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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

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. Open to Public Inspection Internal Revenue Service For calendar year 2013 or tax year beginning 1/1/2013 , and ending 12/31/2013 A Employer Identification number Name of foundation Magaro Family Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite 46-1558048 B Telephone number (see instructions) 1248 Oenoke Ridge City or town State ZIP code CT 06840 203-972-5856 New Canaan Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply. X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, ■ Name change Address change check here and attach computation E. If private foundation status was terminated under H Check type of organization: X Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) ▶ □ under section 507(b)(1)(B), check here 2.403.867 (Part I, column (d) must be on cash basis.) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily . expenses per ıncome purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2,171,000 2 Check ► I If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain 9 Income modifications Gross sales less returns and allowances 10a Less. Cost of goods sold Gross profit or (loss) (attach schedule) 403,122 403,122 11 Other income (attach schedule) 403,122 12 Total. Add lines 1 through 11 2,574,122 403,122 403,122 Compensation of officers, directors, trustees 13 Operating and Administrative Expenses Other employee salaries and wages 14 15 Pension plans, employee benefits Legal fees (attach schedule) 16a Accounting fees (attach schedule) NOV 1 Other professional fees (attach schedule) 17 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy . 21 Travel, conferences, and meetings 22 Printing and publications 105 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 105 0 25 Contributions, gifts, grants paid 170,250 170,250 26 Total expenses and disbursements. Add lines 24 and 25 170,355 0 170,250 Subtract line 26 from line 12.

2,403,767

403,122

For Paperwork Reduction Act Notice, see instructions.

Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) . .

Adjusted net Income (if negative, enter -0-)

Form 990-PF (2013)

403,122

Page 2

.Da	rt II	Palance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
ı a	للعب	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1	Cash—non-interest-bearing	100	745	745
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Accounts receivable Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts			
	5	Grants receivable			- 14
	6	Receivables due from officers, directors, trustees, and other			_
	•	disqualified persons (attach schedule) (see instructions)			
ļ	7	Other notes and loans receivable (attach schedule)			
	•			·····	
Ø	8	Less allowance for doubtful accounts Inventories for sale or use		·	
Assets	9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·		
ŝ	_			•	
٦	10a	Investments—U.S. and state government obligations (attach schedule)	-		,
	b	Investments—corporate stock (attach schedule)	-		
	C	Investments—corporate bonds (attach schedule)	 		
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
J	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		2,403,122	2,403,122
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule)			
l	15	Other assets (describe)			
į	16	Total assets (to be completed by all filers—see the	i		i
		ınstructions Also, see page 1, item I)	100	2,403,867	2,403,867
	17	Accounts payable and accrued expenses			
_s	18	Grants payable			
<u>‡</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia l	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			
- 1	23	Total liabilities (add lines 17 through 22)	0	0	
1		Foundations that follow SFAS 117, check here	i i		
es		and complete lines 24 through 26 and lines 30 and 31.			
일	24	Unrestricted	100	2,403,867	
ᇛᅵ	25	Temporarily restricted			
ă	26	Permanently restricted			
or Fund Balances	20	Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
Š		Paid-in or capital surplus, or land, bldg , and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	•	100	2,403,867	
1	30	Total net assets or fund balances (see instructions)	100	2,403,007	
ž	31	Total liabilities and net assets/fund balances (see	,,,	0.400.007	
		Instructions)	100	2,403,867	<u></u>
	rt III	Analysis of Changes in Net Assets or Fund Balances	. I 00 /		
1		net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree v		
		of-year figure reported on prior year's return)		· · · 1	10
		r amount from Part I, line 27a	•	2	2,403,76
3	Othe	r increases not included in line 2 (itemize)		3_	
		lines 1, 2, and 3	•	4	2,403,86
5	Decre	eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Par	t II column (b) line 30	6	2 403 86

		amily Foundation, Inc		_	46	-1558048 Page 3
Part l		Losses for Tax on Investr		(b) How acquired	(c) Date acquired	
2-story brick warehouse, or common stock, 200 shs MLC Co) P—Purchase D—Donation						(d) Date sold (mo , day, yr)
<u>1a</u>		<u></u>				
b_						
<u>c</u>	 				 	
<u>d</u> e	_				,	
		(f) Depreciation allowed	(a) Cost or	other basis	(h) Ga	in or (loss)
	(e) Gross sales price	(or allowable)		nse of sale		(f) minus (g)
а						
b		· · · · · · · · · · · · · · · · · · ·				
С						
d						
е			l budha faundatian	40/24/60		
	Complete only for assets sn	nowing gain in column (h) and owned	1			ol (h) gain minus ot less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (I) (I), If any		from col (h))
a						
b						
С						
d						
е	·		L		r	<u> </u>
2	Capital gain net income or	(net capital loss) 1	also enter in Pai), enter -0- in Pai	}	2	0
3		or (loss) as defined in sections 1				
		line 8, column (c) (see instructio	ns) If (loss), ente	er -0- in }		
	Part I, line 8	 		J	3	0
Part		der Section 4940(e) for Red vate foundations subject to the se				
Was t	s," the foundation does not o	re this part blank section 4942 tax on the distributa qualify under section 4940(e). Do unt in each column for each year	not complete the	s part	•	Yes No
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value	of noncharitable-use a		stnbution ratio divided by col (c))
	2012					0 000000
	2011					0 000000
	2010					0 000000
	2009					0 000000
	2008					0 000000
_	₩ 4 8 81 7 - 4 - (1 / ///					0.00000
2	Total of line 1, column (d)	 for the 5-year base period—divide	a the total on line	2 by 5 or by tho	. 2	0 000000
3	•	iation has been in existence if les		e z by 5, or by the	. 3	0 000000
	number of years the lound	ration has been in existence in les	is than 5 years		. -	0 000000
4	Enter the net value of non-	charitable-use assets for 2013 fro	om Part X, line 5		4	
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6	C
7	Add lines 5 and 6 .				7	0
8	Enter qualifying distribution If line 8 is equal to or great	ns from Part XII, line 4 . iter than line 7, check the box in F	Part VI, line 1b, a		part using a 1% ta	x rate See the

Part VI instructions

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)						
1a	Exempt operating foundations described in section 4940(d)(2), check here X 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% 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-)		0				
3	Add lines 1 and 2		0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0	ļ			
6	Credits/Payments:			İ .			
a	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6a						
b	Exempt foreign organizations—tax withheld at source		i				
C	Tax paid with application for extension of time to file (Form 8868) Continuous the later as a second south and the later as a second south application for extension of time to file (Form 8868)						
d 7	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d		0	 			
8 9	Enter any penalty for underpayment of estimated tax. Check here		0	 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		0	 			
11	Enter the amount of line 10 to be Credited to 2014 estimated tax Refunded 11		0				
Part \		· · ·		L			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
	participate 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)?						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?	1c		X			
d	(·), · · · · · · · · · · · · · · · · ·						
	(1) On the foundation. ►\$ (2) On foundation managers. ►\$						
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers \$	<u> </u>					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X			
3	If "Yes," attach a detailed description of the activities 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					
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		$\frac{\hat{x}}{x}$			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	-^-			
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						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?	6	Х				
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	Х				
	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	CT						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			لببا			
•	(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 calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If						
10	"Yes," complete Part XIV	9	Х	<u> </u>			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	х				
			\ <u>\</u>				

(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

2b N/A

3b N/A

4a

4b X Form **990-PF** (2013)

☐ Yes X No

all years listed, answer "No" and attach statement—see instructions)

foundation had excess business holdings in 2013)

▶ 20 ____, 20 ____, 20 ____, 20 ____

at any time during the year?

Form 9	96-PF (2013) Magaro Family Foundation, Inc.							46-15	58048	F	age 6
Par	VII-B Statements Regarding Activities	for W	hich Form	4720 N	lay Be Re	quire	d (contin	ued)			
` 5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to it			section	4945(e))?	_	☐ Yes	X No		,	
	(2) Influence the outcome of any specific public electric directly or indirectly, any voter registration drives(3) Provide a grant to an individual for travel, study	? . `		,.		•	☐ Yes ☐ Yes	X No			
	(4) Provide a grant to an organization other than a section 509(a)(1), (2), or (3), or section 4940(d	charita	ble, etc , orga	inizatio		in	Yes	X No			
	(5) Provide for any purpose other than religious, cl purposes, or for the prevention of cruelty to chi	narıtable	e, scientific, li	•	or education	al 	☐ Yes	⊠ No		,	
b	If any answer is "Yes" to 5a(1)–(5), did any of the t Regulations section 53 4945 or in a current notice		•	•		•		d in	5b	N/A	
С	Organizations relying on a current notice regarding if the answer is "Yes" to question 5a(4), does the forecause it maintained expenditure responsibility for	oundati	on claım exer				. Yes	► □ □ No			
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any ful on a personal benefit contract?				pay premiur	ns	□vaa	X No			
b	Did the foundation, during the year, pay premiums If "Yes" to 6b. file Form 8870	, directly	y or indirectly	on a p	ersonal ben	iefit coi	—	<u>.</u>	6b		Х
7a b	At any time during the tax year, was the foundation a pail f"Yes," did the foundation receive any proceeds of					e trans	☐ Yes action?	X No	7b	N/A	
Par	VIII Information About Officers, Direct and Contractors								ploye	es,	
1	List all officers, directors, trustees, foundation										
	(a) Name and address	hou	e, and average irs per week ted to position	` (If ı	mpensation not paid, iter -0-)	empl	Contribution oyee benefit ferred compe	plans	(e) Expe	nse ac allowar	
	Magaro	Presid	ent & Treasu								
	Oenoke Ridge New Canaan, CT 06840		50		0			∤			
	Magaro Oenoke Ridge New Canaan, CT 06840	Directo	or .50		0						
AIP.	Trebing	Secret	ary								
161 C	herry Street New Canaan, CT 06840		50		0						
2	Compensation of five highest-paid employees ("NONE."	other ti	han those in	cluded	on line 1—	see in:	structions	s). If nor	ne, ent	er	
	(a) Name and address of each employee paid more than \$50,000	- 	(b) Title, and a hours per w devoted to po	eek	(c) Compen	sation	(d) Contrib employee plans and compens	benefit deferred	(e) Expe	nse ac allowar	

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense account other allowances

(e) Expense account other allowances

(f) Compensation

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

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

Pa	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
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
NON	E	
		7.
Tota	I number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	Charitable Giving - The foundation made charitable donations to Ballet Etudes Company, The Rye Day School, Yale University, The Children's School, and Harvard University to help these organizations further their own exempt activities and programs.	170,250
2	exempt addition and programs.	
_		
3		
4		
•		
P:	rt IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
A	other program-related investments. See instructions	.,
3		
Tota	I. Add lines 1 through 3	0
	Fc	orm 990-PF (2013)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundat	ions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	さな	
	purposes:	11	
а	Average monthly fair market value of securities	1a	1,009,280
b	Average of monthly cash balances	1b	11,704
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,020,984
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,020,984
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	15,315
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,005,669
6	Minimum investment return. Enter 5% of line 5	6	50,283
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2013 from Part VI, line 5	盘線	
b	Income tax for 2013. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>line 1 </u>	7	0
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	1a	170,250
b	Program-related investments—total from Part IX-B	1b	
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	100	
а	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	170,250
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		<u> </u>
-	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	170,250
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the for	
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	XIII Undistributed Income (see instructions)			N/A
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				
2	Undistributed income, if any, as of the end of 2013.				-
а	Enter amount for 2012 only			0	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2013				
а	From 2008				
b	From 2009				
С	From 2010				
d	From 2011				
е	From 2012				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2013 from Part XII,				
	line 4 [.] ▶ \$				
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of pnor years				
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2013 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013.				
	(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	0			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
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	·			
a	Subtract line 6c from line 6b Taxable				
_	amount—see instructions .				
е	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2013 Subtract lines		· · · · · · · · · · · · · · · · · · ·	- 0	· <u></u> -
•	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) .				
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9			-	-
a	Excess from 2009				
b	Excess from 2010				
С	Excess from 2011				
d	Excess from 2012				
е	Excess from 2013				

Part 2	XIV Private Operating Foundati	ions (see instruc	tions and Part V	II-A, question 9)	
`1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective for	r 2013, enter the da	ate of the ruling	▶	11/17/	/2014
b	Check box to indicate whether the found			n described in sec		
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	231 10 12 17	<u>9/ 6/</u>
	income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	investment return from Part X for	50,283	(6) 2012	(0) 2011	(u) 2010	E0 202
	each year listed					50,283
b	85% of line 2a	42,741		-		42,741
С	Qualifying distributions from Part XII,	.== ===				
	line 4 for each year listed .	170,250				170,250
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c .	170,250				170,250
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	:				0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in	33,522	66			33,588
	Part X, line 6 for each year listed	33,322	00			33,366
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)					0
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization .					0
	(4) Gross investment income					0
Part	XV Supplementary Information	n (Complete this	s part only if the	e foundation ha	ad \$5,000 or mor	e in assets at
	any time during the year—	see instructions	s.)			
1	Information Regarding Foundation Ma	anagers:				
а	List any managers of the foundation who	o have contributed	more than 2% of the	he total contribution	ons received by the	foundation
	before the close of any tax year (but onl	y if they have conti	ributed more than \$	\$5,000). (See sect	ion 507(d)(2))	
Diviva	Magaro Alex Magar	ro				
	List any managers of the foundation who		e of the stock of a o	corporation (or an	equally large portion	n of the
_	ownership of a partnership or other entit					
		,,		J		
2	Information Regarding Contribution,	Grant Gift Loan.	Scholarship, etc.	Programs:		
_	Check here ► X if the foundation on				zations and does no	ot accept
	unsolicited requests for funds If the four					
	under other conditions, complete items		, 5	,		
a	The name, address, and telephone num		ess of the nerson to	o whom application	ns should be addres	
a	The hame, address, and telephone han	iber of e-mail addit	ess of the person to	o whom applicatio	ins should be addre	3360
	The form in which applications should b	a authoritad and in	formation and mate	anala thay abould	includo:	
b	The form in which applications should b	e andillilled aud (U	iormation and mate	enais uiey snould	madde.	
	Any automorphisms					
С	Any submission deadlines:					
			<u> </u>	Lilli fill 1 1		H
d	Any restrictions or limitations on awards	s, such as by geogr	aphical areas, cha	ritable fields, kind	s of institutions, or o	tner
	factors.					

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Recipient show any relationship to Purpose of grant or Amount any foundation manager or substantial contributor contribution Name and address (home or business) a Paid during the year **Ballet Etudes Company** None PC 30,000 104 Wall St. Norwalk, CT 06850 PC Rye Country Day School None 250 3 Grandview Ave Rye, NY 10580 Yale University None PC 10,000 Yale University New Haven, CT 06520 The Children's School PC None 5,000 118 Scofield Road Stamford, CT 06903 Harvard University None PC 125,000 Harvard University Cambridge, MA 02138 170,250 3a b Approved for future payment Total 3b

Pa	rt XVI-A Analysis of Income-Producing Ac	tivities				
	er gross amounts unless otherwise indicated	T'	Isiness income	Excluded by sect	on 512, 513, or 514	(e)
1	Program convoca revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	Program service revenue a					
	b					
	С					
	d					
	е					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
	a Debt-financed property					
6	b Not debt-financed property Net rental income or (loss) from personal property			<u> </u>		<u> </u>
6 7	Other investment income		<u> </u>			
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events .					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					
	С					
	d					
	e					
40	Subtotal. Add columns (b), (d), and (e)		0	L	0	•
13	-, (-), (-)			•	13	0
13 (See	worksheet in line 13 instructions to verify calculations)			13	0
13 (See Pa	e worksheet in line 13 instructions to verify calculations at XVI-B Relationship of Activities to the A) ccomplishm	ent of Exempt	Purposes		
13 (See Pa	worksheet in line 13 instructions to verify calculations) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	
13 (See Pa	e worksheet in line 13 instructions to verify calculations T XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom) ccomplishm e is reported in c	ent of Exempt	t Purposes	importantly to the	

Form 990-PF (2013)

Form 990-PF (2013) Magaro Family Foundation, Inc. 46-1558048 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) 1a(2) X (2) Other assets **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If the answer to any of the above is "Yes." complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

b	If "Yes,"	complete the foll	owing schedule					
		(a) Name of organizati	on	(b) Type of organiz	ation		(c) Des	scription of relationship
				n, including accompanying schedul			nowledge	and belief, it is true,
Sign Here		al 1-		s) is based on all information of which	h preparer has any knowl Secretary	ledge		May the IRS discuss this return with the preparer shown below (see instructions)? XYes
		ure of officer or trustee		/	Title			
Paid	lg	nnt/Type preparer's na Greg McRay	me //	Preparer's signature Greg McRay		Date 11/17/20	014	Check I if self-employed P00281093
	Parer Firm's name ► Foundation Group, In		oundation Group, In-				Firm's I	EIN ► 62-1813735
use			ke Ste 610 Nashville	TN 37217		Phone	no (615) 361-9445	

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

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number					
Magaro Family Foundation, Inc.	46-1558048						
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	orm 990 or 990-EZ						
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	on					
	501(c)(3) taxable private foundation						
Check if your organization is cov	vered by the General Rule or a Special Rule.						
Note. Only a section 501(c)(7), (instructions	8), or (10) organization can check boxes for both the General Rule and a	Special Rule See					
General Rule							
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or r contributor. Complete Parts I and II	nore (in money or					
Special Rules							
sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 170(b)(1)(A)(vi) and received from any one contributor, during the year, a of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	contribution of the greater					
the year, total contribution	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							
	not covered by the General Rule and/or the Special Rules does not file S answer "No" on Part IV, line 2, of its Form 990, or check the box on line H						

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organizationEmployer identification numberMagaro Family Foundation, Inc46-1558048

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	Alex & Diviya Magaro 1248 Oenoke Ridge New Canaan CT 06840 Foreign State or Province Foreign Country	\$2,171,000	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country.	\$	Person Payroll Noncash Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

Name of organizationEmployer identification numberMagaro Family Foundation, Inc.46-1558048

Part II	Noncash Property (see instructions). Use duplicate co	ppies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- 		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of org	ganization mily Foundation, Inc.			Employer identification number 46-1558048		
Part III						
art iii	total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry					
	For organizations completing Part III, ente	•		<u> </u>		
	contributions of \$1,000 or less for the year	ir (Enter this inf	ormation once. See instri	uctions.) > \$ 0		
	Use duplicate copies of Part III if additional	al space is need	ed			
(a) No. from	(h) Durmos of gift	(0)	Use of sift	(d) Description of how sift is held		
Part I	(b) Purpose of gift	(c) Use of gift ((d) Description of how gift is held		
i						
	(a) Transfer of sile					
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	Transferee 5 flame, address, and	211 14	Relationsi	ip of transferor to transferee		
	For Prov Country					
(a) No. from	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held			
Part I	(b) r dipose or gitt	(0)	ose of gift	(d) Description of now gift is field		
		(e) T	ransfer of gift			
		ζ-γ.	. . .			
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee		
'						
				•		
	For. Prov Country					
(a) No.	For. Prov Country	Τ				
from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held		
raiti		 	· · · · · ·			
	•			•••••		
!						
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
			1,014.11.01.01			
(a) No.	For Prov Country		<u> </u>			
from	(b) Purpose of gift) (c) Use of gift	(d) Description of how gift is held		
Part I		 	<u></u>			
	(e) Transfer of gift					
	Transferee's name, address, and	ZIP + 4	Relationsh	nlp of transferor to transferee		
	For Prov Country					

Part I, Line 11 (990-PF) - Other Income

	403,122	403,122	403,122
	Revenue		
	and Expenses	Net Investment	Adjusted
Description	per Books	Income	Net Income
Other investment income - Medallion Capital interest	403,122	403,122	403,122

Part I, Line 23 (990-PF) - Other Expenses

	105	0	0	0
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Chantable
Description	per Books	Income	Income	Purposes
1 Bank service charge	105			

Magaro Family Foundation, Inc.

Part II, Line 13 (990-PF) - Investments - Other

2 403 122	2 403 122	C	-MA	Limited Partnership - Medallion Capital Investr	_
End of Year	End of Year	Beg of Year	Valuation	Asset Description	
FMV	Book Value	Book Value	Basis of		
2,403,122	2,403,122	0			l

Part VII-A, Line 8b (990-PF) - Copy of Form 990-PF to Attorney General
This is the first 990PF filing so no previous filing has been sent to the CT Attorney General's Office yet The foundation will
send the CT Attorney General's Office a copy of this filing.

1 Foundation Managers
es and
Truste(
Directors,
of Officers,
sation o
Compen
90-PF) - (
1066
Line 1
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P.

51		_	-		6
,	Expense	Account)
0		Benefits	0	0	0
•	Avg Hrs	Compensation	0	0	0
	Avg Hrs	Per Week	0 20	0 20	0 20
		Title	President & Treasurer	Director	Secretary
		Foreign Country			
		State Zip Code	06840	06840	06840
		State	CT	CT	CT
		City	New Canaan	New Canaan	New Canaan
		Street	1248 Oenoke Ridge	1248 Oenoke Ridge	161 Cherry Street
	Check "X"	if Business			
		Name	Бічуа Мадаго	Alex Magaro	Al P Trebing
	L				