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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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 instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017

Name of foundation
THE HAWK FAMILY FOUNDATION

A Employer identification number
42-1719365

Number and street (or P O box number if mail is not delivered to street address)
1705 MADISON AVENUE

Room/suite

B Telephone number (see instructions)
(570) 342-7487

City or town, state or province, country, and ZIP or foreign postal code
DUNMORE, PA 18509

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

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 *(from Part II, col (c), line 16)* ▶$ 24,064,458

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*	**(a)** Revenue and expenses per books	**(b)** Net investment income	**(c)** Adjusted net income	**(d)** Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc, received (attach	20,627,361			

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	13,622	18,493,138	18,493,138
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)	16,755		
7	Other notes and loans receivable (attach schedule) ▶			

[redacted]

1a	See Additional Data Table			
b				
c				
d				
e				

	(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)
a	See Additional Data Table			
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
a				
b				
c				
d				
e				

Part IV **Capital Gains and Losses for Tax on Investment Income**

(a)	(b) How acquired	(c)	(d)
[redacted]			

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	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)**			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b		1	2,089
c	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-)		2	0
3	Add lines 1 and 2.		3	2,089
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	2,089
6	Credits/Payments			
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a 748		
b	Exempt foreign organizations—tax withheld at source	6b		

Part VII-A **Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			

[redacted]

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No
(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes	☑ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID W HAWK 1705 MADISON AVENUE DUNMORE, PA 18509	TRUSTEE 2 00	0	0	0
ANN M HAWK 1705 MADISON AVENUE DUNMORE, PA 18509	TRUSTEE 2 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over $50,000. . . . . ▶ 0

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over $50,000 for professional services. . . . . ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 . . . . . ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	1,656,196
b	Average of monthly cash balances	1b	1,167,683
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	2,823,879
e	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

[redacted]

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	327,369	3,368,259	0 097192
2015	314,013	3,259,360	0 096342
2014	166,242	3,090,888	0 053785
2013	138,415	2,191,883	0 063149
2012	71,190	1,478,234	0 048159

2	**Total** of line 1, column (d)	2	0 358627
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 071725
4	Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	2,781,521
5	Multiply line 4 by line 3	5	199,505
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	2,089
7	Add lines 5 and 6	7	201,594
8	Enter qualifying distributions from Part XII, line 4	8	350,044

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI

[redacted]

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				136,987
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013. 29,314				
c From 2014. 12,665				
d From 2015. 151,239				
e From 2016. 159,266				
f **Total** of lines 3a through e.	352,484			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ $ 350,044				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election	0			

[redacted]

instructions

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c 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					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the 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 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "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 support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				348,000
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	2,603	
4 Dividends and interest from securities. . . .			14	44,602	
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.					
8 Gain or (loss) from sales of assets other than inventory			18	63,225	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a NEW YORK LIFE INSURANCE [7036]					6,599
b NEW YORK LIFE INSURANCE [7038]					37,210
c NEW YORK LIFE INSURANCE [2699]					68,830
d REFUND OF EXCISE TAXES					748
e					
12 Subtotal Add columns (b), (d), and (e). .		0		110,430	113,387
13 **Total.** Add line 12, columns (b), (d), and (e).				**13**	223,817

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
11A	LIFE INSURANCE POLICIES WERE SURRENDERED DURING THE CURRENT YEAR AND INVESTED REQUIRED PROCEEDS AND EARNINGS WILL BE DISTRIBUTED ANNUALLY AS CHARITABLE CONTRIBUTIONS

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		**Yes**	**No**
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2018-05-03	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☑	PTIN
PETER J LOFTUS CPA		2018-05-03		P00011687
Firm's name ▶ BAKER TILLY VIRCHOW KRAUSE LLP				Firm's EIN ▶39-0859910
Firm's address ▶ 46 PUBLIC SQUARE WILKESBARRE, PA 187012681				Phone no (570) 820-0100

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
010 SHS NATIONAL OIL WELL VARCO INC	P	2016-12-13	2017-04-25
251 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2017-03-21	2017-04-28
382 SHS NATIONAL OIL WELL VARCO INC	P	2016-06-24	2017-04-25
405 SHS NATIONAL OIL WELL VARCO INC	P	2016-09-27	2017-04-25
449 SHS NATIONAL OIL WELL VARCO INC	P	2017-03-28	2017-04-28
459 SHS TRANSOCEAN LIMITED COM	P	2015-09-23	2017-04-28
473 SHS NATIONAL OIL WELL VARCO INC	P	2016-12-13	2017-04-28
1 163TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2015-12-03	2017-04-25
1 185 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2015-09-03	2017-04-25
1 206 TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2014-12-02	2017-04-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
			0
8		8	0
16		16	0
17		16	1
15		16	-1
5		6	-1
14		15	-1
35		76	-41
36		75	-39
37		69	-32

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			0
			0
			0
			1
			-1
			-1
			-1
			-41
			-39
			-32

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
1 223 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2015-06-04	2017-04-25
1 331 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2016-03-14	2017-04-25
1 342 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2015-03-03	2017-04-25
1 414 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2016-06-07	2017-04-25
1 461 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2014-06-02	2017-04-25
1 485 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2014-03-10	2017-04-25
1 485 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2014-09-04	2017-04-25
1 518 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2016-09-09	2017-04-25
1054 981 SHS THORNBURG GLOBAL OPPT FD INSTL	P	2016-11-17	2017-09-18
10716 744 SHS RIVERNORTH/OAKTREE HIGH INCOME CL I	P	2017-01-01	2017-03-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
37		75	-38
41		76	-35
41		76	-35
43		76	-33
45		75	-30
45		74	-29
44		74	-30
46		77	-31
32,789		28,125	4,664
103,524		109,843	-6,319

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-38
			-35
			-35
			-33
			-30
			-29
			-30
			-31
			4,664
			-6,319

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
11 816 SHS TRANSOCEAN LIMITED COM	P	2015-03-18	2017-04-25
148 768 SHS OPPENHEIMER STEEL PATH MLP	P	2017-01-01	2017-04-12
1758 904 SHS OAKMARK GLOBAL SELECT FD INVESTOR	P	2014-11-11	2017-04-25
1816 261 SHS OAKMARK GLOBAL SELECT FD INVESTOR	P	2014-11-11	2017-09-18
1949 SHS OPPENHEIMER STEEL PATH MLP	P	2017-01-01	2017-04-12
2 098 SHS TRANSOCEAN LIMITED COM	P	2015-06-17	2017-04-25
2 110 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2017-03-21	2017-04-25
2 124 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2016-12-21	2017-04-25
2 187 SHS TRANSOCEAN LIMITED COM	P	2015-09-23	2017-04-25
2 836 SHS NATIONAL OIL WELL VARCO INC	P	2015-06-26	2017-04-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

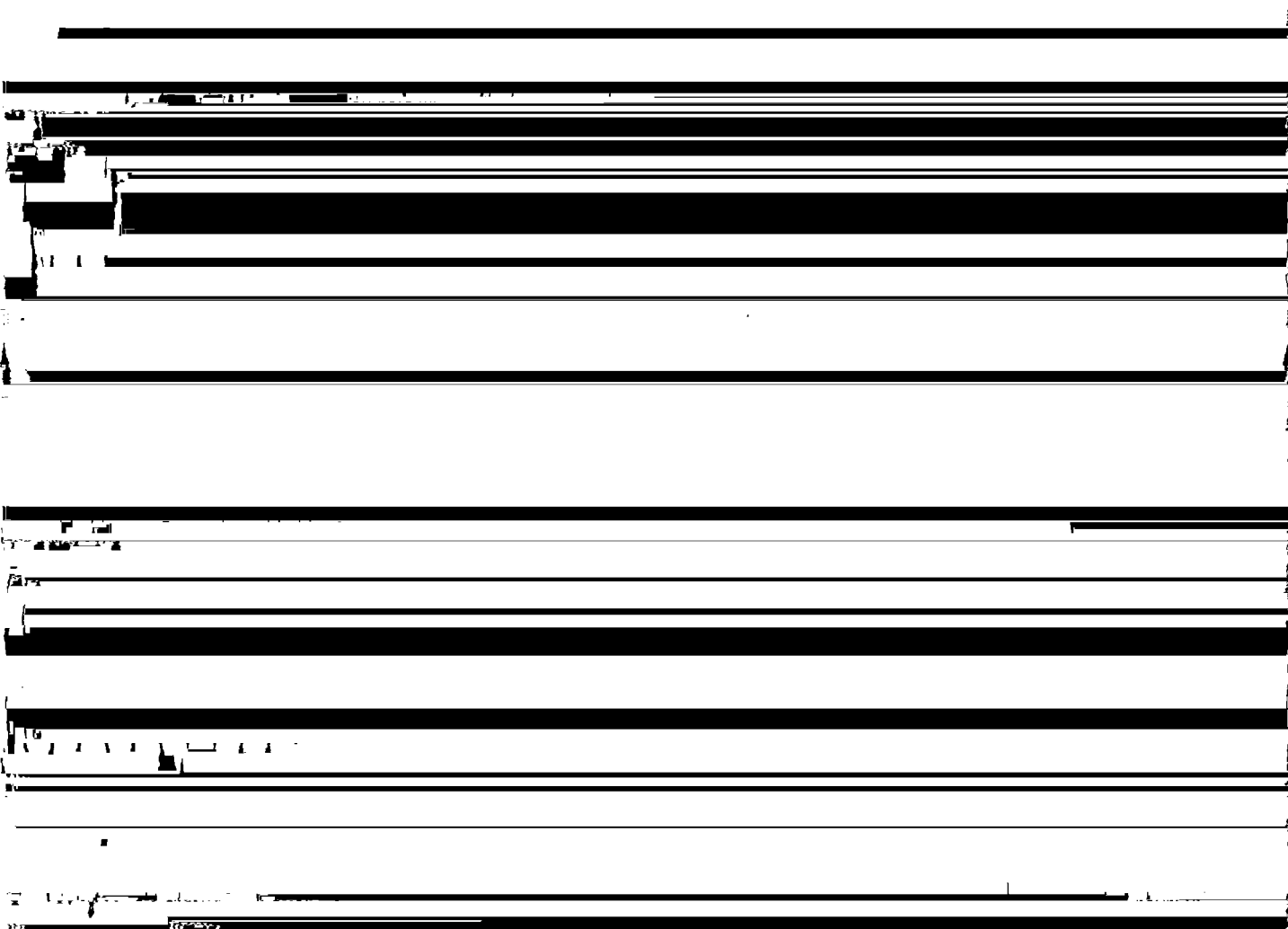
(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
136		170	-34
1,452		1,549	-97
32,100		28,767	3,333
35,453		29,705	5,748
19,022		20,290	-1,268
24		36	-12
64		69	-5
65		77	-12
25		30	-5
101		138	-37

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-34
			-97
			3,333
			5,748
			-1,268
			-12
			-5
			-12
			-5
			-37

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
2 884 SHS TRANSOCEAN LIMITED COM	P	2014-03-19	2017-04-25
207 SHS TRANSOCEAN LIMITED COM	P	2013-12-26	2017-04-25
252 SHS TEVA PHARMACEUTICAL INDUSTRIES SPON ADR	P	2013-12-26	2017-04-25
26973 507 SHS WASATCH EMERGING MARKETS SMALL CAP FD	P	2016-08-12	2017-04-12
3 514 SHS TRANSOCEAN LIMITED COM	P	2014-06-18	2017-04-25
3 737 SHS NATIONAL OIL WELL VARCO INC	P	2015-09-25	2017-04-25
300 SHS NATIONAL OIL WELL VARCO INC	P	2015-05-20	2017-04-25
4 064 SHS NATIONAL OIL WELL VARCO INC	P	2015-12-18	2017-04-25
4 431 SHS NATIONAL OIL WELL VARCO INC	P	2016-03-25	2017-04-25
4 630 SHS TRANSOCEAN LIMITED COM	P	2014-09-17	2017-04-25



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired	**(c)** Date acquired	**(d)** Date sold

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000).

DAVID W HAWK
ANN M HAWK

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual	Foundation	Purpose of grant or	Amount

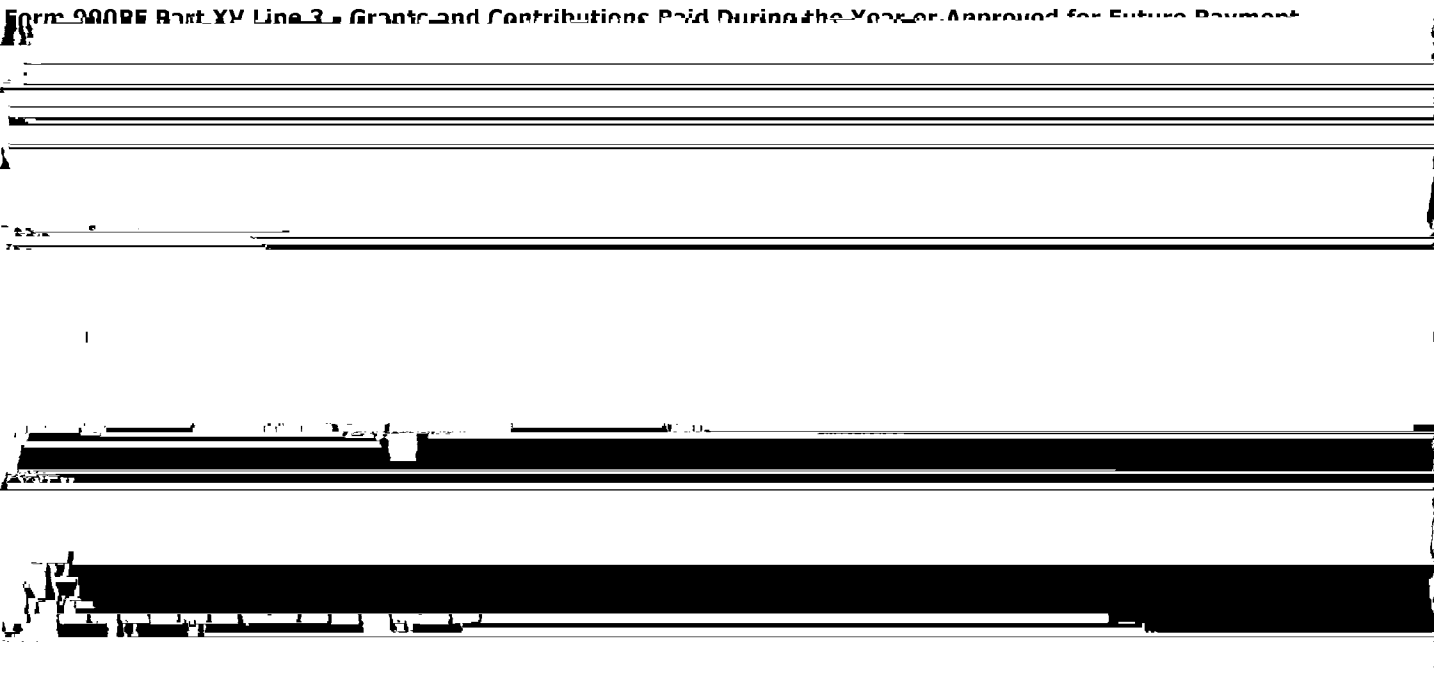
Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KEYSTONE COLLEGE1 COLLEGE GREEN LA PLUME TOWNSHIP, PA 18440	NONE	PUBLIC	CHARITABLE	25,000
MARYWOOD UNIVERSITY 2300 ADAMS AVENUE SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	30,000
MEALS ON WHEELS OF NEPA 541 WYOMING AVE SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	2,000
MISERICORDIA UNIVERSITY 301 LAKE STREET DALLAS, PA 18612	NONE	PUBLIC	CHARITABLE	500
NATIVITY MIGUEL SCHOOL OF SCRANTON 1 KNOX ROAD SCRANTON, PA 18505	NONE	PUBLIC	CHARITABLE	75,000
Total 3a . . . . . ▶				348,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SCRANTON AREA FOUNDATION 615 JEFFERSON AVE SUITE 102 SCRANTON, PA 18510	NONE	PUBLIC	CHARITABLE	2,000
SCRANTON PUBLIC THEATRE 126 W MARKET ST SCRANTON, PA 18508	NONE	PUBLIC	CHARITABLE	1,000
ST MARY OF MOUNT CARMEL CHURCH 322 CHESTNUT STREET DUNMORE, PA 18512	NONE	PUBLIC	CHARITABLE	17,500
ST FRANCIS OF ASSISI KITCHEN 500 PENN AVE SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	1,000
THE GEISINGER COMMONWEALTH MEDICAL COLLEGE 525 PINE STREET SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	50,000
Total . . . . . ▶ 3a				348,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NEIGHBORWORKS OF NE PENNSYLVANIA 709 E MARKET STREET SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	1,000
FAMILY TO FAMILYPO BOX 13 SCRANTON, PA 18503	NONE	PUBLIC	CHARITABLE	2,500
LACKAWANNA HISTORICAL SOCIETY 232 MONROE AVE SCRANTON, PA 18510	NONE	PUBLIC	CHARITABLE	1,000
THE MILK SAVING STARVING CHILDREN FOUNDATION 801 N WASHINGTON AVE SCRANTON, PA 18509	NONE	PUBLIC	CHARITABLE	500
Total . . . . . ▶ 3a				348,000

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491130012188

TY 2017 Accounting Fees Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,275	0		1,275

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TY 2017 Investments Corporate Bonds Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
INGARGIOLA WEALTH MANAGEMENT ACCOUNT # B37-491654	258,177	254,875

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TY 2017 Investments Corporate Stock Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INGARGIOLA WEALTH MANAGEMENT ACCOUNT # B37-491654	161,291	256,304

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TY 2017 Investments - Other Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INGARGIOLA WEALTH MANAGEMENT ACCOUNT # B37-491654	FMV	2,279,946	2,378,274
PERSHING ADVISOR SOLUTIONS LLC ACCOUNT #345113	FMV	2,683,230	2,681,867

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TY 2017 Other Assets Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PACIFIC LIFE INSURANCE POLICY #1A27234090	742,752	0	0
NEW YORK LIFE INSURANCE POLICY #62852699	393,811	0	0
NEW YORK LIFE INSURANCE POLICY #60327036	90,321	0	0
NEW YORK LIFE INSURANCE POLICY #60327038	371,436	0	0
TIAA CREF MU000799	788,048	0	0

TY 2017 Other Deductions Schedule

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TY 2017 Other Expenses Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT INVESTMENT FEE- PERSHING	2,535	2,535		0
MANAGEMENT INVESTMENT FEE- INGARGIOLA	11,643	11,643		0
WIRE FEE	17	8		9

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TY 2017 Other Income Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

TY 2017 Other Increases Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Description	Amount
INCREASE IN NET CASH SURRENDER VALUES	31,892

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TY 2017 Taxes Schedule

Name: THE HAWK FAMILY FOUNDATION

EIN: 42-1719365

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	748	0		0
FOREIGN TAXES PAID	760	0		760

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491130012188

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

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 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

2017

Name of the organization
THE HAWK FAMILY FOUNDATION

Employer identification number
42-1719365

Organization type (check 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	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
THE HAWK FAMILY FOUNDATION	42-1719365

Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERTRUDE HAWK CHOCOLATE 9 KEYSTONE INDUSTRIAL PARK DUNMORE, PA18512	$ 20,391,120	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
2	DAVID HAWK 1705 MADISON AVENUE DUNMORE, PA18509	$ 246,241	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)

Name of organization	Employer identification number
THE HAWK FAMILY FOUNDATION	42-1719365

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

(a)	(b)	(c) FMV (or estimate)	(d)

Name of organization	Employer identification number
THE HAWK FAMILY FOUNDATION	42-1719365

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $** _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee

[redacted]