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

OMB No 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 05-01-2019 , and ending 04-30-2020

Name of foundation
THE HALLINGBY FAMILY FOUNDATIONINC

A Employer identification number
06-1516271

Number and street (or P O box number if mail is not delivered to street address)
P HALLINGBY-7 GRACIE SQUARE NO 1

Room/suite

B Telephone number (see instructions)
(212) 628-4923

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10028

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)* ▶$ 852,010

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)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	392,200			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	1,466	1,466		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	350,294			
	b	Gross sales price for all assets on line 6a 379,094				
	7	Capital gain net income (from Part IV, line 2)		350,294		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	**Total.** Add lines 1 through 11	743,960	351,760		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	2,500	1,250		1,250
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)				
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	150	0		150
	24	**Total operating and administrative expenses.** Add lines 13 through 23	2,650	1,250		1,400
	25	Contributions, gifts, grants paid	119,000			119,000
	26	**Total expenses and disbursements.** Add lines 24 and 25	121,650	1,250		120,400
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	622,310			
	b	**Net investment income** (if negative, enter -0-)		350,510		
	c	**Adjusted net income** (if negative, enter -0-)				

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
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	593,100	852,010	852,010
	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)			
	7 Other notes and loans receivable (attach schedule) ▶			
	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 (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	593,100	852,010	852,010
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons	19,582	19,582	
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	19,582	19,582	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☑ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	1,025,625	1,025,625	
	27 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	-452,107	-193,197	
	29 **Total net assets or fund balances** (see instructions)	573,518	832,428	
	30 **Total liabilities and net assets/fund balances** (see instructions)	593,100	852,010	

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 29 (must agree with end-of-year figure reported on prior year's return)	1	573,518
2	Enter amount from Part I, line 27a	2	622,310
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,195,828
5	Decreases not included in line 2 (itemize) ▶	5	363,400
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	832,428

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 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 a	RELMADA THERAPEUTICS INC	P	2019-12-26	2020-01-09
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	379,094		28,800	350,294
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(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	
a				350,294
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	350,294
3	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) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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? ☐ 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))
2018	189,371	673,511	0 281170
2017	115,224	808,193	0 142570
2016	150,655	929,528	0 162077
2015	142,898	1,074,568	0 132982
2014	164,139	1,103,310	0 148770

2	**Total** of line 1, column (d)	2	0 867569
3	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	3	0 173514
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	649,022
5	Multiply line 4 by line 3	5	112,614
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	3,505
7	Add lines 5 and 6	7	116,119
8	Enter qualifying distributions from Part XII, line 4	8	120,400

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

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	3,505
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	3,505
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	3,505
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 0		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments Add lines 6a through 6d	7	0
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	3,505
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 2020 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*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?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
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? *If "Yes," attach the statement required by General Instruction T*	5		No
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	Yes	
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	Yes	
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) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

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 advisory privileges? If "Yes," attach statement See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ PAUL HALLINGBY Telephone no ▶ (212) 628-4923

Located at ▶ 7 GRACIE SQUARE NEW YORK NY ZIP+4 ▶ 10028

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 ▶ 15

16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

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 ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(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 ☑ 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 ☑ 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	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 2019?	1c		No
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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____ , 20____ , 20____ , 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2019 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 2019).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2019?	4b		No

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

			Yes	No
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		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	☐ 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	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PAUL L HALLINGBY 7 GRACIE SQUARE-SUITE 10A NEW YORK, NY 10028	PRESIDENT 15 00	0	0	0
JULIA H HALLINGBY 7 GRACIE SQUARE-SUITE 10A NEW YORK, NY 10028	VICE PRESIDENT 7 00	0	0	0
THOMAS P SPELLANE 116 RIDGE ACRES ROAD DARIEN, CT 06820	SECY/TREASURER 7 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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

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	32,683
b	Average of monthly cash balances	1b	626,223
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	658,906
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
3	Subtract line 2 from line 1d	3	658,906
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,884
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	649,022
6	**Minimum investment return.** Enter 5% of line 5	6	32,451

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	32,451
2a	Tax on investment income for 2019 from Part VI, line 5	2a	3,505		
b	Income tax for 2019 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	3,505
3	Distributable amount before adjustments Subtract line 2c from line 1			3	28,946
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	28,946
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	28,946

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	120,400
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	120,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	3,505
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	116,895

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				28,946
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014. 119,795				
b From 2015. 89,174				
c From 2016. 104,179				
d From 2017. 74,866				
e From 2018. 155,703				
f **Total** of lines 3a through e.	543,717			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ $ 120,400				
a Applied to 2018, 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 required—see instructions).	0			
d Applied to 2019 distributable amount.				28,946
e Remaining amount distributed out of corpus	91,454			
5 Excess distributions carryover applied to 2019	0			0
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	635,171			
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		
d Subtract line 6c from line 6b Taxable amount —see instructions		0		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				0
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 2014 not applied on line 5 or line 7 (see instructions) . . .	119,795			
9 **Excess distributions carryover to 2020.** Subtract lines 7 and 8 from line 6a	515,376			
10 Analysis of line 9				
a Excess from 2015. . . . 89,174				
b Excess from 2016. . . . 104,179				
c Excess from 2017. . . . 74,866				
d Excess from 2018. . . . 155,703				
e Excess from 2019. . . . 91,454				

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 2019, 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) 2019	(b) 2018	(c) 2017	(d) 2016	
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 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))

PAUL L HALLINGBY

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 to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

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**				119,000
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					1,466
4 Dividends and interest from securities. . . .					
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					350,294
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		0	351,760
13 **Total.** Add line 12, columns (b), (d), and (e).				13	351,760

(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)
1	N/A

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
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) (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

******	2020-09-03	******
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
DAVID WEISS				P00962062
Firm's name ▶ DAVID WEISS CPA PLLC				Firm's EIN ▶46-5082756
Firm's address ▶ 183 MADISON AVE SUITE 803 NEW YORK, NY 100164403				Phone no (212) 695-5771

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*				
AMAERICAN RED CROSSPO BOX 807 NEW YORK, NY 10113	N/A	501(C)(3)	HUMANITARIAN	1,000
AMERICAN HUMANE SOCIETY 1400 16TH STREET NW SUITE 360 WASHINGTON, DC 20036	N/A	501(C)(3)	HUMANITARIAN	1,500
ANIMAL HAVEN200 CENTRE STREET NEW YORK, NY 10013	N/A	501(C)(3)	ANIMAL WELFARE	250
Total . . . . . ▶ **3a**				119,000

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*				
ASPCAPO BOX 96929 WASHINGTON, DC 20077	N/A	501(C)(3)	ANIMAL WELFARE	2,500
AUDUBON SHARON 325 CORNWALL BRIDGE ROAD SHARON, CT 06069	N/A	501(C)(3)	PROTECTS WILD BIRDS AND HABITATS IN CONNECTICUT	1,000
BERKSHIRE TACONIC COMMUNITY FOUNDAT 800 NORTH MAIN STREET SHEFFIELD, MA 01257	N/A	501(C)(3)	TO MAKE A DIFFERENCE IN THE LIVES OF CHILDREN AND ADULTS LIVING IN BERKSHIRE TACONIC REGION	1,000
Total . . . . . ▶ **3a**				119,000

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*				
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON ROAD KANAB, UT 84741	N/A	501(C)(3)	ANIMAL WELFARE	2,500
BIDE A WEE410 EAST 38TH STREET NEW YORK, NY 10016	N/A	501(C)(3)	TO RESCUE, SHELTER, HEAL, LOVE AND PLACE CATS AND DOGS INTO PERMANENT HOMES	250
BOWERY MISSION227 BOWERY NEW YORK, NY 10002	N/A	501(C)(3)	SERVES HOMELESS AND HUNGRY NEW YORKERS	250
Total . . . . . ▶ **3a**				119,000

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*				
BROOKS SCHOOL 1160 GREAT POND ROAD N ANDOVER, MA 01845	N/A	501(C)(3)	EDUCATIONAL-ANNUAL GIVING & CAPITAL CAMPAIGN	50,000
CAREPO BOX 1870 MERRIFIELD, VA 22116	N/A	501(C)(3)	HUMANITAIAN	1,000
CARL SCHURZ PARK ASSOCIATION 1562 FIRST AVENUE NEW YORK, NY 10028	N/A	501(C)(3)	PROGRAMS FOR THE PRESERVATION AND ENJOYMENT OF CITY PARKS	3,000
Total . . . . . ▶ **3a**				119,000

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*				
CENTERS FOR HOPE AND SAFETY PO BOX 217 HACKENSACK, NJ 07602	N/A	501(C)(3)	DEDICATED TO ASSISTING VICTIMS, AND THERE CHILDREN OF DOMESTIC VIOLENCE BY TURNING FEAR INTO SAFETY, HELPLESNESS INTO STRENGTH AND ISOLATION INTO HOPE	500
CENTRAL PARK CONSERVANCY CHURCH STREET STATION PO BOX 4004 NEW YORK, NY 10277	N/A	501(C)(3)	CONSERVATION	1,000
CHILDRENS AIDE SOCIETYPO BOX 4009 NEW YORK, NY 10277	N/A	501(C)(3)	PROVIDES HELP FOR CHILDREN IN POVERTY TO SUCEED AND THRIVE	1,000
Total . . . . . ▶ **3a**				119,000

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*				
CHORE SERVICEPO BOX 522 LAKEVILLE, CT 06039	N/A	501(C)(3)	LEADING AT HOME CARE RESOURCE FOR STAY AT HOME SERVICES IN THE NORTHWEST CORNER	500
CITY HARVEST6 EAST 32ND ST 5TH FL NEW YORK, NY 10016	N/A	501(C)(3)	PROVIDES FOOD TO THE HOMELESS	250
CMHA233 MAIN STREET NEW BRITAIN, CT 06051	N/A	501(C)(3)	HELPING DELIVER MEDICAL SERVICES TO FAMILIES IN CONNECTICUT	250
Total . . . . . ▶ **3a**				119,000

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*				
COLUMBIA BUSINESS SCHOOL 33 W60TH STREET NEW YORK, NY 10023	N/A	501(C)(3)	EDUCATIONAL	5,000
CPTV CONNECTICUT PUBLIC BROADCASTIN 1049 ASYLUM AVENUE HARTFORD, CT 06105	N/A	501(C)(3)	TO CONNECT NEIGHBORS THROUGH RESPECTFUL CONVERSATION BRINGING ARTS INTO EVERY HOME AND ILLUMINATING THE NEWS EVENTS OF THE DAY	500
DOE FUND232 E84TH STREET NEW YORK, NY 10028	N/A	501(C)(3)	CONSERVATION	1,000
Total . . . . . ▶ **3a**				119,000

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*				
FARM SANCTUARYPO BOX 58 BUFFALO, NY 14205	N/A	501(C)(3)	RESUCUES ANIMALS IN NEED	250
FEED THE CHILDREN 333 N MERIDIAN AVE OKLAHOMA CITY, OK 73107	N/A	501(C)(3)	TO PROVIDE BOYS AND GIRLS LIVING IN POVERTY WITH NUTRITIOUS FOOD AND ESSENTIALS	2,000
FOOD BANK FOR NEW YORK CITY 39 BROADWAY 10TH FLOOR NEW YORK, NY 10006	N/A	501(C)(3)	TO CONTINUE THE FIGHT AGAINST FOOD POVERTY ACROSS THE FIVE BOROUGHS BY PROVIDING ACCESS TO NUTRITIOUS FOOD	250
Total . . . . . ▶ **3a**				119,000

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*				
FRESH AIR FUND633 THIRD AVENUE NEW YORK, NY 10017	N/A	501(C)(3)	CONSERVATION	1,000
GUIDE DOGS FOR THE BLIND PO BOX 151200 SAN RAFAEL, CA 94915	N/A	501(C)(3)	TO CREATE INCREDIBLE LIFELONG PARTNERSHIPS BETWEEN PEOPLE WHO ARE BLIND OR VISUALLY IMPAIRED AND THEIR LOYAL CANINE GUIDES	250
HABITAT FOR HUNMANITY 111 JOHN STREET 23RD FLOOR NEW YORK, NY 10038	N/A	501(C)(3)	PROVIDES HOUSING FOR NEEDY FAMILIES IN NEW YORK METROPLOITAN AREA	1,500
Total . . . . . ▶ **3a**				119,000

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*				
HUMANE SOCIETY 306 EAST 59TH STREET NEW YORK, NY 10022	N/A	501(C)(3)	HUMANITARIAN	1,500
BOY AND GIRLS CLUB OF AMERICA 1275 PEACHTREE STREET NE STE100 ATLANTA, GA 30309	N/A	501(C)(3)	ENRICH QUALITY OF LIFE OF YOUNG PEOPLE BY PROVIDING EDUCATIONAL AND DEVELOPMENTAL PROGRAMS	1,000
MAKE A WISHPO BOX 97104 WASHINGTON, DC 20090	N/A	501(C)(3)	HELPING SICK CHILDREN FULFILL THEIR DREAMS	500
Total . . . . . ▶ **3a**				119,000

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*				
MARCH OF DIMES 1275 MAMARONECK AVENUE WHITE PLAINS, NY 10605	N/A	501(C)(3)	RESEARCH	1,000
METROPOLITAN MUSEUM 1000 FIFTH AVENUE NEW YORK, NY 10028	N/A	501(C)(3)	CULTURAL	500
MORRIS ANIMAL FOUNDATION 10200 E GIRARD AVE STE B430 DENVER, CO 80231	N/A	501(C)(3)	HELPS ANIMALS IN NEED	250
Total . . . . . ▶ **3a**				119,000

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*				
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	N/A	501(C)(3)	CULTURAL	500
NATIONAL AUDUBON SOCIETY PO BOX 97193 WASHINGTON, DC 20090	N/A	501(C)(3)	CONSERVATION OF WILDLIFE	250
NEUE GALERIE NEW YORK 1048 5TH AVENUE NEW YORK, NY 10028	N/A	501(C)(3)	CULTURAL	500
Total . . . . . ▶ **3a**				119,000

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*				
NEW LIFE FELLOWSHIP 8210 QUEENS BOULEVARD QUEENS, NY 11373	N/A	501(C)(3)	HUMANITARIAN	500
NEW YORK CITY AUDUBON 71 WEST 23RD STREET NEW YORK, NY 10010	N/A	501(C)(3)	PROTECTS WILD BIRDS AND HABITATS IN THE FIVE BOROUGHS	250
NEW YORK CITY PUBLIC LIBRARY 445 5TH AVENUE 3RD FL NEW YORK, NY 10157	N/A	501(C)(3)	CULTURAL	250
Total . . . . . ▶ **3a**				119,000

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*				
NORTH SHORE ANIMAL LEAGUE PO BOX 97003 WASHINGTON, DC 20090	N/A	501(C)(3)	TO RESCUE ANIMALS FROM OVERCROWDED MUNICIPAL SHELTERS, ABUSIVE HOMES AND INHUMANE CONDITIONS	250
NORTHWEST CONNECTICUT COMMUNITY FOU PO BOX 1144 TORRINGTON, CT 06790	N/A	501(C)(3)	TO ENHANCE AND DIVERSIFY OUR PHILANTHROPIC SERVICES AND PROGRAMS OF WORK THROUGH OUT THE 20 TOWNS THAT ARE SUPPORTED	500
OEF US810 VERMONT AVENUE WASHINGTON, DC 20420	N/A	501(C)(3)	HELPING VETERANS DEAL WITH MENTAL HEALTH ISSUES	10,000
Total . . . . . ▶ **3a**				119,000

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*				
PRIME TIME HOUSE836 MAIN STREET TORRINGTON, CT 06790	N/A	501(C)(3)	ASSISTING ADULTS WITH SERIOUS MENTAL ILLNESS	250
PROJECT HOPEPO BOX 5029 HAGERSTOWN, MD 21741	N/A	501(C)(3)	HUMANITARIAN	500
ROBIN HOOD RADIO67 MAIN STREET SHARON, CT 06069	N/A	501(C)(3)	CULTURAL	500
Total . . . . . ▶ **3a**				119,000

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*				
RONALD MCDONALD HOUSE NEW YORK PO BOX 2489 NEW YORK, NY 10131	N/A	501(C)(3)	PROVIDE STABILITY AND RESOURCES FOR FAMILIES WITH SICK CHILDREN	1,000
SAINT JUDE CHILDREN'S RESEARCH HOSP 262 DANNY THOMAS PL MEMPHIS, TN 38105	N/A	501(C)(3)	TO PROVIDE AIDE FOR PEDIATRIC TREATMENT AND RESEARCH FOCUSED ON CHILDREN'S CATASTROPHIC DISEASES	1,000
SALISBURY VISITING NURSE ASSOCIATIO 30A SALMON KILL ROAD SALISBURY, CT 06069	N/A	501(C)(3)	PROVIDES HEALTH CARE	250
Total . . . . . ▶ **3a**				119,000

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*				
SAVE THE CHILDRENPO BOX 9160 CHELSEA, MA 02150	N/A	501(C)(3)	PROMOTES CHILDREN'S RIGHTS, PROVIDES RELIEF AND HELPS SUPPORT CHILDREN IN DEVELOPING COUNTRIES	1,000
SHARON DAYCAREPO BOX 1031 SHARON, CT 06069	N/A	501(C)(3)	TO PROVIDE CHILD CARE SERVICES	200
SHARON GREEN PRESERVATION SOCIETY 18 MAIN STREET SHARON, CT 06069	N/A	501(C)(3)	CONSERVATION	100
Total . . . . . ▶ **3a**				119,000

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*				
SHARON LAND TRUSTPO BOX 1027 SHARON, CT 06069	N/A	501(C)(3)	CULTUERAL	2,500
SHARON PLAYHOUSEPO BOX 1187 SHARON, CT 06069	N/A	501(C)(3)	CULTURAL	500
SPCAPO BOX 2008 MILFORD, NH 03055	N/A	501(C)(3)	ANIMAL WELFARE	1,000
Total . . . . . ▶ **3a**				119,000

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*				
SURVIVE THE DRIVE 125 WHITE HOLLOW ROAD LAKEVILLE, CT 06039	N/A	501(C)(3)	TO MOTIVATE AND INFORM DRIVERS THROUGH COMPREHENSIVE EDUCATIONAL PRESENTATIONS TO UNDERSTAND THEIR OWN VULNERABILITY AND IMPRINT SAFE DRIVING ATTITUDES BEHAVIORS AND TECHNIQUES	100
THE HOTCHKISS LIBRARY 10 UPPER MAIN STREET SHARON, CT 06069	N/A	501(C)(3)	EDUCATION	250
THE JANE GOODALL INSTITUTE PO BOX 10346 MCLEAN, VA 221028346	N/A	501(C)(3)	PROMOTES UNDERSTANDING AND PROTECTION OF GREAT APES AND THERE HABITAT	250
Total . . . . . ▶ **3a**				119,000

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*				
THE SEEING EYE INCPO BOX 375 MORRISTOWN, NJ 07963	N/A	501(C)(3)	HUMANITARIAN	250
UNICEFPO BOX 27780 NEWARK, NJ 07101	N/A	501(C)(3)	HUMANITARIAN	1,000
UNITED WAY OF NORTHWEST CT PO BOX 1001 TORRINGTON, CT 06790	N/A	501(C)(3)	HUMANITARIAN	1,000
Total . . . . . ▶ **3a**				119,000

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*				
USOPOBOX 96322 WASHINGTON, DC 20090	N/A	501(C)(3)	PROVIDE ENTERTAINMENT AND RECREATION TO THE ARMED FORCES	500
VNA NORTHWEST INC 607 BANTAM ROAD UNIT F BANTAM, CT 06750	N/A	501(C)(3)	EDUCATIONAL	250
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	N/A	501(C)(3)	TO CONTINUE TO FOSTER EMERGING ARTISTS AND SHOWCASE IMPORTANT ACHEIVEMENTS IN AMERICAN ART	500
Total . . . . . ▶ **3a**				119,000

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*				
WMNR FINE ARTS RADIOPO BOX 920 MONROE, CT 06468	N/A	501(C)(3)	CULTURAL	100
WNET THIRTEEN825 EIGHTH AVENUE NEW YORK, NY 10019	N/A	501(C)(3)	CULTURAL	1,250
WOMENS SUPPORT SERVICES 158 GAY STREET SHARON, CT 06069	N/A	501(C)(3)	HUMANITARIAN	1,500
Total . . . . . ▶ **3a**				119,000

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*				
WORLD WILDLIFE FUNDPO BOX 96555 WASHINGTON, DC 20077	N/A	501(C)(3)	WORKING ON ISSUES REGARDING THE CONSERVATION, RESEARCH AND RESTORATION OF THE ENVIRONMENT	1,000
ANIMAL MEDICAL CENTER 510 EAST 62ND STREET NEW YORK, NY 10065	N/A	501(C)(3)	ANIMAL WELFARE	500
CITY MEALS ON WHEELSPO BOX 1504 NEW YORK, NY 10117	N/A	501(C)(3)	HUMANITARIAN	250
Total . . . . . ▶ **3a**				119,000

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*				
EASTERSEALSPO BOX 768 ALBANY, NY 12201	N/A	501(C)(3)	HUMANITARIAN	500
FEED THE HUNGRY530 E IRELAND RD SOUTH BEND, IN 46614	N/A	501(C)(3)	HUMANITARIAN	500
GOD'S LOVE WE DELIVER 166 AVENUE OF THE AMERICAS NEW YORK, NY 10013	N/A		HUMANITARIAN	250
Total . . . . . ▶ **3a**				119,000

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*				
THE GUIDE DOG FOUNDATION FOR THE BLIND 371 EAST MAIN STREET SMITHTOWN, NY 11787	N/A	501(C)(3)	PROVIDING GUIDE DOGS FOR THE BLIND	250
GUIDING EYES FOR THE BLIND PO BOX 97007 WASHINGTON, DC 20090	N/A	501(C)(3)	SERVICES FOR THE BLIND	250
NEW YORK PUBLIC RADIOPO BOX 1550 NEW YORK, NY 10116	N/A	501(C)(3)	CULTURAL	250
Total . . . . . ▶ **3a**				119,000

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*				
THE LITTLE GUILD 285 SHARON-GOSHEN TPKE WEST CORNWALL, CT 06796	N/A	501(C)(3)	TO PROVIDE HOMES FOR STRAY ANIMALS	500
SHARON FIRE DEPT INCPO BOX 357 SHARON, CT 06069	N/A	501(C)(3)	HUMANITARIAN	1,000
SUSAN B ANTHONY PROJECT 179 WATER STREET TORRINGTON, CT 06790	N/A		PROMOTES SAFTY HEALING AND GROWTH FOR ALL SURVIVORS OF DOMESTIC AND SEXUAL ABUSE	500
Total . . . . . ▶ **3a**				119,000

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*				
THE GOOD DOG FOUNDATION 500 7TH AVENUE NEW YORK, NY 10018	N/A	501(C)(3)	TO HELP CHILDREN AND ADULTS HEAL FROM TRAMA OF DISEASE DISABILITY AND DISASTER USING ANIMAL ASSISTED INTERVENTION	250
Total . . . . . ▶ **3a**				119,000

TY 2019 Accounting Fees Schedule

Name: THE HALLINGBY FAMILY FOUNDATIONINC

EIN: 06-1516271

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,500	1,250		1,250

TY 2019 Other Decreases Schedule

Name: THE HALLINGBY FAMILY FOUNDATIONINC

EIN: 06-1516271

Description	Amount
EXCESS FMV OVER COST ON CONTRIBUTED STOCK	363,400

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491247010060

TY 2019 Other Expenses Schedule

Name: THE HALLINGBY FAMILY FOUNDATIONINC

EIN: 06-1516271

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	150	0		150

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491247010060

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

OMB No 1545-0047

2019

Name of the organization
THE HALLINGBY FAMILY FOUNDATIONINC

Employer identification number
06-1516271

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
THE HALLINGBY FAMILY FOUNDATIONINC

Employer identification number
06-1516271

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

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL L HALLINGBY 7 GRACIE SQ 10A NEW YORK, NY 10028	$ 392,200	☐ 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)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions)

Name of organization
THE HALLINGBY FAMILY FOUNDATIONINC

Employer identification number
06-1516271

Part 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
1	10,000 SHARES OF RELMADA THERAPUTICS INC	$ 392,200	2019-12-26
-		$	
-		$	
-		$	
-		$	
-		$	

Name of organization	Employer identification number
THE HALLINGBY FAMILY FOUNDATIONINC	06-1516271

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	

(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 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	