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990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545-0052

		lendar year 2012 or tax year beginning		2/01 , 2012 , and end	ling		11/30,2013
	Name	of foundation O'CONNELL FAMILY FO	UNDATION, INC.		A	Employer identif	ication number
	c/0	DANIEL S. O'CONNELL			İ	13-374591	2
	Numb	er and street (or P O box number if mail is not delivere	d to street address)	Room/sui	ite B	Telephone numb	er (see instructions)
						() -
	16	ROCK RIDGE AVENUE				•	
_		town, state, and ZIP code					
	•				c	If exemption applic	ation is
	CDE.	ENWICH, CT 06831			i	pending, check here	, ▶ ∟ .
_			Initial satura	of a former public cha			, 🗀
G	Che	ck all that apply Initial return		•	ם עוווי	1 Foreign organiza	
		Final return	Amended re		1	2 Foreign organiza 85% test, check	
_	 -	Address change	Name chang			computation .	
H	—¬	ck type of organization X Section 501			E	If private foundation	n status was terminated
\perp		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(t	o)(1)(A), check here . >
ı	Fair	— — — — — — — — — — — — — — — — — — —	unting method X C	ash Accrual	F	If the foundation is	in a 60-month termination
	of y		ther (specify)			under section 507(b)(1)(B), check here . >
	16)	▶ \$ 42,624. (Part I,	column (d) must be on	cash basis)			
Ę	art l	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Not investment	(2)		(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net investment income	(6)	Adjusted net income	for charitable purposes
		column (a) (see instructions))	books	moone	l	income	(cash basis only)
_	1	Contributions, gifts grants, etc. received (attach schedule) .	776,517.	ATCH 1			
	2						
	3	Check attach Sch B	2,956.	2,956.			
	-	Interest on savings and temporary cash investments	2,557.				ATCH 2
	4	Dividends and interest from securities					
	5 a	Gross rents			 		
		Net rental income or (loss)	-32,340.		 		
ě	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all 643 207	-32,340.				
ē	Ĭ	assets on line 6a			-		
Revenue	7	Capital gain net income (from Part IV, line 2) .		66,179.	 		
_	8	Net short-term capital gain ,			 -		" '
	9	Income modifications			3/	 -	10
	10 a	Gross sales less returns and allowances • • • •		ļ <u> </u>	3/ 1	//D =	181
	ь	Less Cost of goods sold .		·-····································	\perp		190
	С	Gross profit or (loss) (attach schedule)			<u></u>		
	11	Other income (attach schedule)			k./	<u> </u>	' 3 '
_	12	Total Add lines 1 through 11	749,690.	69,135.			<u> </u>
	13	Compensation of officers, directors, trustees, etc.	0		<u> </u>		
s	14	Other employee salaries and wages					<u> </u>
sesses	15	Pension plans, employee benefits					
		Legal fees (attach schedule)			L		
Щ	b	Accounting fees (attach schedule)					
Š		Other professional fees (attach schedule)		L			
ā	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)ATCH 3	917.				917
۳	10	Depreciation (attach schedule) and depletion.					
퉏	20	Occupancy			<u> </u>		
▼	24	Travel, conferences, and meetings					· · · · · · · · · · · · · · · · · · ·
ā	21						
p	22	Printing and publications	210.	150.			210
Operating	23	Other expenses (attach schedule) ATCH .4.			 		1
ē	24	Total operating and administrative expenses.	1,127.	150.	Į.		1 107
Ö		Add lines 13 through 23	791,761.	130.	 		1,127
	25	Contributions, gifts, grants paid		150	 		791,761
_	26	Total expenses and disbursements Add lines 24 and 25	792,888.	150.	 		792,888
	27	Subtract line 26 from line 12					
	1	Excess of revenue over expenses and disbursements	-43,198.		ļ		
	b	Net investment income (if negative, enter -0-)		68,985.			ļ <u>-</u>
	C	Adjusted net income (if negative, enter -0-)	1				

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Form 990-PF (2012) PAGE 5

Dest	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year	
Part	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
T ₁	Cash - non-interest-bearing				
` 2	Savings and temporary cash investments		42,624.	42,624.	
3	Accounts receivable				
	Less allowance for doubtful accounts ▶				
4	Pledges receivable				
	Less allowance for doubtful accounts ▶				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other		· · · · · · · · · · · · · · · · · · ·		
	disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule)				
'					
<u>"</u>	Less allowance for doubtful accounts ▶				
Assets	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
110	a Investments - US and state government obligations (attach schedule)				
	b Investments - corporate stock (attach schedule)				
144	c Investments - corporate bonds (attach schedule)				
111	Investments - land, buildings, and equipment basis				
	and equipment basis Less accumulated depreciation (attach schedule)				
12	Investments - mortgage loans				
13	Investments - other (attach schedule)				
14	Land, buildings, and equipment basis			_	
-	equipment basis Less accumulated depreciation (attach schedule)				
15	Other assets (describe				
16	Total assets (to be completed by all filers - see the				
1	instructions Also, see page 1, item I)	85,822.	42,624.	42,624.	
17	Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·		
18	Grants payable				
ı	Deferred revenue				
tie.	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities 20 21 22					
当21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe				
22	Total lightilian (add lang 17 through 22)	o	_		
23	Total liabilities (add lines 17 through 22)			1	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
S					
일 24	Unrestricted				
25	Temporarily restricted				
d Balances	Permanently restricted				
5	Foundations that do not follow SFAS 117,				
띱	check here and complete lines 27 through 31. ▶ X	1		\	
S 27	Capital stock, trust principal, or current funds	85,822.	42,624.		
Net Assets or Fund	Paid-in or capital surplus, or land, bldg, and equipment fund				
Š 29	Retained earnings, accumulated income, endowment, or other funds	**************************************			
= 30	Total net assets or fund balances (see instructions)	85,822.	42,624.		
Z 31	Total liabilities and net assets/fund balances (see				
1	instructions)	85,822.	42,624.		
Part	Analysis of Changes in Net Assets or Fund E				
	tal net assets or fund balances at beginning of year - Part I		nust agree with		
	d-of-year figure reported on prior year's return)	* *	- 1	85,822.	
	ter amount from Part I, line 27a			-43,198	
3 Oth	13,130				
	ner increases not included in line 2 (itemize) ▶ d lines 1, 2, and 3		42,624.		
	creases not included in line 2 (itemize) ▶	• • • • • • • • • • • • • • • • • • • •		72,024	
	tal net assets or fund balances at end of year (line 4 minus li	ine 5) - Part II column (h)		42,624.	
<u> </u>	tal fiet assets of fully palatices at end of year (fille 4 fillings if	ne <i>3)</i> - Fart II, Column (0),	ште JU 6	42,024.	

Page 3

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
, , ,	d describe the kind(s) of property sold (•	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE	DULE				
b					
C					
d					
е					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a			 		
<u>b</u>			 		
<u>c</u>					
d			 		
e Consider the formation		d bu the few data and 10/04/00	 		
Complete only for assets	showing gain in column (h) and owne	T		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less to Losses (from co	
a			-		
b					
<u>c</u>			 	·	·
<u>d</u>			ļ		
<u>e</u>		<u> </u>	 		
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		66,179.
	or (loss) as defined in sections 12		1		
•	t I, line 8, column (c) (see inst				
Part I, line 8	<u> </u>	<u> </u>	3	···	0
Part V Qualification l	Jnder Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e)	outable amount of any year in the b	ase penod	13	Yes X No
		, see the instructions before making	any entri	es	
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
2011	705,115.	41,605.			6.947843
2010	662,083.	53,906.	I .	1	2.282176
2009	23,684.	1,811.			3.077858
2008	306,524.	53,633.			5.715213
2007	28,160.	59,351.			0.474465
2 Total of line 1, column (d)	·		2	4	8.497555
3 Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the s than 5 years	3		9.699511
4 Enter the net value of nor	ncharitable-use assets for 2012 fro	om Part X, line 5	4	· · · · · · · · · · · · · · · · · · ·	312,702.
Multiply line 4 by line 3			5	3,	033,056.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6	·	690.
7 Add lines 5 and 6			7	3,	033,746.
8 Enter qualifying distribution If line 8 is equal to or graph Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete t	8 hat part	using a 1% ta	792,888. x rate See th

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruc	tions	<u>) </u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		1,3	80.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		1,3	80.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0		1,3	80.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			19.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,3	399.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in 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 the			
	definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			ĺ
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d		1		1
	(1) On the foundation > \$ (2) On foundation managers > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			l
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
	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?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T	1 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			l
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		v	
	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? If "Yes," complete Part II, col (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	1 1		
	NY,	-	į	1
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	,	, i	1
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			v
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and		İ	x
	addresses	10 Form 99	0.05	<u></u>
		- UIIII 3 3	V-FF	.zu121

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

Form 990-PF (2012)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	gers, Highly Paid Employ	ees,
3 Five highest-paid independent contractors for professional services (see instru	ictions). If none, enter "NONE	"
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
		· · · · · · · · · · · · · · · · · · ·
NONE		
Total number of others receiving over \$50,000 for professional services	.	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficianes served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 N/A		
`		
2		
3		
		li
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1 NONE		
2		
All other program-related investments. See instructions		
3 NONE		
Total. Add lines 1 through 3	>	

Page 8

Pa	rt X	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundations,	
1	Fair r	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purpo			
а	Avera	age monthly fair market value of securities	1a	248,510.
b	Avera	age of monthly cash balances	1b	68,954.
С	Fairn	narket value of all other assets (see instructions)	1c	
d	Total	(add lines 1a, b, and c)	1d	317,464.
е	Redu	ction claimed for blockage or other factors reported on lines 1a and		
	1c (at	ttach detailed explanation)		
2	Acqui	sition indebtedness applicable to line 1 assets	2	
3	Cubtr	and line 2 from line 1d	3	317,464.
4	Cash	deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstru	alue of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	4	4,762.
5	Net v	alue of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	312,702.
6	Minin	num investment return. Enter 5% of line 5	6	15,635.
Pa	rt XI	Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating		
		foundations and certain foreign organizations check here and do not complete this p	oart)	
1	Minim	num investment return from Part X, line 6	1	15,635.
2 a	Tax o	in investment income for 2012 from Part VI, line 5		
b	Incom	ne tax for 2012 (This does not include the tax from Part VI)		
С	Add I	ines 2a and 2b	2c	1,380.
3	DISTI	butable amount before adjustments. Subtract line 2c from line 1	3	14,255.
4	Reco	veries of amounts treated as qualifying distributions	4	
5	Add li	nes 3 and 4	5	14,255.
6	Dedu	ction from distributable amount (see instructions) butable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
7	Distri	ibutable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1		7	14,255.
Pa	rt XII	Qualifying Distributions (see instructions)	 	
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a		enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	792,888.
ь			1b	192,888.
2	Amo	ram-related investments - total from Part IX-B punts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
_		999	2	
3		unts set aside for specific charitable projects that satisfy the	- -	
а		ability test (prior IRS approval required)	3a	
b		n distribution test (attach the required schedule)	3b	
4	Quali	ifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	792,888.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income	· · · · · · · · · · · · · · · · · · ·	122,000.
-		r 1% of Part I, line 27b (see instructions)	5	0
6	Adiu	sted qualifying distributions. Subtract line 5 from line 4	6	792,888.
_	Note	e. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal		foundation
		qualifies for the section 4940(e) reduction of tax in those years	outuing whether ti	ie iouridation

Page 9

	rt XIII Undistributed Income (see instru	ictions)			Page 3
	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	line 7	· · · · · · · · · · · · · · · · · · ·			14,255.
2	Undistributed income, if any, as of the end of 2012				21/2331
_	Enter amount for 2011 only				
	Total for pnor years 20 10 .20 09 .20 08				
3	Excess distributions carryover, if any, to 2012				
	From 2007 28,160.				
b	From 2008				
С	From 2009 23,659.				
đ	From 2010				
	From 2011				
	Total of lines 3a through e	1,725,993.			
4	Qualifying distributions for 2012 from Part XII,				}
_	line 4 ▶ \$ 792,888.				
	Applied to 2011, but not more than line 2a			 -	
D	Applied to undistributed income of prior years (Election required - see instructions)				
	,				
C	Treated as distributions out of corpus (Election required - see instructions)				
đ	Applied to 2012 distributable amount				14,255.
	Remaining amount distributed out of corpus	792,888.			
5	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,518,881.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2011 Subtract line				
	4a from line 2a Taxable amount - see instructions				
_					
T	Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2013				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)			· · · · · · · · · · · · · · · · · · ·	
8	Excess distributions carryover from 2007 not	22.162			
	applied on line 5 or line 7 (see instructions)	28,160.			
9	Excess distributions carryover to 2013.	2 490 721			
4.5	Subtract lines 7 and 8 from line 6a	2,490,721.			
10	Analysis of line 9 Excess from 2008 306,524.				
a	Excess from 2009 23,659.				
'n	Excess from 2010 661,900.				
d	Excess from 2011				
	Excess from 2012 792, 888.			•	
					Form 990-PF (2012)

N/A

Page **11**

	990-PF (2012)			······································	Page 11
Pa	rt XV Supplementary Information (continued)			
_3	Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or Appr	oved for F	Future Payment	
	Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Paul dupor the year	or substantial contributor	recipient		
а	Paid during the year				
A'	гсн 6				
••	- 				
				1	
			1		
			1		
			ļ		
			ļ		
			1		
			ĺ		
			}	1	1
			ĺ		
					ĺ
_	Takal	1	<u> </u>	<u> </u>	701 761
	Total	<u> </u>			791,761.
	Approved for future payment				
			ļ		
	Total	<u> </u>	<u> </u>		
					i .

Part XVI-A Analysis of Income-Produ			· Ie.		(2)
nter gross amounts unless otherwise indicated	(a)	(b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
b					· · · · · · · · · · · · · · · · · · ·
с					
d					
е					
f					
g Fees and contracts from government agencies					
Membership dues and assessments			14	2.056	
Interest on savings and temporary cash investments Dividends and interest from securities	<u> </u>		14	2,956. 2,557.	
Net rental income or (loss) from real estate				2,337.	
a Debt-financed property			-		
b Not debt-financed property					
Net rental income or (loss) from personal property .					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	-32,340.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a	ļ		 -		
b					· · · · · · · · · · · · · · · · · · ·
d					
e					
Subtotal Add columns (b), (d), and (e)				-26,827.	·
me No. Explain below how each activit accomplishment of the foundation					
	,				
		NOT APPLICABLE			
		NOT APPLICABLE			
	_				
					Form 990-PF (2

		Exempt Organ					ships With Non	on an	tabit	,
, (n secti organiz	on 501(c) of the Co ations?	de (other than	engage in any of the follow section 501(c)(3) organizati	ons) or i	n section 527,			Yes	No
	a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash									
(1) Cas	an					• • • • • • • • • • • • • • • • • • • •	1a(1) 1a(2)		X
h ((2) Other assets								-	X
	(1) Sales of assets to a noncharitable exempt organization							15(1)		х
(2) Pur	chases of assets fro	om a noncharit	able exempt organization				1b(2)		Х
(Rer	ntal of facilities, equi	pment, or othe	r assets				1b(3)		х
(4) Rei	mbursement arrange	ements					16(4)		Х
(5) Loa	ins or loan guarantee	es				• • • • • • • • • •	1b(5)		X
(b) Per Sharing	tormance of service	s or members	hip or fundraising solicitations sts, other assets, or paid emp	lovoos	• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	1b(6)		<u>x</u>
d !	f the a alue o alue ir	answer to any of the first the goods, other any transaction or	e above is "Ye assets, or serv sharing arran	es," complete the following vices given by the reporting gement, show in column (d)	schedule foundate the val	e Column (b) son If the found ue of the goods	should always show lation received less s, other assets, or s	the than ervice	fair m s rece	arke arke eived
(a) Line	9 NO	(b) Amount involved	(c) Name of	nonchantable exempt organization	N/2		ers, transactions, and sha	nng arra	ngeme	nts
							-			
		· · · · · · · · · · · · · · · · · · ·								
				· · · · · · · · · · · · · · · · · · ·						
					 					
	<u> </u>									
					-					
										
c	lescrib f "Yes,		of the Code (c wing schedule	ffiliated with, or related to, other than section 501(c)(3)) (b) Type of organization		tion 527?			es X] No
		(=) (Totalio of organization	·	(b) Type of organization		<u> </u>	(c) Description of relation	sub.		
	Т									
Sign Here	correct	and complete Declaration of	preparer (other than	named this return, including accompanying taxpayer) is based on all information of white Date	Title	and statements, and the same statements and the same statements.	May the IR	discus eparer	s this	
	<u></u>	Drunt/Tung ========	2000	/ Dronfort		- Det-	····			
Paid		Print/Type preparer's THOMAS ROONE:		Preparer signature	ے '	Date 3/3/201	4 Clieck	PTIN		
Prep	arer		LOITTE TAX			3	Self-employed			3
Use (Only	Firm's name DE Firm's address 16					Firm's EIN ▶ 86-1	100/	,	
				ΙΥ	:	10019-6754	Phone no 212-4	92-36	500	

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

Name of the organization		Employer identification number					
O'CONNELL FAMILY FOUND							
C/O DANIEL S. O'CONNELL 13-3745912							
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 fo	undation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See					
General Rule							
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 e contributor. Complete Parts I and II	or more (in money or					
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% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.							
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 the prevention of cruelty to children or animals. Complete Parts I, II, and III							
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 religious, charitable, etc., contributions of \$5,000 or more during the year.							
990-EZ, or 990-PF), but it must a	not covered by the General Rule and/or the Special Rules does not file Sanswer "No" on Part IV, line 2 of its Form 990, or check the box on line It, to certify that it does not meet the filing requirements of Schedule B (Fo	H of its Form 990-EZ or on					
For Paperwork Reduction Act Notice, s	ee the Instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-F7, or 990-PF) (2012)					

Name of organization O'CONNELL FAMILY FOUNDATION, INC.
C/O DANIEL S. O'CONNELL

Employer identification number 13-3745912

	C/O DANIEL S. O CONNELL		13-3743912
Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	DANIEL S. & GLORIA P. O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	\$501,830.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _	DANIEL S. & GLORIA P. O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	\$1,784.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
3_	DANIEL S. & GLORIA P. O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	\$172,720.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 _	DANIEL S. & GLORIA P. O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	\$100,183.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(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)
(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 O'CONNELL FAMILY FOUNDATION, INC.
C/O DANIEL S. O'CONNELL

Employer identification number 13-3745912

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	US TREASURY NOTES		
		\$501,830.	_12/26/2012_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3_	2,000 SHS JOHNSON AND JOHNSON COM		
		\$172,720.	_6/18/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	3,985 SHS PFIZER INC		
		\$100,183.	12/27/2012
(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
		\$	

Page 4 Employer identification number Name of organization O'CONNELL FAMILY FOUNDATION, INC. C/O DANIEL S. O'CONNELL 13-3745912 Part III 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 the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose 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

O'CONNELL FAMILY FOUNDATION, INC. 13-3745912 FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of I	Property	Description Description		or Date D acquired		Date sold		
Gross sale price less expenses of sale	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of 12/31/69	Excess of		Gain	
expenses of sale	allowed/ allowable	basis	as of 12/31/69	12/31/69	FMV over adj basis	H	or (loss)	
TOTAL GAIN(L	oss)			• • • • • • • • • • • • • • • • • • • •			66,179.	
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FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

ATTACHMENT	1	

NAME AND ADDRESS		DATE	DIRECT PUBLIC SUPPORT
DANIEL S & GLORIA P 16 ROCK RIDGE AVENUE GREENWICH, CT 06831		12/26/2012	501,830.
DANIEL S & GLORIA P 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	O'CONNELL		1,784.
DANIEL S. & GLORIA P 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	O'CONNELL	6/18/2013	172,720
DANIEL S. & GLORIA P 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	O'CONNELL	12/27/2012	100,183.
	TOTAL CO	ONTRIBUTION AMOUNTS	776,517

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

REVENUE

AND

EXPENSES

DESCRIPTION

PER BOOKS

ACCRUED INTEREST

2,557.

TOTAL

2,557.

13-3745912

ATTACHMENT	3

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
NYS FILING FEE 2011 FEDERAL TAX LIABILITY	50. 867.		50. 867.
TOTALS	917.		917.

13-3745912

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

REVENUE

AND

NET

EXPENSES PER BOOKS

INVESTMENT INCOME

150.

<u>DESCRIPTION</u>
ANNUAL BANK FEE
TRANSFER FEE

TOTALS

210.

150.

150.

60.

CHARITABLE

PURPOSES

210.

150.

13-3745912

FORM 990PF, PART VIII - LIST OF OFFIC	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 5	
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION			
DANIEL S O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	PRESIDENT	0	0	0
GLORIA P O'CONNELL 16 ROCK RIDGE AVENUE GREENWICH, CT 06831	VICE PRESIDENT	0	0	0
CHRISTINE POMAR 10 GREENRIDGE DRIVE CHAPPAQUA, NY 10514	DIRECTOR	0	0	0

GRAND TOTALS

EDGARTOWN, MA 02539

13-3745912

FORM 990PF, PART XV GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

33315 331 (11311)	TORING TEAC		
		ATTACHMENT	
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	POUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE BOATHOUSE FOUNDATION	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	300
TWO MAIN STREET		THEIR EXEMPT FUNCTIONS	
EDGARTOWN MA 02539			
CARDINAL SPELLMAN H S	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	3,350
ONE CARDINAL SPELLMAN PLACE		THEIR EXEMPT FUNCTIONS	2,220
BRONX, NY 10466			
BOSTON PREPARATORY CHARTER PUBLIC SCHOOL	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	2,500
1286 HYDE PARK AVE		THEIR EXEMPT FUNCTIONS	
HYDE PARK, MA 02136			
BROWN UNIVERSITY	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	76
BOX 1859		THEIR EXEMPT FUNCTIONS	
PROVIDENCE RI 02912			
YALE UNIVERSITY DEVELOPMENT	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	20 000
157 CHURCH STREET		THEIR EXEMPT FUNCTIONS	
NEW HAVEN, CT 06510			
VGC FOUNDATION	501(C)(3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	500
100 CLUBHOUSE LANE		THEIR EXEMPT FUNCTIONS	

ATTACHMENT 6

CAMBRIDGE, MA 02142

13-3745912

FORM 990PP, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT & (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND POUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SHERIFF'S MEADOW FOUNDATION 57 DAVID AVENUE VINEYARD HAVEN, MA 02568	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	2 500
PMC 77 FOURTH AVENUE NEEDHAM, MA 02494	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	1 000
MARTHAS VINEYARD PRESERVATION TRUST 99 MAIN ST EDGARTOWN, MA 02539	501(C)(3)	TO AID THE DONES ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	2 500
THE BREAST CANCER ALLIANCE 48 MAPLE AVENUE GREENWICH, CT 06830	501(C)(3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	15,000
STS PHILIP & JAMES SCHOOL 1160 E 213TH ST NEW YORK NY 10469	501(C)(3)	TO AID THE DONES ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	25,000
AMERICAN RED CROSS 139 MAIN ST	501(C)(3)	TO ALD THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	1 000

ATTACHMENT 6

40368N 2706 3/1/2014 9 00 16 AM V 12-7 12

ARLINGTON, VA 22203-1606

13-3745912

FORM 990PF PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

ATTACHMENT 6 (CONT.D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SLOAN KETTERING (TEAM PERRY)	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	1 000
633 THIRD AVENUE		THEIR EXEMPT FUNCTIONS	
NEW YORK NY 10017			
REACH PREP	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	1 000
1 DOCK ST #100		THEIR EXEMPT FUNCTIONS	
STAMFORD, CT 06902			
DANA FARBER (CHRIS DURBIN)	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	1,000
450 BROOKLINE AVE		THEIR EXEMPT FUNCTIONS	
BOSTON, MA 02215			
SLOAN KETTERING (TEAM PAUL SCHAYE)	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	500
633 THIRD AVENUE		THEIR EXEMPT PUNCTIONS	
NEW YORK NY 10017			
VINEYARD HOUSE, INC	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	5 000
15 CHURCH ST		THEIR EXEMPT FUNCTIONS	
VINEYARD HAVEN, MA 02568			
THE NATURE CONSERVANCY	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT	20
4245 NORTH FAIRFAX DRIVE, SUITE 100		THEIR EXEMPT FUNCTIONS	

ATTACHMENT 6

40368N 2706 3/1/2014 9 00 16 AM V 12 7 12

PROVIDENCE, RI 02912

13-3745912

FORM 990PE, PART XV : GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PLUS STOPP, PARL AV : GHANTS AND CONTRIBUTION	S PAID DURING THE YEAR	ATTACHMENT	6 (CONT.D).
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BROWN DELTA PHI ALUM BOX 1877 PROVIDENCE, RI 02912	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	500
YALE ALUMNI MAGAZINE P O BOX 1905 NEW HAVEN, CT 06509-1905	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	45
REDFITZ PRODUCTIONS 67 WEST STREET, SUITE 612 BROOKLYN, NY 11222	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	250
YMCA OP MARTHA'S VINEYARD 111R EDGARTOWN VINEYARD HAVEN ROAD VINEYARD HAVEN, MA 02568	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	8,333
JOSEPHINE HERRICK PROJECT 64 FULTON ST SUITE 905 NEW YORK, NY 10038	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	1,200
BROWN UNIVERSITY BOX 1877	501 (C) (3)	TO AID THE DONEE ORGANIZATION IN CARRYING OUT THEIR EXEMPT FUNCTIONS	600,000

ATTACHMENT 6

40368N 2706 3/1/2014 9 00 16 AM

V 12-7 12

13-3745912

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 6 (CONT : D)

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS

BRONX NY 10466

POUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

THE CAMPAIGN FOR CARDINAL SPELLMAN HS FOUNDATION

ONE CARDINAL SPELLMAN PLACE

501 (C) (3)

TO AID THE DONEE ORGANIZATION IN CARRYING OUT

99,187

THEIR EXEMPT FUNCTIONS

TOTAL CONTRIBUTIONS PAID

791,761

ATTACHMENT 6 PAGE 32

40368N 2706 3/1/2014 9 00 16 AM V 12-7 12

SCHEDULE D (Form 1041)

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. ▶ Information about Schedule D (Form 1041) and its separate instructions is at OMB No 1545-0092

2012

Department of the Treasury www.irs.gov/form1041. Internal Revenue Service Name of estate or trust O'CONNELL FAMILY FOUNDATION, INC. Employer identification number C/O DANIEL S. O'CONNELL 13-3745912 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (mo , day, yr) (c) Date sold (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss Carryover Worksheet _______ 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back 5 Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (mo, day, yr) (c) Date sold (e) Cost or other basis (d) Sales price the entire year (mo, day, yr) (see instructions) Subtract (e) from (d) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b 66,179. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 12 66,179.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2012

Schedule D (Form 1041) 2012				Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	3 (2)
Caution: Read the instructions before completing this	part.	(see instr.)	or trust's	(3) Total
13 Net short-term gain or (loss)	13			
14 Net long-term gain or (loss):				
a Total for year	14a			66,179.
b Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
c 28% rate gain	14c			
15 Total net gain or (loss). Combine lines 13 and 14a	15			66,179.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a n	or Fo	orm 990-T, Part I, line 48	a) If lines 14a	and 15, column (2), are net
necessary	701 103.	s, complete rait iv and	Capital LC	ss carryover vvorksneet, as
Part IV Capital Loss Limitation				
16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				
a The loss on line 15, column (3) or b \$3,000			16	()
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, Loss Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 990	-T, line 34), is a	a loss, complete the Capital
Part V Tax Computation Using Maximum Capital Gains Rate				
Form 1041 filers. Complete this part only if both lines 14a and 15 in col		(2) are gains, or an ar	nount is enter	ed in Part I or Part II and
there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor			Trount to critical	co in rait for rait if and
Caution: Skip this part and complete the Schedule D Tax Worksheet in the i	ınstrud	ctions if		
• Either line 14b, col (2) or line 14c, col (2) is more than zero, or				
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form 990-T trusts. Complete this part only if both lines 14a and 15 a	ire ga	ins, or qualified divid	ends are inclu	ided in income in Part I
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part if either line 14b, col. (2) or line 14c, col. (2) is more than zero.	and d	complete the Scheaul	e Diax Work	sheet in the instructions
				
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17		
18 Enter the smaller of line 14a or 15 in column (2)				
but not less than zero 18				
19 Enter the estate's or trust's qualified dividends				
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T)				
20 Add lines 18 and 19				
21 If the estate or trust is filing Form 4952, enter the				
amount from line 4g, otherwise, enter -0		⊢ l		
22 Subtract line 21 from line 20 If zero or less, enter -0		22		,
23 Subtract line 22 from line 17 If zero or less, enter -0		23		
0.4 . Fatas the amplian of the amplication has 47 as 60 400			İ	
Enter the smaller of the amount on line 17 or \$2,400		24		
25 Is the amount on line 23 equal to or more than the amount on line 24				
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box No. Enter the amount from line 23	(
	• • •	25		
26 Subtract line 25 from line 24	• • •	20		
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	00	27		
NO. Enter the smaller of line 17 or lin	10 22	21		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Enter the arroant not the 20 (if the 20 is blank, offer 0),		20		
29 Subtract line 28 from line 27		20	ł	
30 Multiply line 29 by 15% (15)			30	
31 Figure the tax on the amount on line 23 Use the 2012 Tax Rate	 e Sch	edule for Estates and	Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)				
			31	
32 Add lines 30 and 31			32	
32 Add lines 30 and 31 33 Figure the tax on the amount on line 17 Use the 2012 Tax Rate	 e Sch	edule for Estates and	Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)				
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 h	here a	and on Form 1041 S	chedule	
G, line 1a (or Form 990-T, line 36)		•		
-, -,	· · · · -	 		edule D (Form 1041) 2012

Schedule D-1 (Form 1041) 2012 Page 2 Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number O'CONNELL FAMILY FOUNDATION, INC. 13-3745912 Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date acquired (mo , day, yr) (c) Date sold (mo , day, yr) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (d) Sales pnce 6a US TREASURY INFLATION NOTE 01/20/2010 06/20/2013 473,230. 451,366. 21,864. 1,200 SHS JOHNSON AND JOHNSON COM 07/14/2010 06/19/2013 101,986. 73,264. 28,722. 800 SHS JOHNSON AND JOHNSON COM 02/21/2012 06/19/2013 67,991. 52,398. 15,593.

6b Total. Combine the amounts in co	ilumn (f) Enter h	nere and on Sche	dule D, line 6b .	 	66,179.

FEDERAL FOOTNOTES

ELECTION UNDER IRC.REG SEC 53-4942 (A)-3(D)(2):

THE O'CONNELL FAMILY FOUNDATION HEREBY ELECTS TO TREAT THE CURRENT YEAR'S QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING YEAR'S UNDISTRIBUTED INCOME AS MADE OUT OF CORPUS.

SIGNED:

SIGNED: FOUNDATION MANAGER