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### Form **990-PF**

### **Return of Private Foundation**

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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

A Employee destinification number 27 THOTHY MAGUIRE FOUNDATION			lendar year 2015 or tax year beginning		, 2015, and end		, 20
Number and street (or IP O box number if mail a not delivered to street address)	١	Name	of foundation			A Employer ident	ification number
STONER BRIDGE   Cally or frown, state or province, country, and ZIP or foreign postal code	_	TIM	OTHY MAGUIRE FOUNDATION			27-08707	30
City or town, state or provisors, country, and ZIP or foreign postal code  WEST CONSHOROCKEN, PA 19428  G Check all that apply Initial return Amended return Amended return Amended return Amended return Section 4947(a)(1) nonexempt charitable trust Fair market value of all assesses at Jacounting method (X cash) Account of the control o	ı	Numbe	er and street (or P O box number if mail is not delivered	to street address)	Room/suite	e B Telephone num	ber (see instructions)
City or town, state or provisors, country, and ZIP or foreign postal code  WEST CONSHOROCKEN, PA 19428  G Check all that apply Initial return Amended return Amended return Amended return Amended return Section 4947(a)(1) nonexempt charitable trust Fair market value of all assesses at Jacounting method (X cash) Account of the control o		_					
WEST CONSHOROCKEN, PA 19428   C   Learning to agriculture   C	_					(484) 3	44-5002
WEST CONSHOHOCKEN, PA 19428  G Check all that apply Initial return Amended return Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation end of year (from Part It. col (c), line Other (specify) (1) (a) (a) (a) (a) (b) (b) (b) (c) (a) (a) (c) (b) (c) (a) (c) (c) (a) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	•	City or	town, state or province, country, and ZIP or foreign po-	ital code		6 %	
Check tall that apply							
Final return   Address change   Name change   Seeking organization   Comparison	_		<del></del> _				
Address change	G	Che	'' ' <del>                                 </del>		ormer public chai	2 orongin organia	
H Check type of organization   X Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charable trust   Other taxable private foundation   Section 4947(a)(1) nonexempt charable trust   Other taxable private foundation   First market value of all assests at   JACCOUNTING method   X Cash   Accrual   end of year (from Part II, col (c), Inn   Accrual   from 16)   X 233, 124.   Part   Analysis of Revenue and Expenses method   Other (specify)   Analysis of Revenue and Expenses method   codum (a) fees marketones)			<del></del>	<del>  </del>			
Section 4947(a)(1) nonexempt charatable trust    Colher taxable private foundation   X   Cash   Accrual   Far market value of all assets at end of year (from Part II, col (c), line   Other (specify)   Part Loolura (d) must be on cash basis)    Part I Analysis of Revenue and Expenses (from a part to column (d) must be on cash basis)   Part I Analysis of Revenue and Expenses (from a part to column (d) must be on cash basis)   Collect   Adjusted net income   Ad	_	<u> </u>			- <b>1</b> -1		
Fair market value of all assets at   Accounting method   X   Cash   Accrual   For market value of var (from Part II). Conference (c) (c), Inne   Counting (must be on cash bass)	'n	$\neg$				E If private foundat	ion status was terminated
end of year (from Part II, col. (c), Ine   Other (specify)   Part column (d) must be on cash basis )  Part II Analysis of Revenue and Expenses (The narry not recessarily equal the amounts in column (a) gees instructions)   Other representations of column (a) gees instructions of column (a) gees instructions (c) (d) Distructions	Ţ			· · · · · · · · · · · · · · · · · · ·		under section 507	(b)(1)(A), check here . P
16	'				Accruai	!	
Part   Interest of Revenue and Expenses (The Interest of Amounts in columns (b) (c) and (c) may not necessarily equal the amounts in columns (b) (c) and (c) may not necessarily equal the amounts in columns (c) (c) and (c) (c) (c) and (c)			200 101		210.1	under section 507	(b)(1)(B), check here . >
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b) and necessarily equal the amounts in column (a) (see instructions) 41, 561.  1 Controlled in the foundation is not required to attach Sch. 8	r.				,,, 		(d) Disbursements
may not necessarily equal me amounts in column (a) (see instructions) books  1 Controlutions, gits, gamts, etc. received glates bedeute) 1. 41, 561.  2 Check		ant	total of amounts in columns (b), (c), and (d)		·		for charitable
1   Contributions_gits_parties_etcreceived_(intach schedule)   2   Creek					ıncome	income	
2 Check ▶	_	1		41,561.			(122 140.0 0)
1   1   2   2   2   2   2   2   2   2			Check if the foundation is not required to				<u> </u>
A Dividends and interest from securities   Sa Gross rents   Sa Gross rents   Sh Net rental income or (loss)   Sa Net gain or (loss) from sale of assets not on ine 10   Sc , 439   Sassets on line for the sale project of the s		3		6.	6.		ATCH 1
Sa Gross rents   She   Net rental income or (loss)   Sa Net gain or (loss) from sale of assets not on line 10   37,554							
Description		5a					
Content   Cont	Je	b	Net rental income or (loss)				
Net short errit recipitating all in come in Sprications and allowances				37,554.		•	
Net short errit recipitating all in come in Sprications and allowances	鬞	ь	accate on line 6a == = ::- = :-				
Net short errit recipitating all in come in Sprications and allowances	Š	7	Capital gain net income (from Rant IV line 2) .		37,554.		
10   Coross saled   Collegation   Collegat	Œ	8	Net short-term-capital-gain				
b Less Cost of golds, sold		9	Income modifications				
C Gross profit or (loss)/(atlach Schiedule)   T		IVa				<u>-</u>	
1			Less Cost of goods sold			<del></del>	
1		С	Gross profit or (loss) (attach schedule)				<del></del>
Compensation of officers, directors, trustees, etc. 0.  Compensation of officers, directors, trustees, etc. 0.  Cother employee salaries and wages		11	Other Income-(attach-schedule)	79 121	37 560		
Travel, conferences, and meetings	_			·	37,300.		<del></del>
b Accounting fees (attach schedule)	S						
b Accounting fees (attach schedule)	38						
b Accounting fees (attach schedule)	훒		· ·				<del>                                     </del>
C Other professional fees (attach schedule)	_	h					
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	ě	,					
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	rati	17		29.	29.		
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	ist	18					
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	۳	19					
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	듇	20					
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	ط م	21	, ,				
23 Other expenses (attach schedule) ATCH .3.  24 Total operating and administrative expenses Add lines 13 through 23	Ē	22	Printing and publications				
26 Total expenses and disbursements Add lines 24 and 25 108, 833. 49. 108, 734.  27 Subtract line 26 from line 12 -29, 712.  b Net investment income (if negative, enter -0-) 37, 511.	βū	23		70.	20.		
26 Total expenses and disbursements Add lines 24 and 25 108, 833. 49. 108, 734.  27 Subtract line 26 from line 12 -29, 712.  b Net investment income (if negative, enter -0-) 37, 511.	ati	24	Total operating and administrative expenses				
26 Total expenses and disbursements Add lines 24 and 25 108, 833. 49. 108, 734.  27 Subtract line 26 from line 12 -29, 712.  b Net investment income (if negative, enter -0-) 37, 511.	ğ		Add lines 13 through 23		49.		100 701
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	ō				40		
a Excess of revenue over expenses and disbursements	_			108,833.	49.		108,/34.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).				20 710			
c Adjusted net income (if negative, enter -0-).			·	-29,112.	37 511	·····	<u> </u>
			, <u> </u>	<del></del>	37,311.		
	F						Form 990-PF (2015)

JSA For Paperwork Reduction Act Notice, see instructions.
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Þ	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	4,287.	2,462	. 2,462
	2	Savings and temporary	cash investments			
	3	Accounts receivable ▶_				
		Less allowance for doul	btful accounts ▶		_	
	4	Pledges receivable ▶				
		Less allowance for doul	btful accounts ▶		<del></del> -	
			officers, directors, trustees, and other			
			ach schedule) (see instructions)			
			eceivable (attach schedule)			
			otful accounts >			
2						
Se			e			
Assers		•	eferred charges			
			e government obligations (attach schedule)stock (attach schedule) ATCH 4	301,785.	272,898	. 236,662.
			bonds (attach schedule)	3017,001	2,2,030	230,002.
	11 11	Investments - land, buildings				1
		and equipment basis Less accumulated deprecia				
		(attach schedule)				<del>-</del>
			loans			
		Investments - otner (atta Land, buildings, and	ch schedule)	<del></del>	<del></del>	<del> </del>
		equipment basis Less accumulated deprecia (attach schedule)	tion >			
		(attach schedule)	A MOUL 5			
			ATCH 5			
			completed by all filers - see the	206 072	075 260	020 104
4		instructions Also, see pa	age 1, item I)	306,072.	275,360	. 239,124.
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				_
<u>e</u>	19	Deferred revenue				_
Ĭ	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other no	tes payable (attach schedule)			
-	22	Other liabilities (describe	·▶)			
					_	
_			s 17 through 22)	0.	0	<u>.</u>
		Foundations that foll	ow SFAS 117, check here . ▶ 🗓			
nd Balances		and complete lines 2	24 through 26 and lines 30 and 31.			
ğ	24	Unrestricted		306,072.	275,360	<u>.</u>
ğ						_}
	26	Permanently restricted .				
		Foundations that do	not follow SFAS 117, ▶ 🔲			
Ļ			plete lines 27 through 31.			
0	27 28 29 30 31	Capital stock, trust princ	cipal, or current funds			
e	28	Paid-in or capital surplus, or	land, bldg, and equipment fund			
SS	29	Retained earnings, accumu	lated income, endowment, or other funds			
4	30	Total net assets or fund	balances (see instructions)	306,072.	275,360	
Š	31		net assets/fund balances (see			
		instructions)		306,072.	275,360	
P			nges in Net Assets or Fund Balan	ces		<u></u>
1	Tota	I net assets or fund b	alances at beginning of year - Part II	, column (a), line 30 (mi	ust agree with	
			d on prior year's return)		- 1	306,072.
2			line 27a			-29,712.
						276,360.
5	Dec	reases not included in	line 2 (itemize) ► ATCH 6		5	1,000.
			alances at end of year (line 4 minus l	ne 5) - Part II. column (b)		275,360.
Ť				2/ . a.c.i, column (b),		

For	m 990-PF (2015)	IIMOIHI MAGUIRE FOC	JNDATION		27-08707	_		
		and Losses for Tax on Inve	estment Income			Page 3		
		d describe the kind(s) of property sold (	•	(b) How	(c) Date	(d) Date sold		
	2-story b	orick warehouse, or common stock, 200	shs MLC Co)	acquired P - Purchase D - Donation	acquired (mo , day, yr )	(mo, day, yr)		
<u>1a</u>	SEE PART IV SCHE	DULE						
<u>b</u>								
_ <u>c</u>								
<u>d</u>								
<u>e</u>			(r) Coat or other had a			<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)				
<u>a</u>								
<u>b</u>								
_c d								
e								
	Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col (h) g	ain minue		
	(i) F M V as of 12/31/69	col	(k), but not less t Losses (from co	han -0-) <b>or</b>				
а								
b								
<u>c</u>								
<u>d</u>								
<u>e</u>								
2	Capital gain net income		gain, also enter in Part I, line 7			37,554.		
3	Not short torm conital as	ا ا - ain or (loss) as defined in sections	(loss), enter -0- in Part I, line 7	2		37,334.		
3	If gain, also enter in Pa	art I, line 8, column (c) (see inst	ructions) If (loss), enter -0- in			27 544		
D.		Under Section 4940(e) for Rec		3		37,544.		
		c private foundations subject to the			ma\			
Wa	es," the foundation does	the section 4942 tax on the distrib not qualify under section 4940(e)	Do not complete this part	·		Yes X No		
1		nount in each column for each yea	r, see the instructions before makin	g any enti				
Ca	(a) Base period years lendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by			
	2014	177,685.	439,138.			0.404622		
	2013	344,134.	392,090.			0.877691		
	2012	183,500. 322,175.	917,559. 1,591,787.			0.199987		
	2011	424,000.	1,112,510.			0.202398		
	2010	424,000.	1,112,510.	<del></del>		0.381120		
2		d)		2		2.065818		
J	•	ndation has been in existence if les	-	3		0.413164		
4	Enter the net value of no	encharitable-use assets for 2015 fro	om Part X, line 5	4	<del></del>	519,896.		
5	Multiply line 4 by line 3			5		214,802.		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		375.		
7	Add lines 5 and 6			7		215,177.		
8		reater than line 7, check the box		8 that part	using a 1% ta	108,734. x rate See the		
						000 DE		

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_	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru		s)		
	Exempt operating foundations described in section 4940(d)(2), check here			<del></del>		
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)					
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		7	50.		
	here  and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)					
3	Add lines 1 and 2		7	50.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		7	50.		
6	Credits/Payments					
а	2015 estimated tax payments and 2014 overpayment credited to 2015   6a   2,547.					
ь	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d		2,5	47.		
8	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,7	97.		
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 1,797. Refunded ▶ 11					
Par	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
	participate or intervene in any political campaign?	1a		X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?	1b		X		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities	1c		Х		
	,					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		Ì			
	(1) On the foundation ►\$ (2) On foundation managers ►\$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on					
	foundation managers  \$	ا ۔		х		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2				
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	3		х		
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b				
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	5		Х		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
6	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	Х			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х			
	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CA,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
-	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	Х			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV	9		Х		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
-	names and addresses	10	Х	l		

Pai	t VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
_	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► NONE			
14	The books are in care of ▶ RICHARD ASHLEY Telephone no ▶ 215-680	-022	3	
	Located at ► 2860 STATE RD 13 SAINT JOHNS, FL ZIP+4 ► 32259			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of			
	the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			i
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			1
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			- 1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			}
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2015?	1c	Х	
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))			
а	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?			1
	If "Yes," list the years ,,,,,,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
_	all years listed, answer "No" and attach statement - see instructions )	2b		
Ç	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			- 1
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ju	at any time 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 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, Form 4720, to determine if the			
	foundation had excess business holdings in 2015 )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
	Fo	տ 99	0-PF	(2015)

orm	990-PF (2015) TIMOTHY MAGUII				-0870730	Page
Рa	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)	1	
5a	During the year did the foundation pay or incur any amo					
•	(1) Carry on propaganda, or otherwise attempt to influ		n 4945(e))?	Yes X	lo	
	(2) Influence the outcome of any specific public ele	•				
	directly or indirectly, any voter registration drive?	•			10	
	(3) Provide a grant to an individual for travel, study, or o			37	lo	
		, ,			.	ł
	(4) Provide a grant to an organization other than a			TT., TV.	lo	
	section 4945(d)(4)(A)? (see instructions)				'0	
	(5) Provide for any purpose other than religious, cl			1	.	
	purposes, or for the prevention of cruelty to children			• — — .	lo	
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the					
	Regulations section 53 4945 or in a current notice regain	<u>-</u>	•		5b	
	Organizations relying on a current notice regarding disa	ster assistance check	here		▶□	
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the	grant?		Yes N	lo	
	If "Yes," attach the statement required by Regulations se	ction 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	nds, directly or indire	ectly, to pay premiur			
	on a personal benefit contract?				lo	
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ıct?	. 6b	X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?.	. Yes X	lo	
b	If "Yes," did the foundation receive any proceeds or ha				. 7b	
Рa	rt VIII Information About Officers, Directo and Contractors	rs, Trustees, Fou	Indation Managers	s, Highly Paid Em	iployees,	
1	List all officers, directors, trustees, foundation	nanagers and their	r compensation (see	instructions).		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e) Expense	
	(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other allov	vances
			_			
ATC	CH 7		0.	0	•	0
					,	
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line		tions). If nor	ne, ente
(a	) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense other allow	account, vances
		devoted to position		compensation		
					1	
					1	
	NONE					
	NONE					
	NONE					
	NONE					
	NONE					
	NONE					
	NONE					

3 N/A

All other program-related investments. See instructions

Pari	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	526,903.
	Average of monthly cash balances	1b	910.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	527,813.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	1 2	
3	Subtract line 2 from line 1d	3	527,813.
4	Subtract line 2 from line 1d		
	instructions)	4	7,917.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	519,896.
6	Minimum investment return. Enter 5% of line 5	6	25,995.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ □ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	25,995.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI).		
C	Add lines 2a and 2b	2c	750.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	25,245.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	25,245.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	25,245.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	108,734.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	108,734.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	108,734.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		the foundation

Рa	rt XIII Undistributed Income (see inst	ructions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
•	line 7				25,245.
,	Undistributed income, if any, as of the end of 2015				, , , , , , , , , , , , , , , , , , , ,
	Enter amount for 2014 only.				
h	Total for prior years 20 13 ,20 12 ,20 11		- ''		<del>-</del>
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012 141,020.				
	From 2013 326,075.				
	From 2014				
	Total of lines 3a through e	1,178,337.			
	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 108,734.				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)			<del></del>	
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2015 distributable amount				25,245.
е	Remaining amount distributed out of corpus	83,489.			
5	Excess distributions carryover applied to 2015.				:
	(If an amount appears in column (d), the same amount must be shown in column (a) )				1
6	Enter the net total of each column as				
	indicated below:	1 261 026	}		İ
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,261,826.		<del> </del>	
b	Prior years' undistributed income Subtract				
^	line 4b from line 2b				
٠	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			<del></del>	<del>                                     </del>
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2014 Subtract line			-	
	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2016				
7	Amounts treated as distributions out of corpus				
'	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not				
-	applied on line 5 or line 7 (see instructions)	368,374.			
9	Excess distributions carryover to 2016.	000 450			
	Subtract lines 7 and 8 from line 6a	893,452.			
	Analysis of line 9	ļ			
	Excess from 2011 186, 960.				-
	226 075				}
	155 000				
	CXC633 110111 2014 ,				
e	Excess from 2015 83, 489.				

Form	n 990-PF (2015)	TIMOTHY M	AGUIRE FOUNDAT	ION	27-	-0870730 Page <b>10</b>
Pa	rt XIV Private Op	erating Foundations	(see instructions a	ind Part VII-A, questi	on 9)	NOT APPLICABLE
1 <sub>,</sub> a	If the foundation has foundation, and the rulin	•			· ·	
ь	Check box to indicate v	•	-		<del></del>	(3) or 4942(j)(5)
2 2	Enter the lesser of the ad-	Tax year	-	Prior 3 years		(e) Total
2 4	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c			<del> </del>		
	alternative test relied upon	ļ				
а	"Assets" alternative test - enter			İ		
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
-	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed "Support" alternative test - enter					
•	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general		-			·
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization,					
	(4) Gross investment income		•			
Pa		ntary Information (C		only if the founda	tion had \$5,000 o	r more in assets at
	<del></del>	uring the year - see				
1	Information Regarding	•				
а	List any managers of before the close of any	the foundation who have tax year (but only if the	ey have contributed moi	e than 2% of the tota more than \$5,000) (S	al contributions recei ee section 507(d)(2) )	ved by the foundation
	TIMOTHY MAG		···			
b	List any managers of ownership of a partner					y large portion of the
	ownership of a partner	ship of other chary, or	Willer the roundation	rilas a 1070 or greater	merest	
_	N/A Information Regarding	a Contribution Grant	Giff Loon Sobolard	nin ata Bragrama:		
2	<u> </u>	-		• •		
	Check here ► X if t unsolicited requests for other conditions, comp	or funds. If the founda	ation makes gifts, gr	to preselected char ants, etc (see instruc	itable organizations tions) to individuals (	and does not accept or organizations under
а	The name, address, a			the person to whom ap	plications should be ac	Idressed
D	The form in which app	iications snould be sub	mitted and informati	on and materials they	snoula include	
	Any guilance and a die	200				
C	Any submission deadli	1105				

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

Form 990-PF (2015)  Part XV Supplementary Information	(continued)			Page 1
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ing the Year or Appl	roved for F	uture Payment	
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)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH 8				
All Cili O				
		,		
		] .		
Total	<u> </u>		▶ 3a	108,734.
<b>b</b> Approved for future payment				
		]		
Total			▶ 3b	

Part XV		T		Evoluded 5	4 control E40 54 54	(e)
	amounts unless otherwise indicated	(a) Business code	(b)	(c)	y section 512, 513, or 514 (d)	Related or exempt function income
	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
				-		<del></del>
				<del> </del>		
		_				<del></del>
			·			-
- <u>-</u>						······
g Fees	and contracts from government agencies					
	rship dues and assessments					
	on savings and temporary cash investments			14	6.	
	ds and interest from securities					
5 Net rent	tal income or (loss) from real estate					
a Debt	t-financed property		·			·
	debt-financed property			1		
	al income or (loss) from personal property					
	evestment income			18	37,554.	
•	loss) from sales of assets other than inventory	<u> </u>		10	31,334.	
	ome or (loss) from special events rofit or (loss) from sales of inventory				<u> </u>	
	evenue <b>a</b>					
_						
е						
	Add columns (b), (d), and (e)				37,560.	
13 Total. A	dd line 12, columns (b), (d), and (e)				13	37,560
Part XVI-	heet in line 13 instructions to verify calc  Relationship of Activitie		accomplishment of F-			
<b>V</b>	Explain below how each activit accomplishment of the foundation					
					F-8-2	
					<del>-</del>	
			····		·	
		<del></del>				<del></del>
_			<del></del>		<del>-</del>	
<del></del>			<del></del>			<del></del> .
_		<del></del>				
		<u> </u>	·			
	·					

JSA 5E1492 1 000

Part	XVII	Information R Exempt Organ		ansfers To and T	ransacti	ons and	Relation	ships W	ith Nonc	chari	table	<del></del>
ır	sect	_	•	engage in any of the section 501(c)(3) org	_	-	_				Yes	No
	-		ng foundation t	o a noncharitable exei	mpt organı	zation of						
										1a(1)		<u> </u>
									<i></i>	1a(2)		
		ransactions	ncharitable ev	mnt organization						16/1\		
(	1) Sar 2) Pur	chases of assets fro	om a nonchari	empt organization	 on		• • • • • •			1b(1) 1b(2)		
(;	(2) Purchases of assets from a noncharitable exempt organization											
(!	<b>5)</b> Loa	ins or loan guarantee	es							1b(5)		
				hip or fundraising solic								
				sts, other assets, or pa								
				es," complete the fol nces given by the rep								
				igement, show in coli								
(a) Line		(b) Amount involved	, <u> </u>	noncharitable exempt organ			ription of transf	<del>-</del>	<u>-</u>			
		N/A	` · · · · · · · · · · · · · · · · · · ·			N/A	·		·			
								_				
					<u> </u>							
d	escrib	ed in section 501(c)	of the Code (	ffiliated with, or relate						Y	es X	—— ] No
<u>b</u> If	"Yes,	" complete the follo		T 45.75								
		(a) Name of organizatio	n	(b) Type of org	janization			c) Descripti	on of relations	nip		
			<del></del>									
								,				
	,						<u> </u>					
				nined this return, including acc taxpayer) is based on all informa				o the best of	my knowledge	and b	elief, it	rs true,
Sign		•	Tan 30A	M 11/21	,, 1	,	,	1	May the IRS	discus	s this	return
Here	۱ <b>′</b> —	IMOTHY MAGUIRI	Brita 1271	11/3/	10	PRESI	DENT			parer :	1 г	below
	Jaign	ature of officer or trustee	U	<b>V</b> Date		Title		l	(see instructions	)? X	Yes	No
	1	Print/Type preparer's na	me	Preparer's signature			Date	Che	ck X if P	TIN		
Paid		RICHARD A ASH		eticlar C	200	Mo	10/31/2	l l	۱۱۱ تـــــا ۵۸	2005	2813	1
Prepa		- HIII - HOURT		ASHLEY, CPA				Firm's EIN	▶80-05	2851	12	
Use C	Only		360 STATE F									
		J.P.	ACKSONVILLE	E, FL		322	59	Phone no	215-68	0-02	223	

Schedule B (Form 990, 990-EZ, Department of the Treasury Internal Revenue Service

or 990-PF)

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization		Employer identification number
TIMOTHY MAGUIRE FOU	NDATION	07 0070720
Organization type (check one	e)	27-0870730
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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 foun	dation
	501(c)(3) taxable private foundation	
	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contror property) from any one contributor. Complete Parts I and II. See instructor in See instructors.	
Special Rules		
regulations under s 13, 16a, or 16b, an \$5,000 or <b>(2)</b> 2% o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 de that received from any one contributor, during the year, total contributor of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that	90 or 990-EZ), Part II, line ons of the greater of (1) Complete Parts I and II
contributor, during	the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, anal purposes, or for the prevention of cruelty to children or animals. Comp	charitable, scientific,
contributor, during contributions totale during the year for <b>General Rule</b> applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, d more than \$1,000. If this box is checked, enter here the total contribution an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of this organization because it received <i>nonexclusively</i> religious, charital more during the year	but no such ons that were received the parts unless the ole, etc., contributions
990-EZ, or 990-PF), but it <b>mu</b>	is not covered by the General Rule and/or the Special Rules does not file st answer "No" on Part IV, line 2, of its Form 990, or check the box on line certify that it does not meet the filing requirements of Schedule B (Form	e H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

Employer identification number 27-0870730

Part I	Contributors (see instructions) Use duplicate cop	ies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	TIMOTHY J. MAGUIRE  5 TOWER BRIDGE  WEST CONSHOHOCKEN, PA 19428	\$\$	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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

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

Name of organization TIMOTHY MAGUIRE FOUNDATION

Employer identification number 27-0870730

sh Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	   \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	-
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	     \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  \$

Schedule B	(Form 990, 990-EZ, or 990-PF) (2015)		Pope A
	rganization TIMOTHY MAGUIRE FOUNDAT	ION	Employer identification number 27-0870730
Part III	(10) that total more than \$1,000 for the	ne year from any one considerated in the second in the sec	ations described in section 501(c)(7), (8), or contributor. Complete columns (a) through (e) and ter the total of exclusively religious, charitable, etc. tion once. See instructions.) ▶ \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	1
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gif	t 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
	Transference and drawn and	(e) Transfer of gif	
	Transferee's name, address, and	ZIF + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	.9	.9
REVENUE AND EXPENSES PER BOOKS	.9	9
		TOTAL
DESCRIPTION	GOLDMAN SACHS	

ATTACHMENT 1 PAGE 23

## FORM 990PF, PART I - INTEREST EXPENSE

NET INVESTMENT INCOME	29.	29.
REVENUE AND EXPENSES PER BOOKS	29.	29.
		TOTALS
DESCRIPTION	INTEREST	

ATTACHMENT 2 PAGE 24

EXPENSES
OTHER
I I
PART
90PF,
ORM 9

F	INVESTMENT	INCOME		20.		20.	
REVENUE AND	EXPENSES	PER BOOKS		20.	50.	70.	
						TOTALS	
		DESCRIPTION	CA FRANCHISE TAX BOARD	ACCOUNT FEES	REGISTRY FEES		

ATTACHMENT 3 PAGE 25

۵	۲
E	4
_	1
Ή	
$\overline{\zeta}$	)
F	
E	4

STOCK
CORPORATE
) - II
PART
990PF,
FORM

ENDING <u>EMV</u>	236,662.	236,662.
ENDING BOOK VALUE	272,898.	272,898.
BEGINNING BOOK VALUE	301,785.	301,785.
DESCRIPTION	GOLDMAN SACHS - SECURITIES	TOTALS

ATTACHMENT 4 PAGE 26

TIMOTHY MAGUIRE FOUNDATION

FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION

BEGINNING BOOK VALUE

MISCELLANEOUS RECEIVABLES

TOTALS

ATTACHMENT 5

27-0870730

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ATTACHMENT	6	
TI TIICIIIIUI	0	

### FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

PRIOR YEAR CONTRIBUTION 1,000.

TOTAL \_\_\_\_\_\_1,000.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

TIMOTHY MAGUIRE

PRESIDENT/DIRECTOR - AS NEEDED

5 TOWER BRIDGE

P.O. BOX 15014

WEST CONSHOHOCKEN, PA 19428

SUSAN MAGUIRE

SECRETARY - AS NEEDED

5 TOWER BRIDGE P.O. BOX 15014 WEST CONSHOHOCKEN, PA 19428

FRANNY GLOMB

5 TOWER BRIDGE P.O. BOX 15014 WEST CONSHOHOCKEN, PA 19428

CFO - AS NEEDED

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ATTACHMENT 7 PAGE 29

FOUNDATION	
MAGUIRE	
TIMOTHY	

27-0870730

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS

SEE ATTACHED LIST

NONE 501(C)(3) PC

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

GENERAL CHARITABLE PURPOSES

108,734

AMOUNT

ATTACHMENT 8

TOTAL CONTRIBUTIONS PAID

108,734

PAGE 30 ATTACHMENT 8

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V 15-7F

FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Date Date sold Kind of Property Description acquired Gross sale Depreciation Cost or FMV Adj basis Excess of Gain as of 12/31/69 as of 12/31/69 allowed/ FMV over price less other or expenses of sale allowable basis adı basıs (loss) 37,554. TOTAL GAIN(LOSS) ......