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For calendar year 2014, or tax year beginning 07-01-2014 , and ending 06-30-2015

Name of foundation THE BOGLIASCO FOUNDATION INC		A Employer identification number 13-3632296	
% THE BOGLIASCO FOUNDATION		B Telephone number (see instructions) (212) 486-0874	
Number and street (or P O box number if mail is not delivered to street address) 1 EAST 53RD STREET 8TH FLOOR		C If exemption application is pending, check here <input type="checkbox"/>	
Room/suite		D 1. Foreign organizations, check here <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10022		2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 1,958,194		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,072,866			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities.	64,160	64,160	64,160	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	20,269			
	b Gross sales price for all assets on line 6a <u>2,899,421</u>				
	7 Capital gain net income (from Part IV, line 2) . . .		20,269		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	9,450		9,450	
	12 Total. Add lines 1 through 11	1,166,745	84,429	73,610	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	84,646			84,646
	14 Other employee salaries and wages	638,441			693,583
	15 Pension plans, employee benefits	82,494			160,091
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	20,924	1,046	1,046	30,598
	c Other professional fees (attach schedule)	26,121	20,810	20,810	5,311
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion	12,259			
	20 Occupancy	30,827			30,827
	21 Travel, conferences, and meetings	8,053			8,079
	22 Printing and publications				
	23 Other expenses (attach schedule)	208,030			224,702
	24 Total operating and administrative expenses. Add lines 13 through 23	1,111,795	21,856	21,856	1,237,837
	25 Contributions, gifts, grants paid	5,000			5,000
	26 Total expenses and disbursements. Add lines 24 and 25	1,116,795	21,856	21,856	1,242,837
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	49,950			
	b Net investment income (if negative, enter -0-)		62,573		
	c Adjusted net income (if negative, enter -0-)			51,754	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	41,380	29,808	29,808
	2	Savings and temporary cash investments		106,090	106,090
	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 ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges		3,477	3,477
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,928,446	1,746,680	1,746,680
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ 487,279 Less accumulated depreciation (attach schedule) ▶ _____ 416,140	80,076	71,139	71,139
15	Other assets (describe ▶ _____)	6,500	1,000	1,000	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	2,056,402	1,958,194	1,958,194	
Liabilities	17	Accounts payable and accrued expenses		66,702	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)		544,929	
	23	Total liabilities (add lines 17 through 22)		611,631	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	2,056,402	1,346,563	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	2,056,402	1,346,563	
	31	Total liabilities and net assets/fund balances (see instructions) . . .	2,056,402	1,958,194	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 2,056,402
2	Enter amount from Part I, line 27a	2 49,950
3	Other increases not included in line 2 (itemize) ▶ _____	3 102,731
4	Add lines 1, 2, and 3	4 2,209,083
5	Decreases not included in line 2 (itemize) ▶ _____	5 862,520
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 1,346,563

Part IV

Capital Gains and Losses for Tax on Investment Income

(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	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECURITIES				
b				
c				
d				
e				
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 2,899,421			2,879,152	20,269
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				20,269
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	20,269
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }			3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	1,406,757	2,560,628	0 54938
2012	1,327,646	3,379,213	0 392886
2011	1,337,212	1,408,348	0 94949
2010	1,420,122	1,344,668	1 056113
2009	1,450,440	1,225,116	1 183921
2 Total of line 1, column (d).			2 4 13179
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 826358
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.			4 1,892,534
5 Multiply line 4 by line 3.			5 1,563,911
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 626
7 Add lines 5 and 6.			7 1,564,537
8 Enter qualifying distributions from Part XII, line 4.			8 1,242,837

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		11,251	
c		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	
3		Add lines 1 and 2.		31,251	
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		51,251	
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014		6a	5,390
b		Exempt foreign organizations—tax withheld at source		6b	
c		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.		75,390	
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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.		104,139	
11		Enter the amount of line 10 to be Credited to 2015 estimated tax <input type="checkbox"/> 4,139 Refunded <input type="checkbox"/>		11	

Part VII-AStatements Regarding Activities

1a		During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 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 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c		Did the foundation file Form 1120-POL 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 <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$				
e		Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$				
2		Has the foundation engaged in any activities that have not previously been reported to the IRS?		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
b		If "Yes," has it filed a tax return on Form 990-T 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				
		• By language in the governing instrument, or				
		• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	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) <input type="checkbox"/>				
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	Yes	
10		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.		10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		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 ▶ WWW BFNY ORG				
14	The books are in care of ▶ THE BOGLIASCO FOUNDATION Telephone no ▶ (212) 486-0874			
	Located at ▶ 1 EAST 53RD STREET 10TH FLOOR NEW YORK NY ZIP +4 ▶ 10022			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶		Yes	

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>			
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?	1c		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))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>)	3b		
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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

No

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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 and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ARIELLE MOREAU	PROGRAM DIRECTOR	60,000	10,495	0
C/O BOGLIASCO FOUNDATION NEW YORK, NY 10022	40 0			
IVANA FOLLE	STUDY CTR DIRECTOR	65,803	34,119	0
C/O BOGLIASCO FOUNDATION NEW YORK, NY 10022	40 0			

Total number of other employees paid over \$50,000.

0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 PROVIDES RESIDENTIAL FELLOWSHIPS AT ITS STUDY CENTER IN ITALY, WHERE GIFTED ARTISTS & SCHOLARS OF ALL CULTURES COME TOGETHER TO CONNECT, CREATE & DISSEMINATE NEW WORK	801,834
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,888,924
b	Average of monthly cash balances.	1b	32,430
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,921,354
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,921,354
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	28,820
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,892,534
6	Minimum investment return. Enter 5% of line 5.	6	94,627

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	
b	Income tax for 2014 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	1,242,837
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,242,837
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,242,837

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

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.				
b Total for prior years 2012 , 2011 , 2010				
3 Excess distributions carryover, if any, to 2014				
a From 2009.				
b From 2010.				
c From 2011.				
d From 2012.				
e From 2013.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ _____				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2014 distributable amount.				
e Remaining amount distributed out of corpus				
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract 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 assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☒ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years				(e) Total
(a) 2014	(b) 2013	(c) 2012	(d) 2011		
42,304	92,001	6,867		141,172	
35,958	78,201	5,837		119,996	
1,242,837	1,406,757	1,327,646	1,337,212	5,314,452	
5,000	11,260	11,500	16,000	43,760	
1,237,837	1,395,497	1,316,146	1,321,212	5,270,692	

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

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

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2014)

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

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 and deferred compensation	(e) Expense account, other allowances
LAURA HARRISON	PRESIDENT 40 0	84,646	10,015	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
R ANDREW BOOSE	SECRETARY 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
MICHAEL HECHT	TREASURER 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
JORGE AMADOR	CO-CHAIR 2 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
PAGE ASHLEY	CO-CHAIR 2 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
CRISTINA BIAGGI	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
GIANNI BIAGGI DE BLASYS	TRUSTEE 2 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
CHESTER BISCARDI	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
JOHN HARBISON	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
JAMES HARRISON	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
MARINA BIAGGI HARRISON	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
ELIZABETH KAN BRAEKMAN	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
BARBARA LUISI	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
ANNE-MARIE MARTIN	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
LATA MCGINN	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
MARCO MONEFIORI	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				
MARK MORRIS	TRUSTEE 1 0	0	0	0
1 EAST 53RD STREET 8TH FLOOR NEW YORK,NY 10022				

TY 2014 Accounting Fees Schedule**Name:** THE BOGLIASCO FOUNDATION INC**EIN:** 13-3632296

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONDON O'MEARA MCGINTY &				
DONNELLY, LLP				
- AUDIT & TAX SERVICES	14,000	700	700	12,600
NANCY LUPTON				
- BOOKKEEPER SERVICES	3,400	170	170	3,060
HECHT AND COMPANY				
- TAX SERVICES	1,973	99	99	1,775
RIFKIN & LUBCHER, LLP				
- AUDIT SERVICES	1,197	60	60	1,077
OTHER PROFESSIONAL FEES	354	18	18	318

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2014 Depreciation Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

TY 2014 Investments Corporate
Stock Schedule

Name: THE BOGLIASCO FOUNDATION INC
EIN: 13-3632296

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESCO EQUALLY	105,678	105,678
ACCENTURE PLC IRELAND	18,001	18,001
ALTRIA GROUP INC COM	7,807	7,807
AVERY DENNISON CORP COM	3,230	3,230
GENUINE PARTS CO	6,625	6,625
HARRIS CORP DEL	3,846	3,846
JOHNSON & JOHNSON COM	19,395	19,395
MICROSOFT CORP COM	5,121	5,121
SYSCO CORP COM	7,509	7,509
TARGET CORP COM	12,734	12,734
ABBVIE INC COM	7,861	7,861
DR PEPPER SNAPPLE GROUP	5,978	5,978
HERSHEY CO COM	6,573	6,573
QUALCOMM INC	14,468	14,468
BEMIS CO INC COM	5,356	5,356
CISCO SYSTEMS INC	7,799	7,799
GENERAL ELECTRIC CO COM	20,618	20,618
JP MORGAN CHASE & CO	5,489	5,489
LILLY ELI & CO COM	17,199	17,199
SONOCO PRODS CO COM	5,700	5,700
TRAVELERS COS INC COM	5,896	5,896
ALLIANZ	13,229	13,229
AXA PARIS SHS	12,656	12,656
BASF SE SPONS ADR	6,499	6,499
ERICSSON L M TEL CO ADR	9,135	9,135
L'OREAL COM SHS	8,022	8,022
SANOFI SPONS ADR	14,611	14,611
SIEMENS A G SPONSORED	12,986	12,986
TOTAL S A SPONSORED ADR	6,835	6,835
RED ELECTRICA	9,289	9,289

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BRITISH AMERN TOB PLC	8,768	8,768
BURBERRY GROUP PLC SHS	7,584	7,584
COMPASS GROIUPL PLC SHS	6,077	6,077
JOHNSON MATTHEY PLC SHS	3,822	3,822
RIO TINTO PLC SPONSORED	4,286	4,286
UNILEVER PLC SPON ADR	21,996	21,996
NOVARTIS AG SPONSORED	17,996	17,996
ROCHE HLDGS LTD	17,907	17,907
MTN GROUP LTD SHS	6,580	6,580
ALTRIA GROUP INC COM	14,673	14,673
CORNING INC COM	9,446	9,446
DU PONT E I DE NEMOURS & CO CO	14,069	14,069
EATON CORPORATION PLC	9,414	9,414
INTEL CORP COM	12,142	12,142
JOHNSON & JOHNSON COM	16,568	16,568
MERCK & CO INC NEW COM	14,193	14,193
MICROSOFT CORP COM	16,312	16,312
PHILIP MORRIS INTL INC COM	14,376	14,376
BAXTER INTL INC COM	12,559	12,559
BOEING CO COM	13,872	13,872
AT&T INC COM	15,629	15,629
CHEVRON CORP NEW COM	14,453	14,453
CISCO SYSTEMS INC	9,336	9,336
CONOCOPHILLIPS COM	13,510	13,510
DIAMOND OFFSHORE	5,890	5,890
EDISON INTERNATIONAL	11,672	11,672
EXXON MOBIL CORP COM	12,480	12,480
GENERAL ELECTRIC CO COM	14,566	14,566
JP MORGAN CHASE & CO	14,907	14,907
METLIFE INC COM	12,290	12,290

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PFIZER INC COM	12,071	12,071
PPL CORP COM	9,725	9,725
RAYTHEON CO COM NEW	16,266	16,266
SYMANTEC CORP	8,138	8,138
WELLS FARGO & CO NEW COM	17,967	17,967
HEALTH CARE REIT INC COM	11,813	11,813
BCE INC COM NEW	9,775	9,775
SHAW COMMUNICATIONS INC	12,202	12,202
VODAFONE GROUP PLC NEW	10,935	10,935
ROYAL DUTCH SHELL PLC	9,750	9,750
SANOFI SPONS ADR	9,906	9,906
SIEMENS A G SPONSORED	11,074	11,074
GLAXOSMITHKLINE PLC	8,315	8,315
HSBC HLDGS PLC SPONS	13,443	13,443
UNILEVER NV NEW YORK	14,226	14,226
NOVARTIS AG SPONSORED	14,627	14,627
MFS GIVT MKTS INCOME TR	4,158	4,158
POWERSHARES EXCHANGE	5,115	5,115
AMERICAN HOMES PART PFD	4,276	4,276
ISHARES TR S&P U S PFD STK	8,030	8,030
EATON VANCE TAX MANAGED	4,547	4,547
ACCENTURE PLC IRELAND	6,775	6,775
DU PONT E I DE NEMOURS & CO CO	4,477	4,477
EATON CORPORATION PLC	5,399	5,399
GENUINE PARTS CO	4,924	4,924
MERCK & CO INC NEW COM	5,693	5,693
PAYCHEX INC COM	4,688	4,688
TORTOISE ENERGY	19,747	19,747
ARTISAN PARTNERS ASSET	4,181	4,181
COACH INC COM	4,326	4,326

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CUMMINS INC	5,248	5,248
HOME DEPORT INC COM	6,112	6,112
HONEYWELL INTL INC COM	5,608	5,608
CISCO SYSTEMS INC	5,629	5,629
GANNETT COMPANY INC	7,032	7,032
GENERAL ELECTRIC CO	5,181	5,181
MDU RES GROUP INC COM	5,507	5,507
PFIZER INC COM	8,047	8,047
SYMANTEC CORP	4,185	4,185
AIRCASTLE LTD SHS	5,668	5,668
IRON MTN INC NEW COM	4,960	4,960
UBS AG LONDON BRH	20,391	20,391
KINDER MORGAN INC	4,223	4,223
DIGITAL RLTY TR INC COM	4,668	4,668
EPR PPTYS COM SH BEN INT	6,300	6,300
HOSPITALITY PPTYS TR COM	4,899	4,899
OMEGA HEALTHCARE INVS	5,150	5,150
OUTFRONT MEDIA INC COM	5,174	5,174
POTASH CORP	4,955	4,955
ALPS ETF TR U S EQUITY	4,167	4,167
AFLAC COM INC	9,095	9,095
AMAZON COM INC	9,119	9,119
AMERICAN EXPRESS CO	7,660	7,660
AMGEN INC	9,168	9,168
ANADARKO PETE CORP	9,877	9,877
BOSTON PPTYS LTD	7,437	7,437
BURLINGTON NORTHN	7,816	7,816
CNA FINL CORP FIXED RT NT	10,638	10,638
CONTINENTIAL RES INC OKLA	9,806	9,806
CVS HEALTH CORP	7,487	7,487

Name of Stock	End of Year Book Value	End of Year Fair Market Value
DISCOVER BK	9,858	9,858
GOLDMAN SACHS GROUP	11,136	11,136
HEWLETT PACKARD CO	8,753	8,753
JEFFERIES GROUP INC	11,446	11,446
JP MORGAN CHASE & CO	7,485	7,485
KENNAMETAL INC	7,951	7,951
KROGER CO	7,051	7,051
L-3 COMMUNICATIONS	7,388	7,388
LENDER PROCESSING	7,368	7,368
MACYS RETAIL HLDGS INC	7,258	7,258
MERRILL LYNCH & CO	11,247	11,247
MORGAN STANLEY SR NT	9,025	9,025
NASDAQ STK MKT INC	10,798	10,798
PHILLIPS 66 GTD SR NT	7,346	7,346
PRUDENTIAL FINL INC	7,724	7,724
TRANSOCEAN INC	9,000	9,000
VALERO ENERGY CORP	7,608	7,608
VERIZON COMMUNICATIONS	7,551	7,551
WELLPOINT INC	8,891	8,891
ZURICH REINS CENTRE	10,613	10,613
ALCOA INC FIXED RATE NTS	10,893	10,893
AMERENENERGY	9,725	9,725
CENTURYLINK INC	8,060	8,060
DEAN FOODS CO	9,495	9,495
LEVEL 3 FING INC	9,090	9,090
MASCO CORP	10,525	10,525
NRG ENERGY INC	8,770	8,770
THOMSON REUTERS CORP	8,717	8,717
ERICSSON TELEFONAKTIE	9,323	9,323
LYONDELLBASELL INDS	9,157	9,157

Name of Stock	End of Year Book Value	End of Year Fair Market Value
FEDERATED ULTRA SHORT BONDFUND	7,563	7,563
SELECT SECTOR SPDR	8,489	8,489
SELECT SECTOR SPDR	15,652	15,652
VANGUARD INDEX FDS	22,094	22,094
VANGUARD INDEX FDS	44,747	44,747
UBS AG LONDON	19,941	19,941
WISDOMTREE	14,789	14,789
WISDOMTREE	23,851	23,851
WIDSOMTREE	9,135	9,135
ISHARES TR CURRENCY	37,879	37,879
ISHARES INC	31,994	31,994

TY 2014 Other Assets Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SECURITY DEPOSITS	6,500	1,000	1,000

TY 2014 Other Decreases Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	-141,734
ADJUSTMENT TO PRIOR YEAR BALANCE	1,004,254

TY 2014 Other Expenses Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSES	6,269			6,269
UTILITIES	57,566			63,300
FELLOWSHIP EXPENSES	51,151			57,568
TELEPHONE	7,933			9,954
REPAIRS AND MAINTENANCE	14,240			14,302
SUPPLIES	8,316			8,316
INSURANCE	19,754			22,957
PUBLICITY & DEVELOPMENT	2,167			1,191
WEBSITE	7,700			7,700
COMPUTER EXPENSE	12,886			12,886
OTHER	14,914			15,125
WASTE REMOVAL	5,134			5,134

TY 2014 Other Income Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
application fee	9,450		9,450

TY 2014 Other Increases Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Amount
FOREIGN CURRENCY GAIN	102,731

TY 2014 Other Liabilities Schedule

Name: THE BOGLIASCO FOUNDATION INC

EIN: 13-3632296

Description	Beginning of Year - Book Value	End of Year - Book Value
ACCRUED PENSION AND BENEFITS OBLIGATION		544,929

TY 2014 Other Professional Fees Schedule**Name:** THE BOGLIASCO FOUNDATION INC**EIN:** 13-3632296

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	20,810	20,810	20,810	
CONSULTING	5,311			5,311

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	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 <u>www.irs.gov/form990</u>.	OMB No 1545-0047
		2014

Name of the organization THE BOGLIASCO FOUNDATION INC	Employer identification number 13-3632296
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ 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, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ 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. If 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 **General Rule** 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 THE BOGLIASCO FOUNDATION INC	Employer identification number 13-3632296
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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
<div>_____</div>	<div>See Additional Data Table</div> <div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>

Name of organization THE BOGLIASCO FOUNDATION INC	Employer identification number 13-3632296
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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
_____	_____ _____ _____ _____	_____ \$	_____

Name of organization THE BOGLIASCO FOUNDATION INC	Employer identification number 13-3632296
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	

Additional Data

Software ID:

Software Version:

EIN: 13-3632296

Name: THE BOGLIASCO FOUNDATION INC

Form 990 Schedule B, 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
<u>1</u>	<div>AARON COPLAND FUND FOR MUSIC</div> <div>254 WEST 31ST STREET 15TH FLOOR</div> <div>NEW YORK, NY 10001</div>	\$ <div>7,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>2</u>	<div>JOHN BURROUGH SCHOOL</div> <div>755 SOUTH PRICE ROAD</div> <div>ST LOUIS, MO 63124</div>	\$ <div>25,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>3</u>	<div>EDWARD T CONE FOUNDATION</div> <div>260 MADISON AVENUESTE 1800</div> <div>NEW YORK, NY 10016</div>	\$ <div>20,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>4</u>	<div>CHRISTINA BIAGGI</div> <div>9 LUDLOW LANE</div> <div>PALISADES, NY 10964</div>	\$ <div>8,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>5</u>	<div>PAGE ASHLEY</div> <div>168 EAST 74TH STREET 1B</div> <div>NEW YORK, NY 10021</div>	\$ <div>5,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>6</u>	<div>JOHN HARBISON</div> <div>479 FRANKLIN STREET</div> <div>CAMBRIDGE, MA 02139</div>	\$ <div>5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	<div>PROFESSIONAL LANDSCAPE MANAGEMENT S</div> <div>47 EAST ALL SAINTS STREET</div> <div>FREDERICK, MD 21701</div>	\$ <u>5,500</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>8</u>	<div>GEORGE SCHWARZ</div> <div>330 LAFAYETTE STREET 7</div> <div>NEW YORK, NY 10012</div>	\$ <u>5,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>9</u>	<div>SANDY AND MICHAEL HECHT</div> <div>211 CENTRAL PARK WEST APT 11J</div> <div>NEW YORK, NY 10024</div>	\$ <u>5,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>10</u>	<div>MARINA AND JAMES HARRISON</div> <div>30 WOODS ROAD BOX 657</div> <div>PALISADES, NY 10964</div>	\$ <u>374,178</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>
<u>11</u>	<div>GIANNI AND RENEE BIAGGI DE BALSYS</div> <div>AVENUE SECRETAN 25</div> <div>LAUSANNE, 1005 SZ</div>	\$ <u>558,450</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution)</div>