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Form **990-PF**

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

Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

	alendar year 2013 or tax year beginning		, and en	aing	A P. A	<u> </u>
m	ne of foundation				A Employer identification	on number
	TANLEY FAMILY FOUNDATION	A and described		B	06-115788	8
1 7	nber and street (or PO box number if mall is not delivered to stree RICHARDS AVENUE			Room/suite	B Telephone number 203-853-2	000
	or town, state or province, country, and ZIP or foreign portion of the country of	postal code			C If exemption application is	pending, check here
CI	heck all that apply: Initial return Final return	Initial return of a fo Amended return	rmer public ch	narity	D 1. Foreign organization	•
	Address change	Name change			Foreign organizations in check here and attach in	computation
Cf	heck type of organization X Section 501(c)(3) e Section 4947(a)(1) nonexempt charitable trust	xempt private foundation Other taxable private founda	tion		E If private foundation st	
aı	ir market value of all assets at end of year J Account		X Accru	al	under section 507(b)(
	· 1	ther (specify)	Lea Acold	···	F If the foundation is in a under section 507(b)(
<u> </u>	\$ 297,125,778. (Part I, cold		oasis.)			- A-7 5.1551
aı	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 expenses per books	(b) Net inv		(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
T	1 Contributions, gifts, grants, etc., received	132,716,963.			N/A	
	2 Check if the foundation is not required to attach Sch B			ш. т		
	3 Interest on savings and temporary cash investments	1,187,182.	1 12	7,182.		STATEMENT 1
	4 Dividends and interest from securities	1,107,102.	1,10	,,102.		LILITICALINA L
	D Net rental income or (loss)					
	62 Net gain or (loss) from sale of assets not on line 10	8,709,907.				
	b Gross sales price for all assets on line 6a 70,872,950.				· N	
	7 Capital gain net income (from Part IV, line 2)		8,709	9,907.		
	Net short-term capital gain Income modifications			''', ', '		
	10a and allowances		······································	·····		
	D Less Cost of goods sold .					1-16-14-14-14-14-14-14-14-14-14-14-14-14-14-
	c Gross profit or (loss)					
П	11 Other income	142 614 052	0 001	7 000		
+	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	142,614,052.	7,89	7,089. 0.		0.
П	14 Other employee salaries and wages					-
ŀ	15 Pension plans, employee benefits					
	16a Legal fees STMT 2	1,240.		620.		620.
	b Accounting fees STMT 3	22,411.	1.	L,206.		11,205.
	c Other professional fees		····	<u> </u>		Cil-u-q
	18 Taxes STMT 4	155,000.		0.	1 - 1 7 - 1 N - 1 7	0.
1	19 Depreciation and depletion			· 61		18
	20 Occupancy				U. 1 4 201g	ipi
1	21 Travel, conferences, and meetings			~		1 <u>K</u> 1
	22 Printing and publications	44.		44	CUSA; UT	
	23 Other expenses STMT 5 24 Total operating and administrative	44.		44.		0.
	expenses. Add lines 13 through 23	178,695.	1:	L,870.		11,825.
	25 Contributions, gifts, grants paid	5,140,000.				5,140,000.
	26 Total expenses and disbursements.					
ļ	Add lines 24 and 25	5,318,695.	1	L , 870.		5,151,825.
1	27 Subtract line 26 from line 12.	137,295,357.				
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	131,233,331.	9.88	5,219.		-
	C Adjusted net income (if negative, enter -0-)		-,000	- , •	N/A	-
7	11-13 LHA For Paperwork Reduction Act Notice, see	Instructions				Form 990-PF (2013)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	102,657,104.
2	Enter amount from Part I, line 27a	2	137,295,357.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	239,952,461.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	239,952,461.

	and Losses for Tax on I		Income	,				
` 2-story brick wa	(a) List and describe the kind(s) of property sold (e g , real estate,2-story brick warehouse, or common stock, 200 shs MLC Co)) Date acquired mo , day, yr)	(d) Date sold (mo , day, yr.)
1a STOCK SALES					P	V.	ARIOUS	VARIOUS
b PIMCO BONDS			_		P	V.	ARIOUS	VARIOUS
c ISHARES BARCLA	Y				P	V.	ARIOUS	VARIOUS
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cos plus ex	t or other basis kpense of sale		(h) Gain or (loss) (e) plus (f) minus (g)			
a 60,483,453.		52	2,423,16	6.				8,060,287.
b 3,442,654.			3,220,49			•		222,163.
c 6,946,843.			5,519,38	6.				427,457.
d								
е								
Complete only for assets showin	g gain in column (h) and owned by	y the foundation	on 12/31/69				ains (Col (h) gaır	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I)			col. (k L), but not less tha .osses (from col	n -0-) ar (h))
a							-	8,060,287.
b				ļ				222,163.
C								427,457.
d	·							
е				i				
2 Capital gain net income or (net ca		ter in Part I, line 7 -0- in Part I, line		}	2			8,709,907.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5)			\ \ \ \ \				
If gain, also enter in Part I, line 8,				 			N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U		Poduood	Toy on Not	<u> (</u>	3	nt Inco		<u> </u>
If section 4940(d)(2) applies, leave the Was the foundation liable for the sectif "Yes," the foundation does not qual	tion 4942 tax on the distributable a fly under section 4940(e) Do not o	complete this pa	rt					Yes X No
	each column for each year; see the	instructions bet	ore making any e					(4)
(a) Base penod years Calendar year (or tax year beginnii			Net value of no		ntable-us			(d) bution ratio vided by col (c))
2012	4,1	09,782.				,530.		.035679
2011		25,000.				,902.		.012871
2010		95,000.				,931.		.012157
2009		02,500.				,200.		.016801
2008	1,1	50,000.		40	<u>,832</u>	,982.		.028164
2 Total of line 1, column (d)							2	.105672
3 Average distribution ratio for the the foundation has been in existent		I on line 2 by 5,		r of ye	ars		3	.021134
4 Enter the net value of noncharitab	le-use assets for 2013 from Part X	(, line 5		_			4 21	5,389,460.
5 Multiply line 4 by line 3					-		5	4,552,041.
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)						6	98,852.
7 Add lines 5 and 6							7	4,650,893.
8 Enter qualifying distributions fron	n Part XII, line 4						8	5,151,825.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, lir	ne 1b, and comp	lete that part usin	ng a 1'	% tax rat	te	-	
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	n 990-PF (2013) STANLEY FAMILY FOUNDATION		<u>.57888</u>		Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 4948 - se</u>	ee instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
•	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		_		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1	9	8,8	<u>52.</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).				0
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2		0 0	_0.
_	Add lines 1 and 2	3	9	8,8	52.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		0 0	52.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	9	0,0	<u>52.</u>
	Credits/Payments. 1 2013 estimated tax payments and 2012 overpayment credited to 2013				
		4			
	D Exempt foreign organizations - tax withheld at source	-			
	Tax paid with application for extension of time to file (Form 8868)	-			
	I Backup withholding erroneously withheld	┥╻╿	1Ω	17	95.
	Total credits and payments. Add lines 6a through 6d	8	10	4 ,/)
	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 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8	5 9	43.
	Enter the amount of line 10 to be Credited to 2014 estimated tax 85,943. Refunded	11		5,5	0.
	art VII-A Statements Regarding Activities				-•
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		Yes	No
	any political campaign?	O 111	1a		X
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	n\2	1b		X
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials publisi	•	1.5		
	distributed by the foundation in connection with the activities.	100 01			
	Did the foundation file Form 1120-POL for this year?		10		Х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		10		
	(1) On the foundation ► \$ 0 • (2) On foundation managers ► \$				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_			
	managers > \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		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		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
t	o If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	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.				[
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				ĺ
	By language in the governing instrument, or				ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta	te 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 X	V .	7	X	
					ĺ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		_		ĺ
	CT				
b	o 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	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	endar			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .		10		X

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Minimum Investment Return (All domestic foundations must complete this part. Foreign	1 foundations	s, see instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	190,926,646
b Average of monthly cash balances	1b	27,742,857
c Fair market value of all other assets	. 16	
d Total (add lines 1a, b, and c)	1d	218,669,503
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0
3 Subtract line 2 from line 1d	. 3	218,669,503
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,280,043
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	. 5	215,389,460
6 Minimum investment return. Enter 5% of line 5	. 6	10,769,473
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here and do not complete this part.)	ins and certain	1
1 Minimum investment return from Part X, line 6	1	10,769,473
2a Tax on investment income for 2013 from Part VI, line 5	52.	
b Income tax for 2013 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	20	98,852
3 Distributable amount before adjustments Subtract line 2c from line 1	3	10,670,621
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	10,670,621
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	10,670,621
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	. <u>1a</u>	5,151,825
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	5,151,825
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	98,852 5,052,973
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,052,973
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundated 4940(e) reduction of tax in those years	ition qualifies f	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7				10,670,621.
2 Undistributed income, if any, as of the end of 2013	, ,			
a Enter amount for 2012 only			3,531,756.	
b Total for prior years.	-44,			· · · · · · · · · · · · · · · · · · ·
2 ······		0.		
3 Excess distributions carryover, if any, to 2013			, , , , , , , , , , , , , , , , , , , ,	William Hater Control City of the
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				······································
Part XII, line 4 ▶\$ 5, 151, 825.				
a Applied to 2012, but not more than line 2a			3,531,756.	
b Applied to undistributed income of prior	·	3334444434 - 181344 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 - 18144 -	3/331//333	***************************************
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	······	· · ·		· · · ·
(Election required - see instructions)	0.			
· · · · · · · · · · · · · · · · · · ·				1,620,069.
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	0.			1,020,000.
· F	0.	·· ··········		0.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	V •			
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2012 Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				9,050,552.
7 Amounts treated as distributions out of	_			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2009				
b Excess from 2010				
© Excess from 2011				
d Excess from 2012				
B Excess from 2013				
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Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	at it is a private operating			
foundation, and the ruling is effective for			. ▶		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described i	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		,
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed			ļ		
b 85% of line 2a				-	
c Qualifying distributions from Part XII,		 		+	·
line 4 for each year listed		 		-	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					· · · · · · · · · · · · · · · · · · ·
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter	:				
(1) Value of all assets (2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return				-	
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ata thia part aply	if the foundation	had \$5,000 av	una im accorda
at any time during	the year-see inst		e loundation	nad \$5,000 or mo	ore in assets
1 Information Regarding Foundation a List any managers of the foundation when the state of the foundation of the foundation when the state of the foundation when the state of	o have contributed more	than 2% of the total conti	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed if THEODORE STANLEY	nore than \$5,000) (See :	section 507(d)(2))			
b List any managers of the foundation who other entity) of which the foundation ha	o own 10% or more of the sa 10% or greater interes	he stock of a corporation (or an equally large porti	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation of	only makes contributions	to preselected charitable (organizations and does i	not accept unsolicited requi	ests for funds If
the foundation makes gifts, grants, etc.	(see instructions) to ındı	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	đ
a The name, address, and telephone num	ber or e-mail address of	the person to whom appli	cations should be addre	ssed.	
b The form in which applications should be	pe submitted and informa	ation and materials they sh	ould include.		
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors.	
					
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3 Grants and Contributions Boid During the M		D		r .
3 Grants and Contributions Paid During the Y Recipient	If recipient is an individual,	Payment	1	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Tocipient		
a . a.e ceimig are yea				
			-	
ABC GUILFORD	NONE	PUBLIC CHARITY	CHARITABLE	
PO BOX 140				
GUILFORD, CT 06437				2,500.
BRIDGES	NONE	PUBLIC CHARITY	CHARITABLE	
	 			5,000.
CAMP HAZEN - YMCA	NONE	PUBLIC CHARITY	CHARTMARI.E	
204 WEST MAIN STREET				
CHESTER, CT 06412]	7,500.
COMMUNITY PARTNERS IN ACTION	NONE	PUBLIC CHARITY	CHARITABLE	
110 BARTHOLOMEW AVE, SUITE 3010 HARTFORD, CT 06106				5,000.
	· · · · · · · · · · · · · · · · · · ·			3,000.
COVE FOR GRIEVING CHILDREN	NONE	PUBLIC CHARITY	CHARITABLE	
250 POMEROY AVENUE, SUITE 107				
MERIDEN, CT 06450 Total SEE COL	TINUATION SHEE	ET/S)	. > 3a	2,000. 5,140,000.
b Approved for future payment		32(0)	. 54	3,140,000.
, , , , , , , , , , , , , , , , , , ,				
				:
NONE				
		ļ		
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated (a)	business income	Excluded (C) Exclu-	by section 512, 513, or 514	(e)
1 Program service revenue	Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
С					
d					
e	1	-,-			
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
4. Dundanda and interest from accounting			14	1,187,182.	···
5 Net rental income or (loss) from real estate	·		 	1/10//1021	
- 11.5					
					
	· 				
6 Net rental income or (loss) from personal					
property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other			18	9 700 007	
than inventory			10	8,709,907.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			1		
ā					
b					
C			_		
d	-				
e	-			0.007.000	
12 Subtotal Add columns (b), (d), and (e)).	9,897,089.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	9,897,089.
(See worksheet in line 13 instructions to verify calculations)	<u> </u>				
Part XVI-B Relationship of Activities	to the Accor	nplishment of I	Exempt	Purposes	
Line No. Explain below how each activity for which inc	nme is reported in	column (a) of Part VI	I-A contribut	ad importantly to the accom	nlichment of
the foundation's exempt purposes (other tha				ed importantly to the accom	phoninent of
	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,			
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Part XVII		egarding Transfers To izations		nd Relationships With Noncha	
1 Did the o	rganization directly or indu	ectly engage in any of the follow	ing with any other organization	described in section 501(c) of	Yes No
		(3) organizations) or in section 5			
		ation to a noncharitable exempt o			
(1) Cast					1a(1) X
(2) Othe	rassets				1a(2) X
b Other trai	nsactions				
(1) Sale:	s of assets to a noncharital	ble exempt organization			1 _{b(1)} X
(2) Puro	hases of assets from a nor	ncharitable exempt organization		·	1b(2) X
	al of facilities, equipment,				1b(3) X
	nbursement arrangements				1b(4) X
	is or loan guarantees				1b(5) X
	_	mbership or fundraising solicitat		• • • • •	1b(6) X
		iling lists, other assets, or paid e			1c X
			· ·	ays show the fair market value of the goods,	
or service	es given by the reporting fo		ived less than fair market value	in any transaction or sharing arrangement, s	
(a) Line no	(b) Amount involved	(c) Name of noncharitat		(d) Description of transfers, transactions, and	shanno arrangements
		N/A			Jg
_			· · · · · · · · · · · · · · · · · · ·		
					
					
·					-
					-
<u> </u>				-	
ın sectior	n 501(c) of the Code (other complete the following sche		ction 527?		Yes X No
	(a) Name of org	anization	(b) Type of organization	(c) Description of relations	hip
	N/A				
					.
- land h					y the IRS discuss this
Sign 👠	Ch ?			sho	own below (see instr)?
Here	<u>, m</u>	Υ	17-12.7014	1 orchard	X Yes No
Sig	nature of office r or trustee		Date	Title	
	Print/Type preparer's na	me Preparer's	signature	Date Check If PTIN	
			1 '	self- employed	
Paid	ELIZABETH		/0		0235171
Preparer		M, SHAPIRO 🖟 C	OMPANY, P.C.,	CPA'S Firm's EIN ► 06-1	009205
Use Only					. <u>.</u>
		S. MAIN STREE	-		
	WE_	ST HARTFORD, C'	T 06127-2000		61-4000
				Fe	orm 990-PF (2013)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.irs.gov/form990

OMB No 1545-0047

STANLEY FAMILY FOUNDATION

Employer identification number

STANLEY FAMILY FOUNDATION 06-1157888							
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	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.					
	(1), (b), or (10) organization can check boxes for both the deficital rule and a openial ric	no. God men gonerio.					
	on filing Form 990, 990-EZ, or 990-PF that received, dunng the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one					
Special Rules							
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contributions	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.						
contributions for i If this box is chec purpose. Do not d	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						
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F et 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) (2013)

Name of organization

Employer identification number

STANLEY FAMILY FOUNDATION

06-1157888

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THEODORE STANLEY 47 RICHARDS AVE NORWALK, CT 06857	\$ 132,716,963.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

STANLEY FAMILY FOUNDATION

06-1157888

/n\	Noncash Property (see instructions). Use duplicate copies of P		
(a) No.	<i>(</i> L.)	(c)	(_n
from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
	APPRECIATED SECURITIES		****
1			
		\$ 89,322,610.	05/24/13
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
- $ $			
	· · · · · · · · · · · · · · · · · · ·	\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncasti property given	(see instructions)	Date received
į		— _a	
		\$	
(a)		(2)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(See matradions)	
:			
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I			
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
	13	\$	30, 990-EZ, or 990-PF) (2

vame of orgai	nization		Employer identification number				
STANLE	Y FAMILY FOUNDATION		06-1157888				
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	dual contributions to section 501(c e following line entry. For organizatio , contributions of \$1,000 or less for	(7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year. (Enter this information once)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gif					
	Transferee's name, address, an	d 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, an	d 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, an	0 LIP + 4	Relationship of transferor to transferee				
-							

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
The second secon	or substantial contributor	recipient		
SEORGETOWN MINISTRIES	NONE	PUBLIC CHARITY	CHARITABLE	
.041 WISCONSIN AVENUE NW				
VASHINGTON, DC 20007				50,00
CONTROL OF THE CONTRO				
INNER CITY OUTINGS NH - SIERRA CLUB	NONE	PUBLIC CHARITY	CHARITABLE	
SS SECOND STREET, 2ND FLOOR				2 00
FAN FRANCISCO, CA 94105				3,00
NAMI - CENTRAL VIRGINIA	NONE	PUBLIC CHARITY	CUADIMADIE	
1904 BYRD AVENUE, STE 103	NONE	CORRECT CHARTTI	CHARITABLE	
RICHMOND, VA 23230				5,00
NAMI - DELAWARE	NONE	PUBLIC CHARITY	CHARITABLE	
2400 W. 4TH STREET				
VILMINGTON, DE 19805				5,00
NAMI - ILLINOIS	NONE	PUBLIC CHARITY	CHARITABLE	
218 WEST LAWRENCE AVENUE				
SPRINGFIELD, IL 62704				10,00
NAMI - INDIANA	NONE	PUBLIC CHARITY	CUADAMADI B	
PO BOX 22697	MOME	POBLIC CHARITI	CHARITABLE	
INDIANAPOLIS IN 46222				5.00
				7.5
NAMI - KENTUCKY	NONE	PUBLIC CHARITY	CHARITABLE	
808 MONTICELLO ST.				
SOMERSET, KY 42501				5,00
NAMI - NEW MEXICO (ALBUQUERQUE)	NONE	PUBLIC CHARITY	CHARITABLE	
8015 MOUNTAIN ROAD NE				
ALBUQUERQUE, NM 87110				10,00
NAMI - NEW YORK	NONE	PUBLIC CHARITY	CUADITADI P	
99 PINE STREET	NONE	FORDIC CHARITY	-INVII LUDIE	
ALBANY, NY 12207				5,00
	-			3,30
JAMI - ROANOKE	NONE	PUBLIC CHARITY	 CHARITABLE	
P.O. BOX 20864				
COANOKE, VA 24018		_	l	5,00 5,118,00

STANLEY FAMILY FOUNDATION

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		_
NAMI - VIRGINIA	NONE	PUBLIC CHARITY	CHARITABLE	
P.O. BOX 8260 RICHMOND, VA 23226				10,000
, or some	-			
NAMI NATIONAL	NONE	PUBLIC CHARITY	CHARITABLE	
3803 N. FAIRFAX DR.				
ARLINGTON, VA 22203				50,000
NEW HAVEN HOME RECOVERY 153 EAST STREET	NONE	PUBLIC CHARITY	CHARITABLE	
NEW HAVEN, CT 06511			····	2,500
PLANT IT - CALIFORNIA	NONE	PUBLIC CHARITY	CHARITABLE	
9457 S. UNIVERSITY BOULEVARD HIGHLANDS RANCH, CO 80126				50,000
HIGHLANDS RANCH, CO 00120				30,000
ST. MARTIN DE PORRES ACADEMY	NONE	PUBLIC CHARITY	CHARITABLE	
208 COLUMBUS AVENUE				
NEW HAVEN, CT 06519	 			18,500
STANLEY CENTER AT THE BROAD INSTITUTE 7 CAMBRIDGE CENTER	NONE	PUBLIC CHARITY	CHARITABLE	
CAMBRIDGE, MA 02142				4,250,000
				:
TREATMENT ADVOCACY CENTER	NONE	PUBLIC CHARITY	CHARITABLE	
200 N. GLEBE ROAD, SUITE 730				500.000
ARLINGTON, VA 22203		+		600,000
VARCA	NONE	PUBLIC CHARITY	CHARTTARI.E	
5 COON HOLLOW ROAD	NONE			
DERBY, CT 06418				1,500
BARTON CENTER FOR DIABETES	NONE	PUBLIC CHARITY	CHARITABLE	
60 CLARA BARTON RD NORTH OXFORD, MA 01537				2,500
DC CENTRAL KITCHEN	NONE	PUBLIC CHARITY	CHARITABLE	
425 2ND ST NW				30.000
WASHINGTON, DC 20001 Total from continuation sheets	<u> </u>	<u> </u>		30,000

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES ST	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	S	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
BARCLAYS I SHARES DIVIDENDS -	23,702.	(0.	23,702.	23,702.		
CORPORATE STOCKS FLEET INTEREST	817,675. 4.	(0.	817,675. 4.	817,675. 4.		
PIMCO DIVIDENDS UBS MONEY MARKET INTEREST	336,121. 9,680.		0.	336,121. 9,680.	336,121. 9,680.		
TO PART I, LINE 4	1,187,182.		0.	1,187,182.	1,187,182.		
DESCRIPTION		(A) EXPENSES PER BOOKS	NE'	(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
LEGAL FEES		1,240.		620.			20.
TO FM 990-PF, PG 1,	LN 16A	1,240.		620.		62	20.
FORM 990-PF		ACCOUNTI	NG :	FEES	S:		 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NE	(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	BLE
ACCOUNTING FEES		22,411.		11,206.		11,20)5.
TO FORM 990-PF, PG 1	, LN 16B	22,411.		11,206.		11,20)5.

FORM 990-PF	TAX	ES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
FEDERAL TAX PAYMENTS	155,000.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	155,000.	0.		0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
BANK FEES	44.	44.		0.	
TO FORM 990-PF, PG 1, LN 23	44.	44.		0	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT (
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE	
AMAZON APPLE BED, BATH & BEYOND COMCAST CVS GENERAL ELECTRIC			1,582,686. 0. 2,996,149. 3,308,375. 989,242.	25,123,770 0 7,227,000 7,794,750 2,147,100	

 STANLEY FAMILY FOUNDATION			 06-1157888
OUTERWALL PRICELINE RALPH LAUREN ULTA SALON HEPTARES		16,824,312. 12,001,200. 1,836,152. 17,339,050. 5,118,851.	19,508,300. 17,436,000. 1,765,700. 18,338,800. 5,423,677.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	162,966,731.	220,289,117.
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
UBS MONEY MARKET UBS INSTITUTIONAL FUND BARCLAYS PIMCO TOTAL RETURN PIMCO REAL RETURN FUND PIMCO UNCONSTRAINED PIMCO LOW DURATION	COST COST COST COST COST COST	0. 0. 0. 0. 0. 18,441,759. 10,477,843.	0. 0. 0. 0. 18,346,720. 10,401,402.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	28,919,602.	28,748,122.
FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
REMAINDER INTEREST - 13 SUTTON PL REMAINDER INTEREST - 432 FROGTOWN		4,546,133. 3,694,355.	4,546,133. 3,694,355.
TO FORM 990-PF, PART II, LINE 15	8,240,488.	8,240,488.	8,240,488.

FORM 990-PF EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT

9

GRANTEE'S NAME

A GLIMMER OF HOPE FOUNDATION

GRANTEE'S ADDRESS

3600 NORTH CAPITAL OF TEXAS HIGHWAY, BLDG B, SUITE AUSTIN, TX 78746

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

500,000. 03/24/12

378,491.

PURPOSE OF GRANT

FOR CHARITABLE ACTIVITIES CONSISTENT WITH GLIMMER'S TAX-EXEMPT STATUS AND PURPOSES AS STATED IN ITS ORGANIZATIONAL DOCUMENTS.

DATES OF REPORTS BY GRANTEE

2/25/13

ANY DIVERSION BY GRANTEE

N/A

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

• ii you a	re ming for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of t	nis torm).			
Do not co	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ly filed Fo	rm 8868.		
Electronic	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time	e to file (6	months fo	r a corpo	ration
	o file Form 990-T), or an additional (not automatic) 3-mo						
	file any of the forms listed in Part I or Part II with the exc				-		
	Benefit Contracts, which must be sent to the IRS in pap						
	irs gov/efile and click on e-file for Charities & Nonprofits		,				•
Part I	Automatic 3-Month Extension of Time		submit original (no copies nee	eded).			
	tion required to file Form 990-T and requesting an autor						
Part I only	· -					•	
-	orporations (including 1120-C filers), partnerships, REM	IICs. and t	rusts must use Form 7004 to reques	 t an exten	sion of time	•	
	me tax returns.	•		_	r's identify		ber
Type or					Employer identification number		
print	-			. ,	(=:: 7 ::		
•	STANLEY FAMILY FOUNDATION			06-1157888			
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	cunty numb		
filing your	47 RICHARDS AVENUE				,	(,	
return See Instructions	City, town or post office, state, and ZIP code. For a for NORWALK, CT 06857	oreign add	lress, see instructions.				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)				0 4
Application	Ann	Dotum	Andication			-	D-4
	oi:	Return	Application				Return
Is For	av Form 000 F7	Code	Is For				Code
	or Form 990-EZ	01	Form 990-T (corporation)				07
Form 990		02	Form 1041-A				08
	rm 4720 (individual) 03 Form 4720 (other than individual)						09
Form 990		04	Form 5227				10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
rom 990	T (trust other than above) JULIE FRIESE	06	Form 8870				12
• The he		47 RI	CHARDS AVENUE - NO	א דענים	Cm (16057	
	one No. ► (203) 853-2000	4 / I/T		KWALIK	, ст с	10057	
		- :- 45 - 11-	Fax No.			_	
	rganization does not have an office or place of busines: s for a Group Retum, enter the organization's four digit			£ 41 i £			
box ▶ [7	· · · · · · · · · · · · · · · · · · ·				
	quest an automatic 3-month (6 months for a corporation		to file Form 200 They tanging of time		ers the exte	ension is	ior.
1 1160	311G11GM 15 0014	-	tion return for the organization name		The extens		
ie fe	or the organization's return for:	n organiza	mon return for the organization name	d above.	THE EXIENS	IOH	
	X calendar year 2013 or						
▶[tax year beginning	20	d ending				
- (tax year beginning	, cu i	a ending		<u> </u>		
2 if th	e tax year entered in line 1 is for less than 12 months, o	hack rase	on: Initial return	Final retur	_		
- "	Change in accounting period	ileun leas	on millarretum n	illai letui	14		
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6060	anter the testative tay less any				
	•••	, or o ues,	enter the tentative tax, less any		*	101	,900.
	refundable credits. See instructions.) onto	v refundable aredite	3a	\$	101	, 500.
	is application is for Forms 990-PF, 990-T, 4720, or 6069			2	•	1Ω/	,795.
	mated tax payments made. Include any prior year overg			3b	\$	104	, 133.
	ance due. Subtract line 3b from line 3a. Include your pa	-	•		&		0.
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	70 50 1	
instruction	lf you are going to make an electronic funds withdrawalns.	(uirect de	on, with this form 8008, see form 8	453∙EU af	ia Form 88	r 9-EU for	payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA

323841 12-31-13 Form 8868 (Rev. 1-2014)