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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. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Department of title Treasury Internal Revenue Service For calendar year 2015 or tax year beginning and ending A Employer identification number Name of foundation 27-2886960 JOSEPH P HEENAN FAMILY FOUNDATION INC Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 780 610-496-7171 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 19010 BRYN MAWR, PA Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Initial return Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here Accrual I Fair market value of all assets at end of year J Accounting method: X Cash F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 659, 263. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 121,114 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 12,405 STATEMENT 12,405 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1,345 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 341,131. 1,345 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 13,750 134,864 12 Total, Add lines 1 through 11 0. 0 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees SCANNED MAY 2 3 2016 STMT 2 1,500 1,500 0. **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 679 679 0. 23 Other expenses STMT 3 24 Total operating and administrative 2.179 2,179 0. expenses. Add lines 13 through 23 23,885 23,885. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 2,179 26,064 23,885. Add lines 24 and 25 27 Subtract line 26 from line 12: 108,800 Excess of revenue over expenses and disbursements 11,571 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	
	column snould be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	30,988.	7,924.	7,924.
2	Savings and temporary cash investments			
3	Accounts receivable ►			
	Less: allowance for doubtful accounts			<del></del>
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
1	Less <sup>-</sup> allowance for doubtful accounts ▶			
<u>ه</u> ا	Inventories for sale or use			
Assets 6 8	Prepaid expenses and deferred charges			
₹   10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 4	112,103.	121,114.	184,312.
	c Investments - corporate bonds STMT 5	182,312.	74,588.	71,425.
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	! Investments - mortgage loans			
13	Investments - other STMT 6	180,638.	411,121.	395,602.
14	Land, buildings, and equipment: basis			
	Less accumulated depreciation			
15	Other assets (describe >			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	506,041.	614,747.	659,263.
17	Accounts payable and accrued expenses			
18	` . <u>`</u> ` ` ` .			
Liabilities 51	ľ			
문 21				
ت <sub>22</sub>	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u>E</u> 25				
E 26	Permanently restricted			
밀	Foundations that do not follow SFAS 117, check here			
호	and complete lines 27 through 31.			
δ 27		0.	0.	
Net Assets or Fund Balance 52 22 22 22 22 22 22 22 22 22 22 22 22		0.	0.	
¥ 29		506,041.	614,747.	
₹ 30		506,041.	614,747.	
_				
31	Total liabilities and net assets/fund balances	506,041.	614,747.	
Dom	t III Analysis of Changes in Net Assets or Fund B	alances		
rar	t III Analysis of Changes in Net Assets or Fund B			
1 Tot	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
(m	ust agree with end-of-year figure reported on prior year's return)		1	506,041.
2 Ent	ter amount from Part I, line 27a		2	108,800.
3 Oth	ner increases not included in line 2 (itemize)  PRIOR PERIO	D ADJUSTMENT	3	1,509.
	d lines 1, 2, and 3		4	616,350.
<b>5</b> Dec	creases not included in line 2 (itemize)   EXCISE TAXES		5	1,603.
<u>6 Tot</u>	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	614,747.
				Form <b>990-PF</b> (2015)

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Form 990-PF (2015) JOSEPH P HEENAN FAMILY FOUNDATION INC

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	990-PF (201 r <b>t VI E</b>						FOUNDA Section 49			940(e). c			2886 - see i			Page 4
							re 🕨 🔲 and			)			<u> </u>			
		-	nation letter:				opy of letter if n			ons)						
		-					V, check here					1			2	31.
	of Part I, line													-		
C	All other dor	mestic founda	ations enter 2%	6 of line	27b. Exen	npt foreign orga	nizations enter 4	4% of Part	I, line 12, co	l. (b).						
2	Tax under se	ection 511 (d	omestic section	n 4947(	a)(1) trust	s and taxable fo	undations only.	Others en	ter -0-)			2				0.
3	Add lines 1 a	and 2										3			2	31.
4	Subtitle A (ir	ncome) tax (d	domestic section	on 4947	(a)(1) trus	ts and taxable fo	oundations only.	. Others er	nter -0-)		L	4				0.
5	Tax based o	on investmen	it income. Sub	tract line	e 4 from lu	ne 3. If zero or l	ess, enter -0-					5			2	<u>31.</u>
6	Credits/Payr	ments:							ı							
а	2015 estima	ated tax paym	ents and 2014	overpay	yment cred	dited to 2015		6a		1,16	0.					
b	Exempt fore	eign organizat	ions - tax with	held at s	ource			6b								
C	Tax paid wit	th application	for extension	of time t	o file (Forn	n 8868)		6c		· <del></del>						
d	Backup with	nholding erroi	neously withhe	ıld				6d								
			its. Add lines 6								<u> </u>	7			1,1	<u>60.</u>
8	Enter any pe	enalty for und	derpayment of	estimate	ed tax. Che	ck here ıf	Form 2220 is a	ttached			<u> </u>	8				
					-	nter amount ow					▶	9				
							mount overpaid			, I		10			9	<u> 29.</u>
			10 to be: Cred					<del>-</del>	929.	Refunded		11				<u>0.</u>
			ents Rega												V	
1a	•		he foundation	attempt :	to influenc	e any national,	state, or local leg	gislation oi	r did it partici	pate or inter	vene in				Yes	
	any political													<u> 1a</u>		X
þ			_				for political purp							1b		<u>X</u>
							the activities a	and copie	es of any ma	atenals pub	lished	or				
		•	ndation in co			e activities										
			orm 1120-POL		-									1c	ļ	<u>X</u>
d							mposed during t				_			1		
							indation manage				0.					
е			t (if any) paid b	_	indation d	uring the year to	or political exper	nditure tax	imposed on	foundation						
_	managers.			0.				ID00						_		47
2		_				-	n reported to the	B IRS7						2		X
			iled descripti							6						
3							S, in its governin		ent, articles o	i ilicorporati	on, or			١,		v
4-	-						opy of the char nore during the y	-						3 4a		X
			umeialeu busi return on <b>Forn</b>	_			iore during the y	real f				NT.	/A	·		
							on during the yea	ar?				14	<i>/</i> A	4b 5		Х
J		• /	•		•	Instruction T	in during the yea	<b>41</b> -						<u> </u>	l	
6	-		•	•			n 4945) satisfied	l either:								
Ü	-		erning instrun		, 10 3001101	13 1311 tillougi	1 40 40) 541151100									
		-	-		e governin	ia instrument sa	that no mandat	tory directi	ons that con	flict with the	state la	w				
		ne governing		101100 111	o govorim.	g mondmone oc	Tildt 110 mailda	,	one mar con		oluto la	•••		6	ļ	х
7				ın asset	s at any tu	me during the v	ear <sup>?</sup> If "Yes," c	omplete i	Part II. col. i	(c) and Par	t XV			7	х	
•	DIG 210 1001	industria vo	at 10a0t <b>4</b> 0,000	0000		ine coming the y		,	,,	,-,,	• • • •			<u> </u>	<del></del> -	
8a		tates to which	the foundation	n reports	or with w	hich it is registe	ered (see instruc	tions) 🕨					<del></del>			
	PA					ad a age: -4.F-	000 DC 4 45	Attorna	Conord (ac d	lacianete\						
D							m 990-PF to the	Altorney	deneral (of 0	esignate)				   0F	<sub>v</sub>	
						"No," attach ex		contina Af	M2(1)(2) as 4	049/ME\ *~~	calas 4	la-		8b	X	<b></b>
9			• .	•	_		the meaning of			542(J)(5) IOI	Calend	ıdı		9		v
10							t XIV)? <i>If "Yes,</i> 'Yes <u>," attach a sch</u> e			al a alul				10		X
10	Did dily per	JOHN DECOINE	, suvstantiai U	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	as during	no my year. It	res, anacii a scri	some usuild	men names an	<u>auuresses</u>			For		0-PF	(2015)

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orm 990-PF (2015) JOSEPH P HEENAN FAMILY F	OUNDATION INC	<u> </u>	<u>27-28869</u>	<u>60 Page 6</u>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,		
any voter registration drive?		Ye	s X No	]
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for		
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , ,	☐ Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described	<del></del>		
section 53.4945 or in a current notice regarding disaster assistance (see instru		in riogulations	N/A	5 <b>b</b>
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ınad		
• • • • • • • • • • • • • • • • • • • •		I/A 🔲 Ye	es No	
expenditure responsibility for the grant?		/A	:S NU	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		<b>7</b>	
a personal benefit contract?		Y6	es X No	.
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	y	
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	( ) Cypana
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)	compensation	allowances
JOSEPH P HEENAN	DIRECTOR			
P.O. BOX 780				
BRYN MAWR, PA 19010	2.00	0.	0.	0.
MICHAEL P HEENAN	DIRECTOR			
10 WESTVIEW ROAD	]			
BRYN MAWR, PA 19010	2.00	0.	0.	0.
RYAN M HEENAN	DIRECTOR			
10 WESTVIEW ROAD				
BRYN MAWR, PA 19010	2.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		
4 Name and address of seek ampleyes and mare than \$50,000	(b) Title, and average	( ) Componentian	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE	·			
	1			
		·		
	†			
		<u> </u>		
	-			
			-	
	4			
Total number of other employees paid over \$50,000	<del></del>	<del></del>		000 PF (22.45)
			Form	<b>990-PF</b> (2015)

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orm 990-PF (2015)  JOSEPH P HEENAN FAMILY FOUNDATION INC  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)		2886960	Page 7
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 se	rvice	(c) Compe	nsation
NONE			
Fotal number of others receiving over \$50,000 for professional services			
Part IX-A Summary of Direct Charitable Activities	-		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  N/A  2  3  4  4  4  4  4  4  4  4  4  4  4  4		Expenses	
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
N/A			
All other program-related investments. See instructions.			
Total Add lines 1 through 3			0.

	n 990-PF (2015) JOSEPH P HEENAN FAMILY FOUNDATION INC	<u> 27-2886960</u>	Page 8
Į P.	Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations, see instructions	)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		·
а	Average monthly fair market value of securities	1a 561	,581.
b	Average of monthly cash balances	1b 19	,456.
C	Fair market value of all other assets	_1c	
d	Total (add lines 1a, b, and c)	1d 581	,037.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d		,037.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		,716.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		,321.
6_	Minimum investment return. Enter 5% of line 5		,616.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	nd certain	
	foreign organizations check here   and do not complete this part.)	, <del> </del>	
1	Minimum investment return from Part X, line 6	1 28	,616.
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	231.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 28	,385.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 28	,385.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 28	,385.
P	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 23	,885.
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 23	,885.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 23	,885.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the section	

4940(e) reduction of tax in those years.

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## JOSEPH P HEENAN FAMILY FOUNDATION INC Part XIII Undistributed Income (see instructions)

1 Distributable import for 2015 from Part XI, the 7	,	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
2 Understorbed motion. A rank, as of the med oid 1815	1 Distributable amount for 2015 from Part XI,				
A Remain amount for 2014 any b Total to prior years:  3 Excess distributions carryover, if any, to 2015: a From 2010	line 7				28,385.
Screen destributions carryover, if any, to 2015; a From 2010   62, 280. e From 2011   62, 280. e From 2012   71, 232. e From 2014   71, 232. e From 2015   71,	2 Undistributed income, if any, as of the end of 2015				
3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011	a Enter amount for 2014 only			0.	
3 Excess distributions curryover, if any, to 2015: a From 2010 b From 2011	b Total for prior years:				
a From 2010	,,		0.		
From 2011   62, 280.	3 Excess distributions carryover, if any, to 2015:			•	
From 2012					
4 From 2013					
From 2014	c From 2012 71,232.			•	
1 Total of lines 3a through e 4 Qualifying distributions for 2015 from Part XII, Inve 1 ► \$ 23,885.  a Applied to 2014, but not more than line 2a b Applied to modistributed income of pror years (Flection required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributable amount eRemaining amount distributed to 10 ctrus 5 Excess destributions carryover applied to 2015 6 Inter the net total of each column as indicated below: a Corpus Addiness 44, so 44 es Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of proving years' undistributed income for which a notice of deficiency has been resulted, or on which the section 494(2) lax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract lines 4d from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract lines and from line 6b. Taxable amount - see instructions e Undistributed income for 2015. Subtract lines 4d from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract lines 4d and 5 from line 16b. Taxable amount - see instructions  0 .  4 . 500 .  6 . 6 . 6 . 6 . 6 . 6 . 6 . 6 . 6 .					
4 Qualifying distributions for 2015 from Part XII, line 4: PS 23, 885.  Applied to 2014, but not more than line 2a  Applied to undistributed income of prior years (Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2015 distributable amount  e Remaining amount distributed out of corpus  first amount appears in column (a). In esame amount must be adventised to 2015  off an amount appears in column (a). In esame amount in set feet the left of the same amount in set be also in column (a).  6 Enter the net total of each column as indicated believ.  1 Corpus Add lines 31. 4c, and 4e Subtract line 3  1 Corpus Add lines 31. 4c, and 4e Subtract line 3  1 Corpus Add lines 31. 4c, and 4e Subtract line 3  1 Corpus Add lines 31. 4c, and 4e Subtract line 4  1 Corpus Add lines 31. 4c, and 4e Subtract line 5  1 Enter the amount of prior years' undistributed income for Which a notice of deficiency has been issued, or on which in section 4942(a) fax has been previously assessed distributed microme for 2014. Subtract line 4a from line 8b. Taxable amount - see instructions  e Undistributed income for 2014. Subtract line 4a from line 8b. Taxable amount - see instructions  e Undistributed income for 2015. Subtract line 4a from line 2b. This amount must be distributed microme for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed microme for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed microme for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed microme for 2015. Subtract lines 6d and 6 from line 6a  1 Excess form 1016	e From 2014 23,039.				
Part XI, Ime 4* ► \$ 23,885.  a Applied to 2014, but not more than line 2a  b Applied to andistributed income of prior years (Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2015 distributable amount  e Remaining amount distributed out of corpus  5 excess distributions carryver applied to 2015  5 excess distributions carryver applied to 2015  5 excess form feel This existence are a controlled and of the seminary and the seminar	f Total of lines 3a through e	156,551.			
A Applied to 2014, but not more than line 2a b Applied to undistributed uncome of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 towas distributions carryove applient to 2015 (of an amount appears in column) of the semi-semont make the allowing carryove applient to 2015 (of an amount appears in column) of the semi-semont make the allowing carryove applient to 2015 (of an amount appears in column) of the semi-semont make the allowing carryove applient to 2015 (of an amount appears in column) of the semi-semont indicated below.  1 Corpus Add lines 34, 40, and 4e Subtract line 5 Prior years (or an amount of prior years) (or an amount of prio					
b Applied to undistributed income of prior years (Election required - see instructions) (Electio	Part XII, line 4: ► \$ 23,885.			_	
years (Election required - see instructions)  d Rophed to 2015 distributions out of corpus (Election required - see instructions)  d Appled to 2015 distributable amount e Remaining amount distributed out of corpus for an endow appears in obtaining the same amount must be shown in column (a))  Enter the relatat of each column as indicated below:  a Corpus Add lines 31, 4c, and 4e. Subtract line 3 before your included income. Subtract line 4b from line 2  Enter the amount of prior years' undistributed income for which a notice of delicinacy has been issued, or on which the section 494/2(a) tax has been previously assessed  d Subtract line 6c from line 6b. Taxable amount - see instructions  e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions  e Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015, Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015, Subtract lines 4d and 5 from line 5 or line 7  Amounts freated as distributions out of corpus to satisfy requirements imposed by section 1700/(1/ff) or 494/2(a)3 (Election may be required - see instructions)  8. Excess from 2011  5. Analysis of line 9:  a Excess from 2011  5. Analysis of line 9:  a Excess from 2013  d Excess from 2014  6. Excess from 2014	a Applied to 2014, but not more than line 2a			0.	
e Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015 must be shown in column (a)) 6 Enter the net total of each column as indicated below: 3 Corpus Add lines 31, 4c, and 4e. Subtract line 5 D Prior years' undistributed income. Subtract line 4b from line 2b e Enter the amount of prior years' undistributed income. Subtract line 4b from line 2b e Enter the amount of prior years' undistributed income for which the section 494(a) as has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4 from line 2 a. Taxable amount - see instructions e 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(f)(f)(f) or 494(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 9 Excess from 2011 9 Excess from 2011 5 77, 780. Excess from 2014 6 Excess from 2016 6 Excess	<b>b</b> Applied to undistributed income of prior				
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d Applied to 2015 distributable amount e Remaning amount distributed out of corpus Excess distributions carryover applied to 2015 (if an amount appears in column (ii), the same amount must be shown in column (ii).  E Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b  E Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  4. Subtract line 6c from line 6b. Taxable amount - see instructions  E Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions  E Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016  A mounts 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)  E Excess distributions carryover from 2010 not applied on line 5 or line 7  D. 9  Excess distributions carryover to 2016. Subtract lines 6a 10 Analysis of line 9.  Excess from 2011  Excess from 2012  A Excess from 2013  G Excess from 2014  E Excess from 2015  Excess from 2015  Excess from 2015  Excess from 2016  Exce	c Treated as distributions out of corpus	_			
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015 6 Einter the net total of each column as indicated below: 8 Definition of the service of the	(Election required - see instructions)	0.			
5 Ences deutwhens carryover applied to 2015 (fina mound appears in column (d), the same amount must be shown in column (d).  6 Enter the net total of each column as indicated below:  1 Corpus Add lines 31, 4c, and 4e Subtract line 5  6 Prior years' undistributed income. Subtract line 4b from line 2b  6 Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  4 Subtract line 6b from line 6b. Taxable amount - see instructions  6 Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions  6 Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016  7 Amounts freated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(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  5 7 7 7 8 0.  b Excess from 2011  b Excess from 2012  c Excess from 2013  d Excess from 2013  d Excess from 2015	d Applied to 2015 distributable amount				23,885.
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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  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2011				n i	
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  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2011			· ·	<u>U•</u>	
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  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2011	1				
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  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2011					Λ.
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					
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)  8					
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  152,051.  10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	The state of the s				
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  152,051.  10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015		0.			
not applied on line 5 or line 7  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  152,051.  10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015					
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a  152,051.  10 Analysis of line 9: a Excess from 2011 b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015	•	0.1			
Subtract lines 7 and 8 from line 6a 152,051.  10 Analysis of line 9:  a Excess from 2011 57,780. b Excess from 2012 71,232. c Excess from 2013 d Excess from 2014 23,039. e Excess from 2015	* **				*
10 Analysis of line 9:  a Excess from 2011	· · · · · · · · · · · · · · · · · · ·	152,051.			
a Excess from 2011 57,780. b Excess from 2012 71,232. c Excess from 2013 d Excess from 2014 23,039. e Excess from 2015					<del>-</del>
b Excess from 2012 c Excess from 2013 d Excess from 2014 e Excess from 2015					
c Excess from 2013 d Excess from 2014 e Excess from 2015					
d Excess from 2014 23,039. e Excess from 2015					
e Excess from 2015	d Excess from 2014 23,039.				

523581 11-24-15

Part XIV   Private Operating F		MILY FOUNDER structions and Part VI		N/A	186960 Page 10
1 a If the foundation has received a ruling o		······································	1-A, question 5)	N/A	<del></del>
foundation, and the ruling is effective fo			in coction	4942(j)(3) or 49	942(j)(5)
b Check box to indicate whether the found	Tax year	ing journation described	Prior 3 years	4342())(3) 01 [] 4.	942())(3)
2 a Enter the lesser of the adjusted net	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2011	(0) 2010	(4) - 5 - 5	(0) 1044
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,		Ì			
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly		•	<del>-</del>		<del></del>
for active conduct of exempt activities.	•				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		<del> </del>			
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter		<u> </u>	<u> </u>		<del> </del>
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed c "Support" alternative test - enter:	ļ				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)	ļ				
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during	the year-see inst	ructions.)			······································
1 Information Regarding Foundation					
a List any managers of the foundation wh			tributions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed i	nore than \$5,000). (See	section 507(a)(2).)			
NONE					
<ul> <li>b List any managers of the foundation who other entity) of which the foundation has</li> </ul>			(or an equally large porti	on of the ownership of a p	partnership or
	is a 10% or greater intere				
NONE		0			
2 Information Regarding Contribut Check here ► If the foundation			<del>-</del>	not accept unsolicited req	unete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	·				
JOSEPH P HEENAN, 610		the person to whom app	ilications should be addre	550 <b>u.</b>	
P.O. BOX 780, BRYN N		010			
b The form in which applications should			should include:		
c Any submission deadlines:					
				<del></del>	. <del></del>
d Any restrictions or limitations on award	ls, such as by geographic	cal areas, charitable fields	, kınds of ınstitutions, or	other factors:	

Entar arnes	amounts unless otherwise indicated.	Unrelated t	ousiness income	Excluded b	by section 512, 513, or 514	(e)
_	service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
-		0000		+		
		-		1 1		<del></del>
				1 1		
				1 1	" " "	
						•
, —		-		1 1		
a Fees	and contracts from government agencies			1 1	-	
-	ship dues and assessments					
	on savings and temporary cash					1
investme						
	Is and interest from securities			14	12,405.	
=	al income or (loss) from real estate:				22,200	
	-financed property		<del>.</del>	1		······································
	debt-financed property					
	al income or (loss) from personal			1		
property						
	vestment income			+ + -		
	(loss) from sales of assets other			+ + +		
than inve				18	1,345.	
	me or (loss) from special events		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	1,545.	
	rofit or (loss) from sales of inventory			<del>  </del>		
11 Other re	•			+		
		1 1				
				+		
				1		
_				+ +		- · · · · · · · · · · · · · · · · · · ·
·		_		+		
12 Subtotal	l. Add columns (b), (d), and (e)	- <del>                                    </del>	0	_	13,750.	0.
	dd line 12, columns (b), (d), and (e)	<u></u>	<u> </u>	<u> </u>	13	
	heet in line 13 instructions to verify calculations	.)				207.000
Part X\	/I-B Relationship of Activitie	s to the Accon	npiisnment of E	xempt P	urposes	
Line No.	Explain below how each activity for which ii	ncome is reported in a	column (e) of Part XVI-	A contributed	I importantly to the accomp	olishment of
▼	the foundation's exempt purposes (other th					
			"			
			·			
						1,170

							0.5	2006060	
Part 2			garding Tran		LY FOUNDATIO			2886960 ncharitable	Page 13
1 Did		<del> </del>		of the following	g with any other organizati	on described in sec	ction 501(c) of	Y	es No
	_	-			7, relating to political orgai		` ,		
	-	n the reporting founda							
	Cash			•	,			1a(1)	x
	Other ass	ets						1a(2)	Х
	er transac								
		assets to a noncharital	ble exempt organizat	tion				1b(1)	x
(2)	Purchase	s of assets from a noi	ncharitable exempt o	organization				1b(2)	Х
٠,,		facilities, equipment,		_				1b(3)	X
		sement arrangements						1b(4)	X
(5)	Loans or	loan guarantees						1b(5)	X
(6)	Performa	ince of services or me	mbership or fundrai:	sıng solıcıtatıo	ns			1b(6)	X
c Sha	aring of fac	cilities, equipment, ma	ılıng lısts, other asse	ts, or paid emp	oloyees			1c	X
d If t	he answer	to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	lways show the fair	market value of the g	oods, other asset	ts,
	_				ed less than fair market val	lue in any transactio	on or sharing arranger	nent, show in	
col		e value of the goods,				1			
(a) Line n	o (b)	Amount involved	(c) Name of		exempt organization	(d) Description	on of transfers, transaction	ns, and sharing arrar	ngements
				N/A	<del></del>				
	<u> </u>								
						<u> </u>		<del></del>	
							<del></del>		
									· · · ·
	-					-		<del> </del>	<del></del>
				<del>, ,</del>					
		<del> </del>							
		· · · · · · · · · · · · · · · · · · ·							
2a  s	the founda	tion directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organ	nizations described			
ın :	section 50	1(c) of the Code (other	than section 501(c	)(3)) or in sect	ion 527?			Yes	X No
b If"	Yes," comp	lete the following sch	edule.						
		(a) Name of org	anization		(b) Type of organization		(c) Description of rel	ationship	
		N/A						·	
						ļ			
						<del></del>			
<b>^</b> :-					g accompanying schedules and n taxpayer) is based on all infori			May the IRS dis	
Sign Here		loss 17 a	1-		1 000			shown below (s	
11616		roughy A		TOUSTER			ee	_ LX Yes	No
		re of officer or trustee rint/Type preparer's na		Preparer's s	Date egature	Title Date	Check If	PTIN	
	1.5	ει τρο μιομαιοί ο πο	4	יושעט וטועטעטיין	W	A	ıı L ''		

P01267931

Firm's EIN  $\triangleright 41-0746749$ 

Phone no. 215-643-3900

self- employed

**Paid** 

Preparer

**Use Only** 

HEATH WAWRZYNEK

Firm's name CLIFTONLARSONALLEN LLP

Firm's address ▶ 610 W. GERMANTOWN PIKE,

PLYMOUTH MEETING,

STE.

400

PA 19462

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

2015

Name of the organization

**Employer identification number** 

1	JOSEPH P HEENAN FAMILY FOUNDATION INC	27-2886960
Organization type (chec	ck one):	
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	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	l Rule. See instructions.
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total any one contributor. Complete Parts I and II See instructions for determining a contribu	
Special Rules		
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support of 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the and -EZ, line 1. Complete Parts I and II	6a, or 16b, and that received from
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or e of cruelty to children or animals. Complete Parts I, II, and III	
year, contributi is checked, ent purpose Do no	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled ter here the total contributions that were received during the year for an exclusively religion to complete any of the parts unless the <b>General Rule</b> applies to this organization becautable, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000 If this box lous, charitable, etc ,
but it must answer "No"	on that is not covered by the General Rule and/or the Special Rules does not file Schedu on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on it neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

### JOSEPH P HEENAN FAMILY FOUNDATION INC

27-2886960

Part I	Contributors (see instructions) Use duplicate copies of Part I in	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPH P HEENAN P.O. BOX 780 BRYN MAWR, PA 19010	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
···		\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

### JOSEPH P HEENAN FAMILY FOUNDATION INC

27-2886960

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	6416 SHS BANK OF AMERICA CORP	s 62,294.	03/17/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	1475 SHS CITIGROUP	\$\$ <u>58,820.</u>	03/17/15
(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
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \ \$	

Name of orga	nization			Employer identification number				
JOSEPH Part III	P HEENAN FAMILY FOUNDA	ibutions to organizations described i	in section 501(c)(7), (8), o	27-2886960 r (10) that total more than \$1,000 for				
	the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or I	/ING IINE ENTRY. For organization less for the year (Enter this info onc	ns e) > \$				
(a) No. from	Use duplicate copies of Part III if additiona (b) Purpose of gift	al space is needed (c) Use of gift		cription of how gift is held				
Part I	(2)			·				
-								
-								
		(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	insferor to transferee				
	Transieree s name, address, an							
-								
-								
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held					
- Farti								
_								
		(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
				<del> </del>				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
<u> </u>		(e) Transfer of gift	,					
		(c) Transier or give	•					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	ansferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I								
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
<u> </u>								
			• •					

2 Capital gain net income or (net capital loss)

If (loss), enter "-0-" in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

2

27-2886960 PAGE 2 OF 2

		FAMILY FOUNDATION sses for Tax on Investment Income	N INC 27-28	8696	0 P	AGE	2 01	F 2
	(a) List and	I describe the kind(s) of property solo rick warehouse; or common stock, 20	d, e.g., real estate,	(b	) How acquired P - Purchase	(c) Date acquire (mo., day, yr.)	ed <b>(d</b> )	Date sold o., day, yr.)
_					D - Donation P	12/18/1		
	2,094.294 SHS	STONE RIDGE REIN	SURANCE RISK			$\frac{12/18/1}{07/10/1}$		
		TEMPLETON GLOBAL	RD			VARIOUS		
		NGUARD SHORT TER				07/10/1		
		LLS FARGO ADVTG		<del></del>		07/10/1		
<del>e</del>		DIVIG CONTROL	EFIKG			07/10/1	404	11/13
_ <u>'</u> _g	<del></del>						-	
<u>я</u>							+	
<u></u>								
<u>-</u> -	<u>-</u>							
k					-			
<u> </u>								
m								
n								
0	· · · · · · · · · · · · · · · · · ·							
		(f) Depreciation allowed	(g) Cost or other basis		(h)	Gain or (loss)	ı	
	(e) Gross sales price	(or allowable)	plus expense of sale			lus (f) minus (g)	ı	
a	23,765.		23,735.					30.
b	25,112.		24,773.					339.
C	22,620.		24,397.					1,777.
d	11,787.		11,835.					-48.
e	10,843.		11,486.					-643.
f			•		·			
g								
h						, ,		
1								
J								
k								
$\overline{\perp}$								
m								
n								
0	,_,			ļ <u></u>				
	Complete only for assets showing	ng gain in column (h) and owned by			(I) Los	ses (from col. (h	1))	<i>u</i> >
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ı), ıf any		but n	of col. (h) gain ov ot less than "-0-"	ver col. )	(K),
a								30.
b	-							339.
С							<u> </u>	1,777.
d								-48.
е								<u>-643.</u>
f								
g				ļ				
h	··········				·			
_!_				<del></del>		····		
⊥	·						<del></del>	
k				<u> </u>				
				<u> </u>				
<u>m</u>								
<u>n</u>	<del> </del>							
0				<del>                                     </del>				
_	Capital gain act income as (act as	apital loss) { If gain, also enter -0	in Part I, line 7 1					1,345.
	Capital gain net income or (net ca		•	2				1,343.
3	Net short-term capital gain or (lost figain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an	d (6):					
	if (loss), enter "-0-" in Part I, line 8		J	3		N/A		

JOSEPH P HEENAN FAMILY FOUNDATION INC 27-2886960

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** any foundation manager contribution status of Name and address (home or business) or substantial contributor recipient 501 (C)(3) EDUCATIONAL AMERICAN CANCER SOCIETY P.O. BOX 22478 ORGANIZATION 500. OKLAHOMA CITY, OK 73123 THE SOCIETY OF THE FRIENDLY SONS OF 501 (C)(3) EDUCATIONAL ORGANIZATION ST. PATRICK P.O. BOX 2297 7,000. PHILADELPHIA, PA 19103 STARS YOUTH CENTER 501 (C)(3) EDUCATIONAL ORGANIZATION 8 COLEMAN SQUARE 3,000. HOWARD BEACH, NY 11414 NATIONAL MS SOCIETY 501 (C)(3) EDUCATIONAL 30 SOUTH 17TH STREET STE 800 ORGANIZATION PHILADELPHIA, PA 19103 100. Total from continuation sheets 10 600.

TOTAL TO FORM 990-PF, PART II, LINE 10B

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
CHARLES SCHWAB	12,405.		0.	12,405.	12,405	•
TO PART I, LINE 4	12,405.		0.	12,405.	12,405	•
FORM 990-PF		ACCOUNTI	NG	FEES		STATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CLIFTONLARSONALLEN,	LLP	1,500.		1,500.		0.
TO FORM 990-PF, PG	1, LN 16B	1,500.	=	1,500.		0.
FORM 990-PF		OTHER E	XPE	NSES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES	_	679.		679.		0.
TO FORM 990-PF, PG	1, LN 23 =	679.	_	679.		0.
FORM 990-PF		CORPORATE STOCK			STATEMENT 4	
DESCRIPTION				вос	K VALUE	FAIR MARKET VALUE
511.455 SHS FIDELIT 1663.315 SHS INNOVA 490.70 SHS SCOUT IN 740.871 SHS FIRST E 2331.858 SHS STONE 496.272 SHS WELLS F 6416 SHS BANK OF AM 1475 SHS CITIGROUP	TOR MATRIX TL FD AGLE OVERSI RIDGE REINS ARGO ADVTG ERICA CORP	INCM FD EAS SURANCE			0. 0. 0. 0. 0. 0. 62,294. 58,820.	0. 0. 0. 0. 0. 107,981. 76,331.

22 STATEMENT(S) 1, 2, 3, 4 10350512 131844 097-17062500 2015.03040 JOSEPH P HEENAN FAMILY FOUN 097-0021

121,114.

184,312.

FORM 990-PF CORPO	ORATE BONDS		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	ľ
1818.495 SHS TEMPLETON GLOBAL BOND	•	0.		0.
4099.010 SHS AVENUE CREDIT		0.		0.
2117.175 SHS NUVEEN HIGH YIELD MUNI		0.		0.
3746.738 SHS NUVEEM SHORT DUR HIGH		0.		0.
2094.294 SHS T ROWE PRICE SUMMIT MUN	I	0.		0.
745.853 SHS VANGUARD SHORT TERM TAX		0.		0.
7310.637 SHS BLACKROCK STRATEGIC INC	74,588.	71,425.		
TOTAL TO FORM 990-PF, PART II, LINE	74,588.	71,42	425.	
FORM 990-PF OTHER	INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	r
92 SHS POWERSHARES FTSE US	COST	9,102.	8,63	38.
625 SHS POWERSHS EXCH TRAD FD TR	COST	0.	·	0.
1241 SHS SCHW US LCAP GRO ETF	COST	60,706.	65,56	52.
1421 SHS SCHW US LCAP VAL ETF	COST	60,940.	60,30	07.
1610 SHS VANGUARD FTSE ETF	COST	66,291.	59,11	19.
393 SHS ISHARES CORE MSCI EMERGING	COST			
MKT		20,154.	15,48	
149 SHS ISHARES CORE S&P MID-CAP	COST	22,539.	20,75	
123 SHS JP MORGAN USD EMERGING MKT	COST	13,919.	13,01	11.
1414 SHS ISHARES CORE US AGGREGATE BOND	COST	157,470.	152,72	26.