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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury

Internal Rev	venue Service Note. The foundation may b				Open to public Inspection
For calen	dar year 2012 or tax year beginning APR	1, 2012	, and ending	MAR 31, 2013	
Name of	foundation			A Employer identification	number
THE	ELLEN JEANNE GOLDFARB	MEMORIAL			
_CHA	RITABLE TRUST			06-6371228	
Number a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P.0	BOX 945			(860)677-8	111
City or to	own, state, and ZIP code			C If exemption application is p	ending, check here
_FAR	MINGTON, CT 06034-0945		_ -		
G Check	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2 5	- A
	Address change	Name change		Foreign organizations me check here and attach co	pering the 85% test, proputation
H Check	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(1)	
I Fair ma	arket value of all assets at end of year J Accountin	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(from i	Part II, col. (c), line 16)	her (specify)	· · · · · · · · · · · · · · · · · · ·	under section 507(b)(1)	(B), check here
\$	1,255,063. (Part I, colui	mn (d) must be on cash b	pasis)		
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
1	Contributions, gifts, grants, etc., received	126,014.	·	N/A	
2	Check ditach Sch B				
3	Interest on savings and temporary cash investments	3.	3.		STATEMENT 1
4	Dividends and interest from securities	26,725.	26,725.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
დ 6a	Net gain or (loss) from sale of assets not on line 10	<1,311.	>		
Bevenue 7	Gross sales price for all assets on line 6a 26,644.				 -
7 <u>ق</u>	Capital gain net income (from Part IV, line 2)		0.	KECENED	
8	Net short-term capital gain		let-		
9	Income modifications Gross sales less returns		643	n n	SO-S
10a	and allowances		2-2	JUL & & ZUIS	Š
b					
	Gross profit or (loss)		1 (JGUEN, UI	
11	Other income	151 431	26 722		_
12	Total. Add lines 1 through 11	151,431.	26,728.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages			-	
ε 15 ε 15	Pension plans, employee benefits				
ુ દૂ 168	Legal fees Accounting fees STMT 3	1,455.	728.		727.
	Accounting fees STMT 3 Other professional fees	T,433.	140.	<u> </u>	141.
ੋ ਘੇ ਫ ਭੇ 9 17	Interest			 	
81 ati €	Taxes STMT 4	216.	52.		0.
Operating and Administrative Expenses 12 12 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	Depreciation and depletion	210.	<u> </u>		0.
	Occupancy				
№ 21	Travel, conferences, and meetings				
P 21	Printing and publications				
声 23	Other expenses STMT 5	4.	4.		0.
24 at 24	Total operating and administrative	4.	***		1
Sera (₹	expenses. Add lines 13 through 23	1,675.	784.		727.
ීට් 25	Contributions, gifts, grants paid	182,300.	,04		182,300.
26	Total expenses and disbursements.	102,300			102,300.
20	Add lines 24 and 25	183,975.	784.		183,027.
27	Subtract line 26 from line 12:	100,0,0	,,,,,,		100,027.
	Excess of revenue over expenses and disbursements	<32,544.	\		
ł	Net investment income (if negative, enter -0-)	102/0440	25,944.	,	
	Adjusted net income (if negative, enter -0-)			N/A	
223501 12-05-12	LHA For Paperwork Reduction Act Notice, see	instructions.		——————————————————————————————————————	Form 990-PF (2012)

Form	990-	.PF	(2N	121

THE ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST

06-6371228 Page 2

Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	47,662.	21,834.	<u>21,834.</u>
3	Accounts receivable ► 500.			
	Less: allowance for doubtful accounts ▶		500.	500.
4	Pledges receivable -			
ŀ	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
1	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
<u>ه</u> ا	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
¥ 10a	Investments - U.S. and state government obligations			
	Investments - corporate stock STMT 6	300,836.	302,001.	525,180.
- 1	: Investments - corporate bonds			
	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation		İ	
12	Investments - mortgage loans			
13	Investments - other STMT 7	568,249.	559,868.	707,549.
	Land, buildings, and equipment; basis	300/==30		
1	Less accumulated depreciation	·		
15	Other assets (describe >			
''	Other assets (describe P			
16	Total assets (to be completed by all filers)	916,747.	884,203.	1,255,063.
\neg	Accounts payable and accrued expenses	J10,747.	001,203.	1,233,0034
	Grants payable			
40	Deferred revenue			
. <u>e</u>		··		
≣ 20	Loans from officers, directors, trustees, and other disqualified persons			
# 21				
22	Other liabilities (describe)			
00	Total liabilities (add Imag 17 through 99)	0.	0.	
23	Total liabilities (add lines 17 through 22)	0.	<u>U•</u>	
	Foundations that follow SFAS 117, check here			
8 24	and complete lines 24 through 26 and lines 30 and 31.			
ğ 24	Unrestricted			
<u>a</u> 25	Temporarily restricted			
8 26	Permanently restricted			
5	Foundations that do not follow SFAS 117, check here			
or Fund Balance	and complete lines 27 through 31.		_	
ş 27		0.	0.	
(C)	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ 29		916,747.	884,203.	
≥ 30	Total net assets or fund balances	916,747.	884,203.	
		046 545	004 000	
31	Total liabilities and net assets/fund balances	916,747.	884,203.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
			··	 .
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		046 545
	ist agree with end-of-year figure reported on prior year's return)		1	916,747. <32,544.>
	er amount from Part I, line 27a		2	<u> </u>
	er increases not included in line 2 (itemize)		3	0.
	I lines 1, 2, and 3		4	884,203.
	reases not included in line 2 (itemize)		5	0.
6 Tot	<u>al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co</u>	olumn (b), line 30		884,203.
				Form 990-PF (2012)

08210626 755449 2524

Turtit Supital Gallo a	ind E033C3 for Tax on in	ivesument	income				
	ibe the kınd(s) of property sold (e.g rehouse; or common stock, 200 shs			(b) How ac P - Purc D - Dona	hase '	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 30.221 SH ARTIC	O INTL. EOUITY F	UND II				2/20/11	05/14/12
b 1,901.851 SH AF		_	II			ARIOUS	05/04/12
c CAPITAL GAINS I							
d							
<u>e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss (e) plus (f) minus	s) (g)
a 313.			283	3.			30.
b 19,703.			27,672	2.			<7,969.
c 6,628.							6,628.
_d							
_e							
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69			Gains (Col. (h) gair	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex over	cess of col. (ı) col. (ı), ıf any		col. (k), but not less that Losses (from col.	an -0-) or (h))
<u>a</u>							30.
b							<7,969.
C							6,628.
<u>d</u>							
_e							<u></u>
2 Capital gain net income or (net cap	ortal loss) { If gain, also enterortal loss), enter -0			} 2			<1,311.
3 Net short-term capital gain or (loss							
If gain, also enter in Part I, line 8, o		10 (0).					
If (loss), enter -0- in Part I, line 8	• •] 3		N/A	1
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Investn	nent Inco	me	
(For optional use by domestic private	foundations subject to the section	4940(a) tax оп	net investment ind	come.)			
If section 4940(d)(2) applies, leave th	ue nart hlank						
ii section 4340(u)(2) applies, leave til	iis part Dialik.						
Was the foundation liable for the section	ion 4942 tax on the distributable an	nount of any ye	ear in the base peri	od?			Yes X No
If "Yes," the foundation does not quali							
1 Enter the appropriate amount in e	ach column for each year; see the I	nstructions be	fore making any en	itries.		Ţ-	(4)
Base period years Calendar year (or tax year beginnin			Net value of non			Distr (col. (b) d	(d) ibution ratio ivided by col. (c))
2011		4,483.			5,034.		.182533
2010		2,527.			7,279.		.161918
2009		4,408.			<u>8,155.</u>		.192462
2008		8,900.			1,931.		.165275
2007	19	5,716.		1,21	<u>8,883.</u>		160570
2 Total of line 1, column (d)	-			-		_2	.862758
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number of	of years			
the foundation has been in existen	ice if less than 5 years			-		3	.172552
						1	
4 Enter the net value of noncharitable	le-use assets for 2012 from Part X,	line 5				4	1,200,104.
5 Multiply line 4 by line 3	•					5	<u>207,080.</u>
6 Enter 1% of net investment incom	ie (1% of Part I, line 27b)					6	<u>259.</u>
7 Add lines 5 and 6	•	-				7	207,339.
						.	
8 Enter qualifying distributions from	Part XII, line 4	•				8	183,027.
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	tb, and comp	lete that part using	g a 1% tax	rate.		
See the Part VI instructions.							
223521 12-05-12							Form 990-PF (2012)

THE ELLEN JEANNE GOLDFARB MEMORIAL

	990-PF (2012) CHARITABLE TRUST 06-637			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	msut	Cuoi	15)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		_	10
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			<u> 19.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			$\frac{0.}{19.}$
	Add lines 1 and 2			
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			<u> 19.</u>
	Credits/Payments:			
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 280.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld		_	
	Total credits and payments. Add lines 6a through 6d		2	<u>80.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		2	<u>39.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	ļ	Yes	No
	any political campaign?	1a	_	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year;			
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	Ì		
	managers. ▶ \$ 0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X_
	If "Yes," attach the statement required by General Instruction T.		İ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	СТ	_	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	x	<u>L</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		x
10		10		X
		orm 99)-PF	(2012)

223531 12-05-12

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Form 990-PF (2012)

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THE ELLEN JEANNE GOLDFAR				
orm 990-PF (2012) CHARITABLE TRUST Part VII-B Statements Regarding Activities for Which	Form 4700 May Bo F		<u>06-63712:</u>	28 Page 6
	romi 4/20 Way be r	required (continu	Jea)	
5a During the year did the foundation pay or incur any amount to:	- 404E(a)\\Q		s X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		— —	SI A NO	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire		. 	
any voter registration drive?		• ====	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Te	S LALINO	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		s X No	
509(a)(1), (2), or (3), or section 4940(d)(2)?	ar adventional surpassa or f	. L lYe	SI A NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or i		s X No	
the prevention of cruelty to children or animals?	dor the eventions described i	—	S LALINO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		п пеушанопъ	N/A	ib
section 53.4945 or in a current notice regarding disaster assistance (see instri	•	•	N/A	-
Organizations relying on a current notice regarding disaster assistance check		unod		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to		. — —	l	
expenditure responsibility for the grant?			si No	
If "Yes," attach the statement required by Regulations section 53.494 6a Did the foundation, during the year, receive any funds, directly or indirectly, to	` *		1	
a personal benefit contract?	pay premiums on	Y ₆	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	norconal honofit contract?			Sb X
If "Yes" to 6b, file Form 8870.	hei 2011ai menenii confracti	-	· <u> </u>	- A
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y ₆	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib		L U.S		7b
Information About Officers Discotors Touch		nagers. Highly		<u>, , , , , , , , , , , , , , , , , , , </u>
Part VIII Paid Employees, and Contractors	,		•	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(h) Title and average	(c) Compensation		
(a) Name and address	(b) Title, and average hours per week devoted		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	account, other
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
(a) Name and address SEE STATEMENT 8	hours per week devoted	(If not paid,	(C) Contributions to employee benefit plans and deferred compensation	account, other
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	compensation	account, other allowances
SEE STATEMENT 8	hours per week devoted to position	(If not paid, enter -0-)	compensation	account, other allowances
	hours per week devoted to position	(If not paid, enter -0-)	O •	account, other allowances
SEE STATEMENT 8	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defered	account, other allowances 0.
SEE STATEMENT 8 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	O .	account, other allowances
SEE STATEMENT 8 Compensation of five highest-paid employees (other than those in	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defered	account, other allowances 0.
SEE STATEMENT 8 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defered	account, other allowances 0.
SEE STATEMENT 8 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defered	account, other allowances 0.
SEE STATEMENT 8 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position cluded on line 1). If none,	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defered	account, other allowances 0.

Form **990-PF** (2012)

Total number of other employees paid over \$50,000

Part IX-B Summary of Program-Related Investments	-
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	•
3	
Total. Add lines 1 through 3	0.

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Form **990-PF** (2012)

06-6371228 CHARITABLE TRUST Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,183,632. a Average monthly fair market value of securities 1a 34,748. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 1,218,380. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 380. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 <u> 18,276.</u> 1,200,104. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 60,005. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) Minimum investment return from Part X, line 6 60,005. 519 Tax on investment income for 2012 from Part VI, line 5 b Income tax for 2012. (This does not include the tax from Part VI.) c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1

Part XII Qualifying Distributions (see instructions)

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1

Recoveries of amounts treated as qualifying distributions

Deduction from distributable amount (see instructions)

4940(e) reduction of tax in those years.

		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	183,027.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	183,027.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	183,027.
Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the fou	ndation qualifies for th	e section

Form **990-PF** (2012)

486.

3

5

5

Add lines 3 and 4

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				59,486.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2012:		0.		· · · · · · · · · · · · · · · · · · ·
a From 2007 138,590.				
b From 2008 120, 473.				
c From 2009 136,840.				
d From 2010 126,522.				
e From 2011 156, 219.				
f Total of lines 3a through e	678,644.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 183,027.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				59,486.
e Remaining amount distributed out of corpus	123,541.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	802,185.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	120 500			
not applied on line 5 or line 7	138,590.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	663,595.			
10 Analysis of line 9:	003,393.			
a Excess from 2008 120, 473.				
b Excess from 2009 136,840.				
b Excess from 2009 c Excess from 2010 136,840. 126,522.				
d Excess from 2011 156, 219.				
e Excess from 2012 123,541.	•			
			<u>-</u> '	

Form 990-PF (2012) CHARITABLE T Part'XV Supplementary Informatio	n (continued)		06-6371	.228 Page 11
3 Grants and Contributions Paid During the	Year or Approved for Future F	Payment		
Recipient	If recipient is an ındıvidual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE SCHEDULE ATTACHED				182,300
Total			. ▶ 3a	182,300
b Approved for future payment		,		•
NONE				
				-
Total	<u>l</u>	1	▶ 3b	0

Part XVI-A	Analysis	s of Income	-Producing	Activities

Catan anno anno anto anto anto anto anto	Unrelated	business income	Excluded b	y section 512, 513, or 514	(a)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	, and an	
<u> </u>					<u></u>
D	 		 		
<u> </u>					
d			 		-
e	— —				
f			ļ ļ		
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	3.	
4 Dividends and interest from securities			14	26,725.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other					-
than inventory			18	<1,311.	
9 Net income or (loss) from special events				(1)0111	·
10 Gross profit or (loss) from sales of inventory		•			
11 Other revenue:	-				
a			<u> </u>		
b	-		 		
c		•	 		
d		•			
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		25,417.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	25,417
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco					nlichment of
the foundation's exempt purposes (other than				a importantly to the accomp	
	-, -, -, -, -, -, -, -, -, -, -, -, -, -	, , , , , , , , , , , , , , , , , , , ,			
				<u> </u>	
					<u> </u>
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					·
				······································	
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223621 12-05-12

Part'XVII	Information Re Exempt Organ		sfers To a	and Transaction	ns an	d Relation	ships With Noncha	ritable	<u>, , , , , , , , , , , , , , , , , , , </u>	10 10
1 Did the or	ganization directly or indir		of the followin	g with any other organ	ization	described in se	ction 501(c) of		/es	No
	other than section 501(c)									
	from the reporting founda				J				ŀ	
(1) Cash								1a(1)		Х
(2) Other	assets							1a(2)		Х
b Other tran	sactions:									
(1) Sales	of assets to a noncharita	ble exempt organıza	tion .					1b(1)		_X_
	nases of assets from a no		_					1b(2)		<u>X</u>
(3) Renta	ıl of facılıtıes, equipment,	or other assets				-		1b(3)		<u> </u>
	bursement arrangements		•	-				1b(4)		<u>X</u>
	s or loan guarantees			•				1b(5)		<u>X</u>
	rmance of services or me		_		-			1b(6)		<u>X</u>
	f facilities, equipment, ma	-								X
			_			-	market value of the goods, on or sharing arrangement,		IS,	
	s given by the reporting to I) the value of the goods,				it value	iii ariy transacti	on or snaring arrangement,	SHOW III		
	(b) Amount involved			e exempt organization		(d) Descripti	on of transfers, transactions, and	sharing arra	ngemer	
<u>(-)</u>	(0)	(6)	N/A			(5) 2333 [2.1]				
										
										
						<u> </u>				
						ļ				
				· · · · · · ·		ļ				
						ļ				
		-								
ın section	ndation directly or indirec 501(c) of the Code (othe complete the following sch	r than section 501(c edule.		tion 527? _.		itions described	[Yes	X] No
	(a) Name of org	ganization	<u>-</u>	(b) Type of organiza	tion		(c) Description of relations	ship		
	N/A					 -				
										
		-/			-		·····			
Sign Here	pending of perjury, I declare prief, it is true, correct and con fature of officer or trustee	mplee Declaration of p					rer has any knowledge ref	ay the IRS di urn with the own below (s X Yes	prepare	er
1	Print/Type preparer's na	ame	Preparer's s	ignature .	[Date	Check if PTIN self- employed			
Paid	TAV CAMMIE	סיי		E M	-	7/1/13	1 ' T	00411	001	
Preparer	JAY SATTLE Firm's name ► BLU		00 00	MDANV D		CPA'S	Firm's EIN ► 06-1	00412		
Use Only	Firms name > BLO	MI, STAPII	α CC	MITANI, F.C	-•,	CFA S	FIGURE SEIN ► UO-1	00320		
	Firm's address ▶ 29	S. MAIN	STREET	, P.O. BOX	<u>c 27</u>	72000				
				06127-200			Phone no. 860	561-4	100	0
								orm 990 -	PF "	20121

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.

OMB No 1545-0047

2012

Name of the organization **Employer identification number** THE ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST 06-6371228 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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

of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

the prevention of cruelty to children or animals. Complete Parts I, II, and III.

religious, charitable, etc., contributions of \$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 Part I, line 2 of its Form 990-PF, 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) (2012)

Name of organization THE ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST

Employer identification number

06-6371228

Part I	Contributors ((see instructions).	. Use duplicate co	pies of Part I if addition	al space is needed.
--------	----------------	---------------------	--------------------	----------------------------	---------------------

		·	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	ALBERT & DIANE KANEB 2 NEWTOWN EXECUTIVE PARK, SUITE 302 NEWTON, MA 02462	- \$\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	FRANCINE L. GOLDFARB 15 RIDGEMONT DRIVE WEST HARTFORD, CT 06117	- \$\$55,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ROBERT B. GOLDFARB 15 RIDGEMONT DRIVE WEST HARTFORD, CT 06117	_ \$ <u>25,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	KI & TUCK MILLER 89 BAINBRIDGE ROAD WEST HARTFORD, CT 06119	\$5,000. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	WILLIAM H. GOLDFARB PO BOX 945 FARMINGTON, CT 06034-0945	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.

Name of organization

Employer identification number

THE ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST

06-6371228

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

raitii	Noticasti Property (see instructions). Ose duplicate copies of Par	t ii ii additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \ \	000 F7 0-000 PF\/0010
		Oakadula D (Farm (OO OOO EZ OOO DE\ /OO4O\

Name of organization Employer identification number THE ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST 06-6371228 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

ELLEN JEANNE GOLDFARB MEMORIAL CHARITABLE TRUST 06-6371228 Contributions Paid Fiscal Year Ended March 31, 2013

Name of Recipient	Relationship	Status	<u>Purpose</u>	Funds <u>Disbursed</u>
Artists Collective	N/A	Public	Donation -	5,000
Barnard College	N/A	Public	Financial Aid Scholarship Donation	3,500
Boys & Girls Clubs of Hartford, Inc	N/A	Public	Educational Program	3,000
Brandeis University	N/A	Public	Financial Aid Scholarship Donation	3,500
The Bridge	N/A	Public	Donation	15,000
Brown University	N/A	Public	Financial Aid Scholarship Donation	3,500
Central Connecticut State University	N/A	Public	Financial Aid Scholarship Donation	3,500
Channel 3 Kids Camp	N/A	Public	Educational Program	1,500
Children's Educational Opportunity Foundation	N/A	Public	Donation	3,000
The Children's Museum	N/A	Public	Educational Program	5,000
Christian Activities Council Summer Youth Program	N/A	Public	Educational Program	2,000
College of the Holy Cross	N/A	Public	Financial Aid Scholarship Donation	3,500
Common Ground	N/A	Public	Educational Program	3,500
Conard High School	N/A	Public	Educational Programs	3,000
Connecticut Radio Information System	N/A	Public	Donation	1,000
Cove Center for Grieving Children, The	N/A	Public	Donation	6,000
Cultural Dance Troupe of the West Indies	N/A	Public	Donation	2,000
Emmanuel College	N/A	Public	Financial Aid Scholarship Donation	3,500
Goodwin College Foundation	N/A	Public	Donation	1,000
Grace Academy	N/A	Public	Financial Aid Scholarship Donation	5,000
Greater Hartford Academy of the Arts	N/A	Public	Educational Program	3,500
Greater Hartford Festival of Jazz	N/A	Public	Educational Program	1,000
HARC, Inc	N/A	Public	Educational Program	6,500
Hall High School	N/A	Public	Educational Programs	10,400
Hartford Camp Courant	N/A	Public	Financial Aid Scholarship Donation	1,500
Hartford Children's Theatre	N/A	Public	Educational Program	1,500
Hartford Foundation for Public Giving	N/A	Public	Music Program	
Gifts of Music Fund		•	-	5,000
Hartford Stage Company	N/A	Public	Educational Program	3,000
Hill-Stead Museum	N/A	Public	Educational Program	5,000
HopeWorks, Inc	N/A	Public	Educational Program	1,000
Intensive Education Academy	N/A	Public	Educational Program	15,000
Jonathan's Dream	N/A	Public	Donation	2,500
King Philip Middle School	N/A	Public	Educational Program	600
Mark Twain House & Museum	N/A	Public	Educational Program	4,000
Mary's Place	N/A	Public	Donation	1,000
Morley Elementary School	N/A	Public	Educational Program	600
Oak Hill / CT Institute for the Blind	N/A	Public	Educational Program	5,000
Playhouse Theatre Group, Inc	N/A	Public	Educational Program	3,000
Real Art Ways	N/A	Public	Educational Program	3,000
Ronald McDonald House	N/A	Public	Donation	1,000
Trinity College	N/A	Public	Educational Program	3,200
Trust for a Mountain Classroom	N/A	Public	Educational Program	1,000
University of Chicago	N/A	Public	Financial Aid Scholarship Donation	3,500
University of Notre Dame	N/A	Public	Financial Aid Scholarship Donation	3,500
Wadsworth Atheneum Museum of Art	N/A	Public	Educational Program	7,500
West Htfd Dept of Fine & Performing Arts	N/A	Public	Educational/Music Program	1,000
West Hartford Public Library	N/A	Public	Educational/Music Program	5,000
West Hartford Summer Arts	N/A	Public	Donation	2,500
Winding Trails Summer Camp	N/A	Public	Financial Aid Scholarship Donation	4,000
				182,300

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
FIDELITY DAILY INCOME TRUST					•		3.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A		:		3.
FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A)
FIDELITY INVESTMENTS	•		33,353.		6,628.	26,7	25.
TOTAL TO FM 990-PF, PART I, I	LN 4		33,353.		6,628.	26,7	25.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN				
BLUM, SHAPIRO & COMPANY, P.C.		1,455.		728.		7	27.
TO FORM 990-PF, PG 1, LN 16B		1,455.		728.			27.
FORM 990-PF	·	TAX	ES			STATEMENT	4
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
FOREIGN TAXES PAID ON DIVIDEND INCOME		52.		52.			0.
FEDERAL EXCISE TAX ON INVESTMENT INCOME		164.		0.			0.
TO FORM 990-PF, PG 1, LN 18		216.	-	52.			0.

	OTHER E		STATEMENT	5		
	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNT FEES - FIDELITY INVESTMENTS	4.		4.			0.
TO FORM 990-PF, PG 1, LN 23	4.		4.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE	T
EXXON MOBIL CORP COCA COLA CO. GENERAL ELECTRIC CO. VODAFONE GROUP PLC HOME DEPOT INC. MICROSOFT CORP. JOHNSON & JOHNSON INC. COMCAST CORP. INTERNATIONAL BUSINESS MACHINES TOTAL TO FORM 990-PF, PART II,				68,178. 97,586. 93,967. 5,211. 5,091. 29,905. 898. 1,023. 142. 302,001.	239,2 164,0 70,6 3,9 15,0 28,8 1,2 1,1 1,0	09. 14. 82. 19. 28. 45. 38.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
FIDELITY SMALL CAP STOCK DODGE & COX STOCK FUND		COST COST COST		43,615. 123,922. 132,927.	78,9 166,7 171,4	84.
DODGE & COX BALANCE FUND DODGE & COX INTERNATIONAL STOCE	· -					
DODGE & COX BALANCE FUND DODGE & COX INTERNATIONAL STOCK FUND ARTISAN INTERNATIONAL FUND ARTIO INTERNATIONAL EQUITY FUND		COST COST		29,958. 31,108.	29,3	07. 26.
DODGE & COX BALANCE FUND DODGE & COX INTERNATIONAL STOCE FUND ARTISAN INTERNATIONAL FUND) II					07. 26. 0. 51. 01. 79.

	LIST OF OFFICERS, D AND FOUNDATION MANA					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT		
ROBERT B. GOLDFARB 5 TWO MILE ROAD FARMINGTON, CT 06032	TRUSTEE 3.00	0.	0.	0.		
FRANCINE L. GOLDFARB 15 RIDGEMONT DRIVE WEST HARTFORD, CT 06117	TRUSTEE 1.00	0.	0.	0.		
WILLIAM H. GOLDFARB 5 TWO MILE ROAD FARMINGTON, CT 06032	TRUSTEE 0.50	0.	0.	0.		
MARY D. ELDER 5 TWO MILE ROAD FARMINGTON, CT 06032	TRUSTEE 2.00	0.	0.	0.		
LUCY K. MILLER 89 BAINBRIDGE ROAD WEST HARTFORD, CT 06119	TRUSTEE 0.50	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAG	E 6, PART VIII	0.	0.	0.		
	ART XV - LINE 1A OF FOUNDATION MANAGE	≅RS	STAT	EMENT 9		

NAME OF MANAGER

ROBERT B. GOLDFARB FRANCINE L. GOLDFARB WILLIAM H. GOLDFARB