FINANCIAL STATEMENTS

SEPTEMBER 30, 2015 AND DECEMBER 31, 2014

and

INDEPENDENT AUDITORS' REPORT



INDEPENDENT AUDITORS' REPORT

To the Board of Trustees of Hubbard Brook Research Foundation, Inc.

We have audited the accompanying financial statements of Hubbard Brook Research Foundation, Inc. (a New Hampshire nonprofit organization) which comprise the statement of financial position as of September 30, 2015 and December 31, 2014, and the related statements of activities and changes in net assets and cash flows for the nine months ended September 30, 2015 and the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Hubbard Brook Research Foundation, Inc. as of September 30, 2015 and December 31, 2014, and the changes in its net assets and its cash flows for the nine months and year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matter

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of functional expenses is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Schiffman, Dattilio 3 Company, P.C. Lebanon, New Hampshire

February 7, 2016

STATEMENTS OF FINANCIAL POSITION

SEPTEMBER 30, 2015 AND DECEMBER 31, 2014

	2015	2014
ASSETS		
Current assets:		
Cash and cash equivalents	\$ 2,577	\$ 52,583
Cash and cash equivalents, restricted	49,017	72,815
Pledges receivable	45,000	5,840
Grants receivable	43,406	40,392
Other receivables	34,747	22,194
Prepaid expenses	7,999	2,772
Total current assets	182,746	196,596
Property and equipment:		
Buildings and improvements	1,949,847	1,937,003
Furniture and equipment	68,682	68,682
Land	470,200	470,200
	2,488,729	2,475,885
Less: accumulated depreciation	742,523	695,891
Total property and equipment	1,746,206	1,779,994
Total property and equipment	1,110,200	
Total assets	\$ 1,928,952	\$ 1,976,590
LIABILITIES AND NET ASSETS		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 42,288	\$ 40,657
Deferred income	68,220	63,840
Current portion of long-term debt	16,812	16,274
Total current liabilities	127,320	120,771
Long-term debt	318,013	421,446
Net assets:		
Unrestricted	1,296,993	1,330,103
Temporarily restricted	186,626	104,270
Total net assets	1,483,619	1,434,373
Total liabilities and net assets	\$ 1,928,952	\$ 1,976,590

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

See independent auditors' report and notes to financial statements

STATEMENTS OF CASH FLOWS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

	4	2015		2014
Cash flows from operating activities:				
Change in net assets	\$	49,246	\$	(17,729)
Adjustments to reconcile change in net assets to net				
cash provided by operating activities:		1101 2 112 12 12 12		
Depreciation		46,632		61,629
(Increase) decrease in the following assets:				
Pledges receivable		(39,160)		17,863
Grants receivable		(3,014)		16,048
Other receivables		(12,553)		(18,459)
Prepaid expenses		(5,227)		(1,601)
Increase (decrease) in the following liabilities:				o verse
Accounts payable and accrued liabilities		1,631		24,693
Deferred income		4,380		9,149
Accrued interest		538	_	693
Net cash provided by operating activities	_	42,473		92,286
Cash flows from investing activities:				10000011004000000011
Acquisition of property and equipment	_	(12,844)		(7,582)
Net cash used in investing activities	_	(12,844)	_	(7,582)
Cash flows from financing activities:				
Payments on long-term debt		(103,433)		(47,342)
Net cash used in financing activities	-	(103,433)		(47,342)
Net increase (decrease) in cash		(73,804)		37,362
not morous (assistant) in such		, , , , ,		
Cash and cash equivalents, beginning of year	-	125,398		88,036
Cash and cash equivalents, end of year	\$	51,594	\$	125,398
Supplemental disclosures of cash flow information:				
Cash paid during the year for: Interest	\$	13,448	\$	19,879

NOTES TO FINANCIAL STATEMENTS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

Note 1. Summary of significant accounting policies:

This summary of significant accounting policies of Hubbard Brook Research Foundation, Inc. (the Foundation) is presented to assist in understanding the Foundation's financial statements. The financial statements and notes are representations of the Foundation's management who is responsible for the integrity and objectivity of the financial statements. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the financial statements.

<u>Nature of Organization</u> – The Foundation is a New Hampshire nonprofit organization which promotes the understanding and stewardship of terrestrial and aquatic ecosystems through scientific research, long-term monitoring and public education. The Foundation's Board voted to change its fiscal year end from December 31st to September 30th. This change is effective for the period ending September 30, 2015. The attached financials represent the nine month period ending September 30, 2015 and the year ended December 31, 2014.

<u>Basis of presentation</u> – The accompanying financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Net assets, revenues, expenses, gains, and losses are classified based on the existence *or* absence of donor-imposed restrictions. If donor-imposed restrictions are met in the same period as the gift or income is received, the amount is reported as unrestricted revenues. Accordingly, net assets of the Foundation and changes therein are classified and reported as follows:

- Unrestricted net assets net assets that are not subject to donor-imposed stipulations.
- <u>Temporarily restricted net assets</u> net assets that are available for use, but subject to donor-imposed restrictions which will be met either by the Foundation's actions or the passage of time.
- <u>Permanently restricted net assets</u> net assets subject to donor-imposed restrictions that they be maintained permanently by the Foundation. There are currently no permanently restricted net assets.

<u>Use of estimates</u> – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect the reported amounts and disclosures. Therefore, actual results could differ from those estimates.

<u>Cash and cash equivalents</u> – For purposes of the statements of cash flows, the Foundation considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

<u>Cash deposits with financial institutions</u> – The Foundation maintains its cash and cash equivalents with financial institutions, which, at times may exceed federally insured limits. The Foundation has not experienced any losses on such accounts and believes it is not exposed to any significant credit risk on cash and cash equivalents.

<u>Fair value measurement</u> – The Foundation's financial instruments consist primarily of cash, accounts receivable, pledges and grants receivable, and accounts payable. The carrying amounts of these financial instruments approximate their fair value due to the short-term nature of such instruments.

NOTES TO FINANCIAL STATEMENTS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

Note 1. Summary of significant accounting policies (continued):

<u>Pledges and promises to give</u> – When a donor has unconditionally promised to contribute funds to the Foundation in future periods, the Foundation recognizes a pledge receivable. All pledges are available for unrestricted use unless specifically restricted by the donor. Conditional promises to give are recognized when the conditions on which they depend are substantially met.

<u>Donated goods and services</u> – Contributions of donated noncash assets are recorded at their fair values in the period received. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation are recorded at their fair values in the period received.

Grants receivable – Grants receivable represent amounts owed from various organizations as reimbursement of grant-related expenses. It includes both billed and un-billed receivables. Any amount that is denied for reimbursement is written off when the Foundation receives notification from the grantor agency. The Foundation considers grants receivable at September 30, 2015 and December 31, 2014, to be fully collectible; therefore, no allowance for doubtful accounts is required.

<u>Property and equipment</u> – Property and equipment are recorded at cost or, if donated, at the fair value at the date of donation. Depreciation is calculated using the straight-line method based on the assets' estimated useful lives, which range as follows:

	Years
Buildings and improvements	7 - 39
Furniture and equipment	3 - 5

Assets donated with explicit restrictions regarding their use, along with contributions of cash that must be used to acquire property and equipment are reported as restricted contributions. Absent donor stipulations regarding how long those donated assets must be maintained, the Foundation reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Foundation reclassifies temporarily restricted net assets to unrestricted net assets at that time.

Costs of maintenance and repairs that do not improve or extend asset lives are charged to expense. Additions and betterments in excess of \$5,000 are capitalized. Depreciation expense was \$46,632 and \$61,629 for the nine months ended September 30, 2015 and the year ended December 31, 2015, respectively.

<u>Functional allocation of expenses</u> – The costs of providing the various programs and activities has been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income taxes – The Foundation was organized under Section 501(c)(3) of the United States Internal Revenue Code. This code section enables the Foundation to accept donations which qualify as charitable contributions to the donor. As such, no provisions for income taxes have been made in these financial statements. The Foundation is also exempt from New Hampshire business taxes

NOTES TO FINANCIAL STATEMENTS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

Note 1. Summary of significant accounting policies (continued):

Accounting for uncertainty in income tax items — The Foundation has analyzed tax positions taken for filing with the Internal Revenue Service and all state jurisdictions where it operates. The Foundation believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse effect on the Foundation's financial condition, results of operations or cash flows. Accordingly, they have not recorded any reserves, or related accruals for interest and penalties for uncertain income tax positions at September 30, 2015. The Foundation's income tax returns are subject to examination by the appropriate tax jurisdictions. As of September 30, 2015 their federal tax returns generally remain open for the last three years. There are currently no audits for any tax periods in progress.

<u>Reclassifications</u> – Certain amounts in the December 31, 2014 financial statements have been reclassified to conform to the current year's presentation. Such reclassifications had no effect on the reported change in net assets.

<u>Subsequent events</u> – Management has evaluated events occurring between the end of the most recent fiscal year and February 7, 2016, the date the financial statements were available to be issued.

Note 2. Pledges receivable:

Pledges receivable represent unconditional promises to give. All pledges receivable are due within one year. No allowance for uncollectible pledges has been established as management believes that all pledges are fully collectible.

Note 3. Line of credit:

The Foundation has available a line of credit in the amount of \$50,000 under an agreement with Ledyard National Bank. Principal is payable on demand. Interest is payable monthly at The Wall Street Journal prime rate plus one percentage point (4.25% at September 30, 2015). The line of credit is collateralized by substantially all business assets other than real estate mortgaged pursuant to a note payable. The balance on the line of credit was \$-0- as of September 30, 2015 and December 31, 2014.

Note 4. Long-term debt:

The long-term debt balance consists of the following at September 30, 2015 and December 31, 2014:

	2015		2014
4.36% mortgage payable due April 2023, payable monthly at \$3,033 including interest. Secured by a first mortgage on certain real estate of the			
Foundation.	\$ 334,825	\$	437,720
Less: current portion	16,812	-	16,274
	\$ 318,013	\$	421,446

NOTES TO FINANCIAL STATEMENTS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

Note 4. Long-term debt (continued):

Maturities for the long-term debt in years subsequent to the nine months ended September 30, 2015 consist of:

2016	\$ 16,812
2017	17,563
2018	18,343
2019	19,159
2020	20,013
Thereafter	 242,935
	\$ 334,825

Note 5. Operating lease:

The Foundation leases office facilities under an operating lease on a month to month basis. Total rent expense incurred in connection with this agreement was \$4,698 and \$7,985 in 2015 and 2014, respectively.

Note 6. Temporarily restricted net assets:

Net assets are temporarily restricted for the following at September 30, 2015 and December 31, 2014:

		2015	2014
Program specific related restrictions: Mirror Lake Captstone Campaign LTER Book Fund Forest Science Dialogues Hubbard Brook Consortium NHTOA	\$	75,000 24,543 24,302 19,375	\$ 1,500
Time restrictions	\$	43,406 186,626	\$ 40,992
Net assets released from restrictions were as follows:			
	7	2015	 2014
Program specific related restrictions: LTER Book Fund Science Policy Exchange Science Links Program Forest Sicence Dialogues NHTOA Time restrictions	\$	37,235 5,698 1,500 - 40,992	\$ 25,892 - 24,907 4,364 56,440
	\$	85,425	\$ 111,603

NOTES TO FINANCIAL STATEMENTS

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015 AND THE YEAR ENDED DECEMBER 31, 2014

Note 6. Temporarily restricted net assets (continued):

Mirror Lake Capstone Campaign – Temporary restrictions on net assets as of September 30, 2015 included a \$75,000 pledge raised through a new Mirror Lake Capstone Campaign, a drive to raise funds to reduce the long-term debt due on the Mirror Lake property. The goal is to raise \$350,000 by July 2016.

Note 7. Pension plan:

The Foundation maintains a defined contribution retirement plan that covers all employees working at least half time. The Foundation matches employee contributions up to 4% of compensation. Pension expense was \$5,878 and \$7,653 for the nine months ended September 30, 2015 and the year ended December 31, 2014, respectively.

HUBBARD BROOK RESEARCH FOUNDATION, INC.

SCHEDULES OF FUNCTIONAL EXPENSES

FOR THE NINE MONTHS ENDED SEPTEMBER 30, 2015

	Facilities	Education	Total Program Costs	Management and General	Fundraising	Total Supporting Services	2015 Totals
Salaries and wages	\$ 63.034	\$ 118,635	\$ 181.669	\$ 89.756	\$ 24.892	\$ 114.648	\$ 296.317
Professional fees	1	95,171	95,171	15,234	i.	15,234	110,405
Depreciation	46,336	1	46,336	296	1	296	46,632
Payroll taxes and employee benefits	6,883	14,317	21,200	10,108	2,287	12,395	33,595
Utilities	17,865	1,536	19,401	1,462		1,462	20,863
Repairs and maintenance	17,745	1	17,745	1	•	1	17,745
Interest and fees	13,545	75	13,620	762	190	952	14,572
Meetings expense	1	1,900	1,900	10,277	1,261	11,538	13,438
Travel	1	7,320	7,320	3,692	63	3,755	11,075
Insurance	8,935		8,935	1,386		1,386	10,321
Supplies and materials	3,546	917	4,463	1,497	104	1,601	6,064
Printing and copying	1	1,041	1,041	1,086	3,540	4,626	2,667
Rent	1	1		4,698	1	4,698	4,698
Telephone	783	106	888	2,004	1	2,004	2,893
Town contributions	2,000	1	2,000	•	1	1	2,000
Postage and shipping	1	20	20	639	661	1,300	1,320
Total expenses	\$ 180,672	\$ 241,038	\$ 421,710	\$ 142,897	\$ 32,998	\$ 175,895	\$ 597,605

HUBBARD BROOK RESEARCH FOUNDATION, INC.

SCHEDULE OF FUNCTIONAL EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 2014

Total

Total

					Δ.	Program	Man	Management			Su	Supporting		2013
	Fa	Facilities	Ш	Education		Costs	and	and General	Func	Fundraising	S	Services		Totals
Salaries and wages	S	58,642	↔	161,851	€	220,493	S	95,224	4	8,085	S	103,309	69	323,802
Professional fees		3		110,395		110,395		15,194		1,100		16,294	05	126,689
Depreciation		61,235		1		61,235		394		1		394		61,629
Payroll taxes and employee benefits		7,486		20,633		28,119		10,197		730		10,927		39,046
Utilities		26,669		1,545		28,214		1,780		ī		1,780		29,994
Repairs and maintenance		20,843		725		21,568				ı		1		21,568
Interest and fees		20,187		•		20,187		1,279		189		1,468		21,655
Meetings expense		35		6,326		6,361		7,305		2,052		9,357		15,718
Travel		7		13,768		13,839		3,663		314		3,977		17,816
Insurance		11,102		ť		11,102		2,179		1		2,179		13,281
Supplies and materials		4,536		5,050		9,586		2,214		202		2,416		12,002
Printing and copying		1		3,484		3,484		20		2,395		2,445		5,929
Rent		1		2,100		2,100		5,885		1		5,885		7,985
Telephone		755		797		1,552		3,151		1		3,151		4,703
Town contributions		1,500		t		1,500		ı		•		ı		1,500
Postage and shipping	i a	89	4	182		250		569		1,084	l	1,653		1,903
Total expenses	69	213,129	S	326,856	()	539,985	69	149,084	₩.	16,151	S	\$ 165,235	69	705,220

See independent auditors' report

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Department of the Treasury Internal Revenue Service

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Inspection

A	For tl	ne 2015 calendar year, or tax year beginning JAN 1, 2015 and c	ending ;	<u>SEP 30, 20</u>	15
В	Check i applica	C Name of organization		D Employer ide	ntification number
	Addi char	HUBBARD BROOK RESEARCH FOUNDATION, INC	<u>. </u>		0.45.40.20
Ļ	Nam Char				-0474938
F	lnitfa retur Final retur	n Number and street (or P.O. DOX II High is not delivered to sinest address)	Room/suite		mber 2-432-1042
_	Iretur term ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	643,466.
Г		NORTH WOODSTOCK, NH 03262		H(a) Is this a gro	
F	retur ☐Appl tion	F Name and address of principal officer:DAVID SLEEPER			ates? Yes X No
	penc	MIRROR LAKE, NORTH WOODSTOCK, NH 03262	2		ates included? Yes No
<u> </u>	Tax-e:	tempt status: X 501(c)(3)			ch a list. (see instructions)
		ite: WWW. HUBBARDBROOKFOUNDATION. ORG		H(c) Group exem	ption number
		f organization: X Corporation Trust Association Other ▶	L Year	of formation: 199	5 M State of legal domicile: NH
		Summary			
-	1	Briefly describe the organization's mission or most significant activities: TO PF	ROMOTI	THE UNDE	RSTANDING AND
Activities & Governance		STEWARDSHIP OF ECOSYSTEMS THROUGH SCIENTI	<u> FIC E</u>	RESEARCH,	LONG-TERM
Ĕ	2	Check this box if the organization discontinued its operations or dispos	ed of mon	e than 25% of its n	et assets.
ð	3	Number of voting members of the governing body (Part VI, line 1a)		*********	3 14
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 14
S	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)		*,***************	5 0
₹	6	Total number of volunteers (estimate if necessary)			6 0
ç		Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.
	b	Net unrelated business taxable income from Form 990 T, line 34	···· <u>····</u>		7ь 0.
		•	_	Prior Year	Current Year
Φ.	8	Contributions and grants (Part VIII, line 1h)		485,70	
Revenue	9	Program service revenue (Part VIII, line 2g) 191, 213			
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			4. 50.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,48	
	<u>12°</u>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		687,49	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			$\frac{0}{0}$. $\frac{0}{0}$.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		362,84	
Ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			$\frac{0}{0}$. $\frac{329,912}{0}$.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>		0.
ᄶ		Total fundraising expenses (Part IX, column (D), line 25) 32,99		342,37	2. 206,853.
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		705,22	
		Revenue less expenses, Subtract line 18 from line 12		-17,72	
<u>≒8</u>	19	Heveride less expenses. Subtract line to from line 12	Re	ginning of Current Ye	
Vet Assets or und Balances	20	Total assets (Part X, line 16)		1,976,59	
888	21	Total liabilities (Part X, fine 26)		542,21	
	22	Net assets or fund balances. Subtract line 21 from line 20		1,434,37	
	irt II	Signature Block			
Unde	er pena	lities of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best	of my knowledge and belief, it is
true,	corre	et, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	
					<u></u>
Sign	1	Signature of officer		Date	
Her	e	DAVID SLEEPER, EXECUTIVE DIRECTOR			
		Type or print name and title	_ _	Date Check	PTIN
		Print/Type preparer's name Preparer's signature		H	<u></u>
Paid		The state of the s		/	pployed P01381342
Prep			<u>C</u>	Firm's EIN	<u>▶ 04-3340470</u>
U8 0	Uniy	Firm's address 23 BANK STREET		Dhone	603-448-6655
	. a to - 11	LEBANON, NH 03766		Priorie ilo.	X Yes No
		RS discuss this return with the preparer shown above? (see instructions)	ne	*****	Form 990 (2015)
58200)1 12-1	6-16 LITA FOI Faperwork negliculari Act Notice, see the separate instruction	14.		(= 510)

Form	990 (2015) HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROMOTE THE UNDERSTANDING AND STEWARDSHIP OF ECOSYSTEMS THROUGH
	DEVELOP NEW INITIATIVES LINKING ECOSYSTEM SCIENCE AND PUBLIC POLICY.
	At 1 18 feet on
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 200 or 200 572
	(iie phoi Form 550 or 550-EZ:
	If "Yes," describe these new services on Schedule O. No analysis of the services of the servi
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomptishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 125.992. including grants of \$) (Revenue \$ 65,139.)
	THE FOUNDATION SUPPORTS PRINCIPAL INVESTIGATORS, PLUS ADDITIONAL FIELD
	TECHNICIANS AND STUDENTS, PARTICIPATING IN THE HUBBARD BROOK ECOSYSTEM
	STUDY BY PROVIDING FACILITIES AND OTHER INFRASTRUCTURE, INCLUDING
	HOUSING, LABORATORIES, STORAGE SPACE, A CLASSROOM, AND INTERNET
	ACCESSIBILITY.
	ACCESSIBILITI:
4b	(Code:) (Expenses \$ 205,321. Including grants of \$) (Revenue \$)
4b	EDUCATIONAL PROGRAMS AT HUBBARD BROOK INCLUDE AN ENVIRONMENTAL LITERACY
4b	EDUCATIONAL PROGRAMS AT HUBBARD BROOK INCLUDE AN ENVIRONMENTAL LITERACY PROGRAM THAT INCLUDES TEACHER PROFESSIONAL DEVELOPMENT AND CURRICULUM
4b	EDUCATIONAL PROGRAMS AT HUBBARD BROOK INCLUDE AN ENVIRONMENTAL LITERACY PROGRAM THAT INCLUDES TEACHER PROFESSIONAL DEVELOPMENT AND CURRICULUM DEVELOPMENT THAT FOCUSES ON DATA-INQUIRY ACTIVITIES AND MOCK EXAMS; A
4b	EDUCATIONAL PROGRAMS AT HUBBARD BROOK INCLUDE AN ENVIRONMENTAL LITERACY PROGRAM THAT INCLUDES TEACHER PROFESSIONAL DEVELOPMENT AND CURRICULUM DEVELOPMENT THAT FOCUSES ON DATA-INQUIRY ACTIVITIES AND MOCK EXAMS; A MENTORED RESEARCH EXPERIENCE FOR UNDERGRADUATES, HIGH SCHOOL STUDENTS,
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Pai	t IV Checklist of Required Schedules		Yes	No
			105	INO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	х	
	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		-11	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3	,	х
	public office? If "Yes," complete Schedule C, Part I	~ _		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
_	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
-	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8		Х
^	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			i
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			ĺ
	If "Yes," complete Schedule D, Part IV	9_		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
•	Part VI	11a	X	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
-	assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			l
	Part X. line 16? If "Yes." complete Schedule D, Part IX	11d		X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	l		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	_14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	Investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	و و		- v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	4.5	ŀ	- v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		x
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17_	1	x
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	"'-		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		x
	1c and 8a? If "Yes," complete Schedule G, Part II	<u>`</u>		┌╌
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x
	complete Schedule G, Part III		990	(2015)

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule II	Pa	t IV Checklist of Required Schedules (continued)		Yes	No
b if Yes' to line 20s, dot the organization natural accord of grants or other assistance to the return? 10 bit the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic operature on the return? 21 bit the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic operature, organization report more than \$5,000 of grants or other assistance to or for domestic admidulates on Part X, column (A), the 17 if Yes', complete Schedule I, Part I and II 22 bit the organization narwer "Yes' to Part XII, Scotion A, Inn 3, 4, or 5 about compensation of the organization's current and former officers, directors, strustess, key employees, and highest compensated organization according to the seat day of the year, that was issued after December 31, 2002/II "Yes," answer lines 24th through 24d and complete Schedule I, I' Me'o, po the 25a 24 bit the organization haves tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the less day of the year, that was issued after December 31, 2002/II "Yes," answer lines 24th through 24d and complete Schedule I, I' Me'o, go the 25a 25 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 27 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 28 Section 50 (16)(3), 501(6)(4), and 501(6)(29) organizations. But the organization engage in an avoses benefit transaction marked and act to any organization and the section of the secti			200	195	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to any domestic organization report more than \$5,000 of grants or other assistance to or for domestic organization or part IX, column (A), the 27 if "Yes," complete Scheduls I, Part I and III 22 III 23 Did the organization arenew "Yes" to Part VII, Section A, Inc 3, 4, or 8 about compensation of the organization or current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Scheduls III 24 III 24 Did the organization have a tax-exempt bord issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was seved after December 31, 2002 If "Yes," canwer into a 24 bit inough 24d and complete Scheduls III III 24 Did the organization maintain an accrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization maintain an accrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization maintain an accrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an "on betain of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on betain of" issuer for bonds outstanding at any time during the year? 24d Did the organization across benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization in your than a contribute or supplies Scheduls III organization report any amount on Part X, line 6, 6, or 22 for receivables from or payables to any current or tomer officers, director, trustees,	2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			
comestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts 1 and III 21 IA 2 Did the organization are than \$5,000 of grants or other assistance to or for comestic Individuals on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts 1 and III 22 IX is the organization arever "Yes" to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, frustress, key employees, and injented compensated employees? If "Yes," complete Schedule I, Parts 1 and III 24 IX	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200	_	
Did the organization export more than \$5,000 of grants or other seekstance to or for domestic individuals on Part K, column (4), the 27 if "Yes," complete Schodule I, Parts I and III 2 Lidt the organization answer "Yes" to Part IVI, Section A, Ivis 43, or 5 about compensation of the organization's current and former officers, directors, trustees, key emproyees, and highest compensated employees" If "Yes," complete Schodule Is and IVI	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	04		¥
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and former officers, directors, trustees, key emptoyees, and highest compensated employees? If "Yes," complete Schedule I.		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
Schodule J All dithe organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. If "No", go to line 258 Schedule II. If "No", go to line 258 Did the organization maintain an secrow account other than a refunding secrow at any time during the year of defease any tax-evempt bonds. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I are organizations and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person on any of the organizations prior Porms 990 or 990 E27 If "Yes," complete Schedule L, Part II Did the organization are any of the organization prior Porms 990 or 990 E27 If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, furstee, law prior any of these persons? If "Yes," complete Schedule L, Part III Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV A nentity of which a current or former officer, director, furstee, or key employee? If "Yes," complete Schedule L, Part IV did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II "Yes," complete Schedule L, Part IV did the organization receive contributions of art, historical treasures, or other similar assets,	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
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b Did the organization maintain an acrow account other than a refunding secrow at any time during the year to defease any tax-evempt bonds?					v
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeese any tax-exempt bonds? 24d		Schedule K. If "No", go to line 25a	-	. —	
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25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations, bid the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled ontity or family member of any of these persons? If "Yes," complete Schedule L, Part III and any complete Schedule L, Part III and surrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and Schedule C, Part II and Schedule C, Part II, III, or IV, and Part V, Iiin 1 and Schedule C, Part II and Schedule C, Part IV, Iiin 2 and Sche		the organization ewere that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 35b If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note All Form 990 files are required to complete Schedule O.		Schedule N, Part II			
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Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note All Form 990 files are required to complete Schedule O		sections 301.7701-2 and 301.7701-37 if "Yes," complete Schedule B, Fart II	1		
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 35a	34		34	•	х
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note All Form 990 files are required to complete Schedule O		Part V, line 1			
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note All Form 990 files are required to complete Schedule O	35a	Did the organization have a controlled entity within the meaning or section 5 (2(0)(10))?	204		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note All Form 990 files are required to complete Schedule O	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any dails action while a some size.	35b	ļ	
If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X		within the meaning of section 512(b)(13)? If "Yes," complete schedule in, Part V, line 2	00.0		
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 files are required to complete Schedule O. 38 X	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organizations.	36	l .	x
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		If "Yes," complete Schedule R, Part V, line 2	<u>"</u>		<u> </u>
and that is treated as a partnership for lederal income tax purposes in 700, complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
Note: All Form 990 filers are required to complete Schedule O		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule II, Part VI	<u> "</u>	\vdash	
Note All Form 990 titlers are required to complete achequie 0	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 110 and 191	39	x	1
		Note, All Form 990 filers are required to complete Schedule O			(2015)

	990 (2015) HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-047 of tV Statements Regarding Other IRS Filings and Tax Compliance	<u>1938</u>	<u> </u>	age <u>5</u>
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a b c	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u> </u>	165	140
۰	(gambling) winnings to prize winners?	_1c	X	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u>2</u> b_	X	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has It filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	<u> </u>	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	х
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		x
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	 	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	 	 -
c 6 a	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 <u>a</u>		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	<u> </u>	<u> </u>

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?

b If "Yes," did the organization notify the donor of the value of the goods or services provided?

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

sponsoring organization have excess business holdings at any time during the year?

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the

a Did the sponsoring organization make any taxable distributions under section 4966?

a Initiation fees and capital contributions included on Part VIII, line 12
 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

a Gross income from members or shareholders
 b Gross income from other sources (Do not net amounts due or paid to other sources against

amounts due or received from them.)

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Organizations that may receive deductible contributions under section 170(c).

Sponsoring organizations maintaining donor advised funds.

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter:

a Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

13b

13c

13c

14a Did the organization receive any payments for indoor tanning services during the tax year?

Form **990** (2015)

Х

7a

7b

7c

7e 71

7g

7h

8

9<u>a</u>

12a

14a

10

Form 990 (2015) HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management	_		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь				
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2	officer, director, trustee, or key employee?	2		X
•	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5	Did the organization become aware during the year of a significant environment of the organization have members or stockholders?	6	•	X
6 ~-	and the state of the state of the state of the state of the power to pleat or appoint one or			
7a	Did the organization have members, stockholders, or other persons who had the power to block is appoint	7a		X
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
D	Are any governance decisions of the organization reserved to (or subject to approve by mornisors, seemed as the control of the	7b		X
_	persons other than the governing body?			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8a	x	
a	The governing body?	8b	X	
þ	Each committee with authority to act on behalf of the governing body?	OD.		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
96¢	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
		10a	100	X
10a	Did the organization have local chapters, branches, or affiliates?	100		
d	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	114	<u>n</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If *Yes, * describe	12c	X	
	in Schedule O how this was done	13		x
13	Did the organization have a written whistleblower policy?	14		X
14	Did the organization have a written document retention and destruction policy?			-42
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	44-	х	
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	_	21
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		x
	taxable entity during the year?	16a		
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401-		
	exempt status with respect to such arrangements?	16b		'
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NH	t1 = 1-	-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ivaliab	iθ	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)	ı.d.	-1-1	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ıπnan	ciai	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	BRENDA MCCARTNEY - 603-686-2815			
	25 DOBSON HILL ROAD, THORNTON, NH 03223			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

X

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether Individuals or organizations), regardless of amount of compensation. Enter—0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			10	C)			(D)	(E)	(F)
(A) Name and Title	Average	l		(C Pos	ition	1		Reportable	Reportable	Estimated
Name and Tide	hours per	box	, unte	hack se pe	rson	is bot	h an	compensation	compensation	amount of
	week	offi	er an	d a d	lirecto	pr/firus	tee)	from	from related	other
	(list any	SCIENT						the	organizations	compensation
	hours for	盲	پ			麗		organization	(W-2/1099-MISC)	from the organization
	related	38	Laste			beus		(W-2/1099-MISC)		and related
	organizations] <u>=</u>	ena		Poy of	28	١.	1		organizations
	below line)	Individual trustee or director	insillutional trustee	Officer	Key employee	Highest compensated employee	Former	1		
	1.00	<u> </u>	=	-	포	王弘	-			
(1) CHARLES DRISCOLL	- 1.00-	x	Ì.					0.	. 0.	0.
trustee	1.00	╬	-	-	\vdash	╁	┢	 		
(2) PETER GROFFMAN	1.00	x	ļ					0.	_0.	0.
TRUSTEE	1.00	*		 		t	┢			
(3) THOMAS F. GROSS	- 	\mathbf{x}		}				0.	_ 0.	0.
TRUSTEE	2.00	1		 		t^-	Г			
(4) STEVEN HAMBURG	<u> </u>	\mathbf{x}]				0.	0.	0.
VICE CHAIR (5) FRED HUNT	1.00	<u> </u>	\vdash			t	Г			
TRUSTEE		\mathbf{x}						0,	0.	0.
(6) GENE E, LIKENS	1.00	T-				T	Ī			
TRUSTEE		x					ŀ	0.	0.	0.
(7) PETER MARTIN	2.00	<u> </u>	Г			T	I -			
CHAIR		x						0.	0.	
(8) NICHOLAS RODENHOUSE	1.00					Г	Π			
TRUSTEE	·	х					_	0.		
(9) MICHAEL SCHOOB	1.00					Γ	}			
TRUSTEE		X						0.	0.	0.
(10) JANE E. S. SOKOLOW	1.00						1		_	
TRUSTEE		X		L	<u> </u>		<u> </u>		0.	0.
(11) STUART V. SMITH, JR.	2.00								1	
TREASURER		X		L	<u> </u>	┖	┖		0.	0.
(12) JOHN SMITKA	2.00				1				_	0.
SECRETARY		X		L	ļ_	┡	╄		0.	<u> </u>
(13) ANANT SUNDERAM	1.00								0.	0.
TRUSTEE		X.		L.	ļ	┡	╄	0.	<u>v.</u>	
(14) PAMELA TEMPLER	1.00	١]				0.	0.
TRUSTEE	 	X		L	-	⊢	╀		ļ — — " •	- •
(15) HARRIET VAN VLECK	1.00							0.	0.	0.
TRUSTEE	10.00	X.	_	<u> </u>	⊢ -	⊢	╀			
(16) DAVID SLEEPER	40.00	-	1	,,		ļ		0.	0.	0.
EXECUTIVE DIRECTOR	1.000	\vdash		X	\vdash	├	╁	 	├── - '-	† · · · · · · ·
(17) BRENDA MCCARTNEY	16.00	1				1		0.	0.	0.
DIRECTOR OF FINANCE		<u> </u>		X	Ц	<u> </u>	Ц.			Form 990 (2015)
500007 40 44 45										

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Page 8

Form 990 (2015)

Seci	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon	<u>plete all columns. All oth</u>	e <u>r organizations must co</u> this Part IX	mplete column (A).	<u>x</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		ехропа <u>са</u>	gonoratoripon	
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic		_		
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			-	
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			ŀ	
	persons described in section 4958(c)(3)(B)	· <u> </u>		00 756	24,892.
7	Other salaries and wages	_296,317.	181,669.	89,756.	
8	Pension plan accruals and contributions (include		4 055	1 000	
	section 401(k) and 403(b) employer contributions)	5,878.	4,055.	1,823. 1,685.	474.
9	Other employee benefits	5,567.	3,408.	6,600.	1,813.
10	Payroll taxes	22,150.	13,737.	0,000.	1,013.
11	Fees for services (non-employees):				
а		<u> </u>			
b		<u>1 F 02 4</u>		15,234.	
	Accounting	15,234.		13,234	-
d					
	Professional fundraising services. See Part IV, line 17	-			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	95,171.	95,1 71 .		
	column (A) amount, list line 11g expenses on Sch O.)	99,1710			
12	Advertising and promotion	9,880.	1,950.	3,729.	4,201.
13	Office expenses	<u> </u>	1,0000	<u></u>	
14	Information technology				
15	Royalties	3,154.	3,154.		
16	Occupancy	11,075.	7,320.	3,692.	63.
17	Payments of travel or entertainment expenses		. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,438.	1,900.	10,277.	1,261.
20	interest	6,962.	6,010.	762.	190.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	28,908.	28,612.	296.	
23	Insurance	6,668.	5,282.	1,386.	
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule O.) REPAIRS AND MAINTENANCE	11,129.	11,129.		
	SUPPLIES AND MAINTENANCE	5,234.	3,633.	1,497.	104.
C	POLITIES WAS INVESTIGATION		-,,,		
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	536,765.	367,03 <u>0</u> .	136,737.	<u>32,998.</u>
26	Joint costs. Complete this line only if the organization				
~~	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				· · · · · · · · · · · · · · · · · · ·
	12-16-15	<u> </u>			Form 990 (2015)

HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 1,569. 52,583. 1 Cash - non-interest-bearing 1 50,025. 72,815. 2 Savings and temporary cash investments 2 46,232 88,406. 3 Pledges and grants receivable, net 34,747. 22,194 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 7,999. 2.772. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 1,746,206. 1.779.994. 10c 742.523. b Less: accumulated depreciation ______ 10b 11 Investments • publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 1,928,952. 1,976,590. 16 Total assets. Add lines 1 through 15 (must egual line 34) 16 42,288. 40,657. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 68,220. 63,840 19 19 Deferred revenue ______ 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 334,825. 437,720. 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other flabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 445,333. 542,217. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,296,993. 1,330,103. 27 Unrestricted net assets 27 186,626. 104,270. 28 Temporarily restricted net assets 28 29 Permanently restricted net assets

Organizations that do not follow SFAS 117 (ASC 958), check here ▶□ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,483,619.

1,434,373.

590

33

34

33

orл	1990 (2015) HUBBARD BROOK RESEARCH FOUNDATION, INC.	<u>02-047</u>	<u> 4938</u>	Pag	je <u>12</u>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	. <u></u>			ш
					~~
1	Total revenue (must equal Part VIII, column (A), line 12)				<u> 26</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	536		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>61.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		1,434	<u>1,3</u>	<u> 73.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	_6		3,3	<u>85.</u>
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	- 1			
	column (B))	<u>10 </u>	<u>1,48</u> :	3 <u>,6</u>	<u> 19.</u>
Pai	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	lon a	1		
	separate basis, consolidated basis, or both:		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	1 1		
	consolidated basis, or both:		1		
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
٠	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form '	9 90 (2015)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

ZU ID
Open to Public

Inspection

Name of the organization

Employer identification number

		aamu	ADD BBOOK	RESEARCH FOU	NDATI	ON. I	NC	0	<u>2-0474938</u>	
Pa	ırt I	Reason for Public	Charity Status (All organizations must c	omplete thi	s part.) Se				
		ization is not a private found								
1	آث	A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).			
2	Ħ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990 EZ).)								
3	Ħ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	\vdash	A medical research organiz	stion operated in co	niunction with a hospita	I described	in section	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
7		city, and state:	411011 Op 41 411 4 11 1 1 1	.,,						
5		An organization operated for	or the benefit of a co	nilege or university owne	d or operat	ed by a go	vernmental (ınit describ	ed in	
J		section 170(b)(1)(A)(iv). (C			- ' '	•				
		A federal, state, or local go		nental unit described in	section 17	оњи пи	(v).	•		
6	\mathbf{x}	An organization that norma	lluranaiuse a subeta	ential part of its support	from a <i>c</i> ove	ernmental	unit or from t	he general	public described in	
1	نها			Intial part of its support	,,oina gon			ŭ		
_		section 170(b)(1)(A)(vi). (C A community trust describe		(4VA)(vi). (Complete Par	+ 11 \					
8	\dashv	An organization that norma	llu er seiverr (1) more	than 22 1/204 of its su	onort from :	contributio	ns member	ship fees, a	nd gross receipts from	
9	ш	activities related to its exen	ily receives: (1) more	et te cortain eveentions	and (2) no	more tha	n 33 1/3% of	its support	from gross investment	
		income and unrelated bush	ipt turictions • subje	the continuent of the section of the	om hueine	eese araii	ired by the O	ranization	after June 30, 1975.	
				i (less section o i i tax) ii	O(II DGS) IO	sses doqu	"ca by alo o.	9-11		
		See section 509(a)(2), (Col		incluses took for public ex	afatu Sac s	action 50	19(a)(4)			
10	片	An organization organized a An organization organized a	and operated exclus	ively to test for public so ively for the benefit of t	a nevform t	he functio	ns of, or to c	arry out the	purposes of one or	
11	ш	more publicly supported or	and operated exclus	nd in eastion 500(a)(4) (u contion f	(C)(e)(0)	See section !	509(a)(3), C	heck the box in	
		lines 11a through 11d that	ganizations describe	o (r),(a),coo nouseet a us et europerting ergenizatio	n and com	nlete lines	11a, 11f, an	d 11a.		
_	_	Type I. A supporting orga	uescribes trie type c	or supporting organization	hv ita sum	norted ord	anization(s).	typically by	giving	
а	l	the supported organization	inization operated, s	supervised, or controlled scularly appoint or elect	a maiority c	of the direc	etors or truste	es of the s	upporting	
					a majorny c	J. 11.0 C				
		organization. You must of Type II. A supporting org	omplete Part IV, 30	t or controlled in connec	tion with it:	s supporte	ed organizatio	on(s), by ha	ving	
b	Ь.	control or management o	anızanıcı supervised Etha supporting ara	anization veeted in the s	ame nerso	ns that co	ntrol or mana	age the sur	ported	
					ano poloo	1,0 1,141 00			•	
		organization(s). You mus Type III functionally inte	t complete Part tv,	a errorization operated	in connect	ion with a	and functions	lly integrate	ed with.	
С	Щ.	its supported organization	grated. A supportion	y Venezust samplete	Dart IV Sa	ctions A	D and F	,	•	
.,		Type III non-functionally	ints) (see instructions	o). Tou must complete	rated in co	nnection v	vith its suppo	rted organi	zation(s)	
a		that is not functionally int	areted. The ergonic	zotion generally must sa	tiefu a distr	ibution rec	nuirement an	d an attent	iveness	
		that is not functionally int	egrated. The organiz	zation generally must se malete Bort IV. Section	nory a dion • A and D	and Part	V.	• • • • • • • • • • • • • • • • • • • •		
		requirement (see Instruct Check this box if the orga	ons). Tou must con minutes received as	uplete Fart IV, Section	on the IRS	that it is a	Type I. Type	II. Type III		
е		functionally integrated, or	Tree III non functio	wolfu interrated cumped	ina orașniz	retion		., .,,.		
	-			mality integrated support	ing organiz					
τ –		r the number of supported or ride the following information		ad omanization(s)				****************		
9	<u> </u>) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the or	ganization.	(v) Amount o	f monetary	(vi) Amount of	
	•	organization		(described on lines 1-9	listed in governing d	n your locument?	support	•	other support (see	
				above (see instructions))	Yes	No	instruct	ions)	instructions)	
					†					
		 -								
			•		_					
			_							
									<u> </u>	
					<u> </u>				<u>-</u>	
					├ —					

Schedule A (Form 990 or 990-EZ) 2015 HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page 2
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support					· · · · · · ·	
Cale	ndar year (or fiscal year beginning In) 🕨	(a) 2011	(ь) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ				_	
	include any "unusua! grants.")	461,933.	721,532.	432,365.	485,702.	453,881.	2,55 <u>5,413,</u>
. 2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to				,		
	or expended on its behalf						
3	The value of services or facilities						
٠	furnished by a governmental unit to						•
	the organization without charge	1	1				
	Total. Add lines 1 through 3	461,933.	721,532.	432,365.	485,702.	453,881.	2,555,413,
		401,555.	721,0020	20275000			
Ģ	The portion of total contributions		•				
	by each person (other than a						•
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						172,566.
	column (f)						
	Public support. Subtract line 5 from line 4.	<u></u>					2,382,847.
	ction B. Total Support				1 1 0011	(-) 001E	(f) Total
	ndar year (or fiscal year beginning in) 🗲	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015 453,881.	
	Amounts from line 4	461,933.	721,532.	432,365.	485,702.	400,001.	2,555,413,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties					F0 501	E1 040
	and income from similar sources	65.	42.	61.	94.	50,781.	51,043.
9	Net income from unrelated business					į	
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						·
	assets (Explain in Part VI.)	165,801.	160 <u>,360</u> .	1 <u>77,</u> 700 <u>.</u>	201 <u>,69</u> 5.	73,665.	779 <u>,221.</u>
11	Total support. Add lines 7 through 10					!	3,385,677.
	Gross receipts from related activities,	etc. (see instruction			***************************************	12	6 <u>5,139.</u>
13	First five years, if the Form 990 is for	the organization's	s first, second, thin	d, fourth, or fifth ta	ex year as a sectio	n 501(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2015 (I	line 6, column (f) di	ivided by line 11, o	olumn (f))		14	<u>70.38 %</u>
15	Public support percentage from 2014	Schedule A, Part	II, line 14		***************************************	15	70.81 %
16a	33 1/3% support test - 2015. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization		*****		PLX.
b	33 1/3% support test - 2014. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization quali	ifies as a publicly s	supported organiza	ation	*****		P
17a	10% -facts-and-circumstances test	t - 2015. If the ora	anization did not o	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	f organization		
h	10% -facts-and-circumstances test	t - 2014, If the ora	anization did not o	heck a box on line	13, 16a, 16b, or	77a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	mstances" test. cl	neck this box and	stop here. Explair	in Part VI how the)
	organization meets the "facts-and-circ	cumstances" test.	The organization of	rualifies as a public	cly supported orga	anization	
12	Private foundation. If the organization	n did not check a	hox on line 13, 16	a. 16b. 17a. or 17b	o, check this box a	ind see instruction	s ▶□
ΙΦ	Fire organizations in the organization	TE AND THOSE OF TO SERVE A	Sex of mo joi to		Cohe	dule A (Form 990	or 990-FZ) 2015

Schedule A (Form 990 or 990 EZ) 2015 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

,	
(Complete only if you checked the	e box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to
qualify under the tests listed bel	w, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2 <u>011</u>	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and		-"	1			
-	membership fees received. (Do not						
	include any "unusual grants.")						
9	Gross receipts from admissions,		·				
Z	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513		<u></u>				ļ
4	Tax revenues levied for the organ-		-				
	ization's benefit and either paid to]
	or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to			ļ			1
	the organization without charge			!			
e	Total. Add lines 1 through 5						
			-				
/a	Amounts included on lines 1, 2, and			t			
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the					•	
	amount on line 13 for the year		·				
	Add lines 7a and 7b		·	<u> </u>	<u> </u>		
	Public support. (Subtractline 7c from line 6.)						
	ction B. Total Support		4.0040	4-3-0010	(4) 2014	(e) 2015	(f) Total
	ndar year (or fiscal year beginning in) 📂	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(8) 2013	(1) 10:20
	Amounts from line 6			<u> </u>		<u> </u>	-
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b]				
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital		-			·	
13	assets (Explain in Part VI.)						
14	First five years. If the Form 990 is for	the organization	s first second thir	d. fourth, or fifth t	ax vear as a sectio	n 501(c)(3) organi	zation,
14	check this box and stop here						
<u>e</u>	ction C. Computation of Publi	ic Support Pe	rcentage	***************************************			
360	Public support percentage for 2015 (li	ic ouppoint e	hidad bulias 12	ochumn (ft)		15	%
						16	%
	Public support percentage from 2014					10	
	tion D. Computation of Inves					457	
	Investment income percentage for 20					17	
18	Investment income percentage from a	2014 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2015. If the	organization did r	ot check the box	on line 14, and line	e 15 is more than 3	ਤ 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	nd stop here. T he	organization qual	ifies as a publicly	supported organiza	ation	▶∟
þ	33 1/3% support tests - 2014. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is mo	re than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	anization qualifies	as a publicly suppo	orted organization	³ ▶∐
20	Private foundation. If the organization	n did not <u>check a</u>	box on line 14, 19	<u>a, or 19b, check t</u>	<u>his box and see ins</u>	tructions	<u></u>
-					Sche	dute A (Form 99	0 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Sec	section A. All Supporting Organizations			
		<u> </u>	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		1	
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by		1	
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	_ 2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3 <u>a</u>		<u> </u>
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	<u>3b</u>		
c				
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	<u>3c</u>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	<u>4a</u>		
þ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			ŀ
	despite being controlled or supervised by or in connection with its supported organizations.	<u>4b</u>		<u> </u>
С	Did the organization support any foreign supported organization that does not have an IRS determination			ŀ
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		ļ. <u> </u>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"]	
	answer (b) and (c) below (if epplicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	_		
	was accomplished (such as by amendment to the organizing document).	<u>5</u> a		
þ	*1			
	designated in the organization's organizing document?	<u>5b</u>		
¢	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<u>5</u> c		<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	_		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	-	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	8	ļ	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	-	-	
9a				
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	9a		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	30	-	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9b		1
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	20		
C	Did a disquainted betsort (as defined in this say have an own or only into social) or assistant and person (as	9c		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		†	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	10a		
	supporting organizations)? If "Yes," answer 10b below.	,,,,,,	<u> </u>	
þ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		
	инентине инентенти опуштивного про бловы возывозо понинува			

Sch	edule A (Form 990 or 990 EZ) 2015 HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-04	<u>7493</u>	8 Pa	a <u>ge 5</u>
Pa	rt IV Supporting Organizations (continued)		Yes	No
	the the second of sife as sectional and the following recessor	Γ	105	140
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or Indirectly controls, either alone or together with persons described in (b) and (c)			
а	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11 <u>c</u>		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	-		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	_		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	 	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	ا ہا		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		Yes	No
	to the state of th	r	165	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
	the supported organization(s).		L	
Sec	tion D. All Type III Supporting Organizations		Yes	No
	The state of the state of the state of the fifth month of the		163	110
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	•		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
_	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	The state of the s			
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a_		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b _		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	_ 3a	 	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sche	dule A (Form 990 or 990-EZ) 2015 HUBBARD BROOK RESEARCH	FOUND.	ATION, INC.) <u>2-</u> 047 <u>4938</u> Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Suppo <u>rtin</u>	ıg Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on l	Nov. 20, 1970. See instru	uctions. All
	other Type III non-functionally integrated supporting organizations must co	omplete Se l	ctions A through E.	(B) Current Year
Sect	ion A - Adjusted Net Income		(A) Prior Year	(optional)
1	Net short-term capital gain	_ 1		
2	Recoveries of prior-year distributions	2		<u> </u>
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of Income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	_ 8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		_	
•	instructions for short tax year or assets held for part of year):		<u> </u>	
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
•	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
•	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<u> </u>
6	Multiply line 5 by .035	6		<u> </u>
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
<u>-</u> 2	Enter 85% of line 1	2		
<u>≤</u> 3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
<u>3</u> 4	Enter greater of line 2 or line 3	4		
7 5	Income tax imposed in prior year	5		
_	Distributable Amount. Subtract line 5 from line 4, unless subject to	<u> </u>		
6	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		d Type III supporting org	janization (see
•	instructions).	.,		·
	mon dottonoy.			

Sche Pa	edule A (Form 990 or 990-EZ) 2015 HUBBARD BROOK rt V Type III Non-Functionally Integrated 509	RESEARCH FOUN	DATION, INC. 0 anizations (continued)	2-0474938 Page 7
	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity	F-		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	\$	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions, Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	•	
•	(provide details in Part VI). See instructions.		·	
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(ili) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
_	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a	Excess distributions say, 5 to 1, 1 to 1, 1 to 2 to 1			
b				
c				
	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
ï	Carryover from 2010 not applied (see instructions)			
÷	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			<u> </u>
4	Distributions for 2016 from Section D,			
•	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
-	any, Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see Instructions).			
6	Remaining underdistributions for 2015. Subtract fines 3h			
•	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8_	Breakdown of line 7:			
<u>a</u>	<u> </u>			
<u>b</u>				··· -
	Excess from 2013			
	Excess from 2014			<u> </u>
. ę	Excess from 2015	l		<u> </u>

Sched	ule A (Fo	orm 990 or 9	90•EZ\ 20	15 HUB	BARD I	BROOF	K RI	ESEARC	H FOU	NDA'	ION,	INC.	02-04	7 <u>493</u> 8	Page 8
Part	VI S	upplemer art IV, Sectione 1; Part IV, action D, line	n tal Info on A, lines Section (ormation 1, 2, 3b, 3	1. Provide 3c, 4b, 4c, 1	the expl 5a, 6, 9a	lanatic a, 9b, 9 ion E	ons require 9c, 11a, 11 lines 1c, 2a	d by Part II b, and 11c a 2b 3a ar	, line 10 ; Part IV vd 3b: F); Part II, lii V, Section Part V. line	ne 17a or B, lines 1 1: Part V.	176; Part III, and 2; Part Section B, li	, line 12; IV, Section ine 1e; Pai	1 C,
	(5	See Instruction	ons.)		-		-					<u> </u>	· ·		
PAR	r II	, SECT	ON A	, COL	UMN E	AND	SEC	CTION	B, CO	LUMN	1 E		 		
THE	FOUI	NDATIOI	is cui	RRENT	YEAR	IS T	THE	SHORT	YE <u>AR</u>	OF	JANUA	RY 1	2015		
						<u> </u>		- 							
THRO	JUGH	SEPTE	IBER .	<u>30</u> , <u>4</u> 1	072 _	-	_								-
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											<u> </u>				

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2015

** Do Not File **

*** Not Open to Public Inspection ***

	Contributor's Name	Total Contributions	Excess Contributions
ALISON MASON CHASE	-	240,280.	172,566.
`	· · · · · · · · · · · · · · · · · · ·		
-			
Total Evenes Contributions to Sched	July A. Part II. Lino 6		172,566.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Employer Identification number

2015

Name of the organization 02-0474938 HUBBARD BROOK RESEARCH FOUNDATION, Organization type (check one): Section: Filers of: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 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. J 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 990 PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

HUBBARD BROOK RESEARCH FOUNDATION, INC.

02-0474938

Part I	Contributors (see instructions), Use duplicate copies of Part Lif addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	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		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>10,000.</u>	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
4		\$ 30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$3 <u>0,000</u> .	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
6		\$ 20,077.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization

Employer identification number

HUBBARD BROOK RESEARCH FOUNDATION, INC.

02-0474938

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
	SHARES OF PROCTER & GAMBLE		
		\$ 20,077.	_05/11/15
(a) No. com	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
a) o. om rtl	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a)	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) lo. om art 1	(b) Description of noncash property given	(c) FMV (cr estimate) (see instructions)	(d) Date received
		s	

Cohodulo D	/Form 990, 990-E7, or 990-PE\ (2015\			Page 4
Name of orga	(Form 990, 990-EZ, or 990-PF) (2015)		Employer i	dentification number
HUBBAR	D BROOK RESEARCH FOUND	ATION, INC.	02-0	0474938
Part III	Exclusively religious, charitable, etc., con-	tributions to organizations described if	i section 501(c)(7), (8), or (10) max wi no line entry, For organizations .	(at litting that) \$1,000 to
	completing Part III, enter the total of exclusively religiou	is, charitable, etc., contributions of \$1,000 of is	ss for the year. (Enter this Info. once.) - \$	<u> </u>
	Use duplicate copies of Part III if addition	al space is needed.		<u> </u>
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of	how gift is held
Part I	(b) Fulpose of gift	(4,555 11,511		<u> </u>
·				
				
		(e) Transfer of gift		
		(0) 112110101 21 3111	•	
	Transferee's name, address, a	nd ZIP_+ 4	Relationship of transferor to	transferee
				
				
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of	now gift is neid
Falti				
			_	
			_	
<u> </u>		1		
		(e) Transfer of gift		
[Transferee's name, address, a	nd 7IP + 4	Relationship of transferor to	transferee
<u> </u>	Transiere s traine, address, d			
				<u> </u>
			<u></u>	
				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of	how gift is held
Part I		· <u>·</u>		
				<u> </u>
		(e) Transfer of gift		
		- 4 7ID + 4	Relationship of transferor to	transferee
⊢	Transferee's name, address, a	<u> </u>	Tiologicalonia or a decision	
		<u> </u>		<u> </u>
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of	how gift is held
Part I	.,			
ĺ				
		(e) Transfer of gift		
1			Relationship of transferor to	transferee
-	Transferee's name, address, a	<u>nd ZIP + 4</u>	Relationship of transferor to	
1				
l				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Sorvice

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Nam	e of the organization	TAIL	02-0474938
	HUBBARD BROOK RESEA	RCH FOUNDATION, INC	
Pai		Funds or Other Similar Fund	S Of Accounts. Complete a trib
	organization answered "Yes" on Form 990, Part IV, line	6. (a) Donor advised funds	(b) Funds and other accounts
	-	(a) Donor advised tonds	(b) i and and and
1	Total number at end of year		
2	Aggregate value of contributions to (during year)	_	
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year L		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advi	Sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that grant funds can be	o conforming
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	Yes No
	impermissible private benefit?	at a time and a time a time a time a time and a time a time a time a time and a time a time a time and a time	Part IV. line 7
Pai	t II Conservation Easements. Complete if the orga	anization answered fee on roll 1	T die i i i i i i i i i i i i i i i i i i
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	torically important land area
	Preservation of land for public use (e.g., recreation or ed		tified historic structure
	X Protection of natural habitat	Freservation of a cer	tilled illotato da sactoro
	Preservation of open space	the form	of a conservation easement on the last
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the loss	Held at the End of the Tax Year
	day of the tax year.		<u> </u>
а	Total number of conservation easements		
þ	Total acreage restricted by conservation easements	entire test short in (a)	
C	Number of conservation easements on a certified historic stru	to 0/17/06, and not on a historic struc	ture
d	Number of conservation easements included in (c) acquired a	REP 8/17/00, and not on a historic struc	2d
	listed in the National Register	and authoriohad or terminated by th	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, of terminated by the	organization aming
	year >	ement is located • 1	
4	Number of states where property subject to conservation eas	efficient is located parties bandling of	ı
5	Does the organization have a written policy regarding the peri	bolds?	X Yes No
	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting, I	conding of violations, and enforcing col	nservation easements during the year
6	Staff and volunteer nours devoted to monitoring, inspecting, i	la luling of violations, and strictions, grant	
_	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserv	ation easements during the year
7		intg of violations, and officions	
_	➤ \$ Does each conservation easement reported on line 2(d) above	a satisfy the requirements of section 17	O(h)(4)(B)(i)
8	and section 170(h)(4)(B)(ii)?	, oadio// 1/0 to quite the control of the control o	Yes No
_	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expens	e statement, and balance sheet, and
9	include, if applicable, the text of the footnote to the organization	on's financial statements that describe	s the organization's accounting for
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
10	If the experiencian elected, as permitted under SEAS 116 (AS)	C 958), not to report in its revenue state	ement and balance sheet works of art,
,-	historical treasures, or other similar assets held for public exh	ibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the feetnete to its financial statements that describ	nes these items.	
h	If the propriettion elected, as permitted under SEAS 116 (AS)	C 958), to report in its revenue stateme	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		•
	(b) Boyonus included on Form 990, Part VIII, line 1		. <u></u> • \$
	(ii) Assets included in Form 990, Part X		,,
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financ	ial gain, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
•	Revenue included on Form 990, Part VIII, fine 1		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
1.	Assets included in Form 900 Part Y	***************************************	. \$

	t III Organizations Maintaining (BROOK RES	rt, His	torical Tr	easures, e	or Othe	<u>er Si</u>	milar <u>A</u>	sset	74938 S(contine	ued)	
3	Using the organization's acquisition, access	ion, and other record	ds, check	k any of the	following tha	ıt are a s	ignific	ant use (of its c	ollection	item	S
•	(check all that apply):	,	•	•								
а	Public exhibition	d	ı 🔲	Loan or exc	hange progra	ams						
b	Scholarly research	ŧ	· 🔲	Other			_					
c	Preservation for future generations							-				
4	Provide a description of the organization's c	offections and explai	in how th	ney further t	he organizati	on's exe	mpt p	urpose i	n Part	XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er simila	r asse	ts			_	_
•	to be sold to raise funds rather than to be m	aintained as part of t	the orga	nization's <u>co</u>	oliecti <u>on?</u>	*********				Yes		<u>No</u>
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" or	Form	990, Pa	rt IV, li	ne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.					· 					
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not	inclu	ded			_	-
	on Form 990, Part X?					**********			L	Yes	L_	No.
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	Howing	table:			_					
		•					_	<u>· </u>		Amount		
G	Beginning balance						'	<u>1c</u>				
ų	Additions during the year							<u>1d</u>				
	Distributions during the year							1e				
	Ending balance							1 f				
2a	Did the organization include an amount on F	orm 990. Part X. line	21. for	escrow or C	ustodial acco	ount liabi	lity?		\square	Yes		No
20 h	If "Yes," explain the arrangement in Part XIII.	. Check here if the e	xplanatio	on has been	provided on	Part XIII	i		<u>.</u>	,		
Par		if the organization ar	nswered	"Yes" on Fo	orm 990, Par	t IV, line	10.					
((a) Current year		rior year	(c) Two yea	rs back	(d) Th	ree years	back	(e) Four	years	<u>back</u>
4.	Beginning of year balance	(dy our or k) our	127.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	1							
		·										
	Contributions			_								
	Net investment earnings, gains, and losses	<u> </u>		<u>-</u>								
	Grants or scholarships			· -								
е	Other expenditures for facilities				1							
_	and programs				 							
	Administrative expenses			<u> </u>	 - 							
g	End of year balance			a salumn /	a)) polq se.							
2	Provide the estimated percentage of the cur		oz oz	g, column (a)) Helu as.	۷						
	Board designated or quasi-endowment					_						
ь	Permanent endowment	%										
¢	Temporarily restricted endowment	%										
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.				and for t	ha ar	anizatio				
3a	Are there endowment funds not in the posse	ession of the organiz	ation the	at are neid a	ina aaminista	sted for t	ilio Oly	Jai iizatio	""	Γ	Yes	No
	by:									3a(i)	103	110
	(i) unrelated organizations	••••••				***********	******		•••••			-
	(ii) related organizations						***-**		•••••			\vdash
b	ff "Yes" on line 3a(ii), are the related organiza						******		•••••	30		
4	Describe in Part XIII the intended uses of the		owmen <u>t</u>	funds								
Par	t VI Land, Buildings, and Equipn	nent.			o 00	. nv	line 1	10				
	Complete if the organization answere	<u>d "Yes" on Form 99</u>	0, Part I	V, line 11a. S	See Form 99), Part X	, <u>line</u>	10.		(II D1	15	
	Description of property	(a) Cost or o			t or other			ulated	1	(d) Book	valu	Þ
		basis (investi	ment)		(other)	de	precia	11011	+-			<u> </u>
1a	Land				70, <u>200</u> .			- 0 4 4				00.
	Buildings	,		1,94	<u> 19,847.</u>		6 <u>73</u>	<u>,841</u>	• -	1,276	<u>, u</u>	<u>00.</u>
	Leasehold improvements				_				- -			
	Equipment	Ł			 .		-		- -			
е	Other				<u> 8,682.</u>			<u>,682</u>				<u> </u>
Total	Add lines 1a through 1e. (Column (d) must e	egual Form 990, Part	X, colur	nn (B), li <u>n</u> e i	10c.)			<u> </u>	نبك	1,746	<u>3 , 2</u>	Ub.

Schedule D (Form 990) 2015 HUBBARD BROO	OK RESEARCH I	OUNDATION, INC.	0 <u>2-0474938 Page</u> 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, fine	11b. See Form 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: C	ost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)		<u> </u>	
(B)		<u> </u>	
_(C)		<u> </u>	
(D)	 .		
(E)			
<u>(F)</u>			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	 _	<u> </u>	
Complete if the organization answered "Yes" or	on Form 000 Port IV line	11c See Form 990, Part X. line	- 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: C	Cost or end-of-year market value
	<u></u>		
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line	e 15. (b) Book value
(a) C	escription		(a) Book Value
<u>(1)</u>		<u> </u>	
(2)			
(3)		<u> </u>	
(4)			
(5)			
(6)		<u> </u>	
(8)			
(9)	15)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	10./	·····	
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11e or 11f. See Form 990, Par	t X, line 25.
(-) Description of liability	111111111111111111111111111111111111111	(b) Book value	
(a) Description of liability (1) Federal income taxes			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			•
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line	25.)		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

c Add lines 4a and 4b Fortal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IV, line 12b. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) c Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses on included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART II, LINE 5: THE EASEMENT HELD IS NOT ACCOUNTED FOR IN THE FOUNDATION'S FINANCIAL STATEMENTS; THE EASEMENT PROTECTS THE SCIENTIFIC INTEGRITY OF WATER QUALITY RESEARCH CONDUCTED AT MIRROR LAKE. MONITORING IS ACCOMPLISHED VIA SITE INSPECTIONS PERFORMED ON A REGULAR		dule D (Form 990) 2015 HUBBARD BROOK RESEARCH F	OUNDATIO	N, INC.	02-0 <u>4</u>	<u>474938</u>	Page 4
Total revenue, gaine, and other support per audited financial statements	Par	Complete if the organization answered "Yes" on Form 990. Part IV, line	12a.	itoronao poi ii			
2 Amounts included on line 1 but not on Form 960, Part VIII, line 12: a Not unrealized gains (coses) or investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Cescribe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2a from line 1 Amounts included on Form 950, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 950, Part VIII, line 170 b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses and losses per audited financial Statements Complete if the organization answered "ve" on Form 950, Part I, line 12. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 1 Total expenses and losses per audited financial statements Complete if the organization answered "ve" on Form 950, Part I, line 12a. 2 Amounts included on line 1 but not on Form 950, Part III, line 25: Describe in Part XIII) Could be describe in Part XIII. Could be describe in Part XIII. Could line 8 and 4b. Could line 8 an					1	646,	851.
a Net unrealized gains (casse) on investments 22 3 3,385, c Recoveries of prior year grants 20 6 20 3,385, d Committee 20 5 3,385, d Committee 20 5 3,385, d Committee 20 5 20 5 20 5 20 5 20 5 20 5 20 5 20		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
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ACCOUNTING FOR UNCERTAINTY IN INCOME TAX ITEMS - THE FOUNDATION HAS							
ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE INTERNAL REVENUE SERVICE Schedule D (Form 990) 20	ANA	<u>LYZED TAX POSITIONS TAKEN FOR FILING WI</u>	TH THE I	NTERNAL RE	VENU Schedu	E SERV:	ICE 190) 2015

Schedule D (Form 990) 2015 HUBBARD BROOK RESEARCH FOUNDATION, INC. 02-0474938 Page 5 Part XIII Supplemental Information (continued)
AND ALL STATE JURISDICTIONS WHERE IT OPERATES. THE FOUNDATION BELIEVES
THAT INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND
DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL
ADVERSE EFFECT ON THE FOUNDATIONS FINANCIAL CONDITION, RESULTS OF
OPERATIONS OR CASH FLOWS. ACCORDINGLY, THEY HAVE NOT RECORDED ANY
RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN
INCOME TAX POSITIONS AT SEPTEMBER 30, 2015. THE FOUNDATIONS INCOME TAX
RETURNS ARE SUBJECT TO EXAMINATION BY THE APPROPRIATE TAX JURISDICTIONS.
AS OF SEPTEMBER 30, 2015 THEIR FEDERAL TAX RETURNS GENERALLY REMAIN OPEN
FOR THE LAST THREE YEARS. THERE ARE CURRENTLY NO AUDITS FOR ANY TAX
PERIODS IN PROGRESS.
PART_XI, LINE 2D - OTHER ADJUSTMENTS:
REAL PROPERTY RENTAL EXPENSES 60,840.
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PART XII, LINE 2D - OTHER ADJUSTMENTS:
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REAL PROPERTY RENTAL EXPENSES 60,840.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ
Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection

Name of the organization HUBBARD BROOK RESEARCH FOUNDATION, INC.	Employer identification number 02-0474938
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
MONITORING AND EDUCATION, AND TO DEVELOP NEW INITIATIVES	HIMITIO
ECOSYSTEM SCIENCE AND PUBLIC POLICY.	
FORM 990, PART VI, SECTION B, LINE 11:	
LINE 11A EXPLANATION - THE FORM 990 IS REVIEWED BY THE FI	NANCE COMMITTEE
PRIOR TO FILING	
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS AND DIRECTORS COMPLETE A DISCLOSURE FORM ANNUALL	Y. THE FORMS ARE
REVIEWED AND RETAINED BY MANAGEMENT.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE BOARD REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECT	OR ANNUALLY PRIOR
TO DETERMINING HIS COMPENSATION. THE COMPENSATION DECISI	•
IN THE ANNUAL BUDGET REPORT WHICH IS APPROVED BY THE BOAR	D
FORM 990, PART VI, SECTION C, LINE 19:	
THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERES	T POLICY AND
FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION	
FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC ENGLISHED	
FORM 990, PART VII, LINE 1A	VEND MUND
THIS IS A SHORT YEAR RETURN IN WHICH THERE IS NO CALENDAR	
ENDS WITH OR WITHIN THE SHORT YEAR. ACCORDIGLY, THE COMP	ENSATION
COLUMNS ARE ZERO.	