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SCANNED JUN 14 2016

 $\mathsf{Form}\, 990$

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Inspection

<u>A</u> F	or the	2014 calendar year, or tax year beginning DEC 1, 2014 and	lending 1	10V 30, 2019	5			
В	Check if upplicable	C Name of organization		D Employer identif	fication number			
, 		FRANK J. BATTAGLIA						
ᆫ	Address change	SIGNAL 13 FOUNDATION, INC.						
Ļ	Name change	Doing business as		52-1273277				
L	initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb				
	Final return/	P.O. BOX 24801		410-	-335-1056			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,686,319.			
	Amende return	BALTIMORE, MD 21220-0801		H(a) Is this a group				
	Applica-	F Name and address of principal officer DARDARA DRANDINGR		for subordinate	es? Yes X No			
	pending	SAME AS C ABOVE		H(b) Are all subordinates	included? Yes No			
1	Гах ехег	npt status X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1)	or 527	If "No," attach	a list. (see instructions)			
<u>J \</u>	<u>Nebsite</u>	:▶ WWW.SIGNAL13FOUNDATION.ORG		H(c) Group exempti	on number			
		organization: X Corporation Trust Association Other	L Year	of formation: 1982	M State of legal domicile; MD			
Pa	art I	Summary						
a	1 B	riefly describe the organization's mission or most significant activities. SEE	SCHEDU	JLE_O				
Activities & Governance	_							
Ë	2 0	theck this box 🕨 🔲 if the organization discontinued its operations or dispersions	osed of more	e than 25% of its net a	assets			
Ş	3 1	lumber of voting members of the governing body (Part VI, line 1a)		. 3	48			
<u>ن</u> مع	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	48			
Se	1	otal number of individuals employed in calendar year 2014 (Part V, line 2a)	٠,		1			
Ę	6 T	otal number of volunteers (estimate if necessary)	, .	∮ 6	0			
ţ	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12		76	0.			
•	ь	let unrelated business taxable income from Form 990 T, line 34, ADD	1 0 0010	7t	_ 0.			
	1		- 0-2-010	Prior Year	Current Year			
a	8 0	Contributions and grants (Part VIII, line 1h)		-1 = 174,598	. 203,053.			
Ž	1	Program service revenue (Part VIII, line 2g)		i	. 0.			
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		181,434	. 77,462.			
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	. 0.			
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		356,032	. 280,515.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		88,998	. 146,174.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0	. 0.			
ø	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) [42,860	. 43,034.			
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0	0.			
ĝ	ьт	otal fundraising expenses (Part IX, column (D), line 25)	0.					
ŵ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		54,047	. 51,548.			
	18 T	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		185,905	. 240,756.			
	19 F	Revenue less expenses Subtract line 18 from line 12		170,127				
Net Assets or Fund Balances			В	eginning of Current Year				
sets	20 1	otal assets (Part X, line 16)		2,560,353				
AAS	21 T	otal liabilities (Part X, line 26)		467	267.			
<u> </u>	22 1	let assets or fund balances Subtract line 21 from line 20		2,559,886	. 2,599,654.			
P	art II	Signature Block						
Und	ler penal	ties of perjury, I declare that I have examined this return, including accompanying schedu	les and staten	nents, and to the best of	my knowledge and belief, it is			
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of	which prepare	r h <u>as any</u> knowledge.				
		Jalles Harry						
Sig	ın	Signature of officer		Date				
Here William B Hooper 4.14.16								
▼ Typ Vice-President								
		Print/Type preparer's name Preparer's signature		Date Check	PTIN			
Pai		JAMES E. CRISP JAMES E. CRISP	lo	02/09/16 sett-emp.	loyed P00025401			
Pre		Firm's name GROSS, MENDELSOHN & ASSOCIATES		Firm's EIN				
Use	<u>-</u>	Firm's address 36 SOUTH CHARLES ST., 18TH FLOO						
	BALTIMORE, MD 21201 Phone no.410-685-5512							
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No			
		LIIA For Donomical Participant Act Matica and the companie instance			Form 990 (2014)			

Form 990 (2014)

FRANK J. BATTAGLIA

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98 19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			٠.,
	Schedule D, Part III	_8_		<u> X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			7,7
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	Х	
h	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total	110	22	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			<u> </u>
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			İ
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		1	l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	,_		.,
	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
_	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
_ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		ــــــــــــــــــــــــــــــــــــــ

Form 990 (2014) SIGNAL 13 FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			i
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			!
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	<u> </u>	_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	}	l I	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			ļ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	ļ	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		1	
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	├	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	 	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1,,
	If "Yes," complete Schedule R, Part V, line 2	36	\vdash	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
	Note, All Form 990 filers are required to complete Schedule O	38	<u> X</u>	(001.1
		Forn	טפע ו	(2014)

Form 990 (2014) SIGNAL 13 FOUNDATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Î	
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-		ı
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			ı
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5а		5a		X
b		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
_	were not tax deductible?	OD		$\overline{}$
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
a		7b	_	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h_		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a_		1
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
, b				
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			1
a h				
р	amounts due or received from them)	į		j
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
b	some ways to the state of the s			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	to the state of th	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	The second secon			
	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand		 	
14a		14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u></u>

SIGNAL 13 FOUNDATION, INC.

52-1273277

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Charles Cabadada O acatoma a response or note to any line in this Both VI					\mathbf{x}
500	Check if Schedule O contains a response or note to any line in this Part VI					
sec	tion A. Governing Body and Management		······································			
		1	ء ا		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	48	4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	48	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision	1 .		
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Did the organization have members or stockholders?			6		X
7a		ppoint	one or			
	more members of the governing body?	PP 0		7a		X
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,	etockh	olders or			
J		JOCKI	olders, or	7b	ľ	х
_	persons other than the governing body?	or by th	o following:	/0		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by tr	le following.		v	
_	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the	1		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			,		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		_X_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	iflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	Yes," d	escnbe			
	in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		Х
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by II	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
9	The organization's CEO, Executive Director, or top management official			15a	х	
	Other officers or key employees of the organization			15b		X
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					 -
16~	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a			
ioa		iiiieiit v	viti i a	160		x
	taxable entity during the year?	-to .to .	and an ation	16a		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization to evaluate the control of the procedure requiring the organization of the procedure requirement of the procedure requir			1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of	mzauc	on s	405		
	exempt status with respect to such arrangements?			16b	l	Ь
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►MD					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	i (Sec	tion 501(c)(3)s only)	availat	DIE	
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website X Upon request Other (explain					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict	of interest policy, ar	nd finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks a	nd records. >			
	BARBARA BRANDNER - 410-335-1056					
	3906 BRIAR POINT ROAD, BALTIMORE, MD 21220					

SIGNAL 13 FOUNDATION INC

Form 990 (2014) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees; and former such persons

Check this box if neither the organization	Check this box if neither the organization nor any related							ed any current officer, director, or trustee			
(A)	(C)						(D)	(E)	(F)		
Name and Title	Average	Average Position (do not check more than one					one	Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)				is bot	han	compensation	compensation	amount of	
	week		er an	a a a	recto	r/trus	100)	from	from related	other	
	(list any	recto						the	organizations	compensation	
	hours for	ordi	8		}	ated		organization	(W-2/1099-MISC)	from the	
	related organizations	ustee	trust		8	ubeu		(W-2/1099-MISC)		organization and related	
	below	inal ti	tiona		l ge	že št	_			organizations	
	line)	Individual trustee or director	Institutional trustee	Officer	Key en	Highest compensated employee	Forme				
(1) GREGORY A. DEVOU	1.00								_	_	
PRESIDENT		X		X		<u> </u>	<u> </u>	0.	0.	0.	
(2) WILLIAM B. HOOPER	1.00									•	
VICE PRESIDENT		Х		X		ļ		0.	0.	0.	
(3) GUY MATRICCIANI, JR.	1.00										
SECRETARY		X		X		<u> </u>	_	0.	0.	0.	
(4) TERRY E. NOLAN	1.00										
TREASURER		X	_	X		ļ	<u> </u>	0.	0.	0.	
(5) LEONARD J. ATTMAN	1.00										
DIRECTOR	1 20	X				├—		0.	0.	0.	
(6) STUART M BROOKS	1.00									_	
DIRECTOR	1 00	X	-		-	-	-	0.	0.	0.	
(7) BARB CLAPP	1.00								_	_	
DIRECTOR	1 00	X	-		<u> </u>	<u> </u>	-	0.	0.	0.	
(8) LEE CORRIGAN	1.00	x	ł	1		ļ	ļ	0.	0.	0.	
DIRECTOR	1.00	^	┢		\vdash	╁╌	╁		<u>U.</u>	•	
(9) KARIN DEFRANCIS	1.00	X					l	0.	0.	0.	
DIRECTOR	1.00	^	-	1		+-			•	•	
(10) L. SCOTT DONAHOO DIRECTOR	1.00	X	1				1	0.	0.	0.	
(11) MARC L. DUBIN	1.00	T-									
DIRECTOR		X						0.	0.	0.	
(12) JOHN B. FRANZONE	1.00				1						
DIRECTOR		X		_	ļ	$oxed{oxed}$		0.	0.	0.	
(13) MARC J. GENTILE	1.00								_	_	
DIRECTOR		X	ļ.,	-	ــــــــــــــــــــــــــــــــــــــ		<u> </u>	0.	0.	0.	
(14) J.P. GRANT	1.00										
DIRECTOR		X	<u> </u>	<u> </u>	↓_	<u> </u>	╙	0.	0.	0.	
(15) JOHN B. HARMON, JR.	1.00										
DIRECTOR	1 4 4 4 4	X	\vdash		-	-	+	0.	_0.	0.	
(16) WILLIAM L. JEWS	1.00							_			
DIRECTOR	1 00	X	\vdash	┼	\vdash	+-	\vdash	0.	0.	0.	
(17) DAN JOERRES	1.00							0.	0.	0.	
DIRECTOR		X		Щ			1		·	Form 990 (2014)	

Form 990 (2014) SIGNAL 1	3 FOUND	AT:	101	1.	Il	NC.			<u>52-127</u> 3	<u> 3277</u>	Pa	age 8
Part VII Section A. Officers, Directors, Trus								compensated Employe				
(A) Name and title	(B) Average hours per week	(do	not c		tion more	than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) stimate nount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations (W-2/1099-MISC)	f org an	npensa rom the ganizati id relate anizatio	e ion ed
(18) MARTIN G. KNOTT, JR. DIRECTOR	1.00	X						0.	0.			0.
(19) PAMELA W. LAPIDES	1.00	х						0.	0.			0.
DIRECTOR (20) KIP MANDRIS	1.00											
DIRECTOR (21) PETE MATHEWS, JR.	1.00	X	 	<u> </u>	_			0.	0.	1		0.
DIRECTOR	1.00	X					-	0.	0 .	•		0
(22) LOU MAZZULLI, JR. DIRECTOR	·	x		ļ				0.	0.			0.
(23) GREG MCCRICKARD DIRECTOR	1.00	x						0.	0			0.
(24) MICHAEL MCDANIEL DIRECTOR	1.00	X						0.	0.			0.
(25) SEAN O'CONOR	1.00	x						0.	0			0 .
DIRECTOR (26) DAVID OROS	1.00											
DIRECTOR 1b Sub-total	1	X	<u> </u>		<u> </u>		<u> </u>	0.	0	•		0
 Total from continuation sheets to Part V Total (add lines 1b and 1c) 	II, Section A						>	40,000.	0	•		0
2 Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) w	ho r		0,000 of reportable			
compensation from the organization											Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for .			e, ke	əy er	mplo	oyee	, or	highest compensated e	employee on	3		Х
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									the organization	4		x
5 Did any person listed on line 1a receive or	accrue compe	nsa	tion	from	an	y un			ridual for services			
rendered to the organization? If "Yes," cor Section B. Independent Contractors	npiete Scheau	ie J	tor s	ucn	per	son		· · · · · ·		5		X
Complete this table for your five highest co	ompensated in	dep	end	ent c	cont	ract	ors 1	that received more than	\$100,000 of comper	sation	from	
the organization Report compensation for	the calendar	/ear	end	ıng v	with	or v	<u>/ithii</u>		year.			
(A) Name and busines	s address	N	ON	E				(B) Description of	services		(C) ensatio	'n
	·											
										_		
Total number of independent contractors	(including but i	not	imite	ed to	the	ose I	isted	d above) who received i	more than			
\$100,000 of compensation from the organ	nization 🕨					0			<u>. </u>			

SIGNAL 13 FOUNDATION, INC. Form 990 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (C) (D) (A) (B) (E) Position Reportable Reportable Estimated Name and title Average hours (check all that apply) compensation compensation amount of per from from related other week the organizations compensation organization (W-2/1099-MISC) from the (list any (W-2/1099-MISC) organization hours for Highest compensated (Institutional trustee and related related trustee (Key employee organizations organizations below line) 1.00 (27) BILL PATERAKIS 0 0. 0. DIRECTOR 1.00 (28) H. FRANCES REAVES 0. 0. 0 DIRECTOR 1.00 (29) MARTIN R. RESNICK 0 0. 0. DIRECTOR 1.00 (30) KEVIN ROCHLITZ 0. 0 0. DIRECTOR 1.00 (31) HENRY A. ROSENBERG, JR. 0 0 0. DIRECTOR 1.00 (32) KAREN SCHUSTER 0. 0 0. DIRECTOR 1.00 (33) HANAN SIBEL 0 0 0. DIRECTOR 1.00 (34) D. JIMMY STAVRAKIS 0. 0. 0. X DIRECTOR 1.00 (35) JIM STREETT 0. 0 0. X DIRECTOR 1.00 (36) JOHN VONTRAN 0. 0. 0. DIRECTOR 1.00 (37) KEVIN E. WESNER 0 0 0. DIRECTOR 1.00 (38) PAUL G. WOOD 0. 0. 0 Х DIRECTOR 1.00 (39) NICHOLAS A. DEFELICE 0. 0 0. DIR, - EMERITUS 1.00 (40) JOSEPH A. DEFRANCIS 0. 0. 0 DIR. - EMERITUS 1.00 (41) LOU GRASMICK 0. 0. 0 DIR. - EMERITUS 1.00 (42) RICHARD A. GROSSI 0. 0. 0. X DIR. - EMERITUS 1.00 (43) CARL T. JULIO 0. 0. 0 DIR. - EMERITUS 1.00 (44) JAMES P. O'CONOR 0. 0 0 DIR. - EMERITUS 1.00 (45) JOHN PATERAKIS 0. 0 0. DIR, - EMERITUS 1.00 (46) MARY JO PONS 0. 0 0. DIR. - EMERITUS Total to Part VII, Section A, line 1c

Form 990 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (B) (C) (D) (E) (A) Average Name and title Position Reportable Reportable Estimated hours (check all that apply) compensation compensation amount of per from from related other organizations week Highest compensated employee the compensation Individual trustee or director (W-2/1099-MISC) (list any organization from the (W-2/1099-MISC) organization hours for Institutional trustee and related related organizations Key employee organizations below Former Officer line) 1.00 (47) VICKIE ROSELLINI 0. X 0. 0. DIR, - EMERITUS 1.00 (48) GEORGE L. RUSSELL, JR. 0. 0. 0. DIR. - EMERITUS 20.00 (49) BARBARA BRANDNER X 40,000. 0. 0. EXECUTIVE DIRECTOR 40,000. Total to Part VII, Section A, line 1c

77,462, Form **990** (2014)

SIGNAL 13 FOUNDATION, INC.

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (B) (C) Related or Total revenue Unrelated from tax under sections 512 - 514 exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 203,053 g Noncash contributions included in lines 1a-1f \$_ h Total. Add lines 1a-1f 203,053 **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a 2f Investment income (including dividends, interest, and other similar amounts) 50,832, 50,832 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (II) Other (i) Securities assets other than inventory 1,432,434 b Less cost or other basis and sales expenses 1,405,804 c Gain or (loss) 26,630. 26,630. d Net gain or (loss) 26,630 8 a Gross income from fundraising events (not Revenue contributions reported on line 1c) See Part IV, line 18 Other b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d

280 515

Total revenue. See instructions.

INC.

Form 990 (2014) SIGNAL 13 FOUNDATION,
Part IX | Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	100,615.	100,615.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	45,559.	45,559.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	40,000.		40,000.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				··
10	Payroll taxes	3,034.		3,034.	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion			2 554	
13	Office expenses	3,774.		3,774.	· · · · · · · · · · · · · · · · · · ·
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				<u> </u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings Interest				
20 21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	212.		212.	
23	Insurance	1,939.		1,939.	
24	Other expenses. Itemize expenses not covered				
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
-	amount, list line 24e expenses on Schedule O.) CONSULTANTS	16,000.		16,000.	
	PROFESSIONAL FEES	15,785.		15,785.	
b	INVESTMENT FEES	13,838.		13,838.	
c d	INVESTIGAT PESS	13,030.		10,000	
	All other expenses				
25	Total functional expenses Add lines 1 through 24e	240,756.	146,174.	94,582.	0.
26	Joint costs Complete this line only if the organization	220,7000			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if tollowing SOP 98-2 (ASC 958-720)			<u> </u>	<u> </u>

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds

INC 52-1273277 Page 11 SIGNAL 13 FOUNDATION, Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 500. 500. 1 Cash - non-interest-bearing 149,578. 185,700. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary Assets employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 1,060. 10<u>a</u> basis Complete Part VI of Schedule D 495. 565. 707. b Less accumulated depreciation 10b 10c 2,409,568. 2,413,226. Investments publicly traded securities 11 11 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 2,560,353. 2,599,921 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 467. 267. 25 Schedule D 467. 26 267. Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,247,951. 2,300,294. 27 Unrestricted net assets 311,935. 299,360. Temporarily restricted net assets 28 28 Permanently restricted net assets 29

> 2,599,921. Form 990 (2014)

2,599,654.

30

31

32

33

34

2,559,886

2.560.353

30

32

FRANK J. BATTAGLIA SIGNAL 13 FOUNDATION INC 52-1273277 Form 990 (2014) Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 280,515 Total revenue (must equal Part VIII, column (A), line 12) 1 240,756. Total expenses (must equal Part IX, column (A), line 25) 2 2 39,759. Revenue less expenses Subtract line 2 from line 1 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 2,559,886. 5 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 6 7 7 Investment expenses Prior period adjustments 8 8 Other changes in net assets or fund balances (explain in Schedule O) 9 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 2,599,654. column (B)) 10 Part XII Financial Statements and Reporting \square Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis Separate basis X 2b b Were the organization's financial statements audited by an independent accountant?

Both consolidated and separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2014)

X

X

2c

За

3b

consolidated basis, or both

X Separate basis

Act and OMB Circular A-133?

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

FRANK J. BATTAGLIA

Employer identification number

SIGNAL 13 FOUNDATION, 52-1273277 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization (i) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2014 SIGNAL 13 FOUNDATION, INC. 52-1273277 Page 2

art II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	İ					
	include any "unusual grants ")	158,268.	_220,765.	130,078.	174,598.	203,053.	886,762.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	3,000.	3,000.	3,000.	3,000.	3,000.	15,000.
4	Total. Add lines 1 through 3	161,268.	223,765.	133,078.	177,598.	206,053.	901,762.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the				,		
	amount shown on line 11,						
	column (f)						132,684.
6	Public support. Subtract line 5 from line 4			-			769,078.
Sec	ction B. Total Support		-			·	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	161,268.	223,765.	133,078.	177,598.	206,053.	901,762.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	50,709.	38,843.	54,491.	50,160.	50,832.	245,035.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10					,	1146797.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2014 (•	column (f))		14	67.06 %
	Public support percentage from 2013					15	65.77 %
16a	33 1/3% support test - 2014. If the				14 is 33 1/3% or n	nore, check this be	
	stop here. The organization qualifies		•				▶ X
b	33 1/3% support test - 2013. If the				l line 15 is 33 1/3%	or more, check to	nis box
	and stop here. The organization qua	•	· · · -		- 40 40 40'		▶□
17a	10% -facts-and-circumstances tes	-					
	and if the organization meets the "fac			•	· ·	π vi now the orgai	nization
	meets the "facts-and-circumstances"	•	•		-	49 46	100/ -=
t	10% -facts-and-circumstances tes						
	more, and if the organization meets t						•
	organization meets the "facts-and-cir		-				┇
<u>18</u>	Private foundation. If the organization	on did not check a	pox on line 13, 16	a, 160, 1/a, or 171	D, CHECK THIS DOX 2	ina see instruction	is P

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	- <u>-</u> -					
ŀ) Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) ction B. Total Support				<u></u>		
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10:	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
١	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support (Add lines 9, 10c, 11 and 12)	L	<u> </u>	1		504()(5)	<u> </u>
14	First five years. If the Form 990 is fo	r the organization'	's first, second, th	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) organi	zation,
	check this box and stop here	io Support De	roontogo				
	ction C. Computation of Publ					45	04
	Public support percentage for 2014 (column (I))		15	<u>%</u>
	Public support percentage from 2013 ction D. Computation of Inve			<u> </u>		16	
						17	%
17 18				ine 13, column (1))	1	18	
	18 Investment income percentage from 2013 Schedule A, Part III, line 17						
19	more than 33 1/3%, check this box a						▶□
	b 33 1/3% support tests - 2013. If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						▶□
			······································			bodulo A (Form 0	00 000 E7\ 0044

Schedule A (Form 990 or 990-EZ) 2014 SIGNAL 13 FOUNDATION, INC.

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I if you checked 11a of Part I, complete Sections A and B if you checked 11b of Part I, complete Sections A and C if you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All	Supporting	Organizations
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- Yes No 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation if historic and continuing relationship, explain. 1 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below За b Did the organization confirm that each supported organization gualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below 4a b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes." describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations 4h c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) 5a b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent 7 controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990) 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990 EZ) 2014 SIGNAL 13 FOUNDATION, INC 52-1273277 Page 5 Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a b A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, 2 supervised, or controlled the supporting organization Section C. Type II Supporting Organizations No Yes 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) 2 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 3 supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions): The organization satisfied the Activities Test. Complete line 2 below b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) C Yes_ No Activities Test Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify how these activities directly furthered their exempt purposes, those supported organizations and explain how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. За b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	7	NC.		52-1273277 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on l	Nov 20, 1970 See instr	uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
•	see instructions)	4		
5	Net value of non exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	illy integrat	ed Type III supporting or	ganization (see

instructions)

Sche	dule A (Form 990 or 990 EZ) 2014 SIGNAL 13 FOU	NDATION, INC.		52-1273277 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity	······································		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	s	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6	<u></u>		
8	Distributions to attentive supported organizations to which t	he organization is responsive)	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	· · · · · · · · · · · · · · · · · · ·		
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Secti	on E - Distribution Allocations (see instructions)	Exocos Biotributions	Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6		110 2014	7.11.0011(10) 2011
	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
ı	Carryover from 2009 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D,			
	line 7 \$			<u> </u>
a	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c			
8	Breakdown of line 7			
a				
<u>b</u>				
<u>C</u>	Tuesda from 2012			
d	Excess from 2013	1	I	

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

FRANK J. BATTAGLIA 52-1273277 Page 8 Schedule A (Form 990 or 990-EZ) 2014 SIGNAL 13 FOUNDATION, INC. Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information (See instructions).

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. FRANK J. BATTAGLIA

SIGNAL 13 FOUNDATION, INC.

Employer identification number

52-1273277 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) _ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

FRANK J. BATTAGLIA SIGNAL 13 FOUNDATION, INC Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Public exhibition Loan or exchange programs Scholarly research Other h Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? No Yes Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes b If "Yes," explain the arrangement in Part XIII and complete the following table Amount c Beginning balance 1c Additions during the year 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 1a Beginning of year balance Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes_ No by (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land b Buildings				
c Leasehold improvementsd Equipment		1,060.	565.	495.
e Other Total. Add lines 1a through 1e (Column (d) me	ust equal Form 990, Part X, colur	nn (B), line 10c)	>	495.

Schedule D (Form 990) 2014

	LYWIN O. DALLAGTIA	,
Schedule D (Form 990) 2014	SIGNAL 13 FOUNDATION,	INC

Schedule D (Form 990) 2014 SIGNAL 13	FOUNDATION, IN	IC.	52-1273277 Page 3
Part VII Investments - Other Securities	•		· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "			
(a) Description of security or category (including name of secu	rity) (b) Book value	(c) Method of valuation Cos	st or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests		<u> </u>	
(3) Other			· · · · · · · · · · · · · · · · · · ·
(A)			
(B)			
(C)			
(D)			
<u>(E)</u>			
(F)			
(G)			
(H)	\ <u>\</u>		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12. Part VIII Investments - Program Related) >	<u> </u>	~~
		44 - 0 - 5 000 D - 1 V 1 - 4	•
Complete if the organization answered "\ (a) Description of investment	(b) Book value		st or end-of-year market value
	(b) Book value	(c) Metrica di Valuationi des	St of end-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> <u>(7)</u> <u></u>	-	 -	
(8)			
(9)			· · · · · · · · · · · · · · · · · · ·
Total (Coi (b) must equal Form 990, Part X, col. (B) line 13	\ \		
Part IX Other Assets.			
Complete if the organization answered "	Yes" to Form 990. Part IV. line	11d. See Form 990, Part X, line 1	5
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (ii	B) line 15)		
Part X Other Liabilities.			
Complete if the organization answered "	Yes" to Form 990, Part IV, line		, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) PAYROLL TAXES PAYABLE		267.	
(3)			
(4)			
(5)			
(6)			

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

▶

267.

(7) (8)

FRANK J. BATTAGLIA SIGNAL 13 FOUNDATION, INC Schedule D (Form 990) 2014 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 196,126. Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 -68,681 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b 2c c Recoveries of prior year grants Other (Describe in Part XIII) 2d -68,681. e Add lines 2a through 2d 26 264,807. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 13,838. 4a b Other (Describe in Part XIII) 4h 1.870. 15,708. c Add lines 4a and 4b 4c 280,515. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 209,433. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a b Prior year adjustments 2b c Other losses 2c -17,485d Other (Describe in Part XIII.) 2d -17,485. 26 e Add lines 2a through 2d 226,918. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 13,838. a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) 4h 13,838. c Add lines 4a and 4b 240,756. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X, LINE 2: THE FOUNDATION HAD NO LIABILITY FOR UNCERTAIN TAX POSITIONS. THE FOUNDATION'S FEDERAL EXEMPT ORGANIZATION RETURNS ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR A PERIOD OF THREE YEARS AFTER THE RETURNS ARE FILED. PART XI, LINE 4B - OTHER ADJUSTMENTS: ADD BACK: ACCRUED INTEREST RECEIVABLE 11/30/14 LESS: ACCRUED INTEREST RECEIVABLE 11/30/15

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LESS: SCHOLARSHIP PAYABLE 11/30/15

FRANK J. BATTAGLIA	
Schedule D (Form 990) 2014 SIGNAL 13 FOUNDATION, INC. Part XIII Supplemental Information (continued)	52-1273277 Page 5
Part XIII Supplemental Information (continued)	
ADD BACK: SCHOLARSHIP PAYABLE 11/30/14	
LESS: ACCOUNTS PAYABLE 11/30/15	
ADD BACK: ACCOUNTS PAYABLE 11/30/14	
PART XI, LINE 4B AND PART XII, LINE 2D	
ACCRUAL TO CASH ADJUSTMENTS	
· · · · · · · · · · · · · · · · · · ·	

SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

1545-0047	14
OMB No	20

2

X Yes

(Form 990)		Governments, and Individuals in the United States	2014
Department of the Treasury	the Treasury	► Attach to Form 990.	Open to Public
Internal Revenue Service	IB Service	Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.	Inspection
Name of t	e organization FRANI		Employer identification number
	SIGN	SIGNAL 13 FOUNDATION, INC.	52-1273277
Part	Part I General Information on Grants and Assistance	Grants and Assistance	
1 Doe	the organization maintain	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	[

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

cntena used to award the grants or assistance?

Part II

recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if additi	onal space is need	pa			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEVENSON UNIVERSITY 1525 GREENSPRING VALLEY ROAD STEVENSON, MD 21153	52-0705392	501(C)(3)	14,500,	0			SCHOLARSHIP GRANTS FOR 9 ELIGIBLE STUDENTS
TOWSON UNIVERSITY 8000 YORK ROAD TOWSON, MD 21252-0002	52-0939453	501(C)(3)	30,803.	0		:	SCHOLARSHIP GRANTS FOR 9
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	and government or slisted in the line	ganizations listed in the table	e line 1 table				2

Schedule I (Form 990) (2014)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

432101 10-15-14

Page 2

SIGNAL 13 FOUNDATION, INC. FRANK J. BATTAGLIA

Schedule I (Form 990) (2014) SIGNAL 13 FOUNDATION, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

rait iii caii be dupiicated ii addiiioliai space is ileeded						
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
DOMARDI		7. A.A.	C			_
FINANCIAL ASSISTANCE						
						* %
Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	uired in Part I, line	e 2, Part III, column	(b), and any other ac	iditional information		•
I, LINE 2:						
THE BOARD OF DIRECTOR'S GRANT ASSESSMENT		COMMITTEE MONITORS	IONITORS THE	E USE OF THE		
GRANT AWARDS AND REVIEWS EXPENDITURES	RES FUNDED	во ву тне	AWARDS. THE	E SCHOLARSHIP		
COMMITTEE RECEIVES AND REVIEWS THE	REQUIRED		INFORMATION FROM THE	HE		
SCHOLARSHIP RECIPIENTS, AS DESCRIBED	IN	THE SCHOLARSHIP	HIP APPLICATION	ATION.		
		į				

Schedule I (Form 990) (2014)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

FRANK J. BATTAGLIA Name of the organization SIGNAL 13 FOUNDATION,

Employer identification number 52-1273277 INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO PROVIDE FINANCIAL SUPPORT IN THE TIME OF NEED TO ACTIVE BALTIMORE
CITY POLICE DEPARTMENT EMPLOYEES, SWORN AND CIVILIAN, AS WELL AS TO
PROVIDE SCHOLARSHIPS TO THESE SAME POLICE DEPARTMENT EMPLOYEES'
DEPENDENT CHILDREN.
FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS REVIEWED BY THE ORGANIZATION'S BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 15A:
THE BOARD OF DIRECTORS REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR ON
AN ANNUAL BASIS AND DECIDES ON AN APPROPRIATE INCREASE IN COMPENSATION, IF
ANY.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION'S PROVIDES ITS GOVERNING DOCUMENTS, FORM 990 AND FINANCIAL
STATEMENTS UPON RECEIPT OF A WRITTEN REQUEST.
FORM 990, PART XII, LINE 2C:
THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE
AUDIT OF THE FINANCIAL STATATEMENTS AND SELECTION OF AN INDEPENDENT
ACCOUNTANT.