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Form **990-PF**

EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

OMB No 1545-0052

Department on the Treasury Internal Revenue Service

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

➤ Do not enter social security numbers on this form as it may be made public.

➤ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For,c	aleni	lar year 2014 or tax year beginning		, and ending		
Nan	ne of	foundation			A Employer identification	number
S	TAN	LEY FAMILY FOUNDATION			06-1157888	3
		d street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
4	7 F	RICHARDS AVENUE			203-853-20	000
City		wn, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is p	pending, check here
		VALK, CT 06857				
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return	,		
		Address change	Name change		Foreign organizations me check here and attach or	eeting the 85% test, omputation
H C	heck	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
	_		Other taxable private founda	tion	under section 507(b)(1	
I Fa		rket value of all assets at end of year J Accounting		X Accrual	F If the foundation is in a	
			ner (specify)		under section 507(b)(1	
•		297, 258, 693. (Part I, colui		pasis.)	(***	<i>N N</i> = 1.1
Pa	rt f	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		' (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	ıncome	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	1,067,810.	1,067,810		STATEMENT 1
CI (1)	5a	Gross rents				,
	b	Net rental income or (loss)				
رو د	6a	Net gain or (loss) from sale of assets not on line 10	23,064,739.			
- Ž	b	Gross sales price for all assets on line 6a 99,948,408.				
Revenue	7	Capital gain net income (from Part IV, line 2)	711	23,064,739	•	
£ œ	8	Net short-term capital gain		17 11111 1 111111 11-11111		
*	9	Income modifications				
	10a	Gross sales less returns and allowances				
		Less Cost of goods sold				
3	C	Gross profit or (loss)				} ■4
	11	Other income				
<i></i>	12	Total. Add lines 1 through 11	24,132,549.	24,132,549		
	13	Compensation of officers directors trustees etc. Other employee salaries and wages ED	0.	0	•	0.
	14					
u	15	Pension plans, employee benefits	5 001			0.600
1Se	16a	Legal fees S. AUG 17 SITMT 20	5,201.	2,601		2,600.
Expenses	b	Accounting fèes STMT 22	3,850.	1,925		1,925.
ũ		Other professional fees			 	
Ě	l	metrose de la companya del companya del companya de la companya de	160,000.			0.
stra	18	Taxes STMT 4	160,000.		<u>'•</u>	<u> </u>
ij	19	Depreciation and depletion				
É	20	Occupancy				
ğ	21	Travel, conferences, and meetings				
Operating and Administrative	22	Printing and publications Other expenses STMT 5	269.	269) .	0.
ting	23		209.	203	•	
era	24	Total operating and administrative expenses. Add lines 13 through 23	169,320.	4,795		4,525.
Ö	25	•	9,370,000.	3,175	· •	9,370,000.
		Contributions, gifts, grants paid	2,370,000.			3,3,0,000.
	26	Total expenses and disbursements.	9,539,320.	4,795		9,374,525.
	27	Add lines 24 and 25	7,335,320.		<u> </u>	7/5:-/525.
	1		14,593,229.	`		
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	,000,220.	24,127,754	•	·
		Adjusted net income (if negative, enter -0-)			N/A	
	<u></u>		<u> </u>	·		

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ► PRIOR PERIOD ADJUSTMENT

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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231,640,826.

1,112.

Form 990-PF (2014) STANLEY FAMILY FOUNDATION

Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income	T				
2-story brick wa	nbe the kir irehouse, (nd(s) of property sold (e.g or common stock, 200 shs	, real estate, . MLC Co.)] P	low acquire - Purchase - Donation	,'() Date acquired mo , day, yr)	(d) Date sold (mo., day, yr)
1a STOCK SALES						P		ARIOUS	VARIOUS
b PIMCO BONDS				-		P_		ARIOUS	VARIOUS
c SUTTON PLACE			_			P	V.	ARIOUS	VARIOUS _
d					<u> </u>				
е					L.,				<u> </u>
(e) Gross sales price	(f) C	Depreciation allowed (or allowable)	plus e	t or other basis xpense of sale			((h) Gain or (los (e) plus (f) minus	(g)
a 62,814,569.				9,899,52				2	22,915,041. 149,698.
b 29,333,839.				9,184,14			_		149,698.
7,800,000.				7,800,00	0.				0.
d									
8			_						
Complete only for assets showing	ng gain in i	column (h) and owned by t	the foundation	on 12/31/69				aıns (Col (h) gai	
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col. (ı), if any				t), but not less the losses (from col	(h))
a							_		22,915,041. 149,698.
b									149,698.
C									0.
d									
е									
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0-	r in Part I, line - in Part I, line	7 7	}	2		2	23,064,739.
3 Net short-term capital gain or (lo	ss) as defi	ned in sections 1222(5) an							
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		·	<u> </u>		<u>}</u>	3		_ N/2	A
Part V Qualification U	<u> Inder S</u>	ection 4940(e) for	Reduced	Tax on Net	t Inv	<u>estmen</u>	t Inco	me	
If section 4940(d)(2) applies, leave to Was the foundation liable for the sector of t	tion 4942 lify under	tax on the distributable arr section 4940(e) Do not co	mplete this pa	rt.					Yes X No
(a) Base period years		(b) Adjusted qualifying dis		Net value of no	(c)		assets		(d) ibution ratio
Calendar year (or tax year beginn	ing in)		5,165.			, 389,			vided by col (c)) • 023098
2013			9,782.			, 389, , 187,			.035679
2012			5,000.			,944,			.012871
2011 2010			5,000.			,847,			.012157
2009			2,500.			,718,			.016801
2 Total of line 1, column (d)			-					2	.100606
3 Average distribution ratio for the the foundation has been in existe	-							3	.020121
4 Enter the net value of nonchanta	ble-use as	sets for 2014 from Part X,	line 5					4 2	81,322,936.
5 Multiply line 4 by line 3						-		5	5,660,499.
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6	241,278.
7 Add lines 5 and 6								7	5,901,777.
8 Enter qualifying distributions fro	m Part XII	, line 4						8	9,374,525.
If line 8 is equal to or greater tha See the Part VI instructions.	ın line 7, c	heck the box in Part VI, line	e 1b, and comp	plete that part usi	ng a 1	% tax rate.			
423521 11-24-14				_					Form 990-PF (2014

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orm 990-PF (2014) STANLEY FAMILY FOUNDATIO			<u>06-115788</u>	8 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	red)	,
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire			
			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	L	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f			
			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations	,_	
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		.N/A. 51	<u> </u>
Organizations relying on a current notice regarding disaster assistance check t			▶∟ .	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta		_ .	
expenditure responsibility for the grant?		Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1
a personal benefit contract?		L Ye	s X No .	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870.			₽	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	L Ye	s 🔼 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A 7	b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly	<i></i>	
1 List all officers, directors, trustees, foundation managers and their			7-0	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THEODORE STANLEY	TRUSTEE			
47 RICHARDS AVENUE				
NORWALK, CT 06857	1.00	0.	0.	0.
JONATHAN A. STANLEY	TRUSTEE			
47 RICHARDS AVENUE				
NORWALK, CT 06857	1.00	0.	0.	0.
JULIUS F. FRIESE	TRUSTEE			
47 RICHARDS AVENUE				
NORWALK, CT 06857	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	· · · · · · · · · · · · · · · · · · ·	enter "NONE."		
(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
NONE				
]	
			1	
Total number of other employees paid over \$50,000			▶	0

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Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "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		. ▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati- number of organizations and other beneficiaries served, conferences convened, research papers pro-	stical information such as the iduced, etc	Expenses
1 N/A		
2		
3		
4		
m any mi		
Part IX-B Summary of Program-Related Investments		A
Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions.		
3		

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	i, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	242,032,809.
	Average of monthly cash balances	1b	43,574,233.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	285,607,042.
	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	0.
3	Subtract line 2 from line 1d	3	285,607,042.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,284,106.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	281,322,936.
6	Minimum investment return. Enter 5% of line 5	6	14,066,147.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	14,066,147.
2a	Tax on investment income for 2014 from Part VI, line 5 241, 278.		
	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	241,278.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	13,824,869.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	13,824,869.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	13,824,869.
P	Qualifying Distributions (see instructions)	FI	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
	Expenses, contributions, gifts, etc total from Part i, column (d), line 26	1a	9,374,525.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the	1	
	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	9,374,525.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		041 055
	income. Enter 1% of Part I, line 27b	5	241,278.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,133,247.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies f	or the section

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	July 1		2010	13,824,869.
line 7	.,			13,024,009.
2 Undistributed income, if any, as of the end of 2014.			8,972,744.	
a Enter amount for 2013 only			0,7/2,/44.	-
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2014.		0.	, , , , , , , , , , , , , , , , , , ,	<u> </u>
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 \triangleright \$ 9,374,525.				
a Applied to 2013, but not more than line 2a			8,972,744.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		******** ****** ****** ***************
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	. ''	······································	
d Applied to 2014 distributable amount				401,781.
e Remaining amount distributed out of corpus	0.	',,' '' ', ' '		
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	,	0.		
d Subtract line 6c from line 6b Taxable	······································			
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				13,423,088.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		-		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.	`		,
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:			**************************************	
a Excess from 2010				
b Excess from 2011			,	
c Excess from 2012				`
d Excess from 2013	``	ì	`	
e Excess from 2014	`			
423581				Form 990-PF (2014)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income	Exclude	ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	Amount	
a		 			
b					
·	 		+		
d	 				
e		· ···			
T	-		+ +		
g Fees and contracts from government agencies	 		-		
Membership dues and assessments Interest on savings and temporary cash	 				
investments			14	1,067,810.	
5 Net rental income or (loss) from real estate:			 ••••	1,00,,010.	
- Balla Garage de Language	 				
b Not debt-financed property			+ +		· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal			+-+	-	
property			+ +		
8 Gain or (loss) from sales of assets other			1		
than inventory			18	23,064,739.	
9 Net income or (loss) from special events		-	1		
O Gross profit or (loss) from sales of inventory		 			
1 Other revenue:					
a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0		24,132,549.	(
				13	0.4 1.00 = 4.0
Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than			-A contribi	uted importantly to the accom	iplishment of

Form 990-PF (20	O14) STANL	EY FAMILY	FOUND	ATION		06-11	57888	Pa	ge 13
Part XVII	Information Re Exempt Organ		sfers To a	nd Transactions	s and Relation	nships With Noncl	naritable	•	
1 Did the org	anization directly or indi	rectly engage in any o	of the following	with any other organiz	ation described in s	ection 501(c) of		Yes	No
the Code (other than section 501(c))(3) organizations) or	in section 527	7, relating to political or	ganizations?		F		
a Transfers f	from the reporting found:	ation to a nonchantab	ole exempt org	anization of					
(1) Cash							1a(1)		X
• •	assets						1a(2)		X
h Other trans									
(1) Sales	of assets to a noncharita	ble exempt organizati	ion				16(1)		Х
	ases of assets from a no						15/2)		Х
• •	of facilities, equipment,				-		15/2)		X
	oursement arrangements						1b(3)		X
• •	=						15/5)	-	X
	mance of services or me						45/6)	-	X
							4.5		X
-	facilities, equipment, ma								
	•	·	_		-	air market value of the good tion or sharing arrangemen		5612,	
) the value of the goods,			u iess than ian market	value ili aliy (ralisac	HOIT OF SHATING ATTANGETHER	it, Show in		
	(b) Amount involved			exempt organization	(d) p	otion of transfers, transactions,			
(a) Line no	(D) Amount myored	(c) Name of	N/A	exempt organization	(u) Descrip	Juon of Bansiers, Bansactions,	Ind Sharing ar	rangerne	11125
	<u></u>								
									
				** *					
									
	· -					<u>.</u>			
	 -	-							
						-			
		<u>-</u>							
									
									
		-							
					<u> </u>				
									
	dation directly or indirec	•			janizations describe	a		Γ υ	a
	501(c) of the Code (othe		(3)) or in sect	ion 52/?			Yes		No
b if Yes, co	mplete the following sch (a) Name of org			(b) Type of organizati	on I	(c) Description of relati	onchin		
	N/A	yanızanını		(b) Type of Organizati	UII	(c) Description of relati	Juguih_		
	N/A				-				
									
									
Under	penalties of perjury, I declare	that I have examined this	e return includin	a accompanying schedules	and statements and to	the hest of my knowledge			
and he	elief it is true, correct, and co						May the IRS return with the		
Sign Here	(). Th			1 8/21/20	Tr	,	shown below	/ (see ins	14)7
P	Ju rr					Ly troi	X Yes	3 L_	_l No
Sign	ature of officer or trustee		D	Date	Title	Chook T of D7	131		
	Print/Nype preparer's n	ame	Preparer's si	gnatur e	Date	Check rf PT	114		
D-1-1		20T 725	L		- 100/05/3	self- employed			
Paid	ELIZABETH			ETH SOLECK			200235		
Preparer	Firm's name ► BLU	JM, SHAPIR	O & CO	MPANY, P.C	., CPA'S	Firm's EIN ► 06-	-10092	:05	
Use Only	<u> </u>		am====		070000			_	
	Firm's address ► 29			•		0.00	FC1 4		
	i WF	ST HARTFO	ко. Ст	06127-200	U	Phone no 860	201-4	FU () ()	1

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Tallo and	or substantial contributor	recipient		
CONNCAN	NONE	PUBLIC CHARITY	CHARITABLE	
85 WILLOW STREET				
NEW HAVEN, CT 06511				1,500
COVE FOR GRIEVING CHILDREN	NONE	PUBLIC CHARITY	CHARITABLE	
250 POMEROY AVENUE, SUITE 107				
MERIDEN, CT 06450				2,000
DC CENTRAL KITCHEN	NONE	PUBLIC CHARITY	CHARITARI.R	
425 2ND ST NW	NO.12			
WASHINGTON, DC 20001				40,000
GEORGETOWN MINISTRIES 1041 WISCONSIN AVENUE NW	NONE	PUBLIC CHARITY	CHARITABLE]
WASHINGTON, DC 20007				50,000
HORIZONS NATIONAL	NONE	PUBLIC CHARITY	CHARITABLE	
120 POST ROAD W #202				
WESTPORT, CT 06880				1,500
INNER CITY OUTINGS NH - SIERRA CLUB 85 SECOND STREET, 2ND FLOOR	NONE	PUBLIC CHARITY	CHARITABLE	
SAN FRANCISCO, CA 94105				4,000
NAMI - CENTRAL VIRGINIA	NONE	PUBLIC CHARITY	CHARITABLE	
1904 BYRD AVENUE, STE 103 RICHMOND, VA 23230				5,000
NAMI - DELAWARE	NONE	PUBLIC CHARITY	CHARITABLE	
2400 W. 4TH STREET				5,000
WILMINGTON, DE 19805		 		
NAMI - ILLINOIS	NONE	PUBLIC CHARITY	CHARITABLE	
218 WEST LAWRENCE AVENUE				
SPRINGFIELD, IL 62704		-		10,000
NAMI - INDIANA	NONE	PUBLIC CHARITY	CHARITABLE	
PO BOX 22697				
INDIANAPOLIS, IN 46222		<u></u>		5,000
Total from continuation sheets	· · · · · · · · · · · · · · · · · · ·	<u></u>		9,347,500

STANLEY FAMILY FOUNDATION

CMANT EV	FAMILY FOUNDAT	TON	06_1	157888
Part XV Supplementary Information		1011	00-1	137000
3 Grants and Contributions Paid During the You		·	· ·	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· Name and address (nome of business)	or substantial contributor	recipient		
NAMI - KENTUCKY	NONE	PUBLIC CHARITY	CHARITABLE	
808 MONTICELLO ST.				
SOMERSET, RY 42501				5,000.
NAMI - NEW MEXICO (ALBUQUERQUE)	NONE	PUBLIC CHARITY	CHARITABLE	
8015 MOUNTAIN ROAD NE				
ALBUQUERQUE, NM 87110				10,000.
NAMI - NEW YORK	NONE	PUBLIC CHARITY	CHARITABLE	
99 PINE STREET				
ALBANY, NY 12207				5,000.
NAMI - ROANOKE	NONE	PUBLIC CHARITY	CHARITABLE	
P.O. BOX 20864				
ROANOKE, VA 24018				5,000.
NAMI - VIRGINIA	NONE	PUBLIC CHARITY	CHARITABLE	
P.O. BOX 8260				
RICHMOND, VA 23226				10,000.
NAMI NATIONAL	NONE	PUBLIC CHARITY	CHARITABLE	
3803 N. FAIRFAX DR.				
ARLINGTON, VA 22203				20,000.
NEW HAVEN HOME RECOVERY	NONE	PUBLIC CHARITY	CHARITABLE	
153 EAST STREET				
NEW HAVEN, CT 06511				2,500.
PLANT IT - CALIFORNIA	NONE	PUBLIC CHARITY	CHARITABLE	
9457 S. UNIVERSITY BOULEVARD				
HIGHLANDS RANCH, CO 80126				50,000.
ST. MARTIN DE PORRES ACADEMY	NONE	PUBLIC CHARITY	CHARITABLE	
208 COLUMBUS AVENUE				
NEW HAVEN, CT 06519				14,500.
STANLEY CENTER AT THE BROAD INSTITUTE	NONE	PUBLIC CHARITY	CHARTTARLE	
7 CAMBRIDGE CENTER	HOME	FUBBLE CHARITY	C.IUC.I IUDID	
CAMBRIDGE, MA 02142				8,500,000.
Total from continuation sheets				.

STANLEY FAMILY FOUNDATION

Part XV Supplementary Informati	Y FAMILY FOUNDAT			
3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	tf recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
TREATMENT ADVOCACY CENTER	NONE	PUBLIC CHARITY	CHARITABLE	
200 N. GLEBE ROAD, SUITE 730				
ARLINGTON, VA 22203				600,000
VARCA	NONE	PUBLIC CHARITY	CHARITABLE	
5 COON HOLLOW ROAD				
DERBY, CT 06418		<u> </u>	-	1,500
	-			-
		<u> </u>		
Total from continuation sheets				

FORM 990-PF I	OIVIDENDS	AND	INTER	EST	FROM SECUR	ITIES S	TATEMENT	1
SOURCE	GROSS AMOUNT	(APITAL GAINS VIDENDS	5	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
BARCLAYS I SHARES	209,540.		(<u> </u>	209,540.	209,540.		
DIVIDENDS - CORPORATE STOCKS DIVIDENDS - UBS	536,850.		().	536,850.	536,850.		
PRIME INST. DIVIDENDS -	8,356.		().	8,356.	8,356.		
VANGUARD FLEET INTEREST	22,535. 8.).).	22,535. 8.	22,535. 8.		
PIMCO DIVIDENDS UBS MONEY MARKET	289,414.				289,414.	289,414.		
INTEREST	1,107.		() .	1,107.	1,107.		
TO PART I, LINE 4 1,	,067,810.	·	() .	1,067,810.	1,067,810.		
FORM 990-PF			LEGAL	FE	ES	5	STATEMENT	2
DESCRIPTION		EXPE	A) NSES BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES			5,201.		2,601.		2,60	00.
TO FM 990-PF, PG 1, LI	N 16A		5,201.		2,601.		2,60	00.
FORM 990-PF		AC	COUNTI	NG	FEES		STATEMENT	3
DESCRIPTION		EXPE	A) NSES BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTING FEES			3,850.		1,925.		1,9	25.
TO FORM 990-PF, PG 1,			3,850.	-	1,925.		1,9	25

FORM 990-PF	TAX	ES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
FEDERAL TAX PAYMENTS	160,000.	0.			0.	
TO FORM 990-PF, PG 1, LN 18	160,000.	0.			0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
MISCELLANEOUS EXPENSES	269.	269.			0.	
TO FORM 990-PF, PG 1, LN 23	269.	269.		: =	0.	
FORM 990-PF	CORPORAT	E STOCK	\$	STATEMENT	6	
DESCRIPTION		ВО	OK VALUE	FAIR MARKE	r	
AMAZON COMCAST IBM O'REILLY STARBUCKS BERKSHIRE HATHAWAY COGNIZANT TECHNOLOGY DIRECT TV DOLLAR GENERAL DOLLAR TREE EBAY GOOGLE LKQ PRICELINE ULTA SALON HEPTARES BAIDU IAC INTERACTIVE MICHAEL KORS TJ MAXX		1 1 1	2,586,276. 3,308,375. 6,243,252. 3,323,639. 4,882,626. 3,312,946. 8,552,137. 3,042,049. 3,282,557. 1,848,029. 5,635,195. 4,105,219. 5,835,958. 8,620,309. 7,339,050. 0,607,030. 4,320,222. 4,198,697. 6,394,681. 5,377,875.	6,207,00 8,701,50 4,813,20 11,557,20 13,128,00 6,006,00 14,218,20 4,335,00 4,242,00 19,002,60 5,612,00 9,513,50 8,436,00 17,103,10 24,289,60 10,201,00 5,699,20 3,647,4 15,020,00 6,858,00	00. 0	

132,816,122. 198,590,672.

TOTAL TO FORM 990-PF, PART II, LINE 10B

FORM 990-PF OT	HER INVESTMENTS	STATEMENT			
· Programme	VALUATION	D001/ 1/37 1/10	FAIR MARKET		
DESCRIPTION	METHOD	BOOK VALUE	VALUE		
BARCLAYS ISHARES - CSJ	COST	26,882,539.	26,817,114.		
BARCLAYS ISHARES - CIU	COST	27,068,628.	27,002,214.		
VANGUARD - GNMA	COST 27,073,		27,048,766.		
TOTAL TO FORM 990-PF, PART II, LI	NE 13	81,024,777.	80,868,094.		
FORM 990-PF	OTHER ASSETS		STATEMENT 8		
	DEGINATING OF	END OF VEND			
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
DESCRIPTION	YR BOOK VALUE 4,546,133.				

Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, complet	-				▶	X	
•	are filing for an Additional (Not Automatic) 3-Month Ext	-		•				
Do not	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	sty filed For	m 8868.			
Electro	nic filing <i>(e-file)</i> . You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months f	or a corpo	ration	
required	I to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically f	ile Form 88	68 to req	uest an ex	tension	
of time t	o file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	ssociated	J With Cer	taın	
Persona	d Benefit Contracts, which must be sent to the IRS in pap	er format ((see instructions). For more details o	on the elec	tronic filin	g of this fo	orm,	
visit ww	w.irs.gov/efile and click on e-file for Chanties & Nonprofits							
Part	Automatic 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).				
A corpo	ration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete				
Part I or	nty					. ▶		
All other	corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	st an exten	sion of tin	ne		
to file ın	come tax returns.			Enter file	r's identi	fying num	ıber	
Type or						tion numb	er (EIN) or	
print					 			
	STANLEY FAMILY FOUNDATION	STANLEY FAMILY FOUNDATION				06-1157888		
File by the due date f						Social security number (SSN)		
filing your	47 RICHARDS AVENUE				•			
retum Sec instruction		oreign add	ress, see instructions.					
	NORWALK, CT 06857	_						
-								
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)				0 4	
		•	, ,					
Applica	tion	Return	Application				Return	
ls For		Code	Is For				Code	
	00 or Form 990-EZ	01	Form 990-T (corporation)				07	
		02	Form 1041-A				08	
	Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 (other than individual)					09		
Form 99		04	Form 5227		.		10	
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11	
	90-T (trust other than above)	06	Form 8870				12	
roini 9	JULIE FRIESE	1 00	1011110070				12	
• The	books are in the care of \blacktriangleright C/O MBI, INC.	17 RT	CHARDS AVENUE - NO	DWAT.K	CТ	06857	,	
	bhone No. ► (203) 853-2000	· / 1(1)	Fax No.	1(WALLIN	,	00037		
		مأم خام ما ام			.			
	e organization does not have an office or place of business			lf 45 f	. 41			
	s is for a Group Return, enter the organization's four digit	1						
box ▶					ers the ex	tension is	tor.	
1 1	request an automatic 3-month (6 months for a corporation AUGUST 15, 2015, to file the exemp	•			T			
_	 :	t organiza	tion return for the organization nam	ed above.	i ne exter	sion		
	for the organization's return for: X calendar year 2014 or							
			at a code c					
	tax year beginning	, an	d ending		- ·			
	Abo According to the distribution about 400 and	5 1:			_			
2 If	the tax year entered in line 1 is for less than 12 months, c	neck reas	on: Initial return	Final retur	n			
	Change in accounting period							
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						205	040	
-	onrefundable credits. See instructions.		3a		305	943.		
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					045	043	
_	stimated tax payments made. Include any prior year overp			3b	\$	245	,943.	
	alance due. Subtract line 3b from line 3a. Include your pa	•	•					
	y using EFTPS (Electronic Federal Tax Payment System).	-		Зс	\$,000.	
Cautio	n. If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 8	879-EO fo	r payment	

Form 8868 (Rev. 1-2014)

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

LHA

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