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Form **990-PF**

ORIGINAL

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2013

	lendar year 2013, or t	ax year beginning	, 2013	3, and ending		
The		d Barbara J. Ba			Employer identification nu 27-6020539	
18 C	oveside Court	P.O. Box 274	address)	Room/suite	B Telephone number (see the (860) 536-70	•
City or to Myst		and ZIP or foreign postal code	СТ	06355	C If exemption application is	pending, check here
	eck all that apply	Initial return	Initial Return of a form	ner public charity	D 1 Foreign organizations, che	eck here
		Final return	Amended return		2 Foreign organizations med	L
H	Check type of organizat	Address change uon. X Section 50°	Name change 1(c)(3) exempt private for	undation	here and attach computati	on
	<u> </u>	nonexempt charitable tru	st Other taxable p	private foundation	E If private foundation status under section 507(b)(1)(A)	
	air market value of all asset from Part II, column (c), line		counting method: Counting method: Counting method:	Cash X Accrual		
<u>► </u>	0,1		column (d) must be on o	cash basis)	If the foundation is in a 60- under section 507(b)(1)(B)	
Part	Analysis of Re Expenses (The columns (b), (c), ar		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	(see instructions).)	. ,	<u></u>			(cash basis only)
		grants, etc, received (att sch) • • • • • • • • • • • • • • • • • • •	27,357.			
2014	3 Interest on savii	ngs and temporary	2.		2.	
	4 Dividends and inter	rest from securities	33,429.	33,429		
12	b Net rental income			Both As. 200 's od	77 MARK 1223 F. SA TESS SAN 188	
≥ R		sale of assets not on line 10		L=6a Stmt		
	b Gross sales price for assets on line 6a	<u>107,000.</u>	海绵斯斯 尔 文指 代 为		5 18 18 18 18 18 18 18 18 18 18 18 18 18	
		me (from Part IV, line 2) capital gain		27,036		
SCANNED	9 Income modifica 10 a Gross sales less	ations	\$ 1520.38 SA	\$ 1 10 NO NO 10 NO	7 7	
X	allowances					
S	b Less Cost of goods sold				K MARKET STATE	
	,	att sch)				
		·				7021X S W X
		1 through 11	87,824.	60,467	<u> </u>	
	' '	lanes and wages				
	•	employee benefits schedule)	-			-
A D M	,	tach sch). L-16b Stmt.	600.			600.
Ϊ Ο Ι		ach sch)		,,		
P S E T	17 Interest	ee ınstrs) Exc1şe Taxes- Form 990PF.	122.	<u> </u>		122.
R R A A T T	19 Depreciation (at	tach on	122.	Co		
N V					APR 5 0 2014 +	
GE		ces, and meetings				2
A E N X D P E N		(attach schedule)	-			NO
E N s	24 Total anancii	Postage	96.			96.
S E S		lines 13 through 23	818.			818.
		grants paid	28,955.	Par de Caranidad		28,955.
	Add lines 24 and	125	29,773.			29,773.
	27 Subtract line 26 a Excess of rever	from line 12: nue over expenses	** , , , , , , , , , , , , , , , , , ,	i ağlı.		
	and disburseme	ents	58,051.	**		
				60,467		
BAA F		ion Act Notice, see inst			EEA0301 10/18/13	Form 990-PF (2013)

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Dai	4.111.6	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
ii ai	. 1176	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	7,431.	19,806.	19,806.
	3	Accounts receivable	33.50 P. 10 P.		The state of the s
	-	Less, allowance for doubtful accounts			**************************************
	4	Pledges receivable	AND THE STANDARDA		
	•	Less: allowance for doubtful accounts			
	5	Grants receivable			
	1				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
_	7	Other notes and loans receivable (attach sch)			
A S S E	ļ	Less: allowance for doubtful accounts			
Š	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
s	10 a	a Investments – U S. and state government obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule) . L=10b. Stmt	424,926.	470,602.	552,021.
	1	: Investments — corporate bonds (attach schedule)	121,520.	170,002.	332,021.
	1	Investments — land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			المداد والكناب الأستان المستان
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis			
	'4	Less, accumulated depreciation			
		(attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item l)	422 257	400 400	551 007
	17	Accounts payable and accrued expenses	432,357.	490,408.	571,827.
ī		Grants payable			
A B	18	• •			
P	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ť	21	Mortgages and other notes payable (attach schedule)			
Ĭ	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
	1	and complete lines 24 through 26 and lines 50 and 51.			
NF	24	Unrestricted	432,357.	490,408.	
E U T N	25	Temporarily restricted			
D	26	Permanently restricted			
A S B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Ĕ Ĺ T A	27	Capital stock, trust principal, or current funds			
T A S N	28	Paid-in or capital surplus, or land, building, and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds			
ΟE	l	•	420.25	400 400	
RS	30	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances	432,357.	490,408.	
	"	(see instructions)	432,357.	490,408.	
Par		Analysis of Changes in Net Assets or Fund Balanc			
1	Total	net assets or fund balances at beginning of year — Part II, column (of-year figure reported on prior year's return)	a), line 30 (must agree w	ith	422 257
2		amount from Part I, line 27a		E 1	432,357. 58,051.
3					J0,0J1.
3 4		ines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·		*	400 400
•		ases not included in line 2 (itemize)		5	490,408.
		net assets or fund balances at end of year (line 4 minus line 5) — Pr	art II. column (b), line 30	·	490 408

(a) List and describe 2-story brick warehous	(b) How acq P — Purcha D — Donat	ase (month, day, year)	(d) Date sold (month, day, year)		
1a 540.541 shares Cal	vert Cap Accumulation A	P		04/05/05	12/17/13
b 1902.291 shares Ca		p		01/06/06	12/17/13
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			
a 19,000.		12,	,622.		6,378
b 88,000.		67,	,342.		20,658
c					
d					
е					
Complete only for assets show	ng gain in column (h) and owned by the	e foundation on 12/31/69		(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Ādjusted basis as of 12/31/69	(k) Excess of column (ı) over column (ı), ıf any		gain minus column (k than -0-) or Losses (fro), but not less
a					6,378.
b			T		20,658.
С					
d					
е					
Capital gain net income or (net Net short-term capital gain or //	capital loss) If gain, also e If (loss), ente oss) as defined in sections 1222(5) and	enter in Part I, line 7 r -0- in Part I, line 7		2	27,036.
, - ,		· · · —			
ın Part I, line 8	8, column (c) (see instructions). If (loss	·		3	
Part Val Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investme	nt Inco	me	
If 'Yes,' the foundation does not quali	ion 4942 tax on the distributable amour fy under section 4940(e). Do not compl n each column for each year; see the in	ete this part.		Yes	No
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	6	(d) Distribution (column (b) divided b	
2012	35,880.	521.	216.		0.068839
2011	21,136.		887.		0.045563
2010	24,984.		589.		0.054480
2009	23,894.		779.	-	0.058168
2008	30,781.		132.	 ··	0.067042
2 Total of line 1, column (d)			T	2	0.294092
Average distribution ratio for the number of years the foundation	5-year base period — divide the total of has been in existence if less than 5 years.	on line 2 by 5, or by the ars		3	0.058818
4 Enter the net value of noncharit	able-use assets for 2013 from Part X, li	ne 5		4	543,741.
5 Multiply line 4 by line 3				5	31,982.
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	605.
7 Add lines 5 and 6				7	
8 Enter qualifying distributions fro			⊢		32,587.
• • •	m Part XII, line 4		[8	32,587. 29,773.

8 b

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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

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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

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Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

Forn	n 990-PF (2013) The Douglas S. and Barbara J. Barrett Family Foundation	27-	-602053	9	P	age :
Pa	rt VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	person had	l • • • • •	12	i	X
13		plication?		13	Х	
	Website address					
14	The books are in care of Douglas S. Barrett Telepho	ne no. 🟲	(860)	536	-709	94
	Located at 18 Coveside Court, Mystic, CT ZIP+4					
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 — Check here				· -	П
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authorbank, securities, or other financial account in a foreign country?	nty over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name foreign country	of the				
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly):					730) 230)
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			97
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	_				
	for the benefit or use of a disqualified person)?	Yes	XNo			
		_			Ž	
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	XNo			
b	olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			1 b		
	Organizations relying on a current notice regarding disaster assistance check here	•	· 🗍			. 🌂
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes	XNo			
	If 'Yes,' list the years 20 _ , 20 _ , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) all years listed, answer 'No' and attach statement — see instructions)	to		2 b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				331	40
	► 20 , 20 , 20 , 20 .					
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No		3.0	
b	If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)			2.6		
		· · · · · ·		3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a	6-87.5	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?			4 b		
BAA	the tax your beginning in 2010:	· · · · · ·		rm 990	DE /2	X 013)
			LO	・・・・・・ プラリ	r-r (∠	

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Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incur a	-				
(1) Carry on propaganda, or otherwise attempt		` ''	Yes X	No No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?	· · · · · · · · · · · · · · · · · · ·	⊢ ⊢	No	
(3) Provide a grant to an individual for travel, stu	idy, or other similar purp	oses?	Yes X	∫No	
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49			· · · · Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention of			· · · · Yes X	No No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b	
Organizations relying on a current notice regardi	ng disaster assistance cl	neck here	▶ □		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemplifity for the grant?	tion from the	Yes	No	
If 'Yes,' attach the statement required by Regula	tions section 53 4945-5(d	d)			
6 a Did the foundation, during the year, receive any on a personal benefit contract?				No	
b Did the foundation, during the year, pay premium	ns, directly or indirectly, c	n a personal benefit con	tract?	6 b	<u>X</u>
If 'Yes' to 6b, file Form 8870.				1	()
7 a At any time during the tax year, was the foundation			1 1 1	No 75	
b If 'Yes,' did the foundation receive any proceeds Part VIII Information About Officers, D					
and Contractors	nectors, riustees,	l'outidation Manag	gers, migniy raid i	Lilipioyees,	
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see instr	uctions).		
,	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense accou	unt.
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowand	es
Douglas S. Barrett					
18 Coveside Court,	Trustee				
Mystic, CT 06355	0.00	0.	0.		0.
Barbara J. Barrett				ļ	
18 Coveside Court,	Trustee				
Mystic, CT 06355	0.00	0.	0.	ļ	<u>0.</u>
				}	
				ļ	
				1	
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1 see in	structions) If none or	ntor 'NONE '	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense accou	unt.
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowance	
NONE					
				ļ	
·					
				ĺ	
				<u> </u>	
				 	
Fotal number of other employees paid over \$50,000 .	• • • • • • • • • • • •			Nic	one
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information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	-
Total number of others receiving over \$50,000 for professional services	None
	None
Rantix: Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	
2	
·	
3	
4	
	
Partix:B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	Amount
·	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
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	Expenses, contributions, girls, etc — total from Part I, column (d), line 26	[Ta	
	b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
	b Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	29,773.
	Enter 1% of Part I, line 27b (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	29,773.

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

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Part XIII Undistributed Income (see instru	ıctions)			
	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
Distributable amount for 2013 from Part XI,				25,978.
line 7			, , , , , , , , , , , , , , , , , , , ,	23,3,0.
2 Undistributed income, if any, as of the end of 2013.			0.	,
a Enter amount for 2012 only			· · · · · · · · · · · · · · · · · · ·	
b Total for prior years. 20, 20, 20				
3 Excess distributions carryover, if any, to 2013	3	ر ش		
a From 2008	3		3%	* * * *
b From 2009				
c From 2010	,			^ *
d From 2011	4			
e From 2012	26,540.			
f Total of lines 3a through e	20,340.	<u> </u>	′,	a de la companya de l
•	. , , }			
XII, line 4. \$ 29,773. a Applied to 2012, but not more than line 2a		in the same of		
h Applied to undistributed income of prior years		1999		
(Election required – see instructions)	·	**	4 6	
(Election required — see instructions)		Market Street Company of the		17,968.
d Applied to 2013 distributable amount			1800 N	1 1000
e Remaining amount distributed out of corpus	11,805. 8,010.	* 3, ^ -	7	8,010.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	8,010.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	30,335.			
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				
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 instructions	, , , , , , , , , , , , , , , , , , ,		0.	
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				0.
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 2008 not applied on line 5 or line 7 (see instructions).	0.	,	.,,	The state of the s
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	30,335.	Control of the second		
10 Analysis of line 9	. 4 %	, *	,	
a Excess from 2009 3,499.	_		1	1 :
b Excess from 2010 2,183.		l . wê	1. \$.	
c Excess from 20111,719.				
d Excess from 2012 11,129.		*	147	7 ',
e Excess from 2013	<u></u>	<u>` </u>		Form 990-PF (2013

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Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2013, enter the date of the ruli	ng			·· <u>·</u> ·····*	
b Check box to indicate whether the foundation		ing foundation descr		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	 	Prior 3 years	- 	
investment return from Part X for each year listed	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
b 85% of line 2a			<u> </u>		
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 Information			foundation had	d \$5,000 or more	in
assets at any time during the		structions.)			
Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have contained to the con	contributed more	than 2% of the total of \$5,000) (See section	contributions receive on 507(d)(2))	ed by the foundation be	efore the
See Schedule B					
 b List any managers of the foundation who own a partnership or other entity) of which the four 	10% or more of the	e stock of a corporati or greater interest.	ion (or an equally lar	ge portion of the owne	ership of
See Schedule B					
2 Information Regarding Contribution, Grant	, Gift, Loan. Scho	larship, etc. Progra	ms:		
Check here if the foundation only maker requests for funds. If the foundation makes grouplete items 2a, b, c, and d	es contributions to	preselected charitat	ole organizations and		
a The name, address, and telephone number of	e-mail of the pers	on to whom application	ons should be addre	essed	
Douglas S. Barrett					
18 Coveside Court Mystic	CT 0635	5 106	0) 536-7094		
b The form in which applications should be sub-					
ATTACHED			,		
c Any submission deadlines:					
September 3					
d Any restrictions or limitations on awards, such ATTACHED	as by geographica	al areas, charitable fi	elds, kınds of institut	ions, or other factors	
					000 DE (2012)

3 Grants and Contributions Paid During the		ure Paymen	<u>t </u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year	•			
Cyclic Vomiting Syndrome Association 2819 West Highland Blvd	n		To donate to combat Cyclic	
Milwaukee WI 5320	8	501 (c) 3	Vomiting Syndrome	1,500.
The New London Hopsitality Center	r		To donate to an	_,
19 Jay Street, POB 1651			organization that	
New London, CT 0632	0	501 (c) 3	assists local residents	2,500.
Donors Choose			To donate to an organization	
347 West 36th Street, Suite 503	; }	1	1	
New York NY 1001	8	501 (c)3	that helps teachers get educational tools.	4,955.
Smile Train, Inc.	}		1	
41 Madison Avenue 28th flr		}	i i	
New York NY 1001	0	501 (c)3	To provide dental care to the poor	1,000.
Work Vessels for VETS			To assist veterans in	
145 Pearl Street			search of civilian jobs	
Noank CT 0634	P	501 (c) 3	1	2,000.
College Visions			To provide college advice	
131 Washington Street, Suite 20			and assistance to low	
Providence RI 0290	3	501 (c)3	income individuals	2,000.
FRESH New London, CT		ļ	To provide management and	
89 South Street, Suite 700		501 () 2	leadership resources	5 000
Boston MA 0211	L	501 (C)3	to nonprofits	5,000.
Herren Project PO Box 131			To assist individuals and families with	
Portsmouth RI 0287	1	501 (0)3	addictions	1,000.
Primera Iglesia Bautista Hispan	ľ	301 (0)3	To assist hispanic youth	1,000.
35 Redden Avenue	^		with college funding	
New London CT 0632		501 (c)3		2,500.
See Line 3a statement		(3,2	i 1	_,
				6,500.
Total			3a	28,955.
b Approved for future payment	T			20,333.
	1			
			1	
)	
			ĺ	
			1	
Total				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			d by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
c					
d					
e					
f				-	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					2
4 Dividends and interest from securities					33,429
5 Net rental income or (loss) from real estate		YK 6 YAKALI	, 15 mg. °	F, 8,4 (M) 1 8 1 19 1	-
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					27,036
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a				_	
b					
С					
d					
е					
Subtotal Add columns (b), (d), and (e)	14 J. 1486, " 352	-	S. Carre		60,467
13 Total. Add line 12, columns (b), (d), and (e)				13	60,467.
See worksheet in line 13 instructions to verify calculations)				
Part XVI-B Relationship of Activities to the		U-1	1 5		

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
3	Interest earned on Foundation investments.
4	Dividends received from Foundation investments.
	

Form 990-PF (2013) The Douglas S. and Barbara J. Barrett Family Foundation 27-6020539 Pärt*XVII: Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

d	escribe	organization dire	1(c) of 1	the Code (ot	ngage in her than	any of the section 50	e following 01(c)(3) c	g with an organizat	y other o	organization in section 527,		<u> </u>		Yes	No
	•	s from the repo			a noncha	aritable ex	empt ora	anization	of						
		h	_										1 a (1)		<u></u>
•		er assets											1 a (2)		X
•	•	ansactions.											14 (2)		X
														<u></u>	
•	•	s of assets to a											├		X
,	•	chases of assets				. •									X
•	•	tal of facilities, e		•									1 b (3)		X
	•	nbursement arra	-										1 b (4)		_X_
•	•	ns or loan guara										• • • • •	1 b (5)		X
•	•	ormance of serv			•	-							1 b (6)		Х
c S	haring	of facilities, equ	ipment	, mailing list	s, other a	assets, or	paid emp	loyees.		. <i>.</i>			1 c		X
th ar	e good ny trans	swer to any of the s, other assets, saction or sharin	or ser	vices given l ngement, sh	oy the reposition in co	porting fou lumn (d) t	undation he value	If the fou of the go	indation ods, oth	received less t er assets, or se	han fair m ervices rec	arket value cerved.	ın		
(a) Line	no.	(b) Amount invol	ved	(c) Nam	e of nonch	antable exer	mpt organiz	zation	(d)	Description of tra	insfers, tran	sactions, and	sharing arrang	gements	<u> </u>
									<u> </u>						
									l.			-			
3															
			ĺ			-		<u>-</u>							
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de	scribed	indation directly d in section 501 omplete the foll	(c) of the	he Code (oth	ed with, ner than	section 50	01(c)(3)) c 	or in sect	ax-exem					X	No
	(a)	Name of organ	ızatıon		1	(b) Type	of organ	ızation		(c) Descrip	tion of relat	ionship		
					_										
					ļ										
Sign	Under pe correct, a	enalties of perjury, I d and complete Declar	declare the	at I have examinoreparer (other the	ned this returned the taxpayer	im, including er) is based of	accompanyon all informa	ing schedul ition of whic	es and stat h preparer	ements, and to the that has any knowledge	pest of my kn	owledge and be	May the IR this return	S discus	ss
Here		(\ <u>/</u> (入!~		>	14/2	3/14	`, ₽ (Urust.	20		preparer s	hown be	low
	Signat	ure of officer or truste	€/ ↑.				Date			tle			. (see instru	Yes	No No
		Print/Type preparer	's name	_ 		Prepare s s	igrature//	181		Date	Chec	k X if	PTIN		لتند
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Paid		Firm's name		mes H.	Δuct:	··· / ·		12 CT11		103/01/14	Firm's EIN		323720	, , ,	
Prepai		Firm's name Firm's address	_					6			rams can	06-1	123120		
Use O	nıy	rains address		Kings		ay Sul	.Le 20		m 00	225		1060	\ 201 F	CEA	
		L	Ga	les Fer	т. А	,		<u>C</u>	T U6	335	Phone no	(860) 381-5		040
- 44													COM YUN		41

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount	
	substantial contributor				
a Paid during the year					
The American Cancer Society			To donate to an organization whose goa	Rerson or	\neg
931 Jefferson Blvd			to eliminate cancer as a major health		Х
Warwick RI 02886		501 (c)3).
CANTER New England			To donate to and organization that pro	nRerson or	\Box
P.O. Box 3			retiring racehorses with opportunities	Business X	X
Westborough MA 01581		501 (c)3	for new careers after the finish line	2,000).
Team Hole in the Wall			To support a camp that promotes	Person or	╝
555 Long Wharf Drive			<u>"a different kinf of healing" to serio</u>	ıs Boùsiness ∑	X
New Haven CT 06511		501 (c)3	children throughout the Northeast	500) <u>.</u>
CT State Dental Association				Person or	
835 West Queen Street				Business	
Southington CT 06489		501 (c)3	To provide dental care for the poor	2,000	<u>. </u>
University of Michigan	 			Person or	
1000 Oakbrook, Suite 100			To support the Unversity	Business X	Κ.
Ann Arbor MI 48104		501 (c)3	Medical School	1,000	

Total

6,500.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
James Austin, CPA	Accounting/Tax prep	600.			600.
Total		600.			600.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of	End of Year				
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value				
Mutual Funds	470,602.	552,021.				
Total	470,602.	552,021.				

Name Employer Identification Number The Douglas S. and Barbara J. Barrett Family Foundation 27-6020539 **Asset Information:** Description of Property 540.541 shares Calvert Cap Accumulated A Date Acquired: . How Acquired . . . Date Sold . . . Name of Buyer: . . . Cost or other basis (do not reduce by depreciation) . . . 12,622. 19,000. Valuation Method Sales Expense . . 6,378. Accumulation Depreciation . . . Total Gain (Loss): . . Description of Property 1902.291 shares Calvert Equity A Date Acquired. . How Acquired: . . . Date Sold . . . Name of Buyer: . . . Cost or other basis (do not reduce by depreciation) . . . 67, 342. Sales Price. . . 88,000. Valuation Method: . . . Sales Expense . . Total Gain (Loss): . . 20,658. Accumulation Depreciation: . . . Description of Property How Acquired . . . Date Acquired . Date Sold: . . . Name of Buyer. . . . Cost or other basis (do not reduce by depreciation) . . . Sales Price . . . Sales Expense . . Valuation Method Total Gain (Loss) . . Accumulation Depreciation . . . Description of Property How Acquired . . . Date Acquired . Date Sold . . . Name of Buyer . . . Sales Price . . Cost or other basis (do not reduce by depreciation) . . . Valuation Method: . . . Sales Expense . . Accumulation Depreciation: . . . Total Gain (Loss): . . Description of Property: How Acquired . . . Date Acquired. . Date Sold. . . . Name of Buyer: . . . Cost or other basis (do not reduce by depreciation) . . . Sales Price: . . Valuation Method: . . . Sales Expense: . . Accumulation Depreciation: . . . Total Gain (Loss) . . Description of Property How Acquired. . . . Date Acquired: . Name of Buyer: . . . Date Sold. . . . Cost or other basis (do not reduce by depreciation) . . . Sales Price: . . Valuation Method: . . . Sales Expense... Total Gain (Loss) . . Accumulation Depreciation . . . Description of Property Date Acquired . How Acquired . . . Date Sold: . . . Name of Buyer: . . . Sales Price: . . Cost or other basis (do not reduce by depreciation) . . . Valuation Method Sales Expense: . . Accumulation Depreciation . . . Total Gain (Loss) . . Description of Property: Date Acquired . How Acquired . . . Date Sold . . . Name of Buyer: . . . Cost or other basis (do not reduce by depreciation) . . . Sales Price: . . Valuation Method: . . . Sales Expense: . . Total Gain (Loss): . . Accumulation Depreciation . . .

THE DOUGLAS S. AND BARBARA J. BARRETT FAMILY FOUNDATION

P. O. Box 274, Mystic, CT 06355-0274

POLICIES AND GUIDELINES

PURPOSE OF FOUNDATION

The purpose of *The Douglas S. and Barbara J. Barrett Family Foundation* is to provide grants to 501(c)(3) organizations recognized by the Internal Revenue Service that are devoted exclusively to charitable, scientific, literary, or educational purposes and which under the Federal and State succession, transfer, and inheritance estate tax laws are exempt from taxation. It is the intent of the donors to provide such organizations with resources to assist in pilot programs, expansion of programs, research, etc. rather than the day-to-day operations of that organization.

Priority consideration will be given to those grant requests from organizations in which the family is personally involved.

The Foundation sees its main role as being that of

- (1) the provider of "seed money" for new services, and
- (2) the allocator of funds to fill needs which are not met by any other organizations or sources

In general, the Foundation will grant funds for special purposes that do not commit the Foundation to recurring expenses. Funds may be given for buildings, equipment and land, in addition to programs.

POLICIES AND GENERAL GUIDELINES

- 1. Grants will be made on an annual basis, generally in a lump sum. However, the Trustees reserve to themselves the option of paying large grants over a multi-year period.
- 2. Grants shall be limited to tax-exempt 501(c)(3), not-for-profit, equal opportunity organizations recognized as such by the Internal Revenue Service.
- 3. The grantee must demonstrate financial responsibility.
- 4. No single grantee shall receive all of the available funding in any one calendar year.
- Partial grants may be awarded at the discretion of the Trustees.
- 6. Special consideration may be given to grantees whose programs offer the possibility of matching grants.
- 7. Grantees must prioritize requests should more than one item be requested.
- 8. Grants will not be made to individuals, for endowments, for deficit financing, or for reimbursement for items purchased prior to grant request.
- 9. Applications made for a project or program in cooperation with another agency(ies) must include letters of commitment to the project or program from the supporting agency(ies).

- 10. Complete original applications, including all required supporting data, for grants must be submitted by September 3rd annually. If this date falls on a Saturday or a Sunday, the deadline is not extended. Applications postmarked on the day of the deadline will be accepted.
- 11. Announcements of the grants are made by December 31st annually. A letter will be sent to all applicants whether their application was approved or denied.
- 12. A report of the expenditure of each grant is required within one year from the date the grant is awarded. If for any reason you are unable to use the full amount of the grant during the period of time for which the grant was approved, or for the purpose intended, etc., you must immediately report your circumstances to the Foundation Trustees. Any unused funds from a grant are to be returned to the Foundation with the final report. Acknowledgements are not considered a report.

SPECIFIC GUIDELINES

The Foundation Trustees are interested primarily in how the proposed project will help the organization achieve its established goals, solve a critical problem or prepare for the next steps in its development to meet the stated needs. These issues should be addressed in a concise proposal of three (3) to five (5) pages covering the requirements listed under items #1-8 below. Nonprofit organizations are encouraged to identify best practices, to explore solutions emerging from nonprofit and business management theory, and to collaborate with others in their field and community.

The Foundation is committed to assisting in the creation of networks, coalitions, shared services or other structures designed to provide a wide range of easily understandable and accessible services and achieve greater integration of services to clients.

The Foundation's financial support may be used only for the direct costs of implementing proposed projects.

HOW TO SUBMIT YOUR PROPOSAL

- A mission statement and current goals for the organization or organizations, if this is a collaborative
 cffort. A brief description of the organization or each collaborating organization including history,
 current services and how this project supports those missions. (OR, attach a brochure or other material
 that contains this information and write "see attachment" under this heading but be sure to address
 the issue of "how this project supports your mission or those missions" of the collaborating
 organizations.)
- 2. <u>PROPOSAL NARRATIVE</u>: A description of problems or conditions the project is intended to address:
 - Need for the project; its uniqueness and non-duplication
 - What outcome do you seek? (Outcomes are long-range and broad in scope)
 - What methods will you use to achieve the end result or outcome(s)? (Methods are short-term, concrete and measurable)
 - What activities will you carry out to achieve the project objectives?
 - The people, who will be served by the project, including the number you estimate will benefit from it.
 - The geographic area the project will directly affect.
 - Methods for measuring your success. How will you know that you have met your objectives? If the project is to serve as a model, how will information be disseminated? (If you receive a multi-

year grant, you will be asked to submit an evaluation report and pictures, if appropriate, on a semi-annual basis until the project is completed and then a final report.)

- Anything else that might help us to understand what you are trying to accomplish and why.
- <u>PERSONNEL</u>: List the personnel who will work on the project and their qualifications OR if not yet hired, please include a job description for each individual to be hired.
- BOARD INVOLVEMENT: Will any of the board be involved and if so, how?
- If this is a collaborative effort, please describe how each organization is integrated into the project; either a flowchart or a brief narrative is acceptable.
- <u>TIMETABLE</u>: Show the timetable you have set to achieve your objectives.
- PROJECT FUNDING: Give details of any funding you have already received or requested for your project (how much, from whom, and for what). Explain how the funds requested from The Barrett Foundation will be used. What are your continuing funding plans?
- PROPOSAL (INCOME & EXPENSE) BUDGET: Provide a full budget breakdown. Detail
 projected overall expenses for your project and itemize the portion requested from The Barrett
 Foundation. If a consultant is utilized, a specific and brief description of how that person will be
 used, the consultant's special qualifications for the assignment and a resume. Please indicate
 consultant's daily rate.
- EVALUATION: Include an evaluation plan that shows how the organization(s) will know to
 what extent the project has succeeded. The plan should state how the evaluation would be carried
 out, when the results will be known, and should include quantified measures wherever possible.
 Successful applicants will be asked to submit a final project report that includes results of the
 evaluation.
- 3. <u>FINANCIAL STATEMENTS</u>: An audited financial statement for the most recent year from existing organizations. Where an audited Statement is unavailable, a Treasurer's Report will be acceptable. For an organization in the formative stage, a projected budget is required.
- 4. <u>TAX-EXEMPT STATUS</u>: Attach a copy of your 501(c)(3) and each participating organization's 501(c)(3) tax exemption letter from the Internal Revenue Service (not a letter from the State). If you are a public agency, so signify.

NOTE: A Federal Income Tax exemption letter dated after 1969. Exemption letters dated prior to 1969 and State Exemption Certificates are not acceptable. Only a municipality is exempt from this requirement.

A new or updated Federal Tax Exemption Letter may be obtained through:

Internal Revenue Service Customer Service Unit P. O. Box 1680
Brooklyn, NY 11202-1680

- 5. <u>BOARD LIST</u>: List each participating organization's current Board of Directors with their names. addresses and affiliations. A brief bio of each board member is very helpful.
- 6. <u>LETTERS OF COMMITMENT</u>: If a collaborative effort, letters of commitment signed by the President or Chairman of the respective governing boards must be attached. The letters should indicate that the proposal has been reviewed and approved by the respective governing board and specify the agreed upon FISCAL AGENT for the project.
- 7. <u>FISCAL AGENT RESPONSIBILITIES</u>: It is the Fiscal Agent's responsibility to see that the funds are properly expended and/or spread among the collaborating entities, if a collaborative effort, and that reports are filed with *The Douglas S. and Barbara J. Barrett Family Foundation* in a timely manner.
- 8 File the original application with attachments with *The Douglas S. and Barbara J. Barrett Family Foundation* at P. O. Box 274, Mystic, CT 06355-0274.

GUIDELINES FOR REPORTING

We want to know how you're doing—what worked and what didn't work. A report is required one year from the date of the grant. For multi-year grants a status report from the Fiscal Agent or grantee summarizing the results of your project and how the money was spent must be submitted on a semi-annual basis with a final report at the conclusion of the project.

- Provide a brief narrative addressing:
 - Program achievements: Identify the program objective, specific achievements and any problems encountered
 - Number served and benefits to those served
 - Community support, including linkages with other organizations, media coverage, etc.
 - Efforts made to obtain funds for program continuation
- Detail of grant expenditures
 - Line item report, including specific expenditures and provide receipts where possible

THE DOUGLAS S. AND BARBARA J. BARRETT FAMILY FOUNDATION

P. O. 274, Mystic, CT 06355-0274

Application for Grant of Funds (Please type)

Name and Address of Organization:	Date:
	Telephone:
	Amount Requested:
Name and Address of Fiscal Agent, if different	:
pecific purpose for which grant is to be used:	
	•
eriod of time in which grant is to be used: nticipated benefits:	
eriod of time in which grant is to be used: nticipated benefits: ow does this project/equipment fit in with the o	
nticipated benefits:	
nticipated benefits: ow does this project/equipment fit in with the o	bjectives of the organization(s) as a whole?
nticipated benefits:	bjectives of the organization(s) as a whole?

	•					
	·					
		UIRED ATTACHMENTS nents with the Application Form:)				
Mission statement from your organization and from each of the collaborating agencies, if a collaborative effort.						
	Letter of Determination from the Internal Revenu Section 501 (c)(3) of the IRS Regulations for each	ue Service (IRS) certifying tax-exempt status und the participating organization.				
	. Most recent Form 990 for each participating orga Form, please explain and document.	unization. If an agency is not required to file a 99				
. Completed Proposal Budget for Project.						
Financial statements and/or audited report.						
Ī	A list of your organization's current Board of Direct of the members from each organization. A brief bio of because of the control of the con	ectors or, if a collaborative effort, a list of board board members is very helpful.				
,	INCOMPLETE APPLICATIONS	WILL NOT BE CONSIDERED				
	Signature (Executive Director)	Signature (Board Chairman)				
						
						
	(Type or print name & title)	(Type or print name & title)				