(F.&F) 850

Form, **990-PF**

EXTENDED TO NOVEMBER 15, 2018

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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

For	cale	ndar year 2017 or tax year beginning		, and ending		
		of foundation	·		A Employer identification	number
		LIAM AND CARLA HANEY FA				
		NDATION INC C/O WILLIAM		45-4907691		
		and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
		CAPE MARCO DR. UNIT 23			239-642-87	20
		town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
_		CO ISLAND, FL 34145		· · · · · · · · · · · · · · · · · · ·]	
G	Chec	k all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2 Eccelon complessions —	ation the OEO/ task
_		Address change	Name change		Foreign organizations me check here and attach co	mputation
H_	_	k type of organization: X Section 501(c)(3) ex			E If private foundation sta	tus was terminated
		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	under section 507(b)(1)	(A), check here
		arket value of all assets at end of year J Account		Accrual	F If the foundation is in a	60-month termination
	rom⊣ ►\$		ther (specify)		under section 507(b)(1)	(B), check here
	art i	1,136,121. (Part I, colur Analysis of Revenue and Expenses		IS.)		T 7.0
150	31 L I	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
_	1	necessarily equal the amounts in column (a)	evheuses het nooks		income	(cash basis only)
	1 2	Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B	,t	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N/A	, , , , , , , , , , , , , , , , , , ,
	2	Interest on savings and temporary cash investments	*	<u> </u>		2 ''
_	3		27,066.	27 066	- -	55.60
	5.	Dividends and interest from securities	27,000.	27,066.		STATEMENT 1
	Ι.	Gross rents	\$* 'n *		. 20 4 3 7 7 7 1 8 8 9 1	20 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13
	b		204.	7 × 345	\$11/1 · 12/2/	200 / 200 /
9	0	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 55,170.	Z04.			**************************************
Revenue	7	Capital gain net income (from Part IV, line 2)	2/48X / A 20	204.		
å	8	Net short-term capital gain	Marie Marie	204.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	9	Income modifications	**************************************			
	10a	Gross sales less returns				
		Less Cost of goods sold				/ * ***
		Gross profit or (loss)	-7 199x 7 ******			1
	11	Other income		\$*** \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		S89.86.58
	12	Total. Add lines 1 through 11	27,270.	27,270.		SEC. DOMEST
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
es	16a	Legal fees				
enses	Ь	Accounting fees				
		Other professional fees				
ě	17	Interest				
Administrative Exp	18	Taxes STMT 2	1,125.	436.		0.
ist	19	Depreciation and depletion				
Ē	20	Occupancy MAY 27 220 10				
		Occupancy MAY 2 2000 In Travel conferences, and meetings				
pue	22	Printing and publications				
ğ	23	Other expenses—				
Operating and	24	Total operating and administrative				
ber		expenses. Add lines 13 through 23	1,125.	436.		0.
O	23	Contributions, gifts, grants paid	49,193.			49,193.
	26	Total expenses and disbursements.				
_		Add lines 24 and 25	50,318.	436.		49,193.
	27	Subtract line 26 from line 12:	_ :	-		
		Excess of revenue over expenses and disbursements	-23,048.			
		Net investment income (if negative, enter -0-)		26,834.		
	C	Adjusted net income (if pegative enter -0-)	I I		NI/A	I I

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

WILLIAM AND CARLA HANEY FAMILY

Form 990-PF (2017) FOUNDATION INC C/O WILLIAM HANEY 45-4907691 Page 2 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 year (a) Book Value (b) Book Value (c) Fair Market Value 3,731. 8,448. 1 Cash - non-interest-bearing 8,448. 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 3 962,397. 13 Investments - other 934,632. 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) 966,128. 943,080 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here **▶** | X | and complete lines 27 through 31. þ 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 29 Retained earnings, accumulated income, endowment, or other funds 966,128. 943,080. 30 Total net assets or fund balances 966,128. 943,080 966,128. 943,080 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 966,128. Enter amount from Part I, line 27a -23,048. Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 943,080. Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 943,080.

WILLIAM AND CARLA HANEY FAMILY FOUNDATION INC C/O WILLIAM HANEY

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (for example, real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 18 CAPITAL GAIN DISTRIBUTIONS VARIOUS 12/31/17 b DETAIL AVAILABLE IN TAXPAYER'S FILE P VARIOUS 12/31/17 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 170. 170 55,000. 54,966 34. (I) Gains (Col. (h) gain minus col (k), but not less than -0-) or Losses (from col. (h)) Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (j) Adjusted basis (k) Excess of col. (i) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any 170. 34. е If gain, also enter in Part I, line 7 204. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V. Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? X Yes No If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part, Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col (b) divided by col. (c)) (a)
Base period years
Calendar year (or tax year beginning in) (c) Adjusted qualifying distributions Net value of noncharitable-use assets 2016 2015 2014 2013 2012 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 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 instructions

45-4907691

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Form 990-PF (2017)

WILLIAM AND CARLA HANEY FAMILY 45-4907691 Form 990-PF (2017) FOUNDATION INC C/O WILLIAM HANEY Page 4 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. _ (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 537 b Domestic foundations that meet the section 4940(e) requirements in Part V, check here

and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). 2 0 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 537 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 537 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 Ō. b Exempt foreign organizations - tax withheld at source 553. c Tax paid with application for extension of time to file (Form 8868) вс d Backup withholding erroneously withheld 553 7 Total credits and payments Add lines 6a through 6d 7 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax 11 Refunded > Part VII-A | Statements Regarding Activities Ýes Nο 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 1a any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b 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 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation. ▶ \$ _____ \$ ____ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 X remain in the governing instrument? 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

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

of each state as required by General Instruction G? If "No," attach explanation

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)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

10 X Form **990-PF** (2017)

8b | X

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WILLIAM AND CARLA HANEY FAMILY Form 990-PF (2017) FOUNDATION INC C/O WILLIAM HANEY 45-4907691 Page 5 Part VII-A | Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions X 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address N/A 14 The books are in care of WILLIAM F. HANEY Telephone no. $\triangleright 239 - 642 - 8720$ Located at ▶940 CAPE MARCO DR. UNIT 2305, MARCO ISLAND ZIP+4 ▶34145 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year N/A 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, Yes No securities, or other financial account in a foreign country? X 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes 1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A 1b Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 10 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)); a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect

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

b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)

N/A

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

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

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X

N/A

2b

3b

4a

statement - see instructions.)

		•			
45-	4	90	76	59	1

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contini}	ued)		
5a'During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	14945(e))?	Ye	s X No		ΓΠ
(2) Influence the outcome of any specific public election (see section 4955); or		ctly,	Ì	1]]
any voter registration drive?					
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization				į	li
4945(d)(4)(A)? See instructions	1 400011004 117 00011011	☐ Ye	s X No	ļ	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo				
the prevention of cruelty to children or animals?	or obdeduction purposed, or to		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described ii			ŀ	
section 53.4945 or in a current notice regarding disaster assistance? See instru	•	TTOGUILLIONS	N/A	5b	+-
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 fr	·	nad	<u> </u>	j	
expenditure responsibility for the grant?		/A 🗀 Ye	s No	Ì	{ }
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		/ 22		-	l i
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				1	1 1
	pay premiums on		s X No		
a personal benefit contract?		1€	S A NO	eh -	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?		-	6b	┢╧┑
If "Yes" to 6b, file Form 8870.	h . W		s X No	/	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6		7b	┼──
Part VIII Information About Officers, Directors, Truste		agers Highly	N/A	10	ь—
Paid Employees, and Contractors	es, roundation Mai	ayers, mgmy			
List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account allowa	, other inces
VILLIAM F. HANEY		CRETARY			
940 CAPE MARCO DR. UNIT 2305	·				
MARCO ISLAND, FL 34145	0.00	0.	0.	1	0.
	VICE PRESIDEN	T; TREASU			
940 CAPE MARCO DR. UNIT 2305		[l	
MARCO ISLAND, FL 34145	0.00	0.	0.		0.
	DIRECTOR				
V136 N6069 WEYER FARM DR.		ł	1		
MENOMONEE FALLS, WI 53051	0.00	0.	0.		0.
	DIRECTOR				
18915 CHAPEL HILL DRIVE					
BROOKFIELD, WI 53045	0.00	0.	0.	ļ	0.
2 Compensation of five highest-paid employees (other than those inc					
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	nours per week devoted to position	(c) Compensation	and deferred compensation	account allowa	., other ances
NONE					
	1				
	<u> </u>				
	1				
	1	l			
		 			
	1	ļ	Į.		
	<u> </u>	 	i		
	1	1	!	1	
Total number of other employees paid over \$50,000		•			0
				OON DE	(0047)

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WILLIAM AND CARLA HANEY FAMILY FOUNDATION INC C/O WILLIAM HANEY

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Part Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(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 Partix A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produces		Expenses
1 THE WILLIAM AND CARLA HANEY FAMILY FOUNDATION AND OPERATED FOR THE SOLE PURPOSE OF MAKING CA		
CONTRIBUTIONS TO QUALIFYING PUBLIC CHARITIES.	THE	0.
2 FOUNDATION DOES NOT ENGAGE IN ANY OTHER DIRECT ACTIVITIES.	CHARITABLE	
ACTIVITIES.		0.
3		
4		
Part X-B Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 N/A		
2	<u> </u>	
All other program-related investments See instructions.		
3		
	-	
Total. Add lines 1 through 3		0.

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<u>P</u>	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations, s	ee 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	1,073,719. 9,827.
b	Average of monthly cash balances	1b	9,827.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d_	1,083,546.
e	Reduction claimed for blockage or other factors reported on lines 1a and	i İ	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,083,546.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,253.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,067,293.
6	Minimum investment return. Enter 5% of line 5	6	53,365.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	53,365.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI.)	,	
c	Add lines 2a and 2b	2c	537.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	52,828.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	52,828.
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	52,828.
F	art XII Qualifying Distributions (see instructions)		
-	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes;	* ***********************************	
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	49,193.
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:	Ÿ	
а	Suitability test (prior IRS approval required)	3a	
ь	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	49,193.
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	49,193.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	
	4940(e) reduction of tax in those years.		

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,		1000 0 prior to 2010	2010	2017
line 7	1			52,828.
2 Undistributed income, if any, as of the end of 2017				32,020.
a Enter amount for 2016 only			48,071.	-
b Total for prior years:			40,071.	
		0.		
3 Excess distributions carryover, if any, to 2017:			· ".	L
a From 2012				
b From 2013	1			1
c From 2014	1			
d From 2015	1			
e From 2016	1			
f Total of lines 3a through e	0.			:
-				·
4 Qualifying distributions for 2017 from Part XII, line 4: ► \$ 49, 193.				
	,	,		
a Applied to 2016, but not more than line 2a			48,071.	
b Applied to undistributed income of prior		_	è	<i>`,</i> *
years (Election required - see instructions)	11 (15 (17	0.	, , , , , , , , , , , , , , , , , , ,	4/.
c Treated as distributions out of corpus		the same a street	CARLY TO	and reader to the same
(Election required - see instructions)	0.	1 14	13. 11.	
d Applied to 2017 distributable amount		10 / 10/	The Co	1,122.
e Remaining amount distributed out of corpus	0.	13	Mary Co	7° &;
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.		1/23	0.
must be shown in column (a))		Single Man &	is the same	11.12
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				1988 1988 1988 1988 1988 1988 1988 1988
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.		
d Subtract line 6c from line 6b Taxable	1			×
amount - see instructions		0.	. **	, , , , , , , , , , , , , , , , , , ,
e Undistributed income for 2016 Subtract line	's	, ĝ		
4a from line 2a. Taxable amount - see instr.	ž	×	0.	
f Undistributed income for 2017. Subtract	, , , , , , , , , , , , , , , , , , ,	,		
lines 4d and 5 from line 1. This amount must	; ()			
be distributed in 2018	,			51,706.
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 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.	1		
D Analysis of line 9:				
a Excess from 2013		İ		
b Excess from 2014				
c Excess from 2015				
d Excess from 2016		ļ	1	
e Excess from 2017				
9 ENGODO 110111 EQ 17				

WILLIAM AND CARLA HANBY FAMILY Form 990-PF (2017) FOUNDATION INC C/O WILLIAM HANEY 45-4907691 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 foundation is a private operating foundation described in section 4942(i)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (d) 2014 (a) 2017 (b) 2016 (c) 2015 (e) Total 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 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 foundation 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 STATEMENT 4

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.

NONE

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

Check here **X** 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., 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:

WILLIAM AND CARLA HANEY FAMILY Form 990-PF (2017) FOUNDATION INC C/O WILLIAM HANEY 45-4907691 Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation status of Amount any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year HORIZONS FOR YOUTH NONE PUBLIC GENERAL CHARITABLE 703 W MONROE ST CHICAGO, IL 60661 200. AMERICAN CANCER SOCIETY NONE PUBLIC GENERAL CHARITABLE 250 WILLIAMS STREET NW ATLANTA, GA 30303 5,000. ST. JUDE CHILDREN'S RESEARCH HOSPITAL NONE PUBLIC GENERAL CHARITABLE 220 E 42ND ST NEW YORK, NY 10017 500. MARCO LUTHERAN CHURCH NONE PUBLIC GENERAL CHARITABLE 525 N COLLIER BLVD MARCO ISLAND, FL 34145 543. ZOOLOGICAL SOCIETY OF MILWAUKEE - ZOO NONE PUBLIC GENERAL CHARITABLE BALL 10005 WEST BLUEMOUND ROAD MILWAUKEE, WI 53226 5,000. SEE CONTINUATION SHEET(S) 49,193. Total ➤ 3a Approved for future payment

• Approved for lattire payment			
NONE			
Total		▶ 3b	0.

Form 990-PF (2017)

Part XVI-A **Analysis of Income-Producing Activities**

Estate and the second s	Uncolote	ed business income	Evel	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue;	code	Amount	code	Amount	function income
8			<u> </u>		
b			L		<u> </u>
c	. []		Ĺ		
d					
e					
f					
g Fees and contracts from government agencies			· -		
2 Membership dues and assessments					
3 Interest on savings and temporary cash		·	<u> </u>		
investments			ľ		
4 Dividends and interest from securities	 		14	27,066.	
5 Net rental income or (loss) from real estate:	 			2,7000	
a Debt-financed property	 				
b Not debt-financed property	 		 	 	
	 		-		
6 Net rental income or (loss) from personal	l l		İ		
property	 				
7 Other investment income	 				
8 Gain or (loss) from sales of assets other	, j		100	204	
than inventory			18	204.	
9 Net income or (loss) from special events	 		 -		
10 Gross profit or (loss) from sales of inventory	1		┞		
11 Other revenue:	1 1				
a	·		ļ	<u> </u>	ļ
b			ļ		<u> </u>
c	.		<u> </u>		<u> </u>
d	.				
e				<u> </u>	
12 Subtotal. Add columns (b), (d), and (e)	J 🕷 🕽	0.	***	27,270.	0.
12 Opproval And Committe (D), (U), and (C)				13	27,270.
13 Total. Add line 12, columns (b), (d), and (e)					
		·			
13 Total. Add line 12, columns (b), (d), and (e)	to the Acco	mplishment of Exe	empt	Purposes	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI_B Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI_B Relationship of Activities t Line No. Explain below how each activity for which income	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	in column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI.B Relationship of Activities to the foundation's exempt purposes (other than	ome is reported i	ın column (e) of Part XVI-A			nplishment of

WILLIAM AND CARLA HANEY FAMILY

Firm's address ▶ 555 EAST WELLS STREET, SUITE 1400

MILWAUKEE, WI 53202

4	5	_	4	9	0	7	6	9	1	

Part			WILLIAM HANKY	45-490		Pa	ge 13
rait	Exempt Organ		o and Transactions and	d Relationships With Nonchar	itable		
1 D						V1	N ₀
			owing with any other organization	described in section 501(c)		Yes	NO
			lating to political organizations?				
	insfers from the reporting found	iation to a noncharitable exemp	ot organization of:				
	Cash	•			1a(1)		X
	Other assets				1a(2)	_	<u> </u>
	ner transactions:				1		
	Sales of assets to a noncharita				1b(1)		X
(2)	Purchases of assets from a no	oncharitable exempt organization	on		16(2)		X
(3)	Rental of facilities, equipment,	, or other assets			1b(3)		X
(4)	Reimbursement arrangements	, , , , , , , ,			1b(4)		<u> </u>
	Loans or loan guarantees	,			1b(5)		X
	Performance of services or me				1b(6)		X
c Sh	aring of facilities, equipment, ma	ailing lists, other assets, or pai	d employees		1c		X
d If t	he answer to any of the above is	"Yes," complete the following	schedule. Column (b) should alwa	ays show the fair market value of the goods,	other asse	ts,	
or :	services given by the reporting f	foundation. If the foundation re	ceived less than fair market value	in any transaction or sharing arrangement,	show in		
	umn (d) the value of the goods,	other assets, or services recei	ved.				
(a) Line n	o (b) Amount involved	(c) Name of nonchar	table exempt organization	(d) Description of transfers, transactions, and	sharing arran	gemen	is
		N/	A				
						-	
ın s	ection 501(c) (other than section	nn 501(c)(3)) or in section 527	, one or more tax-exempt organiza ?	tions described	Yes	X	No
<u>b if "\</u>	es," complete the following sch						
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relation	ship		
	N/A						
							
							
			-				
	Under penalties of pertury I declare	that I have examined this return, incli	uding accompanying schedules and state	ements, and to the best of my knowledge			
Sign Here	and belief, it is true, correct, and con Signature of officer or trustee	nplote Declaration of preparer (other	than taxpayer) is based on all information	n of which preparer has any knowledge.	ay the IRS dis turn with the nown below? X Yes	prepare	r
	Print/Type preparer's na			Date Check if PTIN			
	, , po propuror 3 (to	Tiepare	- AA 11	self- employed			
Paid Prepa	DANIELLE K		ville Knapp	5/10/18 P.0	12473		
Use (Trainis name - Dad	OITTE TAX LLP		Firm's EIN ► 86-1	.06577	2	

Part XV Supplementary Information				
3 'Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
JR. ACHIEVEMENT FUND OF WISCONSIN	NONE	PUBLIC	GENERAL CHARITABLE	
11111 W. LIBERTY DRIVE				0.500
MILWAUKEE, WI 53224			 	8,500.
MILWAUKEE RESCUE MISSION 830 NORTH 19TH STREET	NONE	PUBLIC	GENERAL CHARITABLE	
MILWAUKEE, WI 53233				5,000.
BOYSTOWN	NONE	PUBLIC	GENERAL CHARITABLE	
14100 CRAWFORD STREET				
BOYS TOWN, NE 68010			ļ	200.
REAGAN RANCH	NONE	PUBLIC	GENERAL CHARITABLE	
217 STATE STREET SANTA BARBARA, CA 93101				1 000
SANTA BARBARA, CA 93101			 	1,000.
WISCONSIN VFW FOUNDATION W4489 EXETER CROSSING ROAD	NONE	PUBLIC	GENERAL CHARITABLE	
MONTICELLO, WI 53570				2,500.
ANDREW GRENE FOUNDATION	NONE	PUBLIC	GENERAL CHARITABLE	
9033 MURPHY ROAD .		[
WOODRIDGE, IL 60517				250.
MACC FUND	NONE	PUBLIC	GENERAL CHARITABLE	
10000 W INNOVATION DRIVE STE 135 MILWAUKEE, WI 53226				10,000.
MEDICAL COLLEGE OF WISCONSIN	NONE	PUBLIC	GENERAL CHARITABLE	,
8701 WATERTOWN PLANK RD		02510		
MILWAUKEE, WI 53226				10,000.
BLACK HILLS WILD HORSE SANCTUARY	NONE	PUBLIC	GENERAL CHARITABLE	
12165 HIGHLAND ROAD				
HOT SPRINGS, SD 57747	- · - · - · · - · · · · · · · · · 	 	 	500.
		<u> </u>		
Total from continuation sheets				37,950.

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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

WILLIAM AND CARLA HANEY FAMILY FOUNDATION INC C/O WILLIAM HANEY

Employer identification number

45-4907691

Organization type (check o	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
	is covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) any one contribute	in described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, I, line 1 Complete Parts I and II
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the autions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III
year, contributions is checked, enter purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the section se
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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) (2017)

Name of organization WILLIAM AND CARLA HANEY FAMILY Employer identification number

FOUND.	ATION INC C/O WILLIAM HANEY	5-4907691			
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	WILLIAM F. HANEY 940 CAPE MARCO DR, VERACRUZ BLDG 2305 MARCO ISLAND, FL 34145	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	CARLA A. HANEY 940 CAPE MARCO DR, VERACRUZ BLDG 2305 MARCO ISLAND, FL 34145	\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Occash (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 Oncash Complete Part II for noncash contributions)		

Name of organization
WILLIAM AND CARLA HANEY FAMILY
FOUNDATION INC C/O WILLIAM HANEY

Employer identification number

45-4907691

Pärt II!	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(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 organization Employer identification number WILLIAM AND CARLA HANBY FAMILY 45-4907691 FOUNDATION INC C/O WILLIAM HANEY 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 Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info ence) 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 (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 (a) No. from (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, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
DIVIDEND INCOME	27,066.	0.	27,066.	27,066.	
TO PART I, LINE 4	27,066.	0.	27,066.	27,066.	

FORM 990-PF	TAXES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES WITHHELD 2016 TAX BALANCE DUE	436. 689.	436.		0.
TO FORM 990-PF, PG 1, LN 18	1,125.	436.		0.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 3
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS - DETAIL AVAILABLE	COST	934,632.	1,127,673.
TOTAL TO FORM 990-PF, PART II, LINE	13	934,632.	1,127,673.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 4

NAME OF MANAGER

WILLIAM F. HANEY CARLA A. HANEY CHAD HANEY BRETT HANEY