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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

Open to Public Inspection

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-EZ and its instructions is at www irs gov/form990.

A F	or the	2014 calen	dar year, or tax year beginning , and ending				
В	heck if a	applicable	C Name of organization		D Employer ider	ntification number	
	Address o	change					
\	lame cha	ange	23-7102732				
<u>"</u>	nitial retu	ırn	Number and street (or P O box, if mail is not delivered to street address)	Room/suite	E Telephone nun	nber	
F	inal retu	rn/terminated	11 FARM ROAD		203-97	2-4444	
7	Amended	return	City or town, state or province, country, and ZIP or foreign postal code		F Group Exemp	otion	
	Application	on pending	NEW CANAAN CT 06840-6626		Number >		
G A	Accoun	iting Method	X Cash Accrual Other (specify) ▶	H Che	eck 🕨 🔲 if the or	ganization is not	
1 1	Nebsit	te: ▶ <u>N/A</u>	1	requ	uired to attach Sch	edule B	
<u>J</u> 1	Tax-exe	empt status (c	heck only one) — X 501(c)(3) 501(c)() ◀ (insert no) 4947(a)(1) or 5	527 (Fo	rm 990, 990-EZ, or	990-PF)	
K F	orm o	f organization	n X Corporation Trust Association Other				
			b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total ass	ets			
		.,	are \$500,000 or more, file Form 990 instead of Form 990-EZ		<u>></u> \$	105,775	
Pa	art I		nue, Expenses, and Changes in Net Assets or Fund Balances (ictions for Part I)	ਚਿ	
		Check	if the organization used Schedule O to respond to any question in this Pa	art I		X	
	1		gifts, grants, and similar amounts received		1	92,962	
1	2		rvice revenue including government fees and contracts		2	12,718	
	3	•	dues and assessments		3		
m=	4	Investment	1 1		4	95	
2015	5a		Int from sale of assets other than inventory or other basis and sales expenses 5b				
7		Less cost o	- -				
63	C		from sale of assets other than inventory (Subtract line 5b from line 5a)		5c		
	6	Gaming and					
₹	a Gross income from gaming (attach Schedule G if greater than \$15,000)						
ē≥	b	\$15,000)	<u> </u>	one	 		
A Vallua Revenue A V			ne from fundraising events (not including \$	Ults			
" 纠	<u>}</u>		gross income and contributions exceeds \$15,000)				
4	r c		expenses from gaming and fundraising events 6c				
đ	5 d		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract				
Ŷ.	7	line 6c)			6d		
	7a		of inventory, less returns and allowances 7a				
1	b		of goods sold RECEIVED 76				
	С	Gross profit	or (loss) from sales of Inventory (Subtract line 7b from line 7a)		7c		
	8	Other reven	ue (describe in Schedule O)		8		
	9	Total reven	iue. Add lines 1, 2, 8; 4! 5c, 6d, 7c, and 8 1 1 100 1		▶ 9	105,775	
	10	Grants and	similar amounts paid (Ilst-in-Schedule 0)		10	112,750	
	11	Benefits par	d to or for members OGDEN, UT		11		
တ္က	12	Salaries, otl	ner compensation, and employee benefits		12	16,620	
nse	13	Professiona	I fees and other payments to independent contractors		13		
Expenses	14	Occupancy,	rent, utilities, and maintenance		14		
யி	15	• • •	blications, postage, and shipping		15		
	16	•	nses (describe in Schedule O)		16	7,325	
\rightarrow	17		nses. Add lines 10 through 16		▶ 17	136,695	
ıχ	18		deficit) for the year (Subtract line 17 from line 9)		18	-30,920	
Net Assets	19		or fund balances at beginning of year (from line 27, column (A)) (must agree with		40	FO FOO	
As			figure reported on prior year's return)		19	59,580	
Se l	20	`	ges in net assets or fund balances (explain in Schedule O)	-	20	20 660	
- 1	21		or fund balances at end of year. Combine lines 18 through 20		▶ 21	28,660 m 990-EZ (2014)	

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Form **990-EZ** (2014)

Form 990-EZ (2014) NEW CANAAN HIGH SCHOO	L SCHOLA	RSHIP 23-71	02732		' Page 2
Part II Balance Sheets (see the instructions for Part II	art II)				
Check if the organization used Schedule O to	respond to any	question in this Part I	<u> </u>		
		(A) Bec	inning of year		(B) End of year
22 Cash, savings, and investments			0	22	
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)			0	24	
25 Total assets			0	25	0
26 Total liabilities (describe in Schedule O)			0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree			0	27	0
Part III Statement of Program Service Accom	olishments (se	ee the instructions for	Part III)		
Check if the organization used Schedule O to	respond to any	question in this Part I	11 🔲		Expenses
What is the organization's primary exempt purpose?				(Re	quired for section
				501	(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for e				orga	anizations, optional for
as measured by expenses. In a clear and concise manner, describe	•	vided, the number of		othe	ers)
persons benefited, and other relevant information for each program	title				
28					
(Grants \$) If this amount includes 1	oreign grants, che	ck here	>	28a	
29					
(Grants \$) If this amount includes f	foreign grants, che	ck here	>	29a	
30					
				1	
(Grants \$) If this amount includes t	oreign grants, che	ck here	•	30a	
31 Other program services (describe in Schedule O)					
(Grants \$) If this amount includes to	oreign grants, che	ck here	•	31a	
32 Total program service expenses (add lines 28a through 31a)			<u> </u>	32	
Part IV List of Officers, Directors, Trustees, and Key Er Check if the organization used Schedule O to resp	nployees (list eac	th one even if not compe	nsated — see the	e instrud	ctions for Part IV)
Check it the digametricit used conteduc of to resp	(b) Average	(c) Reportable	(d) Heath ben	efits,	T
(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans,		(e) Estimated amount of other compensation
	devoted to position	(If not paid, enter -0-)	deferred compe	nsation	
Wendy Hilbolt		_		_	
COMMITTEE	0.00	0		0	0
Roberta Peet				_	
_CO-CHAIR	0.00	0		0	0
Cindy Kaufman					_
COMMITTEE	0.00	0		0	0
Kathy Schulte					
CO-CHAIR	0.00	0	<u> </u>	0	0
Stephen Vehslage					
COMMITTEE	0.00	0		0	0
					l
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					<u> </u>
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	L		L		<u></u>
					Form 990-EZ (2014)

Form	990-EZ (2014) · NEW CANAAN HIGH SCHOOL SCHOLARSHIP 23-7102732	•	, P	age 3
Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	·		\Box
	instructions for Fart Vy check if the digarilization used schedule of to respond to any question in this Fart	<u> </u>	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		1	, <u>.</u>
	detailed description of each activity in Schedule O	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	ľ		
	change on Schedule O (see instructions)	34	<u> </u>	X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	<u> </u>	X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	ļ	L
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	<u> </u>	X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		ļ	
	during the year? If "Yes," complete applicable parts of Schedule N	36	<u> </u>	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
b	Did the organization file Form 1120-POL for this year?	37b	ļ	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	ļ	X
<u>b</u>	If "Yes," complete Schedule L, Part II and enter the total amount involved38b	_	·	
39	Section 501(c)(7) organizations Enter			ļ
a	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities 39b	\dashv		`
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ►, section 4912 ►, section 4955 ►	-		
р	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958		1	
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	405		v
_	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line	-		
u	40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	-		
·	transaction? If "Yes," complete Form 8886-T	40e	1	x
41	List the states with which a copy of this return is filed None	1,00	·	
42a		203 - 97	2-4	444
	NEW CANAAN HIGH SCHOOL			
	Located at ▶ NEW CANAAN CT ZIP + 4 ▶ (06840		
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Х
	If "Yes," enter the name of the foreign country	_		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR)			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		_X_
	If "Yes," enter the name of the foreign country			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			▶ _
	and enter the amount of tax-exempt interest received or accrued during the tax year		,	
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		1	
	completed instead of Form 990-EZ	44a	<u> </u>	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b	 	X
C	Did the organization receive any payments for indoor tanning services during the year?	44c	 	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	1	1
	·		 	١,,
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	-	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			,,
	Form 990-EZ (see instructions)	45b	0.53	X
DAA		Form 99	いーヒム	(2014)

Form	996-EZ	(2014) NE	<u>W CANAAN H</u>	IGH SCHO	OOL SCHOLA	RSHIF	23-71	02732		<u> </u>		Page 4
46	Did th	o organization are	anno dispativ or indi				-1¢ -¢	-4			Ye	s No
40			ngage, directly or indiction of the control of the			s on bena	air or or in oppo	sition		40	,	X
Pa	rt VI	Section 5	01(c)(3) organiz	ations only					·	<u> </u>	- 1	
			501(c)(3) organiza	tions must an	swer questions 47	7–49b an	d 52, and cor	mplete the	tables for l	nes		
		50 and 51 Check if the	e organization use	d Schedule O	to respond to any	, auestioi	n in this Part	VI				
					· · · · · · · · · · · · · · · · · · ·	•					Yes	s No
47			ngage in lobbying act		section 501(h) elec	tion in eff	ect during the t	tax				1
48	-	•	e Schedule C, Part I chool as described in		11/41/u\2 If "Voc " o	omploto S	chodulo E			48		X X
49a		-	ake any transfers to			•				49	-	X
b			d organization a sect			.g	,,			49		†
50	Comp	lete this table for	the organization's fiv	ve highest comp	ensated employees	(other th	an officers, dire	ectors, truste	es and key			
	emplo	yees) who each	received more than \$	100,000 of com	pensation from the	organızat	ion If there is i	none, enter	"None "			
		(a) Nama an	d title of each employee		(b) Average hours per week		Reportable pensation		h benefits, s to employee	(e) Estima		
		(a) Name an	utilie of each employee	•	devoted to position		V-2/1099-MISC)	l benefit i	plans, and ompensation	other co	ompens	ation
No	one							T	 .	 		
				· · · · · · · · · · · · · · · · · · ·	 	ļ		···- · · · ·				
			* ,,			 		 				
	··					<u></u>			 	l		
f			employees paid over	•			<u> </u>					
51	\$100,0	lete this table for 000 of compensa	the organization's fivilition from the organiz	re highest comp ation If there is	ensated independe none, enter "None	nt contrac	tors who each	received m	ore than			
			usiness address of eac				(b) Typ	e of service		(c) Com	pensation	on .
No	ne	***************************************		-								
					·							
							· , -					
									ł			
			 		 							
		·										
d			ndependent contract		-	•		·				
52		e organization co eted Schedule A	mplete Schedule A?	Note. All section	on 501(c)(3) organiz	ations mu	st attach a			X Y	\Box	l No.
Linde.			are that I have examine	od this return, incl	uding accompanying s	chedules a	and statements a	and to the her	et of my knowle			No
true,	correct,	and complete Dec	bration of preparer (oth	er than officer) is	pased on all informati	on of which	n preparer has ar	ny knowledge	/ / /	euge and be	ener, it is	,
		Ver	onica Ma	amos	Nuc		/	4-15	-15			
Sigr		Signature of o	,					ate				
Here	•		NICA DELUC	· Ore(Duc		CHAIRMAN	<u> </u>				
		Print/Type preparer's		P	reparer's signature			Date			IN .	
Paid	.	, ,		İ					Check self-er	i if		
_	arer	Firm's name	This tax	return					Firm's EIN			
•	Only	Firm's address	prepared						2 - 114 7			
			non-paid		r				Phone no			
May	the IRS	discuss this ret	urn with the preparer							▶ [X]	Yes	No
										Form 9	90-E	Z (2014

SCHEDULE A (Form 990 or 990-EZ) **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

NEW CANAAN HIGH SCHOOL SCHOLARSHIP FOUNDATION, INC.

Employer Identification number 23 - 7102732

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3) Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-9 listed in your governing support (see other support (see above or IRC section instructions) document? instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2014 NEW CANAAN HIGH SCHOOL SCHOLARSHIP 23-7102732

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support	-					
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	166,111	105,341	107,553	99,220	92,962	571,187
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total Add lines 1 through 3	166,111	105,341	107,553	99,220	92,962	571,187
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount				//		
_	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			=			571,187
	tion B. Total Support ndar year (or fiscal year beginning in) ▶	(=) 2010	(h) 2011	(a) 2012	(4) 2012	(=) 2014	(D Total
	• • • • •	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends,	166,111	105,341	107,553	99,220	92,962	571,187
0	payments received on securities loans, rents, royalties and income from similar sources	969	826	667	352	95	2,909
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)		,				
11	Total support. Add lines 7 through 10						574,096
12	Gross receipts from related activities, etc	(see instructions)				12	68,161
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax yea	ar as a section 501	(c)(3)	_
	organization, check this box and stop her						b
Sec	tion C. Computation of Public Su	apport Percen	tage				· · · · · · · · · · · · · · · · · · ·
14	Public support percentage for 2014 (line 6	, column (f) divided	d by line 11, colum	ın (f))		14	99 49%
15	Public support percentage from 2013 Sche					15	%
16a	33 1/3% support test—2014. If the organ	ization did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, c	heck this	. 🗇
	box and stop here. The organization qual		• •				▶ [X]
b	33 1/3% support test—2013. If the organ				5 is 33 1/3% or m	ore,	
	check this box and stop here. The organiz						▶ [_]
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa	icts-and-circumsta	nces" test. The org	ganization qualifies	as a publicly supp	oorted	▶ □
	organization						
ь	10%-facts-and-circumstances test—201	-					
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization me	eets the facts-and	-circumstances" te	est i ne organizatio	on quaimes as a pu	ibliciy	▶ □
10	supported organization Private foundation. If the organization did	d not check a have	on line 12 160 16	h 17a or 17h ch	ack this hav and co	20	
18	instructions	u not check a box (on line 13, 108, 16	D, 178, 01 170, CN	SON UIIS DOX AND SE		▶ []

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

	If the organization fails to	qualify under the	e tests listed be	elow, please co	mplete Part II)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	166,111	105,341	107,553	99,220	92,962	571,187
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	18,404	8,395	14,453	14,191	12,718	68,161
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	184,515	113,736	122,006	113,411	105,680	639,348
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						639,348
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	184,515	113,736	122,006	113,411	105,680	639,348
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	969	826	667	352	95	2,909
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	505	320	007	332	93	2,303
С	Add lines 10a and 10b	969	826	667	352	95	2,909
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	185,484	114,562	122,673	113,763	105,775	642,257
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, fou	rth, or fifth tax year	as a section 501	(c)(3)	> [
Sec	tion C. Computation of Public Su	pport Percenta	age				
15	Public support percentage for 2014 (line 8,	, column (f) divided	by line 13, column	n (f))		15	99 55%
16	Public support percentage from 2013 Sche					16	99 62 %
<u>Sec</u>	tion D. Computation of Investme	nt Income Perc	entage				
17	Investment income percentage for 2014 (li		-	column (f))		17	%
18	Investment income percentage from 2013					18	<u>%</u>
19a	33 1/3% support tests—2014. If the organization is not more than 33 1/3%, check this bound is a 1/3% support tests—2013. If the organization is a 1/3% support tests—2013. If the organization is a 1/3% support tests—2013.	ox and stop here. T	he organization q	ualifies as a publicl	ly supported organ	nization	▶ <u>X</u>
ь	33 1/3% support tests—2013 If the organ line 18 is not more than 33 1/3%, check the						L
20	Private foundation. If the organization did						

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Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

ect	ion A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		_	
	class or purpose, describe the designation. If historic and continuing relationship, explain			
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	_3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
•	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a	-114-1-11-1	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
_	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
0-	If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		- 1	•
_	In section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which	.	1	
_	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
l0a	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
va	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below	40		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a		
U		40.		
	determine whether the organization had excess business holdings)	10b		

	ule A (Form 990 or 990-EZ) 2014 NEW CANAAN HIGH SCHOOL SCHOLARSHIP 23-71027:	3 <u>2</u>		Page !
Par	t IV Supporting Organizations (continued)			
	Hardina and the second		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		ļ
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	_	V	l Na
'	· · · · · · · · · · · · · · · · · · ·		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		-
-	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sect	supervised, or controlled the supporting organization ion C. Type II Supporting Organizations	2		L
0000	on o. Type if Supporting Organizations		V	Ala.
1	Were a majority of the organization's directors or tructors during the tay year also a majority of the directors		Yes	No
'	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			1
Sect	ion D. All Type III Supporting Organizations	1 1		L
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
·	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	:	
Sect	ion E. Type III Functionally-Integrated Supporting Organizations	<u> </u>		<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	١		·
·	The organization satisfied the Activities Test. Complete line 2 below	,		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruc	tions)		
		,		
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2ь		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			-
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3ь		
	the project of the organization in the legal			

Schedule A (Form 990 or 990-EZ) 2014 NEW CANAAN HIGH SCHOOL SCHO			732 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov			
other Type III non-functionally integrated supporting organizations must complete Section Section A - Adjusted Net Income	is A th	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		(optional)
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or	Ť		
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a — Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)		· · · · · · · · · · · · · · · · · · ·	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6	<u> </u>	
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6_		
7 Check here if the current year is the organization's first as a non-functionally-integrated T	vpe III	supporting organization (s	iee

Schedule A (Form 990 or 990-EZ) 2014

instructions)

	ule A (Form 990 or 990-EZ) 2014 NEW CANAAN HIGH			732 Page 7
_Par) Supporting Organiza	tions (continued)	· · · · · · · · · · · · · · · · · · ·
_Sect	ion D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purpo	ses of supported		
	organizations, in excess of income from activity	· · · · · · · · · · · · · · · · · · ·		<u> </u>
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			<u></u>
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions	· · · · · · · · · · · · · · · · · · ·		
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organ	nization is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			: mmr.r.m.
3	Excess distributions carryover, if any, to 2014			
a				
b				
С				
d		,		
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
نــــــــــــــــــــــــــــــــــــــ	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c			
8	Breakdown of line 7			
а				
b				
С				
d	Excess from 2013			
	Evenes from 2014			***************************************

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 NEW CANAAN HIGH SCHOOL SCHOLARSHIP 23-7102732 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information. (See instructions)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2014

One

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

NEW CANAAN HIGH SCHOOL SCHOLARSHIP

Employer identification number

FOUNDATION, INC.

23-7102732

Form 990-EZ, Part I, Line 10 - Grants/Similar Amts Paid to Individuals

Relationship to Org Class of Activity Date of Gift Desc. of Property

Cash Contrib. Noncash Contrib. Book Value BV Expl. FMV Expl.

FINANCIAL NEED

\$ 112,750 \$

0 S

0

Form 990-EZ, Part I, Line 16 - Other Expenses

Description Amount

Expenses

ADMINISTRATIVE EXPENSES \$ 276

BANK CHARGES \$ 110
FUNDRAISING DRIVE \$ 6,939
Total \$ 7,325

Form 990-EZ, Part III - Primary Exempt Purpose

THE NEW CANAAN HIGH SCHOOL SCHOLARSHIP FOUNDATION, INC.

AWARDS COLLEGE SCHOLARSHIPS TO NEW CANAAN HIGH SCHOOL

GRADUATES BASED ON ACADEMIC ACHIEVEMENT & FINANCIAL NEED.

Form 990-EZ, Part III, Line 31 - All Other Accomplishment COLLEGE SCHOLARSHIPS AWARDED TO NEW CANAAN HIGH SCHOOL GRADUATES BASED ON ACADEMIC ACHIEVEMENT AND FINANCIAL NEED.