2949100600303

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. Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service OCT 1, 2016 SEP 30, 2017 , and ending For calendar year 2016 or tax year beginning A Employer identification number Name of foundation THE SHANLEY FAMILY FOUNDATION 06-1548816 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (203) 869-1200 C/O CUMMINGS & LOCKWOOD LLC BOX 2505 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check he GREENWICH, CT 06836 D 1. Foreign organizations, check here G Check all that apply Initial return initial return of a former public charity Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Cash Accrual If the foundation is in a 60-month termination ___ Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 7,054,005. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not expenses per books income income necessarily equal the amounts in column (a)) N/A 1 Contributions, gifts, grants, etc., received 1,123,376. 2 Check ► _____ If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 166,802. STATEMENT 166,802. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 3,074,924 6a Net gain or (loss) from sale of assets not on line 10 5,813,367. 3,074,924. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) STATEMENT 1,123,376. 0. 11 Other income 4,365,102. 4,365,102. 12 Total Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 18,905. 18,905 0. STMT 3 16a Legal fees ♥b Accounting fees 0. 13,822. 13,822. STMT 4 c Other professional fees 274. 227. 0. Taxes Depreciation and depletion - V Occupancy Travel conferences, and meetings 7 21 Printing and publications 22 23 Other expenses 24 Total operating and administrative 33,001. 32,954 expenses. Add lines 13 through 23 250,000. 250,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 283,001 250,000. Add lines 24 and 25 27 Subtract line 26 from line 12 4,082,101 2 Excess of revenue over expenses and disbursements 4,332,148 b Net investment income (if negative, enter -0-) N/A

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

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c Adjusted net income (if negative, enter -0-)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	1 1	
	(must agree with end-of-year figure reported on prior year's return)	1	2,243,629.
2	Enter amount from Part I, line 27a	2	4,082,101.
3	Other increases not included in line 2 (itemize) ADJUST BOOK VALUE TO TAX COST	3	522,694.
4	Add lines 1, 2, and 3	4	6,848,424.
5	Decreases not included in line 2 (itemize)	5	0.
<u>6</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,848,424.

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Part IV' Capital Gains a	nd Lo	sses for Tax on In	vestment	Income						
O start by deliverable use of common start (200 she BALC Co.)						low ac - Purcl - Dona	nase `	c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a PUBLICLY TRADED SECURITIES							P			
b CAPITAL GAINS D	IVI	DENDS								
C		~								
d		· · · · · · · · · · · · · · · · · · ·			ļ					
<u>e</u>					<u> </u>					<u> </u>
(e) Gross sales price	(1)	epreciation allowed (or allowable)		t or other basis xpense of sale					n or (loss) (f) minus ((g)
a 5,812,412.				2,738,44	3.					3,073,969. 955.
b 955.										9 <u>5</u> 5.
<u>d</u>										
Complete only for assets showing	0210.10.0	column (h) and owned by t	he foundation	on 12/21/60				Onina (Cal	l /h\ aasa	
Complete only for assets showing		j) Adjusted basis		cess of col (I)					l (h) gain It less thai	
(i) FMV as of 12/31/69	(.	as of 12/31/69		col (j), if any	l			Losses (f	rom col (h))
a										3,073,969.
b										955.
C										
d										
e					_		 -			
2 Capital gain net income or (net cap	ntal loss)	If gain, also enter If (loss), enter -0-	in Part I, line	7 7	}	2				3,074,924.
3 Net short-term capital gain or (loss	,									
If gain, also enter in Part I, line 8, c			u (0)		1					
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur					للِـ	3_			<u> N/A</u>	<u> </u>
Was the foundation liable for the section of the section of the foundation does not qualify	y under s	section 4940(e) Do not co	mplete this pa	rt						Yes X No
1 Enter the appropriate amount in ea	ach colur	nn for each year, see the in	istructions be	fore making any e						(4)
Base period years Calandar year (or tay year healing)	a 10/	(b) Adjusted qualifying dist	tributions	Net value of no	(c) Incha		Distribution ratio (col (b) divided by col (c))			oùtion ratio
Calendar year (or tax year beginning 2015	9 111)		2,232.				6,843.		201 (U) UI	.044121
2014		22	8,977.				2,272			.048903
2013		19	4,913.				5,224.			.043168
2012			0,000.				4,963.			
2011		13	5,000.		<u>3</u>	<u>,66</u>	<u>9,007.</u>	·——		.036795
2 Total of line 1, column (d)								2		.216943
3 Average distribution ratio for the 5 the foundation has been in existen	•	•	on line 2 by 5,	or by the number	r of ye	ars		3		.043389
		•					•			
4 Enter the net value of noncharitable	e-use ass	sets for 2016 from Part X,	line 5		• •		•	4		6,564,981.
5 Multiply line 4 by line 3		• •						5		284,848.
6 Enter 1% of net investment income	e (1% of	Part I, line 27b)	•					6		43,321
7 Add lines 5 and 6								7		328,169
8 Enter qualifying distributions from	Part XII,	line 4						8		250,000
If line 8 is equal to or greater than See the Part VI instructions	line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usir	ng a 1	% tax	rate			
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		48816		Page 4
		e mstru	CHO	15)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	0	c c	12
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		0,0	43.
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			٥
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		C C	43
	Add lines 1 and 2		6,6	43.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		6,6	42
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0,0	43.
	Credits/Payments			
	2016 estimated tax payments and 2015 overpayment credited to 2016			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			^
	Total credits and payments Add lines 6a through 6d			<u>-0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			53.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8	6,6	<u>96.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	ļ	Yes	No
	any political campaign?	<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	<u>1b</u>	<u> </u>	Х
	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.			
C	Did the foundation file Form 1120-POL for this year?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ O . (2) On foundation managers ▶ \$ O .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$0.	İ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	X
	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 incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_3_	L_	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u>4a</u>		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 <u>b</u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	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		X
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CT			
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)	_	1	
_	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
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		1	
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	[X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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b If "Yes," did it have excess business holdings in 2016 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,

Yes X No

N/A

2b

3b

4a

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

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 $\overline{\mathbf{x}}$

statement - see instructions)

during the year?

c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2016.)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mus	t complete this	part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	tc , purposes			
а	Average monthly fair market value of securities			1a	1,029,259.
b	Average of monthly cash balances	·		1b	1,029,259. 5,635,696.
	Fair market value of all other assets			10	
d	Total (add lines 1a, b, and c)			1d	6,664,955.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	6,664,955.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, se	e instructions)		4	99,974.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on P.	art V, line 4		5	6,564,981.
6	Minimum investment return. Enter 5% of line 5			6	328,249.
P	foreign organizations check here and do not complete this part)	j)(5) private opera	ating foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	328,249.
2a	Tax on investment income for 2016 from Part VI, line 5	a	86,643.		
b	Income tax for 2016 (This does not include the tax from Part VI)	b			
C	Add lines 2a and 2b			2c	86,643. 241,606.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	241,606.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	241,606.
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 XII	l, line 1		7	241,606.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		•	<u>1</u> a	250,000.
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				
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	250,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investr	nent			
	income Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	250,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years	n calculating whet	ther the foundation (qualifies for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				241,606.
2 Undistributed income, if any, as of the end of 2016				211/0001
a Enter amount for 2015 only			249,989.	
b Total for prior years:		· · · · · · · · · · · · · · · · · · ·	215/3031	
,		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from			······································	
Part XII, line 4 > \$ 250,000.				
			240 000	
a Applied to 2015, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		249,989.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				11.
e Remaining amount distributed out of corpus	0.			<u></u>
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				······
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
ł t			······	
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions		U •	***************************************	
e Undistributed income for 2015 Subtract line			0.	
4a from line 2a Taxable amount - see instr f Undistributed income for 2016 Subtract	·····		<u> </u>	
lines 4d and 5 from line 1. This amount must				241 505
be distributed in 2017	· · · <u> </u>		141111,'111-1111111111111111111111111111	241,595.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	······································	 	
8 Excess distributions carryover from 2011	_			
not applied on line 5 or line 7	0.	***************************************	 	************
9 Excess distributions carryover to 2017.	_			
Subtract lines 7 and 8 from line 6a	0.	+++++	*******************************	
10 Analysis of line 9				
a Excess from 2012		,		
b Excess from 2013				
c Excess from 2014	•			
d Excess from 2015				
e Excess from 2016				

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THE SHANLEY FAMILY FOUNDATION 06-1548816 Form 990-PF (2016) Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CENTER FOR CONTEMPORARY PRINTING NONE PC ALL FOR UNRESTRICTED, MATHEWS PARK, 239 WEST AVE GENERAL CHARITABLE 38,375. NORWALK, CT 06850 PURPOSES BUILDERS BEYOND BORDERS NONE PC ALL FOR UNRESTRICTED, 66 FORT POINT ST GENERAL CHARITABLE NORWALK, CT 06855 PURPOSES 6,500. NEW LIFE ANIMAL RESCUE NONE PC ALL FOR UNRESTRICTED, 48 BAKER BLVD. GENERAL CHARITABLE MARLTON, NJ 08053 PURPOSES 3,125. PEDIATRIC HYDROCEPHALUS FOUNDATION NONE PC ALL FOR UNRESTRICTED, GENERAL CHARITABLE INC PURPOSES 66 CAROLINE STREET 2ND FLOOR WOODBRIDGE, NJ 07095 60,000. NONE EDUCATION AND HOPE PC ALL FOR UNRESTRICTED, P.O. BOX 486 GENERAL CHARITABLE NORWALK CT 06856 PURPOSES 5,000. SEE CONTINUATION SHEET(S) ▶ 3a 250,000. Total b Approved for future payment NONE

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٥.

≥ 3b

Total

TARRETTE TO THE PROPERTY OF TH	Part XVI-A	Analysis of Income-Producing	Activities
--	------------	------------------------------	------------

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					
b					
C					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments					
4 Dividends and interest from securities			14	166,802.	
5 Net rental income or (loss) from real estate		***************************************			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	1,123,376.	
8 Gain or (loss) from sales of assets other					
than inventory			18	3,074,924.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b	_				
c	_				
d	_				
e	_				
12 Subtotal Add columns (b), (d), and (e)			0.	4,365,102.	0.
13 Total. Add line 12, columns (b), (d), and (e)			•	13	4,365,102.
(See worksheet in line 13 instructions to verify calculations	<u> </u>				

V	- the loundar	on s exempt pi	urpuses (other t	nan by provioin	g funds for such	puipuses)			
									
-+	-								
					-				
	-								
					-				
									
								· - · -	
-+		·							
-+									
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-+			-						
									
-+									
-+									
									
-+									
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	Exempt Organ	izations						
1 Did the o	rganization directly or indi	rectly engage in any	of the following	g with any other organiza	ation described in sec	tion 501(c) of		Yes No
	(other than section 501(c							
	s from the reporting found							
(1) Casi	· •	_	•	•			1a(1)	X
(2) Othe	er assets						1a(2)	X
	nsactions					•		
	s of assets to a nonchanta	ble exempt organiza	ation				16(1)	Х
	chases of assets from a no						1b(2)	X
	tal of facilities, equipment,	· ·				•	1b(3)	X
	nbursement arrangements			••	•	•	1b(4)	X
• •	ns or loan guarantees						1b(5)	X
	ormance of services or me	Amhershin ar fundra	usina salieitatie	ine	•		1b(6)	X
	of facilities, equipment, ma				• •	•	10(0)	X
	swer to any of the above is				always show the fair	market value of the ac		
	es given by the reporting f							cis,
	(d) the value of the goods,			ca 1005 triair tair market v	aide in any nansaeno	i or sharing arrangen	ione, snow in	
(a) Line no	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transaction	s and sharing an	mngements
14/2	(5) / 11110011(111101100	(e) riume c	N/A	o oxompt organization	(a) Description	ii oi tiansiers, tiansaction	s, and snaining an	angements
		 	N/A					
		 						
		 						
		 						
								
		 						
		-						
		ļ						
		 						
								
		 						
								
		<u> </u>						
2a Is the for	undation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt orga	anizations described			
	n 501(c) of the Code (othe	•	c)(3)) or in sec	tion 527?			Yes	X No
b If "Yes," o	complete the following sch							
	(a) Name of org	ganization		(b) Type of organizatio	n	(c) Description of rela	ationship	
	N/A							
	er penalties of perjuit declare	that I have examined to	nis return, includir	ng accompanying schedules a	and statements, and to the	best of my knowledge	May the IRS	discuss this
Sign	belief, it is to constitutional con	7 7 17 17 17 17 17 1 01 p		in taxpayer) is based on all inf	ormation of which prepare	er has any knowledge	return with the	e preparer
Here	your o		Tute	31 12/20/17	TRUST	EE	X Yes	
Sig	nature of officer or trustee	, — (Date	Title		-	
	Print/Type preparer's na	ame	Preparer's s	ıgnature	Date	Check If	PTIN	
				4		self- employed		
Paid	ALBERT C.	RUA	M	e M	10/3/17		P00465	056
Preparer			LOCKWOO	D LLC		Firm's EIN ► 06		
Use Only	, o					I IIII 3 LIIV P OC		
	Firm's address ▶ P .	O. BOX 2	505			+		
	1	REENWICH,		36		Phono no 203	8-869-1	200
	<u> </u>	LLLINICH,	<u> </u>			Phone no 203		200)-PF (2016)

Part XV Supplementary Informat				
3 Grants and Contributions Paid During th				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
PROVERBS 12:10 ANIMAL RESCUE	NONE	PC	ALL FOR UNRESTRICTED,	
P.O. BOX 210830		ļ	GENERAL CHARITABLE	2 105
NASHVILLE, TN 37221		 	PURPOSES	3,125.
FACING ADDICTION	NONE	PC	ALL FOR UNRESTRICTED,	
100 MILL PLAIN ROAD, 3RD FLOOR			GENERAL CHARITABLE	
DANBURY, CT 06811			PURPOSES	6,250.
STAND TRUE PRO LIFE OUTREACH	NONE	PC	ALL FOR UNRESTRICTED,	
19 S. CHERRY STREET]	GENERAL CHARITABLE	
TROY, OH 45393		 	PURPOSES	3,125.
FAIRFIELD THEATRE COMPANY	NONE	PC	ALL FOR UNRESTRICTED,	
70 SANFORD STREET			GENERAL CHARITABLE	
FAIRFIELD, CT 06824			PURPOSES	2,500.
FEEDING AMERICA	NONE	PC	ALL FOR UNRESTRICTED,	
35 EAST WACKER DRIVE SUITE 2000	10.12	1.0	GENERAL CHARITABLE	
CHICAGO, IL 60601			PURPOSES	6,250.
THE HERITAGE FOUNDATION	NONE	PC	ALL FOR UNRESTRICTED,	
214 MASSACHUSETTS AVENUE, NE			GENERAL CHARITABLE	
WASHINGTON, DC 20002		-	PURPOSES	33,375.
MILE VOTOR OF MILE MADMING THE	NOVE	70		
THE VOICE OF THE MARTYRS INC P.O. BOX 443	NONE	PC	ALL FOR UNRESTRICTED, GENERAL CHARITABLE	
BARTLESVILLE, OK 74005			PURPOSES	3,125.
LEADERSHIP INSTITUTE	NONE	PC	ALL FOR UNRESTRICTED,	
1101 N HIGLAND STREET			GENERAL CHARITABLE	
ARLINGTON, VA 22201		 	PURPOSES	33,375.
PENTANGLE	NONE	PC	ALL FOR UNRESTRICTED,	
31 THE GREEN			GENERAL CHARITABLE	
WOODSTOCK, VT 05091			PURPOSES	6,000.
PURPLE CRAYON PRODUCTIONS INC.	NONE	PC	ALL FOR UNRESTRICTED,	
P.O. BOX 158			GENERAL CHARITABLE	
SOUTH POMFRET, VT 05067			PURPOSES	2,000.
Total from continuation sheets		·	· · · · · · · · · · · · · · · · · · ·	137,000.

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	Contribution	
JPPER VALLEY HAVEN INC	NONE	PC	ALL FOR UNRESTRICTED,	
713 HARTFORD AVENUE			GENERAL CHARITABLE	
WHITE RIVER JUNCTION, VT 05001			PURPOSES	4,500
THE CATO INSTITUTE	NONE	PC	ALL FOR UNRESTRICTED,	
1000 MASSACHUSETTS AVE NW		**	GENERAL CHARITABLE	
WASHINGTON , DC 20001			PURPOSES	33,375
		 		
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	<u></u>	1		
Total from continuation sheets			<u></u>	

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2016

Employer identification number

	THE SHANLEY FAMILY FOUNDATION	06-1548816
Organization type (checl	k 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	
• -	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	Rule. See instructions.
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin any one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a)(any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppo (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16: utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ibutions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or edulated to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, enter purpose. Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from some exclusively for religious, charitable, etc., purposes, but no such contributions totaled are here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because a able, etc., contributions totaling \$5,000 or more during the year	more than \$1,000. If this box us, charitable, etc.,
but it must answer "No" certify that it doesn't med	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	Form 990-PF, Part I, line 2, to
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

THE SHANLEY FAMILY FOUNDATION

06-1548816

			1310010
Part I	Contributors (See Instructions). Use duplicate copies of Part I if additi	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF WILLIAM C. SHANLEY, III CUMMINGS & LOCKWOOD LLC, BOX 2505 GREENWICH, CT 06836	\$\1,123,376.	Person X Payroll
(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.)

Employer identification number

THE SHANLEY FAMILY FOUNDATION

06-1548816

(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
		\$	
(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	anization		Employer identification number			
THE SH	NANLEY FAMILY FOUNDATION	N	06-1548816			
Part III		ributions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
	Use duplicate copies of Part III if addition	al space is needed.	less for the year (cher this into once)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
	(e) Transfer of gift					
	Transferee's name, address, as	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gift	t			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_		(e) Transfer of gift	t			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF DIV	IDENDS	AND INTE	REST	FROM SEC	URITIES	Si	TATEMENT	1
	OSS OUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOK	NET II	B) NVEST- INCOME	(C) ADJUSTI NET INCO	-
MERRILL LYNCH 16	7,757.	9	55.	166,80	2. 160	5,802.		
TO PART I, LINE 4	7,757.	9	55.	166,80	2. 160	5,802.		
FORM 990-PF		OTHER	INCO	OME		SI	TATEMENT	2
DESCRIPTION				(A) EVENUE R BOOKS	(B) NET INVI MENT INC		(C) ADJUSTEI NET INCOI	
MERRILL LYNCH IRA		_		1,123,376.	1,123	,376.		
TOTAL TO FORM 990-PF, PA	RT I,	LINE 11 =		1,123,376.	1,123	,376.		
FORM 990-PF		LEGA	L FI	EES		S	FATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) ET INVEST- ENT INCOME		STED	(D) CHARITAI PURPOSI	
CUMMINGS & LOCKWOOD, LEGAL ACCOUNTING AND TAX PREPARATION FEES	AL	18,905		18,905				0.
TO FM 990-PF, PG 1, LN 1	6A =	18,905	 - =	18,905	· .			0.
FORM 990-PF	TO	HER PROFE	SSI	ONAL FEES		S	PATEMENT	4
					10	`	(D)	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) ET INVEST- ENT INCOME		STED	(D) CHARITA PURPOS	
DESCRIPTION MERRILL LYNCH FEES		EXPENSES	_ M	ET INVEST-	ADJUS NET II	STED	CHARITA	

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
U.S. TREASURY, EXCISE TAX FOREIGN TAXES	47. 227.		0. 7.	0.
TO FORM 990-PF, PG 1, LN 18	274.	22	7.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH STOCK A/C 7EG-C		_	400,903. 757,289.	441,101. 798,101.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	_	1,158,192.	1,239,202.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 7
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH BOND A/C 7EG-02	2244		1,376,862.	1,388,660.
TOTAL TO FORM 990-PF, PART I	I, LINE 10C	_	1,376,862.	1,388,660.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 8
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH MUTUAL FUND A/O		COST	3,512,440.	3,625,213.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		3,512,440.	3,625,213.

FORM 990-PF

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

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EDWARD F. RODENBACH CUMMINGS & LOCKWOOD LLC PO BOX 2505 GREENWICH, CT 06836

TELEPHONE NUMBER

203-869-1200

FORM AND CONTENT OF APPLICATIONS

WRITTEN REQUESTS, WITH DETAILED INFORMATION REGARDING ENTITY REQUESTING FUNDS AND DETAILED INFORMATION REGARDING THE CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY OR EDUCATION USE TO WHICH THE FUNDS WILL BE PUT.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

RESTRICTIONS - AWARDS FOR CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES. LIMITATIONS - TRUSTEE'S SOLE DISCRETION AS TO AMOUNT AND/OR ANY RECIPIENT.