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CIS5WTY5T6

12717/2014 11:53:46 AM - PJS - BCR - FARRINGTON FOUNDATION

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 identific	cation number
FARRINGTON FOUNDAT	ION	22-374	41108
Organization type (check	one).		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a pri	vate foundation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private	foundation	
	501(c)(3) taxable private foundation		
Note. Only a section 501(dinstructions. General Rule	c)(7), (8), or (10) organization can check boxes for both the General R	tule and a Special Rule, So	ee
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$70 one contributor. Complete Parts I and II.	5,000 or more (in money c	or
Special Rules			
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% sup and 170(b)(1)(A)(vi) and received from any one contributor, during th) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990	e year, a contribution of th	ne greater
the year, total conf	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received tributions of more than \$1,000 for use exclusively for religious, charities, or the prevention of cruelty to children or animals. Complete Part	able, scientific, literary, or	
the year, contribution total to more than year for an exclusion applies to this organized.	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received ions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000 if this box is checked, enter here the total contributions that we gively religious, charitable, etc., purpose Do not complete any of the particular particular in the properties of the properties	nese contributions did not were received during the parts unless the General F	Rule or more
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does must answer "No" on Part IV, line 2, of its Form 990, or check the bo I, to certify that it does not meet the filing requirements of Schedule B	x on line H of its Form 990)-EZ or on its

Schedule B (F	form 990, 990-EZ, or 990-PF) (2013)		Page 2		
Name of organization Employer Identification number FARRINGTON FOUNDATION 22-3741108					
Pârt I					
(a) No	(b) Name, address, and ZIP + 4	(C) Total contributions	(d) Type of contribution		
1	ESTATE OF ETHEL SMITH 800 FAIRWAY DRIVE SUITE 340 DEERFIELD BEACH FL 33441 Foreign State or Province Foreign Country:	\$ 39,587	Person X 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 Porncash (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 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 Noncash (Complete Part II for noncash contributions)		

	am 990, 990-EZ, or 990-PF) (2013)		rage J			
Name of organization FARRINGTON FOUNDATION			Employer identification number 22-3741108			
Part II						
(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			
		\$				

Concasto D (c	OIN 990, 990-CZ, OI 590-PF) (2012)			raye.	
Name of org	ganization FON FOUNDATION			Employer identification number	
Partill		22-3741108			
eri-iranın	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.				
	For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,				
	contributions of \$1,000 or less for the year. (Enter this information once See instructions.) > \$ 0				
(2) No	Use duplicate copies of Part III if addition	al space is ne	eded		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	

		(e) 1	ransfer of gift		
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				

	For Prev. Country				
(a) No.		Γ			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
•	(e) Transfer of gift				
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
	For Prov. Country				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		•••••			
•					

	(e) Transfer of gift				
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
ì					
ſ	***************************************		,		
	Far Prov Country				
(a) No. from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held	
}					
Ì	(e) Transfer of gift				
}	Transferee's name, address, and ZIP + 4 Relationship of		p of dansieror to dansieree		
1	For Prov. Country				
	For Prov. Country			Schedule B (Form 990, 990-EZ, or 990-PF) (2013)	