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# For

## Return of Private Foundation

OMB No 1545-0052

orm 🤇	99	0-PF		or Sec	tion 4947	7(a)(1) Trust Treat	ed as Private	Foundation		201/
epartme	ent of	f the Treasury				curity numbers on and its separate			de public. .gov/form990pf.	Open to Public Inspection
		ar year 2014 or tax year beg		AUG		2014	, and e		JUL 31, 201	<del> </del>
THE	E	oundation INTEGLIA FAMI ORATION	LY FO		•				A Employer identification 47-165453	
		street (or P O box number if mail	is not delivered	d to street :	address)			Room/suite	B Telephone number	<u> </u>
		SOUTH MAIN ST			<b>,</b>				401-274-3	600
		n, state or province, country		foreign no	nstal code	<u> </u>			C If exemption application is	
-			2903	iorcigii pi	Join Couc	•			o il exemption application is	pending, check here
			ial return			Initial return of a fo	ormer public o	harity	D 1. Foreign organization	ns. check here
. 0	on u	,	al return			Amended return				, ,
			ress change			Name change			Foreign organizations no check here and attach of	neeting the 85% test, computation
Che	ck ty	ype of organization:	Section 501	(c)(3) ex	empt priv	ate foundation			]  E= f private foundation st	tatus was terminated
	-	ion 4947(a)(1) nonexempt cl				able private founda	ation		under section 507(b)(	
		ket value of all assets at end o			ng metho	d; Cash	X Accr	ual	F If the foundation is in a	a 60-month termination
(from	ı Pa	art II, col. (c), line 16)			her (spec				under section 507(b)(	
▶\$		303,8	384 . (Par	t I, colui	mn (d) m	ust be on cash i	basis)			
Part		Analysis of Revenue and Ex (The total of amounts in columns ( necessarily equal the amounts in	penses (b), (c), and (d) r column (a) )	nay not		Revenue and nses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	1 0	Contributions, gifts, grants, et	c., received			295,562.			N/A	
2	-	check 🕨 🔃 if the foundation is no	it required to attach	Sch B						
3	3 lr	nterest on savings and temporary ash investments				57 <u>0.</u>		<u>570.</u>		Statement 1
4	<b>4</b> D	Dividends and interest from s	ecurities			2,382.		2,382.		Statement 2
5	5 <b>a</b> G	Gross rents								
	ÞΝ	let rental income or (loss)								
_ლ   €		let gain or (loss) from sale of asset Gross sales price for all	s not on line 10	ס						
Revenue	D a	ssets on line 6a					1.0	2 540		-
7 اچ		Capital gain net income (from Part	V, line 2)				12	3,549.		
-   8		let short-term capital gain								
ئے۔ مد		ncome modufications	<b>!</b>							<u> </u>
i		RELEIVED O	<del>                                     </del>							
4	8 I	ess Cost of goods sold O						-		
P		Graf Dayoff Dog 10 91 15	1							-
12		ratal A through 11			-	298,514.	12	6,501.	<b>†</b> ·	
		Compensation of officers, directors	_		<u> </u>	0.		0.	T	0
14	-	Other employee salaries and								
18		Pension plans, employee ben	-							
Ses 10		_egal fees	Stmt	. 3		2,394.		0.		0
ğ	b A	Accounting fees	Stmt	4		3,500.		0.		0
Administrative Expenses	c (	Other professional fees								
2 1	7 !	nterest								
11 Ta		Taxes							ļ	
[ 1		Depreciation and depletion			ļ					
Ē 20		Occupancy								
<u>ک</u>  2		Travel, conferences, and mee	tings		ļ					
P 2		Printing and publications	٠	-		1 000			<u> </u>	
B 2		Other expenses	Stmt	. 5		1,008.	<del>  -</del>	0.		0
rati		Total operating and adminis				6 000		0		_
Operating		expenses. Add lines 13 throi			-	6,902.		0.	<u> </u>	2,600
2		Contributions, gifts, grants p			}	15,000.				4,600
2		Total expenses and disburs	ements.			21,902.		0.		2,600
	/	Add lines 24 and 25			1	41,704.	L		P.L	

c Adjusted net income (if negative, enter -0-) 423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

2 Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

Form **990-PF** (2014)

276,612.

N/A

126,501

Add lines 24 and 25 27 Subtract line 26 from line 12:

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of year			
P	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments		8,669.	8,669.		
	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	1				
S.	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
		Investments - corporate stock Stmt 7	0.	92,028.	159,587.		
		Investments - corporate bonds Stmt 8	0.	77,987.	77,723.		
	11	Investments - land, buildings, and equipment basis		-			
		Less accumulated depreciation	1				
	12	Investments - mortgage loans					
	13	Investments - other Stmt 9	0.	60,453.	57,905.		
	14	Land, buildings, and equipment; basis			**		
		Less accumulated depreciation					
	15	Other assets (describe ►					
	16	Total assets (to be completed by all filers - see the					
		instructions. Also, see page 1, item I)	0.	239,137.	303,884.		
	17	Accounts payable and accrued expenses		6,744.			
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ā	21	Mortgages and other notes payable					
	22	Other liabilities (describe > CONTRIBUTIONS )	0.	12,400.			
_	23	Total liabilities (add lines 17 through 22)	0.	19,144.			
		Foundations that follow SFAS 117, check here					
S		and complete lines 24 through 26 and lines 30 and 31.					
Š	24	Unrestricted					
<u>a</u>	25	Temporarily restricted					
ä	26	Permanently restricted					
Fund Balance		Foundations that do not follow SFAS 117, check here					
F		and complete lines 27 through 31.					
ţ	27	Capital stock, trust principal, or current funds	0.	0.			
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Net Assets or	29	Retained earnings, accumulated income, endowment, or other funds	0.	219,993.			
Ž	30	Total net assets or fund balances	0.	219,993.			
				020 127			
_	31	Total liabilities and net assets/fund balances	0.	239,137.			
P	art	III Analysis of Changes in Net Assets or Fund E	Balances				
_	Tota	Il net assets or fund balances at beginning of year - Part II, column (a), line	20	T			
•		st agree with end-of-year figure reported on prior year's return)		1	0.		
2	-	er amount from Part I, line 27a		2	276,612.		
3		er increases not included in line 2 (itemize)		3	0.		
4		lines 1, 2, and 3	. <u></u>	4	276,612.		
5		reases not included in line 2 (itemize)   SEE ATTACHED I	FOOTNOTE	5	56,619.		
6		Il net assets or fund balances at end of year (line 4 minus line 5) - Part II, o		6	219,993.		
-					Form <b>990-PF</b> (2014)		

	ORATION				<u>47-165</u>	4536 Page
	nd Losses for Tax on I					
(a) List and described 2-story brick ward	be the kind(s) of property sold (e. ehouse; or common stock, 200 sl	g., real estate, is. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED	SECURITIES					
b						
d						
<u>e</u>	40 Decrease allowed	(1) 000100	<u> </u>		(h) Core or (lose	<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o			(h) Gain or (loss (e) plus (f) minus	
a 194,367.	(	F.22.2.F.2	70,81	R	(-/ (-/	123,549
b 194,36/.			70,01	· · · · · · · · · · · · · · · · · · ·		123,343
C			<del></del> .			
d	<del></del>					
e						
Complete only for assets showing	gain in column (h) and owned by	the foundation on 1	2/31/69		(I) Gains (Col. (h) gain	minus
(i) F M V as of 19/21/60	(j) Adjusted basis	(k) Excess			col. (k), but not less that Losses (from col. (	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (	j), if any		Losses (nom con	· · · · · · · · · · · · · · · · · · ·
a						123,549
b			•			
С						<del></del>
d						
e				<del>.                                     </del>		
2 Capital gain net income or (net cap	If gain, also ent	er ın Part I, line 7 0- ın Part I, line 7		}   2		123,549
, , , ,				1 2		123,343
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		and (6):		1		
If (loss), enter -0- in Part I, line 8	:01011111 (C).			) 3	N/A	
	nder Section 4940(e) fo	r Reduced Tax	x on Net	Investment Ir		
For optional use by domestic private	foundations subject to the section	1 4940(a) tax on net II	nvestment ind	come.)		N/A
		. ,		·		
f section 4940(d)(2) applies, leave thi	s part blank.					
Was the foundation liable for the secti			the base peri	od?		Yes No
f "Yes," the foundation does not qualif				<del> </del>		
1 Enter the appropriate amount in ea	ach column for each year; see the	instructions before n	naking any er	itries.	-	(4)
(a) Base period years	(b) Adjusted qualifying d	ietributione No	t value of nor	(c) ncharitable-use asse	nts Distril	(d) bution ratio
Calendar year (or tax year beginnin	g in) Aujusteu quailiyilig u	istributions ive	t value of floi	iciiai ilabie-use asse	(col. (b) div	vided by col. (c))
2013						
2012 2011						
2010						<del>.</del>
2009						
2003						
2 Total of line 1, column (d)					2	
3 Average distribution ratio for the 5	-year base period - divide the tota	I on line 2 by 5, or by	the number	of years		
the foundation has been in existen				-	3	
4 Enter the net value of noncharitabl	e-use assets for 2014 from Part >	(, line 5			4	
Multiply line 4 by line 3					5	
Enter 1% of net investment incom	e (1% of Part I, line 27b)				6	
Add lines 5 and 6					7	
D. Enter qualifying disk but and	Dort VII. line 4					
B Enter qualifying distributions from					8	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, li	ne 1b, and complete t	hat part using	g a 1% tax rate.		

THE INTEGLIA FAMILY FOUNDATION

	990-PF (2014) CORPORATION	<u>47-1</u>	<u> 16545</u>	<u> 36</u>	F	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 -	see ins	stru	ctior	1S)
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)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			2,5	<u>30.</u>
	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		<del></del>		0.
3	Add lines 1 and 2	3			<u>2,5</u>	30.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		<del>,</del>		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,5	<u> 30.</u>
6	Credits/Payments:					
	2014 estimated tax payments and 2013 overpayment credited to 2014  6a	-				
	Exempt foreign organizations - tax withheld at source  The control of the control	-				
	Tax paid with application for extension of time to file (Form 8868)  Call the state of the control of the control of time to file (Form 8868)					
	Backup withholding erroneously withheld  Table and the process Add leas to the purple Cd.	$\dashv$ , $\mid$				0.
,	Total credits and payments. Add lines 6a through 6d  Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				<del>57.</del>
8	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			2,5	
40	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			<u> </u>	<u> </u>
10	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				
	irt 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 interve	ne in			Yes	No
10	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 definit	on)?		1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public					
	distributed by the foundation in connection with the activities					
С	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
		١.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		_X_
	If "Yes," attach a detailed description of the activities.			ļ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	1, Or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		-	3		<u> X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u> </u>
	olf "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-	5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or	Anan In	-			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the second of the province of th	ate law		ا ۽		v
-	remain in the governing instrument?  Put the foundation have at least \$5,000 in except at any time during the year? If "Yes " complete Part II, and (a), and Part	VI/	-	7	X	_X_
′	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	AV	-	<del>-'-</del> -		
٥.	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
06	DE			}		
	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)			ļ		
•	of each state as required by General Instruction G? If "No," attach explanation  See State	ment	10	8b		х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for (3)		- T			<del></del>
J	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
			Form	990	-PF	2014)

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D	2	Ω	

Form 990	PF (2014) CORPORATION	<u>47-1654</u>	<u>536</u>		Page 5
Part \	/II-A Statements Regarding Activities (continued)				
11 At a	ny time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
sec	tion 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
<b>12</b> Did	the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisc	ry privileges?			
If "Y	es," attach statement (see instructions)		12		X
<b>13</b> Did	the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	osite address N/A				
	books are in care of ► MICHAEL INTEGLIA JR. Telephone	no. <b>► 401-27</b>	4-3	600	
Loc	ated at > 11415 PINK OLEANDER DRIVE, PALM BEACH GARDENS, F				
	tion 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			<b>&gt;</b>	
	enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>   15	N.	/A	
	ny time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	urities, or other financial account in a foreign country?		16		X
	the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the r	name of the		Ì	
	eign country				
Part \	/II-B   Statements Regarding Activities for Which Form 4720 May Be Required	-	•		
	Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
	ing the year did the foundation (either directly or indirectly):				
	Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
. ,	Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
(2)	a disqualified person?	Yes X No			
(2)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
٠,,		J 165 [22] 110		]	
(5)	Transfer any income or assets to a disqualified person (or make any of either available	Yes X No			
	for the benefit or use of a disqualified person)?	Tes LALINO			
(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	Yes X No			
	, , , , , , , , , , , , , , , , , , , ,	J Yes L∡L NO			
	ny answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	37 / 3			
	tion 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
-	anizations relying on a current notice regarding disaster assistance check here				
	the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	ore the first day of the tax year beginning in 2014?		1c		_X
2 Tax	es on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundat	ion			
	ined 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) begi				
bet	ore 2014?	Yes X No			
lf "	Yes,° list the years ▶,,,,				
	there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to inco				
val	uation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and a				
	tement - see instructions.)	N/A	2b		
c If t	ne provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
<b>&gt;</b>					
3a Dio	the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
du	ring the year?	Yes X No			
b If"	Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persor	is after			
Ma	y 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))	to dispose			İ
	holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedu				
	rm 4720, to determine if the foundation had excess business holdings in 2014.)	N/A	3b		
	the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	I the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pui	pose that			
	d not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		х
		Fo	rm <b>99</b> 0	)-PF	

Form 990-PF (2014)

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

Form 990-PF (2014) CORPORATION	<b>47-1654536</b> Pa	age 7
Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)		
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) Compens	sation
NONE		
·		
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the Expenses	
1 N/A		
2		-
3		
4		
Dot IV B O	<u> </u>	
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 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
	Form <b>990-PF</b> (	

For	m 990-PF (2014) CORPORATION	<u>47-1654536</u>	Page 8
P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see instructions.)	)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	<u> </u>	
а	Average monthly fair market value of securities	1a 151	,154.
	Average of monthly cash balances		,039.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d 160	,193.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 160	,193.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 2	,403.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 157	,790.
6	Minimum investment return Enter 5% of line 5 Adjusted for Short Tax Period		,652.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 7	,652.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 2,530.		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b		<u>,530.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 5	,122.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 5	,122.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 5	,122.
P	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 2	<u>,600.</u>
b	· · · · · · · · · · · · · · · · · · ·	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	_
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 2	,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2014)

2,600.

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Page 9

THE INTEGLIA FAMILY FOUNDATION CORPORATION

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI,	33.7-3			
line 7				5,122.
2 Undistributed income, if any, as of the end of 2014				<u> </u>
a Enter amount for 2013 only			0.	
b Total for prior years:	_			
		0.		
3 Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶ \$ 2,600.				
a Applied to 2013, but not more than line 2a			0.1	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				2,600.
e Remaining amount distributed out of corpus	0.	I		
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		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.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				2,522.
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)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015				
Subtract lines 7 and 8 from line 6a	0.			
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 423581			1	- 000 55
17-67-14				Form <b>990-PF</b> (2014)

year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

### See Statement 11

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.

#### None

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

Check here \( \bigcup 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 e-mail 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:

Form 990-PF (2014)

CORPORATION

Page 11 Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year NC EDUCATIONAL PROGRAMS ROGER WILLIAMS UNIVERSITY 1 OLD FERRY ROAD 1,000, BRISTOL, RI 02809 NC EDUCATIONAL PROGRAMS THE SOHN CONFERENCE FOUNDATION 750 THIRD AVENUE 22ND FLOOR 1,500. NEW YORK, NY 10017 NC EDUCATIONAL PROGRAMS THE 100 CLUB OF RHODE ISLAND 222 CHESTNUT STREET 100. PROVIDENCE RI 02903 ▶ 3a 2,600, Total **b** Approved for future payment NUTRITION PROGRAMS ASSOCIATION TO BENEFIT CHILDREN NC 419 EAST 86TH STREET 10,000. NEW YORK, NY 10028 NC NUTRITION PROGRAMS FEEDING AMERICA 36 EAST WACKER DRIVE SUITE 2000 2,400. CHICAGO, IL 60601

423811 11-24-14

Total

Form **990-PF** (2014)

12,400.

**▶** 3b

CORPORATION

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	iunction income
<u>a</u>	_				
b			+		
<u> </u>	l l				
d	1			<u></u>	
e	-				
g Fees and contracts from government agencies					<del></del>
2 Membership dues and assessments					-151
3 Interest on savings and temporary cash					
investments			i		570.
4 Dividends and interest from securities					570. 2,382.
5 Net rental income or (loss) from real estate:					2,302
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	_				
c	_				
d	_				
e	_	· · · · · · · · · · · · · · · · · · ·			
12 Subtotal. Add columns (b), (d), and (e)		0	•	0.	
13 Total Add line 12, columns (b), (d), and (e)				13	2,952.
(See worksheet in line 13 instructions to verify calculations.)	)			<del></del> .	
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	Exempt	t Purposes	
Line No Explain below how each activity for which in	come is reported in	column (e) of Part XVI	-A contrib	uted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other the				, , , , , , , , , , , , , , , , , , , ,	•
3 INTEREST INCOME FROM	INVESTMEN	ITS			
4 DIVIDEND INCOME FROM					
	<u> </u>				
İ					

423621 11-24-14

	990-PF (2		RATION			<u>47-1654</u>		Page 13
Pa	rt XVII	Information Re Exempt Organ		To and Transactions a	nd Relationshi	ps With Nonchai	ritable	
1	Oud the ord			ollowing with any other organization	on described in section	501(c) of	Yes	s No
				ion 527, relating to political organ				$\top$
а	,	•	lation to a noncharitable exen			1		
	(1) Cash						1a(1)	X
	(2) Other	assets					1a(2)	X
b	Other trans							
			able exempt organization				1b(1)	X
	. ,		oncharitable exempt organiza	tion			1b(2)	X
		l of facilities, equipment,					1b(3)	X
		oursement arrangements					1b(4)	X
	• •	or loan guarantees					1b(5)	X
	(6) Perfo	rmance of services or me	embership or fundraising sol	icitations			1b(6)	X
C	Sharing of	facilities, equipment, ma	ailing lists, other assets, or pa	aid employees			1c	X
d	If the ansv	ver to any of the above is	"Yes," complete the following	g schedule. Column (b) should alv	ways show the fair mar	ket value of the goods, o	other assets,	
	or service:	s given by the reporting f	oundation. If the foundation	received less than fair market valu	ie in any transaction or	sharing arrangement, s	how in	
	column (d	) the value of the goods,	other assets, or services rec	eived.				
(a) L	ine no	(b) Amount involved	(c) Name of noncha	aritable exempt organization	(d) Description of	transfers, transactions, and s	sharing arrangen	nents
			N	/A				
	_		<u> </u>					
			<u> </u>					
			<u> </u>					
			<u> </u>					
	_		<u></u>					
	-							
	-   -				<del>-  </del>			
_					<del></del>			<del></del>
2a		•	•	to, one or more tax-exempt organi	zations described	_	¬ <sub>V</sub> г	X No
			er than section 501(c)(3)) or	in section 5277		L	Yes	NO LA
<u>D</u>	it Yes, co	mplete the following sch (a) Name of org		(b) Type of organization	(6)	Description of relations	hin	
		N/A	gamzation	(b) Type of organization	(6)	Description of relations		
	<del></del>	N/A				<del></del>		<del></del> -
		1		-	<del>                                     </del>			
		<del></del>						
		<del> </del>			-			
	Under	penalties of perjury, I declare	that I have examined the return.	including accompanying schedules and	statements and to the be	st of my knowledge	u the IDC disease	- 45
Si	gn and b	elief, it is true, correct, and co	implete Declaration of preparer (a	ther than taxpayer) is based on all inform	nation of which preparer ha	is any knowledge retu	y the IRS discus	arer
	ere	1 11 /1 /1	$//\sim 1$	XIIIIII	SECRETA	ARY I	Yes Yes	No
	Sigi	nature of officer or truster		Date	Title			
		Print/Type/preparer's n	iame Prepa	rer's signature	Date C	heck If PTIN		
		THOMAS E.	HICHAR,		i i	elf- employed		
Pa	bie	C.P.A.	1 / 5	- Loss	11-15-15	P0	001881	9
	reparer		CHAR & LUCA	INC.		Firm's EIN ► 05-0		
U	se Only	L	·			<del></del>		
		l.	22 SOUTH MAIN					
		I DT	TO SOMBOTION	U 2 0 U 3		Dhone no $A \cap 1 = 7$	51_970	Ω

Form **990-PF** (2014)

## Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

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

OMB No 1545-0047

Name of the organization

THE INTEGLIA FAMILY FOUNDATION

**Employer identification number** 

CORPORATION 47-1654536 Organization type (check one) Filers of: Section: \_\_ 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 33 1/3% 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 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE INTEGLIA FAMILY FOUNDATION
CORPORATION

Employer identification number

<del>47-1654536</del>

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.
--------	---

			1
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MIBIT CAPITAL HOLDING COMPANY  220 SOUTH MAIN STREET  PROVIDENCE, RI 02903	\$ 295,562.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

THE INTEGLIA FAMILY FOUNDATION

**Employer identification number** 

CORPORATION

47-1654536

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		
	SECURITIES				
<u> </u>					
		\$ 295,562.	12/31/14		
(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		
		<del></del>			
(-)					
(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.	(b)	(c)	(d)		
from	(b)  Description of noncash property given	FMV (or estimate)	(a) Date received		
Part I		(see instructions)			
		\$	<u></u>		

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number THE INTEGLIA FAMILY FOUNDATION 47-1654536 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 Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF Intere	st on Savi	ngs and Tem	porary	Cash In	vestments	Statement 1
Source		(a Reve Per Bo	nue		(b) vestment come	(c) Adjusted Net Income
CORPORATE BONDS		570. 570.		570.		
Total to Part I, line 3					570.	
Form 990-PF	Dividend	s and Inter	est fr	om Secur	ities	Statement 2
Source	Gross Amount	Capital Gains Dividend	R	(a) evenue r Books	(b) Net Inves ment Inco	_
EQUITIES	2,382	•	0.	2,382.	2,38	32.
To Part I, line 4	2,382		0.	2,382.	2,38	32.
Form 990-PF		Legal	Fees			Statement 3
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Incom	
LEGAL COSTS	_	2,394.		0.		0.
To Fm 990-PF, Pg 1,	ln 16a =	2,394.		0.		0.
Form 990-PF		Accounti	ng Fee	s		Statement 4
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Incom	
ACCOUNTING FEE	_	3,500.		0.		0.
To Form 990-PF, Pg	1, ln 16b	3,500.		0.		0.

(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
0.		0.
0.		0.
tes	SI	tatement 6
	tes	tes Si

Form 990-PF	Corporate Stock		Statement 7
Description		Book Value	Fair Market Value
CORPORATE STOCK		92,028.	159,587.
Total to Form 990-PF, Par	t II, line 10b	92,028.	159,587.
Form 990-PF	Corporate Bonds		Statement 8
Description		Book Value	Fair Market Value
CORPORATE BONDS		77,987.	77,723.
Total to Form 990-PF, Par	t II, line 10c	77,987.	77,723.
Form 990-PF	Other Investments		Statement 9
Description	Valuation Method	Book Value	Fair Market Value
MUTUAL FUNDS	FMV	60,453.	57,905.
Total to Form 990-PF, Par	t II, line 13	60,453.	57,905.
Form 990-PF Explanation	n Concerning Part VII-A	., Line 8b	Statement 10

# Explanation

STATE OF DELAWARE DOES NOT REQUIRE FILING OF 990PF

Form 990-PF

Part XV - Line 1a List of Foundation Managers Statement 11

Name of Manager

MICHAEL INTEGLIA III

BRENDON INTEGLIA