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EXTENDED TO NOVEMBER 15, 2016

Form 990-PF

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

Do not enter social security numbers on this form as it may be made public Information about Form 990-PF and its separate instructions is atwww.irs.gov/form990pf. OMB No 1545-0052

	artment of the Treas				unty numbers on				2013
	nal Revenue Service) 15 or tax year beginnin		m 990-PF	and its separate			irs.gov/form990pf.	Open to Public Inspection
	me of foundation		<u> </u>			, anu t	ending	A Employer doublinetic	
		MILY FUND,	TNC D1	3619	005			A Employer identification	n number
		Z CAPITAL M			005			26-384330	۵
		O box number if mail is not					Room/suite	B Telephone number	
	•	T KIMBLE AV		,			, noompoons	866-888-5	157
		r province, country, and		nostal code			ــــــــــــــــــــــــــــــــــــــ	 	
	ORRISTO			Justai Cuuc	•			C If exemption application is	pending, check here
	Check all that app				nitial return of a fo	rmer public	charity	D 1. Foreign organization	is check here
		Final retu			Amended return	mor pasmo	ouy	2 11 1 orongin organization	10,01100111010
		X Address		7	lame change			2. Foreign organizations no check here and attach of	neeting the 85% test,
H	Check type of org		on 501(c)(3) e					7	·
	¬ ··· ·	a)(1) nonexempt charitat			ble private founda	tion		E If private foundation st under section 507(b)(1)(A), check here
l Fa		of all assets at end of year				Acc	rual	F If the foundation is in a	
	rom Part II, col.		· —	ther (speci				under section 507(b)(
	-\$	28,121,470	. (Part I, colu	ımn (d) m	ust be on cash b	pasis)			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	The total o	of Revenue and Expense famounts in columns (b), (c), equal the amounts in column	S and (d) may not (a))		Revenue and ises per books		nvestment ome	(c) Adjusted net	(d) Disbursements for chantable purposes (cash basis only)
		ons, gifts, grants, etc., rec		3.	305,056.		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		(casii basis only)
	2 Check	if the foundation is not require				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		<u> </u>	<u> </u>
		avings and temporary			939.		939.	,	STATEMENT 2
		nerus and interest from securiti	es		322,304.	32	2,304.		STATEMENT 3
	5a Gross rent						7. 3. 3. 3.	 	
	b Net rental inc					······································			
•	6a Net gain or (oss) from sale of assets not o	n line 10	1	380,001.			· · · · · · · · · · · · · · · · · · ·	STATEMENT 1
Ž	b Gross sales assets on lin	price for all 7,60	4,758.						
Revenue	1	net income (from Part IV, line	2)			89	5,072.		
Œ	8 Net short-t	erm capital gain							
	9 Income mo								
	10a Gross sales								
	D Less Costo	1 good RECEIVE	U				~~~~		
	c Gross prof	tor (loss)	6 6			····		ļ	
			6 <u>S</u>		251,736.		3,092.		STATEMENT 4
		Thres 1 through 11		5,	260,036.	1,45	1,407.		
	13 Compensation	on of officers directors, truste over salanes and wages	e s et c	ļ	0.		0.	0.	0.
	1			ļ				ļ	
က္က		ans, employee benefits		<u> </u>					
nse	16a Legal fees			<u> </u>				 	
9	b Accounting		DMM E	 	150 227	1 2	4 274	 	24 062
ii)	c Other profe	essional fees 5	rmr 5	} <i>-</i>	159,237.	12	4,374.	0.	34,863.
Ě	17 Interest	CI	гмт 6		34,770.		4,708.	0.	
and Administrative Expenses	18 Taxes		IMI O	}	34,770.		4,700.	<u> </u>	62.
ij	· ·	n and depletion							ļ
b	20 Occupancy	ferences, and meetings		 				 	
þ		d publications		ļ				 	
gar	,		rmr 7		13,686.		3,686.	0.	0.
ţ	24 Total ones	ating and administrative	,		13/000.		3,000.		'
Operating	expenses	Add lines 13 through 23		:	207,693.	14	2,768.	0.	34,925.
ŏ	25 Contributio	ns, gifts, grants paid			299,050.				1,299,050.
		nses and disbursements							2,23,030.
	Add lines 2			1,5	506,743.	14	2,768.	0.	1,333,975.
		ie 26 from line 12	 -						
		enue over expenses and dist	ursements	3,	753,293.				
		nent income (if negative, e				1,30	8,639.		
		et income (if negative, ente	r-0-)					0.	
52350	11								

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	22,032,614.
2	Enter amount from Part I, line 27a	2	3,753,293.
3	Other increases not included in line 2 (itemize) ► COST_BASIS_ADJUSTMENT	3	185,168.
4	Add lines 1, 2, and 3	4	25,971,075.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 8	5	956,681.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	25,014,394.

Form **990-PF** (2015)

_	3	8	4	3	3	0	9	Page	:

(a) List and descr	and Losses for Tax on I ibe the kind(s) of property sold (e rehouse, or common stock, 200 st	g , real estate,		(b) How acquired P - Purchase D - Donation	(c) Date a		(d) Date sold (mo , day, yr)
1a							
b SEE ATTACHED	STATEMENTS				·		
<u>C</u>					 		
<u>d</u>					ļ		
<u>e</u>	(f) Depreciation allowed	(5) (5)			(h) C		
(e) Gross sales price	(or allowable)		st or other basis expense of sale	\		ain or (loss) (f) minus (
a		 					
b		 					
C							
d							
e 7,604,758.			6,962,590	0.			895,072
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69		(I) Gains (C		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (I), If any		col (k), but n Losses	ot less than (from col. (f	
a							
b							
C							
d							005 070
e				_ 			895,072
2 Capital gain net income or (net ca	pital loss) $\left\{egin{array}{l} ext{If gain, also enter-} \ ext{If (loss), enter-} \end{array} ight.$	er in Part I, line 0- in Part I, line	7 7	} 2			895,072
Net short-term capital gain or (los		and (6)					
If gain, also enter in Part I, line 8, on If (loss), enter -0- in Part I, line 8	column (c)) g		N/A	
	nder Section 4940(e) fo	r Reduced	Tax on Net	nvestment Ir	come		
Nas the foundation liable for the sect f "Yes," the foundation does not quality. Enter the appropriate amount in e		omplete this pa	rt				Yes X No
(a)	(b)	motifications son	ioro maning any on	(c)			(d)
Base periód years Calendar year (or tax year beginnin	Adjusted auglifung de	stributions	Net value of non	charitable-use asse	ts (Distribi col (b) divi	ùtión ratio ded by col (c))
2014		15,596.		26,534,88		038	
2013		23,746.	2	20,227,72	9.		.040724
2012		57,207.		17,092,57			.044300
2011		60,037.		15,310,28			.036579
2010	47	70,168.		13,038,59	8.		.036060
2 Total of line 1, column (d)					2		.195937
3 Average distribution ratio for the 5 the foundation has been in existen	•	on line 2 by 5,	or by the number o	of years	3		.039187
Enter the net value of noncharitable-use assets for 2015 from Part X, line 5				4	26	5,111,743	
5 Multiply line 4 by line 3					5	1	1,023,241.
5 Enter 1% of net investment income (1% of Part I, line 27b)				6		13,086	
7 Add lines 5 and 6					7	1	1,036,327
8 Enter qualifying distributions from	Part XII, line 4				8		1,333,975.
If line 8 is equal to or greater than See the Part VI instructions		e 1b, and comp	elete that part using	a 1% tax rate			
523521 11-24-15						Fr	orm 990-PF (2015

HINTZ FAMILY FUND, INC. P13619005

Form 990-PF (2015) C/O HINTZ CAPITAL MANAGEMENT	10(1) 10(0(1) 10(0(1)	26-384			Page 4
Part VI Excise Tax Based on Investment Income (Section 49		1948 - see	Instruc	tior	<u>1S)</u>
1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🗔 and					
Date of ruling or determination letter (attach copy of letter if n	necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1	13	, 0	<u>86.</u>
of Part I, line 27b	1				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	Others enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2		3	13	,0	86.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others enter -0-)	4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	13	,0	86.
6 Credits/Payments					
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 19,931.				
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c				
d Backup withholding erroneously withheld	6d				
7 Total credits and payments Add lines 6a through 6d		7	19	,9	<u>31.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ittached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	6	8,8	<u>45.</u>
11 Enter the amount of line 10 to be Credited to 2016 estimated tax	6,845 • Refunded ▶	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it participate or interveni	e in	'	es	No
any political campaign?			1a		<u>X</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur			1b		X
If the answer is "Yes" to $1a$ or $1b$, attach a detailed description of the activities	and copies of any materials publish	ed or		1	
distributed by the foundation in connection with the activities.				1	
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during				1	
(1) On the foundation \blacktriangleright \$ (2) On foundation manag		=		1	
e Enter the reimbursement (if any) paid by the foundation during the year for political expe	nditure tax imposed on foundation				
managers ▶ \$0 .				1	
2 Has the foundation engaged in any activities that have not previously been reported to th	e IRS?		2		<u>X</u>
If "Yes," attach a detailed description of the activities.				- 1	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing		or		1	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chair	_		3		<u>X</u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y	year?	/-	4a		X
b If "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 ye	ar?		5		X
If "Yes," attach the statement required by General Instruction T.				1	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either				
 By language in the governing instrument, or 					
 By state legislation that effectively amends the governing instrument so that no manda 	itory directions that conflict with the stat	e law		. 1	
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II, col. (c), and Part X	/	7	X	
				1	
8a Enter the states to which the foundation reports or with which it is registered (see instruction DE	ctions) -			1	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)			1	
of each state as required by General Instruction G? If "No," attach explanation	,,,		8b	\mathbf{x}	
9 is the foundation claiming status as a private operating foundation within the meaning of	f section 4942(i)(3) or 4942(i)(5) for cal	endar			
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,			9	İ	Х
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a sch			10		X
		F	orm 990 -	PF (

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HINTZ FAMILY FUND, INC. P13619005 26-3843309 C/O HINTZ CAPITAL MANAGEMENT Page 5 Form 990-PF (2015) Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of 11 section 512(b)(13)? If "Yes," attach schedule (see instructions) 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 12 If "Yes," attach statement (see instructions) X 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A Telephone no ▶8668885157 14 The books are in care of > JPMORGAN CHASE BANK, NA ZIP+4 ▶60603 Located at ▶ 10 S DEARBORN IL1-0117, CHICAGO, IL 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A **▶** 15 and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, 16 X securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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)? (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 termination of government service, if terminating within 90 days) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 1b section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected Х 10 before the first day of the tax year beginning in 2015? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years ▶ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A **2**b statement - see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose

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X

3b

4a

N/A

of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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SEE	STATEMENT 13	<u></u>	0.	0.	0
)	
		4]	}
		_)	
		 	 		
			}	}	
		<u> </u>			
2 Co	mpensation of five highest-paid employees (other than those in		enter "NONE."	T 7 10	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	NONE				
		<u></u>			
				ļ	
		<u> </u>	ļ	ļ	
		_			
			 		
		_		}	
		 	 	 	

Form 990-PF (2015)

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

<u>Form 990-PF (201</u>	Ξ١
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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	1	
 		
		}
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	al information such as the ced, etc	Expenses
1 N/A		
		
2		
3		
<u> </u>		
4		
D. + IV D. c. (D. D. L. L.)		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lir	ues 1 and 2	Amount
1 N/A	es i and z	Anount
1		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.

26-3843309 Form 990-PF (2015) C/O HINTZ CAPITAL MANAGEMENT Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 15,967,546. a Average monthly fair market value of securities 1 a 2,091,733. b Average of monthly cash balances 1b 8,450,105.c Fair market value of all other assets 10 26,509,384. d Total (add lines 1a, b, and c) 1đ e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 3 Subtract line 2 from line 1d 397,641. 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 26,111,743. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 1,305,587. 6 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \blacktriangleright and do not complete this part) 1,305,587. 1 Minimum investment return from Part X, line 6 13,086. Tax on investment income for 2015 from Part VI, line 5 2a b Income tax for 2015 (This does not include the tax from Part VI) 2b 13,086. 2c c Add lines 2a and 2b 1,292,501. 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 1,292,501. 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 ,292 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		· · · · · · · · · · · · · · · · · · ·
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,333,975.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a 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	1,333,975.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income Enter 1% of Part I, line 27b	5	13,086.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,320,889.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the foundation qualifies for	the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

1. Distributible amount for 2015 from Part XI, Island 2 2. Lodesholdes recent, day, as of the end of 2015 a Enter amount for 2014 only 1 or 10tal for part years 2 3. Excess distributions carryover, if any, to 2015 a From 2010 b From 2011 c From 2010 c From 2011 c From 2011 c From 2012 d From 2014 c From 2015 c From 2014 c From 2016 c From 2	•	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2 Lineas busined in Carly and i	1 Distributable amount for 2015 from Part XI,				
2 Lindastobusion receives, 1 any, as of the word of 2016 Entier amount for 2014 only 5 Total for prior years 0 . 3 Excess distributions carryover, if any, to 2015 a From 2010 From 2011 From 2011 From 2014 From 2013 From 2014 1 Total of time 3s through a 4 Qualifying distributions for 2015 from Part XR), time 4 P S 1, 233 3, 975 3 Applied to 2014, but not more than line 2s 3 Applied to undistribution forceme of prior years (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions out of copus (Election required - see instructions) C Treated as distributions as mount distributed out of copus C Election required - see instructions C Treated as distributions out of copus C Election required - see instructions C Election required - see instructions C C Election required - see instructions C C Election required - see instructions C Election representation of the copus	· 1				1,292,501.
3 Excess distributions carryover, if any, to 2015 a From 2010 b From 2011 c From 2013 e From 2014 1 Total of lines 3a brough e 4 Qualifying distributions for 2015 from Part XII, line 4 № \$ 1,233,975. Applied to 2014 by the ton imer than line 2a Applied to undistributed income of prior years (Rection required - see instructions) c Tosafet as distributions out of copus (Rection required - see instructions) d Applied to 2015 distributible amount e Remaining amount distributed out of corpus (Rection required - see instructions) d Applied to 2015 distributible amount e Remaining amount distributed out of corpus (Rection required - see instructions) d Applied to 2015 distributible amount e Remaining amount distributed out of corpus (Rection required - see instructions) d Applied to 2015 distributible amount e Remaining amount distributed out of corpus (Rection required - see instructions) d Applied to 2015 distributible amount e Remaining amount distributed out of corpus (Rection required - see instructions) d Prior years' undistributed microme Subtract line 4 of from line 2 instructions d Corpus Ass line 21, 4s, and 4e. Subtract line 4 from line 21 are assistance in a control of prior years' undistributed microme for vehicle in one of the section 49 27(2) tax has been previously assessed Subtract line 2016 A mounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(6) of 4947(b)(3) (Festion may be required - see instructions) B Excess from 2011 Lines from 2016 Excess from 2015 Excess from 2014 Excess from 2016 Excess from 2014	2 Undistributed income, if any, as of the end of 2015				- 7
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corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014					
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014					
may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014					
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014		0.			
not applied on line 5 or line 7 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014	· · · · · · · · · · · · · · · · · · ·				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014	· · · · · · · · · · · · · · · · · · ·	0.			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014	·				'
10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014	- 4	0.			
a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014					
b Excess from 2012 c Excess from 2013 d Excess from 2014	i l				
t Excess from 2013 t Excess from 2014					
d Excess from 2014	<u> </u>				
					

523581 11-24-15

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

Page 11

C/O HINTZ CAPITAL MANAGEMENT

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AMERICAN ENTERPRISE INSTITUTE EDUCATIONAL WASHINGTON, DC 100,000. AMERICAN ENTERPRISE INSTITUTE EDUCATIONAL 100,000. WASHINGTON, DC BOSTON UNIVERSITY CENTER FOR PSYCHIATRIC REHABILITATION MEDICAL CLINICAL BOSTON, MA 25,000. BROAD FUTURES CHILDREN'S PROGRAM WASHINGTON, DC 5,000. BROOKLINE COMMUNITY MENTAL HEALTH CENTER MEDICAL CLINICAL BROOKLINE, MA 2,500. SEE CONTINUATION SHEET(S) ➤ 3a Total 1,299,050. b Approved for future payment NONE **▶** 3b Total 0.

V1_Λ	Analysis	of Income	-Producina	Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		y section 512, 513, or 514	(e)
and great arrivation arrivation individual	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					
b					
C					
d	1 1				
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	939.	
4 Dividends and interest from securities			14	322,304.	
5 Net rental income or (loss) from real estate		`			, ,,,-, ,,-
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	251,736.	
8 Gain or (loss) from sales of assets other					
than inventory			18	880,001.	
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.	1,454,980.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	1,454,980.
/See worksheet in line 13 instructions to verify calculations	1				

Part X	VI-B Relationship of Activities to the Accomplishment of Exempt Purposes
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	NOT APPLICABLE
 .	

Form **990-PF** (2015)

Part				nd Relationships With Nonc	haritable		aye ra
1 Did	the organization directly or indir	rectly engage in any of the following	ng with any other organization	n described in section 501(c) of		Yes	No
)(3) organizations) or in section 5					
a Tra	insfers from the reporting founda	ation to a noncharitable exempt o	rganization of				
(1)	Cash				1a(1)	<u> </u>	X
(2)	Other assets				1a(2)	Γ	X
b Oth	ner transactions						
(1)	Sales of assets to a noncharital	ble exempt organization			16(1)		X
(2)	Purchases of assets from a nor	ncharitable exempt organization			16(2)		X
(3)	Rental of facilities, equipment,	or other assets			1b(3)		X
(4)	Reimbursement arrangements				1b(4)		X
(5)	Loans or loan guarantees				1b(5)		X
(6)	Performance of services or me	mbership or fundraising solicitati	ons		1b(6)		X
c Sh	aring of facilities, equipment, ma	iling lists, other assets, or paid en	nployees		10		X
d Ifti	he answer to any of the above is	"Yes," complete the following sch	edule Column (b) should alw	ays show the fair market value of the goo	ds, other ass	sets,	
or	services given by the reporting fo	oundation. If the foundation received	ved less than fair market value	e in any transaction or sharing arrangeme	nt, show in		
col	umn (d) the value of the goods,	other assets, or services received					
(a) Line n	o (b) Amount involved	(c) Name of noncharitable	le exempt organization	(d) Description of transfers, transactions,	and sharing ar	rangeme	nts
		N/A		<u> </u>			
				<u> </u>			
				<u> </u>			
			_ ,				
				ļ			
				ļ			
				<u></u>			
2a ist	he foundation directly or indirect	tly affiliated with, or related to, one	e or more tax-exempt organiz	ations described			_
	' '	r than section 501(c)(3)) or in sec	ction 527?		Yes	X] No
<u>b</u> If "	Yes," complete the following sch						
	(a) Name of org	anization	(b) Type of organization	(c) Description of relation	onship		
	N/A		 				
			 				
			·				
			 				
				-,,			
0:				statements, and to the best of my knowledge ation of which preparer has any knowledge	May the IRS of return with the	iscuss t	.his
Sign Here		DD A +	111/11/11		shown below	(see inst	ir)?
Here	- and	No K. Then	1/13/16	7.00	X Yes	L	J No
	Signature of officer or trustee		Date	Title Check If PT	TAL		
	Print/Type preparer's na	ame Presarer's s	orgina grid	Date Check if PT	HA		
Paid	TOCEDE EXT	ANCA I	all al	. / 4/1 /	200020	605	
Prepa	JOSEPH FAL arer Firm's name ► UHY		NO WAY		200029 -15554		
Use (ADVIOUS NY	ing.	Firm's EIN ► 14-	-13334	29	
U56 (85 AVENUE OF TH	HE AMERICAS,	38 FL			
	Times addiess - II	OD WARMORAOL IL	TE WITCHO!	70 T.H			

Phone no 212-381-4700

NEW YORK, NY 10036

2-story brid	describe the kind(s) of property so ck warehouse, or common stock, 2	d, e g , real estate, 00 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a JP MORGAN #P136	19005		P		
b DISPOSITION OF			P		
c DISPOSITION OF		FFSHORE FD, LTD	P		
d CAPITAL GAINS I	DIVIDENDS				
е				 	
_f				 	
g					
h			 		
<u> </u>			 	 	
					
<u>k</u>				 	
			- 		
<u>m</u>			- 	 	
n				 	
0	(f) Decreasition allowed	(g) Cost or other basis		Corp or (loca)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale	(ii,) Gain or (loss) ilus (f) minus (g)	
a	,				243,681
a b 1,255,912.		1,000,000.	 		255,912
c 550,445.		400,000.			150,445
d 173,234.		200,000			173,234
e					
f					
g					
h					
1					
k					
1					
m					
n					
0		L			
Complete only for assets showing	gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	ses (from col (h))	
(i) FM V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (I)	Gains (excess of	of col (h) gain over ot less than "-0-")	COI (k),
(1) 111 1 23 01 12/01/00	as of 12/31/69	over col (j), if any			
a					243,681
b		 		· · · · · · · · · · · · · · · · · · ·	255,912
C		 	. –		150,445
<u>d</u>		 		 	173,234
<u>e</u>					
f					
9					
<u>h</u>					
1		 			
k		 			
K I					
m		 			
n					
0					
	.,	D. A. I. I 7			
2 Capital gain net income or (net cap	oital loss) { If gain, also enter for the loss, enter for the loss is the loss	r in Part I, line 7		8	895,072.
3 Net short-term capital gain or (loss		\ 1			
If gain, also enter in Part I, line 8, c	olumn (c)	}	1		
If (loss), enter "-0-" in Part I, line 8] 3		N/A	

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient BROOKLINE COMMUNITY MENTAL HEALTH CENTER MEDICAL CLINICAL BROOKLINE, MA 2,500. CANNON SCHOOL EDUCATIONAL CONCORD, NC 5,000. CANNON SCHOOL EDUCATIONAL CONCORD, NC 20,000. CATO INSTITUTE RELIEF OF WASHINGTON, DC DISADVANTAGED 25,000. CENTER FOR INDIVIDUAL RIGHTS RELIEF OF DISADVANTAGED WASHINGTON, DC 5,000. CHATHAM EDUCATION FOUNDATION EDUCATIONAL CHATHAM, NJ 2,000. CHATHAM TOWNSHIP FIRE DEPARTMENT COMMUNITY SERVICE CHATHAM, NJ 2,500. CHATHAM UNITED METHODIST CHURCH COMMUNITY SERVICE CHATHAM NJ 2,000. CITIZENS' COMMITTEE FOR THE CHILDREN OF NY CHILDREN'S PROGRAM NEW YORK, NY 10,000. CITIZENS' COMMITTEE FOR THE CHILDREN CHILDREN'S PROGRAM OF NY NEW YORK, NY 10,000. Total from continuation sheets 1,066,550.

3 Grants and Contributions Paid During the Y	· , · · · · · · · · · · · · · · · ·			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
CITIZENS' COMMITTEE FOR THE CHILDREN	}			
OF NY			CHILDREN'S PROGRAM	
NEW YORK, NY				5,00
TORK, NI			 	3,00
CITIZENS' COMMITTEE FOR THE CHILDREN			CHILDREN'S PROGRAM	
OF NY			CHILDREN S PROGRAM	
NEW YORK, NY				5,00
CLASSICAL AMERICAN HOMES PRESERVATION				
rrust			MUSEUM AND CULTURAL	
NEH VODY NV				2 00
NEW YORK, NY				3,00
COOPER-HEWITT SMITHSONIAN DESIGN				
MUSEUM			MUSEUM AND CULTURAL	
NEW YORK, NY				25,00
DAVIDSON UNITED METHODIST CHURCH				
			INTERRELIGIOUS	
DAVIDSON, NC			UNDERSTANDING	8,00
DBSA-BOSTON			MEDICAL CLINICAL	
BELMONT, MA				2,00
DREW UNIVERSITY				
			EDUCATIONAL	
MADISON, NJ			 	3,00
FOUNTAIN HOUSE			MEDICAL CLINICAL	
NEW YORK, NY			MEDICAL CHINICAL	1,00
	1			
HANDEL AND HAYDN SOCIETY				
			MUSEUM AND CULTURAL	
BOSTON, MA	 			5,00
HOSPITAL FOR SPECIAL SURGERY				
NEW YORK, NY			MEDICAL CLINICAL	50,00
Total from continuation sheets				

3 Grants and Contributions Paid During the				l———
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
имнро			}	
RUTHERFORD, CA			MEDICAL CLINICAL	2,00
JERICHO PROJECT				
NEW YORK, NY			COMMUNITY SERVICE	20,00
KAPPA ALPHA THETA FOUNDATION INDIANAPOLIS IN			EDUCATIONAL	5,00
,				3,000
KAPPA ALPHA THETA FOUNDATION			EDUCATIONAL	
INDIANAPOLIS, IN				5,00
LAKE NORMAN YMCA			COMMUNITY SERVICE	
CORNELIUS, NC	+			5,000
LIBERTY CORNER PRESBYTERIAN CHURCH			INTERRELIGIOUS	
LIBERTY CORNER, NJ			UNDERSTANDING	2,000
LUPUS FOUNDATION OF AMERICA, INC.				
WASHINGTON, DC			MEDICAL CLINICAL	300
MANHATTAN INSTITUTE FOR POLICY RESEARCH			COMMUNITY SERVICE	
NEW YORK, NY				20,000
MANHATTAN INSTITUTE FOR POLICY			COMMUNITY SERVICE	
NEW YORK, NY				30,000
MANHATTAN INSTITUTE FOR POLICY RESEARCH			COMMUNITY SERVICE	
NEW YORK, NY	}			20,000

3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MCLEAN HOSPITAL				
BELMONT, MA			MEDICAL CLINICAL	100,00
MCLEAN HOSPITAL			MEDICAL CLINICAL	
BELMONT, MA				100,00
MCLEAN HOSPITAL				
BELMONT, MA			MEDICAL CLINICAL	150,00
MCLEAN HOSPITAL BELMONT MA			MEDICAL CLINICAL	25,00
MCLEAN HOSPITAL - COLE CENTER			MEDICAL CLINICAL	
BELMONT, MA			MDSTCAD CDENTCAD	1,00
MINNESOTA OVARIAN CANCER ALLIANCE,			MEDICAL CLINICAL	
MINNEAPOLIS, MN				3,00
MORRISTOWN MEDICAL CENTER (MORRISTOWN				
MEMORIAL HOSPITAL)			MEDICAL CLINICAL	
MORRISTOWN, NY				25,00
NATIONAL PARK FOUNDATION				
WASHINGTON, DC			COMMUNITY SERVICE	5,00
ICSU STUDENT AID ASSOCIATION				
RALEIGH, NC			EDUCATIONAL	5,00
NEW YORK HARBOR SAILING FOUNDATION,				
INC.			EDUCATIONAL	
BLAIRSTOWN, NJ Total from continuation sheets				10,00

HINTZ FAMILY FUND, INC. P13619005 C/O HINTZ CAPITAL MANAGEMENT

26-3843309

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
IEW YORK HISTORICAL SOCIETY			MUSEUM AND CULTURAL	
NEW YORK, NY				25,00
NEW YORK HISTORICAL SOCIETY				
NEW YORK, NY			MUSEUM AND CULTURAL	25,00
NEW YORK PHILHARMONIC	:		MUSEUM AND CULTURAL	
NEW YORK, NY				1,50
NEW YORK PRESBYTERIAN FUND, INC.				
NEW YORK, NY			MUSEUM AND CULTURAL	5,0
NEW YORK THEATER BALLET			MUSEUM AND CULTURAL	
NEW YORK, NY				3,00
NORTH CAROLINA STATE UNIVERSITY FOUNDATION			EDUCATIONAL	
RALEIGH, NC	_	_		25,00
OPERATION BLING			MEDICAL CLINICAL	
NEW PROVIDENCE, NJ				5,00
OPERATON SMILE				
VIRGINIA BEACH, VA			MEDICAL CLINICAL	10,00
PREP FOR PREP			EDUCATIONAL	
NEW YORK, NY				2,50
PRINCETON UNIVERSITY				
PRINCETON, NJ		_	EDUCATIONAL	2,00
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor PRINCETON UNIVERSITY EDUCATIONAL PRINCETON, NJ 5,000. QUEENS UNIVERSITY OF CHARLOTTE EDUCATIONAL CHARLOTTE, NC 4,000. SENIOR SERVICES OF THE CHATHAMS COMMUNITY SERVICE 250. CHATHAM, NJ SMITHSONIAN INSTITUTION MUSEUM AND CULTURAL 105,000. WASHINGTON, DC SMITHSONIAN INSTITUTION MUSEUM AND CULTURAL 60,000. WASHINGTON, DC SMITHSONIAN NATIONAL AIR & SPACE MUSEUM MUSEUM AND CULTURAL 1,000. WASHINGTON, DC STREET SQUASH, INC. COMMUNITY SERVICE NEW YORK, NY 10,000. THE JERICHO PROJECT COMMUNITY SERVICE 10,000. NEW YORK, NY THE JERICHO PROJECT COMMUNITY SERVICE 1,000. NEW YORK, NY THE ROCKEFELLER UNIVERSITY EDUCATIONAL 1,000. NEW YORK, NY Total from continuation sheets

Part XV **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to any foundation manager Amount status of Name and address (home or business) recipient or substantial contributor WAKE FOREST UNIVERSITY EDUCATIONAL WINSTON-SALEM, NC 2,000. WEILL CORNELL MEDICAL COLLEGE MEDICAL CLINICAL NEW YORK, NY 1,000. WERS MUSEUM AND CULTURAL BOSTON, MA 3,000. YALE UNIVERSITY EDUCATIONAL NEW HAVEN, CT 10,000. YALE UNIVERSITY EDUCATIONAL NEW HAVEN, CT 25,000. Total from continuation sheets

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, 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

2015

Employer identification number

HINTZ FAMILY FUND, INC. P13619005 C/O HINTZ CAPITAL MANAGEMENT

26-3843309

Organization type (check o	ne):
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
•	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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, line 1. Complete Parts I and II.
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for truelty to children or animals. Complete Parts I, II, and III.
year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year
but it must answer "No" on certify that it does not meet	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
HINTZ FAMILY FUND, INC. P13619005
C/O HINTZ CAPITAL MANAGEMENT

Employer identification number

26-3843309

2/0 11	INTE CAPITAL MANAGEMENT		7-3043307
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HINTZ 2008-2017 NON-GRANTOR CLAT C/O JP MORGAN CHASE BANK, NA MORRISTOWN, NJ 07960	\$1,166,709.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HINTZ 2008-2020 NON-GRANTOR CLAT C/O JP MORGAN CHASE BANK, NA MORRISTOWN, NJ 07960	\$ 914,987.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	EDWARD R. HINTZ 140 SUNSET DRIVE CHATHAM, NJ 07928	\$1,723,359.	Person X Payroil 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) <u>No.</u>	(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 Noncash (Complete Part II for noncash contributions.)

Name of organization

HINTZ FAMILY FUND, INC. P13619005

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	1,203 SHARES OF ALPHABET INC.	-	
		\$ 905,859	12/09/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	6,000 SHARES OF VISA INC.	-	
		\$ 470,820.	12/09/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	1,500 SHARES OF TRANSDIGM GROUP INC.	-	
		\$ 346,680.	12/09/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - -	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		-	}

523453 10-26-15

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

HINTZ FAMILY FUND. INC. P13619005

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\sim	10	CITATION OF	(A 1	TIMIT	MARTA	CTEMTENTO

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L	O	╌.	э с	34			v	7

Employer identification number

	<u>NTZ CAPITAL MANAGEMENT</u>		
Part III	Exclusively religious, charitable, etc., contine year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	ributions to organizations described in a columns (a) through (e) and the followings, chantable, etc., contributions of \$1,000 or less	section 501(c)(7), (8), or (10) that total more than \$1,000 for
() 5 1 -	Use duplicate copies of Part III if addition	al space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	_	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
-			

FORM 990-PF	GAIN OR	(LOSS)	FROM SALE	OF	ASSETS		STA	TEMENT	1
(A) DESCRIPTION OF PROPE	ERTY				MANNER ACQUIRED	DA ¹ ACQU		DATE S	OLD
JP MORGAN #13619-30-	-2					VARI	ous	08/25	/15
(B) GROSS SALES PRICE	cos	C) T OR BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	С.	GATN	(F)	s
104,65		125,000		0.		0.		-20,3	
(A) DESCRIPTION OF PROPE	ERTY				MANNER CQUIRED	DA' ACQU		DATE S	OLD
JP MORGAN #13619-30-	-2								
(B) GROSS SALES PRICE	cos	C) T OR BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	s
1,725,02	25. 1,	764,862	•	0.		0.		-39,8	37.
(A) DESCRIPTION OF PROPE	ERTY				MANNER CQUIRED	DA!		DATE SO	OLD
JP MORGAN #13619-40-	-1					VARIO	ous	08/25	/15
(B) GROSS SALES PRICE	cos	C) T OR BASIS	(D) EXPENSE SALE	OF	(E)	с.		(F) OR LOSS	s
104,65	53.	125,000	•	0.		0.		-20,34	47.

DESCRIPT	(A) ION OF PROPERTY				MANNER CQUIRED	DA ACQU	TE IRED	DATE SOLD
JP MORGA	N #13619-40-1	_						
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LOSS
_	1,483,793.	1,522,620.		0.		0.		-38,827.
DESCRIPT	(A) ION OF PROPERTY				MANNER CQUIRED	DA ACQU		DATE SOLD
FIDELITY	676-199480					VARI	ous	12/15/15
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	c.		(F) OR LOSS
_	224,643.	116,744.		0.	<u> </u>	0.		107,899.
DESCRIPT	(A) ION OF PROPERTY	_			MANNER CQUIRED	DA ACQU		DATE SOLD
FIDELITY	676-210113							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPREG	c.		(F) OR LOSS
	75,333.	82,865.		0.		0.		-7,532.
DESCRIPT	(A) ION OF PROPERTY				MANNER CQUIRED	DA ACQU		DATE SOLD
FIDELITY	676-210113	_						
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPREC	c.		(F) OR LOSS
_	402,413.	326,795.		0.		0.		75,618.

DESCRIPT	(A) ION OF PROPERTY			I	MANNER ACQUIRED	DA ACQU	TE IRED	DATE	SOLD
FIDELITY	676-199538	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C.		(F)	oss
	249,941.	239,422.		0.	,	0.		10	,519.
DESCRIPT	(A) ION OF PROPERTY			I	MANNER ACQUIRED	DA ACQU		DATE	SOLD
FIDELITY	676-199538	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LO	oss
	456,698.	469,179.		0.	•	0.		-12	481.
DESCRIPT	(A) ION OF PROPERTY			I	MANNER ACQUIRED	DA ACQU		DATE	SOLD
PERSHING	N4Q-519693	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LO	oss
	2,774.	2,798.		0.	•	0.			-24.
DESCRIPT	(A) ION OF PROPERTY			Į	MANNER ACQUIRED	DA ACQU		DATE	SOLD
PERSHING	N4Q-519693	_		_					
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	e.		(F) OR LO)SS
	55,467.	37,401.		0.	•	0.		18,	066.

DESCRIPT	(A) ION OF PROPERTY				MANNER CQUIRED	DA'. ACQU		DATE	SOLD
PERSHING	RCG-009579	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	C.	GAIN	(F)	oss
	95,638.	127,697.		0.		0.		-32	,059.
DESCRIPT	(A) ION OF PROPERTY				MANNER CQUIRED	DA! ACQU		DATE	SOLD
PERSHING	RCG-009579	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	oss
	644,136.	637,278.		0.		0.		6	,858.
DESCRIPT	(A) ION OF PROPERTY	_			MANNER CQUIRED	DAT ACQUI		DATE	SOLD
K-1 - RR	E LEADERS FUND,	LP		PUI	RCHASED				
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
	SALES PRICE	OTHER BASIS	SALE		DEPRE	c.	GAIN	OR LO	oss
	0.	0.		0.		0.		29,	669.
DESCRIPT	(A) ION OF PROPERTY	_			MANNER CQUIRED	DAT ACQUI		DATE	SOLD
JP MORGA	N #P13619005	_		PUI	RCHASED				
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
_	SALES PRICE	OTHER BASIS	SALE		DEPRE	c. —— -	GAIN	OR LO	oss ———
	0.	0.		0.		0.		-20,	446.

(A) DESCRIPTION OF PROPERTY				ANNER QUIRED	DA ACQU	TE IRED	DATE SOLD
JP MORGAN #P13619005	_		PUR	CHASED			
(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)
SALES PRICE	OTHER BASIS	SALE		DEPRE	c	GAIN	OR LOSS
0.	0.		0.		0.		243,681.
(A) DESCRIPTION OF PROPERTY	_			ANNER QUIRED		TE IRED	DATE SOLD
DISPOSITION OF GRAHAM G	LOBAL INVESTMEN	T FD II	PUR	CHASED			
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	С.		(F) OR LOSS
1,255,912.	1,000,000.		0.		0.		255,912.
(A) DESCRIPTION OF PROPERTY				ANNER QUIRED	DA ACQU	TE IRED	DATE SOLD
DISPOSITION OF BROADWAY	GATE OFFSHORE	FD, LTD	PUR	CHASED			
(B)	(C)	(D)	0.7	(E)			(F)
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF.	DEPRE	С.	GAIN	OR LOSS
550,445.	400,000.		0.		0.		150,445.
CAPITAL GAINS DIVIDENDS	FROM PART IV						173,234.
TOTAL TO FORM 990-PF, P	ART I, LINE 6A						880,001.

FORM 990-PF	INTEREST	ON SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	2

SOURCE		(A) REVENUE PER BOOK	NE S	(B) ET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
JP MORGAN #13619-00-5 JP MORGAN #13619-30-5 JP MORGAN #13619-40-5	2	816. 52. 71.		816. 52. 71.	816. 52. 71.
TOTAL TO PART I, LINI	E 3	9	39.	939.	939.
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM S	SECURITIES	STATEMENT 3
	CROSS	CAPITAL	(A)	, ,	(C)

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY					
676-199480	63.	19.	44.	44.	44.
FIDELITY	15.	0.	15.	15.	15.
676-199481 FIDELITY	15.	0.	13.	15.	13.
676-199538	25,167.	9.	25,158.	25,158.	25,158.
FIDELITY		_			
676-210113 JP MORGAN	2,588.	1.	2,587.	2,587.	2,587.
#13619-30-2	163,974.	91,318.	72,656.	72,656.	72,656.
JP MORGAN		·	·	•	•
#13619-40-1	147,082.	81,887.	65,195.	65,195.	65,195.
JP MORGAN #P13619005	61,357.	0.	61,357.	61,357.	61,357.
K-1 - ARROWPOINT	01,337.	0.	01,337.	01,337.	01,337.
ACQUISITION					
VEHICLE SPC	63,624.	0.	63,624.	63,624.	63,624.
PERSHING N4Q-519693	25,188.	0.	25,188.	25,188.	25,188.
PERSHING	23,100.	•	25,100.	25,100.	25,100.
RCG-009579	6,480.	0.	6,480.	6,480.	6,480.
TO PART I, LINE 4	495,538.	173,234.	322,304.	322,304.	322,304.

FORM 990-PF	OTHER	INCOME		STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME FROM BLACKSTONE FEDERAL TAX REFUND OTHER INCOME FROM GOLUB CAPIT OTHER INCOME FROM VALUE ACT COTHER INCOME FROM PERSHING	'AL IX	47,572. 5,932. 52,053. 133,467.	•	0. 0. 0.
RCG-009579		12,712.	0.	0.
TOTAL TO FORM 990-PF, PART I, LINE 11		251,736.	233,092.	0.
FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES TRUSTEE FEES DELAWARE ANNUAL FEES	89,642 69,464 131	. 34,732	. 0.	. 34,732.
TO FORM 990-PF, PG 1, LN 16C	159,237	. 124,374	. 0.	34,863.
FORM 990-PF	ТА	XES	<u> </u>	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES FEDERAL EXCISE TAX PAID DELEWARE TAX	4,708 30,000 62	. 0	. 0.	0.
TO FORM 990-PF, PG 1, LN 18	34,770	. 4,708	. 0.	62.

	OTHER E	XPENSES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS					
PORTFOLIO DEDUCTIONS THRU K-1S K-1 RRE LEADERS FUND -	11,107.				0.	
INVESTMENT INTEREST EXP FOREIGN CUSTODY FEES INTEREST EXPENSE FOR LOAN	325. 416. 1,838.	416.		0.	0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	13,686.	13,686.		0.	0.	
FMV OF ASSETS CONTRIBUTED IN	EXCESS OF B	ASIS		956,68	1	
TOTAL TO FORM 990-PF, PART II	I, LINE 5			956,68		
TOTAL TO FORM 990-PF, PART II FORM 990-PF	CORPORAT	E STOCK				
		во	OK VALUE	956,68 STATEMENT FAIR MARKET VALUE	9	
FORM 990-PF DESCRIPTION	CORPORAT	BO	8,475,971.	956,68 STATEMENT FAIR MARKET VALUE 10,342,48	9	
FORM 990-PF	CORPORAT	BO	· · · · · · · · · · · · · · · · · · ·	956,68 STATEMENT FAIR MARKET VALUE	9	
FORM 990-PF DESCRIPTION	CORPORAT	BO	8,475,971.	956,68 STATEMENT FAIR MARKET VALUE 10,342,48	9	
FORM 990-PF DESCRIPTION TOTAL TO FORM 990-PF, PART II	CORPORAT	BO BO	8,475,971.	956,68 STATEMENT FAIR MARKET VALUE 10,342,48	9 4. 4.	
FORM 990-PF DESCRIPTION TOTAL TO FORM 990-PF, PART II FORM 990-PF	CORPORAT	BO BO	8,475,971. 8,475,971.	956,68 STATEMENT FAIR MARKET VALUE 10,342,48 10,342,48 STATEMENT FAIR MARKET	9 4. 4.	

FORM 990-PF O	THER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
	COST	1,800,221.	2,146,331.
TOTAL TO FORM 990-PF, PART II, L	INE 13	1,800,221.	2,146,331.
FORM 990-PF	OTHER ASSETS		STATEMENT 12
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
VALUEACT CAPITAL PTRS II, LP BROADWAY GATE OFFSHORE FD, LTD SEG PARTNERS OFFSHORE LTD. GRAHAM GLOBAL INVESTMENT FD II GOLUB CAPITAL PARTNERS INTL IX ARROWPOINT PARTNERSHIP BRENHAM CAP. OFFSHORE FUND LTD GOLUB CAPITAL PARTNERS INTL X PRINCE ST INSTITUTIONAL OFFSHORE RRE LEADERS FUND LP	1,000,000. 400,000. 750,000. 1,000,000. 325,000. 708,259. 0. 0.	1,133,467. 0. 1,665,000. 0. 850,000. 708,872. 1,000,000. 375,000. 1,300,000. 412,124.	1,660,733. 27,522. 2,160,362. 0. 866,597. 691,115. 981,322. 375,000. 1,122,867. 510,055.
TO FORM 990-PF, PART II, LINE 15	4,183,259.	7,444,463.	8,395,573.

	VIII - LIST OF OFFICERS, DIRECTORS RUSTEES AND FOUNDATION MANAGERS		STATEMENT 13	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
EDWARD R HINTZ 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	PRESIDENT 1.00	0.	0.	0.
HELEN S HINTZ 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	VIP & TREASURER 1.00	0.	0.	0.
VIRGINIA HINTZ REMMEY 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	SECRETARY 1.00	0.	0.	0.
HUME R STEYER 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	ASST. SECRETARY 1.00	0.	0.	0.
KATHRYN S HINTZ 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	MEMBER 1.00	0.	0.	0.
ELIZABETH HINTZ 360 MOUNT KIMBLE MORRISTOWN, NJ 07960	MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	EE 6, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 14 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

C/O JP MORGAN CHASE BANK, N.A. 270 PARK AVENUE NEW YORK, NY 10017

FORM AND CONTENT OF APPLICATIONS

N/A

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

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