
| | | | | |
| WHDD | N/A | 501(C)(3) | SUPPORT FOR PUBLIC | |
| 67 MAIN STREET | | | RADIO | |
| SHARON, CT 06069 | | | | 250 |
| WILDLIFE CONSERVATION SOCIETY | N/A | 501(C)(3) | MANAGES NATIONAL AND | |
| PO BOX 421713 | | | INTERNATIONAL | |
| PALM COAST, FL 32142 | | | CONSERVATION PROJECTS RESEARCH AND | |
| | | | EDUCATIONAL PROGRAMS | 250 |
| | | | EDUCATIONAL PROGRAMS | 230 |
| WNET | N/A | 501(C)(3) | SUPPORT FOR PUBLIC | |
| 825 EIGHTH AVENUE | 1/5 | 551(5/(5/ | RADIO | |
| NEW YORK NY 10019 | | | Milita | 2,000 |
| | | | | |
| WOMENS SUPPORT SERVICES | N/A | 501(C)(3) | HUMANITARIAN | |
| 158 GAY STREET | | | | |
| SHARON, CT 06069 | | | | 1,000 |
| WORLD WILDLIFE FUND | N/A | 501(C)(3) | WORKING ON ISSUES | |
| PO BOX 96555 | | | REGARDING THE | |
| WASHINGTON, DC 20077 | | | CONSERVATION, RESEARCH | |
| | | | AND RESTORATION OF THE | |
| | | | ENVIRONMENT. | 250 |

06-1516271 THE HALLINGBY FAMILY FOUNDATION, INC. Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient WOUNDED WARRIOR PROJECT N/A 501(C)(3) AID TO WOUNDED 370 SEVENTH AVENUE VETERANS NEW YORK, NY 10001 2,000. 20/20/20 N/A 501(C)(3) HELPING THE BLIND P.O. BOX 96669 WASHINGTON DC 20090 100. N/A AMERICAN HUMANE ASSOCIATION HELPING NEEDY ANIMALS. 501(C)(3) 1400 16TH STREET NW, SUITE 360 WASHINGTON, DC 20036 500. ANGEL ACRES HORSE HAVEN RESCUE N/A 501(C)(3) DEDECATED TO SAVING P.O. BOX 5054 HORSES BOUND FOR HAGERSTOWN, MD 21741-5054 SLAUGHTER FOR HUMAN CONSUMPTION 100. CHURCH OF GOD N/A 501(C)(3) HELPING THE NEEDY PO BOX 1009 ALLEN, TX 75013-0017 1,000. EXCEPTIONAL OUTREACH ORGANIZATION N/A 501(C)(3) PROVIDES SUPPORT FOR INC. INDIVIDUALS WITH 300 N. DEAN RD STE 5#127 SPECIAL NEEDS AUBURN AL 36830 1,000. FOOD BANK FOR NEW YORK CITY N/A 501(C)(3) PROVIDES FOOD FOR THE PO BOX 1125 HOMELESS NEW YORK, NY 10277-2207 250. GALAPAGOS CONSERVANCY N/A 501(C)(3) PRESERVE PROTECT AND 11150 FAIRFAX BOULEVARD RESTORE THE GALOPAGOS FAIRFAX, VA 22030 CONSERVANCY FOR THE FUTURE 100. LITTLE SHELTER ANIMAL RESCUE AND N/A 501(C)(3) HELPING NEEDY ANIMALS ADOPTION CENTER 33 WARNER ROAD HUNTINGTON, NY 11743 100.

501(C)(3)

HELPING SICK CHILDREN

FULFILL THEIR DREAMS

500.

N/A

MAKE A WISH

PO BOX 97104

WASHINGTON, DC 20090

Total from continuation sheets

THE HALLINGBY FAMILY FOUNDATION, INC. 06-1516271

Part XV Supplementary Information

| Show any relationship to any foundation manager of substantial contribution status of recipient substantial contribution status of recipient substantial contribution status of recipient substantial contribution substantia | 3 Grants and Contributions Paid During the | | | | · |
|--|--|----------------------------|-------------|----------------------------------|-------------|
| MORRIS ANIMAL FOUNDATION 10200 E GIRARD AVE STE B430 DENVER, CO 80231 25 PAMS FOR FURPLE HEARTS PO BOX 9288 PUEBLO, CO 81008 PHYSICIANS COMMITTE FOR RESPONSIBLE 4EDICINE PO BOX 96736 WASHINGTON, DC 20077 PHE SEEING EYE PO BOX 1036 SIERRA CLUB PO BOX 1036 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM SO1(C)(3) FROVIDES SEEING WILDLIFE PO BOX 421041 PALM COAST, FL 32142 TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 10 SO1(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | Recipient Name and address (home or business) | any foundation manager | status of | Purpose of grant or contribution | Amount |
| 25 25 25 25 25 25 25 25 | | or substantial contributor | recipient | | |
| 25 25 25 25 25 25 25 25 | ORRIS ANIMAL FOUNDATION | N/A | 501(C)(3) | HEIDS ANIMAIS IN NEED | |
| DENVER, CO 80231 N/A S01(C)(3) AIDE FOR VETERANS 10 DENVER SEENS DENVE | | [,,,, | 501(0/(3/ | TIEBLE ANTHALIS IN NEED | |
| PAMS FOR PURPLE HEARTS PO BOX 9288 PUEBLO, CO 81008 PHYSICIANS COMMITTE FOR RESPONSIBLE MEDICINE PO BOX 96736 NASHINGTON, DC 20077 PROVIDES SEEING EYE PO BOX 1056 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 PALM COAST, FL 32142 SO1(C)(3) PROVIDES SEEING EYE DOGS FOR THE NEEDY. SO1(C)(3) PROTECTING WILDLIFE TO BOX 421041 PALM COAST, FL 32142 SO1(C)(3) PROTECTING WILDLIFE TO BOX 421041 SON MARNESS FOR SAPE DRIVING AMONG TEENS SON MARNESS FOR SAPE DRIVING AMONG TEENS NLIW21 SO1(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | | 25. |
| PUEBLO, CO 81008 100 PHYSICIANS COMMITTE FOR RESPONSIBLE MEDICINE POED BOX 96736 100 PHYSICIANS COMMITTE FOR RESPONSIBLE MEDICINE POED BOX 96736 100 PHE SEEING EYE 100 PHE SEEING EYE 100 PHE SEEING EYE 100 PHE SIERRA CLUB 100 PHE SURVIVE THE DRIVE TEAM 100 PHE SURVIVE THE DRIVE | <u> </u> | | | | |
| PO BOX 9288 PUEBLO, CO 81008 PHYSICIANS COMMITTE FOR RESPONSIBLE AEDICINE PO BOX 96736 PASHINGTON, DC 20077 PROVIDES SEEING EYE DOSS FOR THE NEEDY. PO BOX 1056 PORRISTOWN, NJ 07962 PROVIDES SEEING EYE DOSS FOR THE NEEDY. 25. PROVIDES SEEING EYE DOSS FOR THE NEEDY. 26. PROVIDES SEEING EYE DOSS FOR THE NEEDY. 26. PROVIDES SEEING EYE DOSS FOR THE NEEDY. 26. PROVIDES SEEING EYE D | PAWS FOR PURPLE HEARTS | N/A | 501(C)(3) | AIDE FOR VETERANS | |
| PHYSICIANS COMMITTE FOR RESPONSIBLE PHYSICIANS COMMITTE FOR RESPONSIBLE SO1(C)(3) HUMANITARIAN PHYSICIANS COMMITTE FOR RESPONSIBLE SO1(C)(3) PROVIDES SEEING EYE DOGS FOR THE NEEDY. 250 SIERRA CLUB SO1(C)(3) PROTECTING WILDLIFE PALM COAST, FL 32142 TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS LAKEVILLE, CT 06039 ALIW21 SO1(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | PO BOX 9288 | | | | |
| MEDICINE PO BOX 96736 WASHINGTON, DC 20077 THE SEEING EYE PO BOX 1056 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 1055 WHITE HOLLOW ROAD AMERICAN SAFE DAKEVILLE, CT 06039 WILW21 SIERRA CLUB SO1(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | PUEBLO, CO 81008 | | | | 10 |
| REDICINE PO BOX 96736 WASHINGTON, DC 20077 THE SEEING EYE PO BOX 1056 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM SOI(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 AMARNESS FOR SAFE DRIVING AMONG TEENS 101 AMARON TEENS AMARULLE, CT 06039 AMARON TEENS 102 AMARON TEENS 103 AMARON TEENS 104 AMARON TEENS 105 AMARON TEENS 106 AMARON TEENS 107 AMARON TEENS 107 AMARON TEENS 108 AMARON TEENS 109 AMARON TEENS 101 AMARON TEENS 101 AMARON TEENS 105 AMARON TEENS 105 AMARON TEENS 106 AMARON TEENS 107 AMARON TEENS 107 AMARON TEENS 108 AMARON TEENS 109 AMARON TEENS 101 AMARON TEENS 105 AMARON TEENS 106 AMARON TEENS 107 AMARON TEENS 107 AMARON TEENS 108 AMARON TEENS 109 AMARON TEENS 1 | PHYSICIANS COMMITTE FOR RESPONSIBLE | | 501(C)(3) | HIMANITARTAN | |
| PO BOX 96736 WASHINGTON, DC 20077 PHE SEEING EYE PO BOX 1056 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PO BOX 421041 PALM COAST, FL 32142 PHE SURVIVE THE DRIVE TEAM 1010 SIERRA CLUB SOURVIVE THE DRIVE TEAM 1025 WHITE HOLLOW ROAD SALEVILLE, CT 06039 WASHINGTON, DC 20077 501(C)(3) PROVIDES SEEING EYE DOGS FOR THE NEEDY. 251 501(C)(3) PROTECTING WILDLIFE AWARNESS FOR SAFE DRIVING AMONG TEENS 101 SULIW21 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | 301(0)(3) | HOMANITAKIAN | |
| THE SEEING EYE PO BOX 1056 PO BOX 1056 PO BOX 20077 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 FHE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 SULIW21 SULIW21 SULIW21 SUSSECTION SEEING EYE DOGS FOR THE NEEDY. 501(C)(3) PROTECTING WILDLIFE DOGS FOR THE NEEDY. 501(C)(3) PROTECTING WILDLIFE DOGS FOR THE NEEDY. 501(C)(3) PROTECTING WILDLIFE DOGS FOR THE NEEDY. 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | | |
| DOGS FOR THE NEEDY. 250 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 105 TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 106 MULIW21 S01(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | | 100 |
| DOGS FOR THE NEEDY. 250 MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 100 TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 WLIW21 825 EIGHTH AVENUE DOGS FOR THE NEEDY. 501(C)(3) PROTECTING WILDLIFE 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | | |
| MORRISTOWN, NJ 07962 SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE S01(C)(3) PROTECTING WILDLIFE 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 S01(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | THE SEEING EYE | | 501(C)(3) | PROVIDES SEEING EYE | |
| SIERRA CLUB PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE 501(C)(3) PROTECTING WILDLIFE 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | PO BOX 1056 | | | DOGS FOR THE NEEDY. | |
| PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE 100 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | MORRISTOWN, NJ 07962 | | | | 250 |
| PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE 100 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | | |
| PO BOX 421041 PALM COAST, FL 32142 THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE 100 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 100 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | SIERRA CLUB | | 501(C)(3) | PROTECTING WILDLIFE | |
| THE SURVIVE THE DRIVE TEAM 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE 501(C)(3) TO PROMOTEPUBLIC AWARNESS FOR SAFE DRIVING AMONG TEENS 10(501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | PO BOX 421041 | | | | |
| AWARNESS FOR SAFE LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE AWARNESS FOR SAFE DRIVING AMONG TEENS 100 SUPPORT FOR PUBLIC BROAD CASTING | PALM COAST, FL 32142 | | | | 100 |
| AWARNESS FOR SAFE LAKEVILLE, CT 06039 WLIW21 825 EIGHTH AVENUE AWARNESS FOR SAFE DRIVING AMONG TEENS 100 SUPPORT FOR PUBLIC BROAD CASTING | | | | | |
| UNIVING AMONG TEENS 100 WLIW21 825 EIGHTH AVENUE DRIVING AMONG TEENS 100 SUPPORT FOR PUBLIC BROAD CASTING | THE SURVIVE THE DRIVE TEAM | | 501(C)(3) | TO PROMOTEPUBLIC | |
| WLIW21 501(C)(3) SUPPORT FOR PUBLIC BROAD CASTING | | | | AWARNESS FOR SAFE | |
| 825 EIGHTH AVENUE BROAD CASTING | LAKEVILLE, CT 06039 | | | DRIVING AMONG TEENS | 100 |
| 825 EIGHTH AVENUE BROAD CASTING | | | | | |
| | | | 501(C)(3) | | |
| | | | | BROAD CASTING | 250 |
| | 10.10. | | | | 230 |
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| Total from continuation sheets | | | | | |

| THE HALLINGBY FAMILY FOUNDATION, INC. 06-1516271 |
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| Part XV Supplementary Information |
| 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution |
| |
| NAME OF RECIPIENT - CONNECTICUT PUBLIC BROADCASTING NETWORK |
| |
| ADDS VALUE TO PEOPLES LIVES THROUGH PROGRAMS AND SERVICES THAT INFORM, |
| |
| EDUCATE, ENTERTAIN, AND INSPIRE. |
| |
| |
| NAME OF RECIPIENT - SHARON DAY CARE |
| |
| FOSTERS THE PHYSICAL, SOCIAL INTELLECTUAL, AND EMOTIONAL DEVELOPMENT OF |
| VOLING CUTI DEEN MUDOLICU MUE DEOUTCION OF A LITCU OUALTMY AND CARE |
| YOUNG CHILDREN THROUGH THE PROVISION OF A HIGH QUALITY AND SAFE |
| ENVIRONMENT |
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423655 05-01-14

| FORM 990-PF . INTEREST ON SAVI | NGS AND TEM | PORARY CASH | INVESTMENTS | STATEMENT | 1 | |
|--------------------------------|--------------------------------|---------------------------------|----------------------------------|---------------------------------|-----------|--|
| SOURCE | (A) REVENUE NE PER BOOKS | | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME | | |
| INTEREST | | 40. | 40. | 40 | 40. | |
| TOTAL TO PART I, LINE 3 | 40. | | 40. | 40. | | |
| FORM 990-PF | LEGAL | FEES | | STATEMENT | 2 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | (C) - ADJUSTEI E NET INCOM | (D) CHARITABI ME PURPOSES | | |
| LEGAL FEES | 4,165. | | 0. | 0. | 0. | |
| TO FM 990-PF, PG 1, LN 16A = | 4,165. | | 0. | 0. | 0. | |
| FORM 990-PF | ACCOUNTI | NG FEES | | STATEMENT | 3 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | (C) - ADJUSTEI E NET INCOM | (D) CHARITABI ME PURPOSES | | |
| ACCOUNTING FEES | 2,625. | | 0. | 0. | 0. | |
| TO FORM 990-PF, PG 1, LN 16B | 2,625. | | 0. | 0. (| 0. | |
| FORM 990-PF | OTHER EXPENSES | | | STATEMENT | | |
| DESCRIPTION | | | (C) - ADJUSTEI E NET INCOM | | | |
| BANK CHARGES | 155. | | 0. | 0. | 0. | |
| TO FORM 990-PF, PG 1, LN 23 | 155. | | 0. | 0. | 0. | |
| | | | | | = | |