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# Form **990-PF**

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. Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation THE PATRICIA M. AND ROBERT H. MARTINSEN 27-6961238 FOUNDATION Number and street (or P O box number if mail is not delivered to street address) B Telephone number 203-743-9434 761 RIDGEBURY ROAD City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here RIDGEFIELD, 06877 Initial return Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 373,806. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome · 图像 2 字形 1 2 2 95,740. N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 17 489 6.489 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) THE RESERVE THE PARTY OF THE PA 8,557 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1 - 1 3 - 1 · 1 · 8,557. 557 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold c Gross profit or (loss) 11 Other income 110,803 15.063 Total, Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees 3,200 0. 0. STMT 2 c Other professional fees 17 Interest 218 0. 3,395 STMT 3 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 6,595 218 expenses Add lines 13 through 23 102,100 102. 100. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 108,695 218 102,100. Add lines 24 and 25

C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

& Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

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2,108

27 Subtract line 26 from line 12:

845

N/A

M. AND ROBERT H. MARTINSF 27-6961238 Form 990-PF (2014) Beginning of year End of year Part II' Balance Sheets column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 186,210 77,750 77,750. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less; allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 49,095 159,663. b Investments - corporate stock STMT 4 c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 235,305. 237,413 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 **Net Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted  $\triangleright [X]$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 235,305 29 Retained earnings, accumulated income, endowment, or other funds 235,305 30 Total net assets or fund balances

### Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	235,305
2	Enter amount from Part I, line 27a	2	2,108.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	237,413.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	237,413

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235,305

237,413

31 Total liabilities and net assets/fund balances

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Part IV Capital Gains a	and Losses for Tax on	Investmen	t Income					
(a) List and descr 2-story brick wa	ibe the kind(s) of property sold (e. rehouse; or common stock, 200 s	.g., real estate, hs. MLC Co.)		(b) F	low acquired - Purchase - Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAINS	DIVIDENDS							
<u>b</u>			<del></del>	ļ				
d				-				
e						<del></del>		<del></del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(0)	st or other basis expense of sale				Gain or (loss) s (f) minus (	
a 8,557.				$\rightarrow$				8,557.
<u>b</u>	<del>-</del>	<del> </del>		-+			<u>-</u>	
<u>c</u>								
e								
Complete only for assets showin	g gain in column (h) and owned by	1		$\Box$	(	Gains (	Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				not less than (from col. (	h))
<u>a</u>		ļ				<del></del>		8,557.
<u>b</u>					·			
<u>c</u>		<del> </del>	···					
e								
2 Capital gain net income or (net cap	If gain, also ent lf (loss), enter -			}	2			8,557.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, 0	s) as defined in sections 1222(5) a							
If (loss), enter -0- in Part I, line 8	. ,		. T		3		N/A	
Part V. Qualification U						come		
(For optional use by domestic private	toundations subject to the section	1 494U(a) tax on	net investment in	icome.	.)			
If section 4940(d)(2) applies, leave th	is part blank.							
Was the foundation liable for the sect If "Yes," the foundation does not quali				lods				Yes X No
	ach column for each year; see the			ntries.		,		· · · · · · · · · · · · · · · · · · ·
(a) Base period years Calendar year (or tax year beginnin	(b) ng in) Adjusted qualifying di		Net value of no	(c) nchari	table-use assets		Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2013		70,800.			269,757			.633162
2012	11	06,587 <u>.</u> 10,500.			147,252 176,345			.723841 .626613
2011	<u></u>	10,300.			<u> 170,34</u> .	<del>,                                    </del>		.020013
2009								
2 Total of line 1, column (d)					· · · · · · · · · · · · · · · · · · ·	2		1.983616
3 Average distribution ratio for the 5 the foundation has been in existen		l on line 2 by 5,	or by the number	of yea	ırs	3		.661205
4 Enter the net value of noncharitable	le-use assets for 2014 from Part X	, line 5				4		290,572.
5 Multiply line 4 by line 3						5_		192,128.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6_		148.
7 Add lines 5 and 6						7		192,276.
8 Enter qualifying distributions from	Part XII, line 4					8		102,100.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, lin	e 1b, and comp	lete that part using	g a 1%	tax rate.			

THE PATRIC M. AND ROBERT H. MARTINSF 27-6961238 FOUNDATION Form 990-PF (2014) Part VI 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 
and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 297. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I. line 27b c 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-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 297. 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: 800 a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 800. 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 503. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 503 Refunded 0. Enter the amount of line 10 to be: Credited to 2015 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х 1a any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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. c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. > \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 Х 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? Х 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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 Х remain in the governing instrument? X 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CT

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Х

8b

10

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

	990-PF (2014) FOUNDATION 27-696	<u> 51238</u>		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► ROBERT H. MARTINSEN Telephone no. ► 203-			
	Located at ► 761 RIDGEBURY ROAD, RIDGEFIELD, CT ZIP+4 ►	<u>)6877</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u>	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the			
	foreign country			L
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	·	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	٠,	٠,	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		٠	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	, , ;	٠.	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	***	* 3	
	for the benefit or use of a disqualified person)?	- (- '	5	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		٤.
	if the foundation agreed to make a grant to or to employ the official for a period after		·	-
	termination of government service, if terminating within 90 days.)		, -,	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	(4)	•	:
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b		-
	Organizations relying on a current notice regarding disaster assistance check here	1	```	,
C	EDID the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	~ ~ ~	A 12	X
_	before the first day of the tax year beginning in 2014?  There are feature to distribute process (control 4042) (does not conty for years the foundation was a private operating foundation.	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	
_	defined in section 4942(j)(3) or 4942(j)(5)):  At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	,		
a	before 2014? Line end of tax year 2014, the the foundation have any undistributed income times of and be, if are xim, for tax year(s) beginning  Yes X No			
	If "Yes," list the years			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	-		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	<del></del> -		
·				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?			
b	of "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
-	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014.)  N/A	3ь	L	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2014?	4b		X
		Form <b>99</b> 0	)-PF	(2014)

THE PATRICIA M. AND ROBE	RT H. MARTINS	SEN "	4	
orm 990-PF (2014) FOUNDATION	Town 4700 May Do I	D	<u>27-69612</u>	38 Page 6
	Form 4720 May Be I	HEirea (contin	ued)	<del></del>
5a During the year did the foundation pay or incur any amount to:	- 40.45/-\\0		es X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			NO LAJ 89	
(2) Influence the outcome of any specific public election (see section 4955); o	is to carry on, directly or mair		es X No	
any voter registration drive?	2		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes			es LAJ NO	1 1
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in Section		es X No	1 1
4945(d)(4)(A)? (see instructions)	or advectional aurages or		ו אונבם ציי	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described		ES LALINU	
section 53.4945 or in a current notice regarding disaster assistance (see instru		ni riegulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		uned		
expenditure responsibility for the grant?		. —	es 🗀 No 🚶	
If "Yes," attach the statement required by Regulations section 53.494		•/ **		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			[-	
a personal benefit contract?	pay promisino on		es 🗶 No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1 1	6b X
If "Yes" to 6b, file Form 8870.			Ţ.	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
Part VIII: Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
ROBERT H. MARTINSEN	TRUSTEE - AS	REQUIRED		
761 RIDGEBURY ROAD				
RIDGEFIELD, CT 06877		0.	0.	0.
	TRUSTEE - AS	REQUIRED		
761 RIDGEBURY ROAD		_		
RIDGEFIELD, CT 06877		0.	0.	0.
				<del> </del>
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
	<u> </u>	<del> </del>		
First author of other ampleyage park over \$50,000		1		0
Total number of other employees paid over \$50,000			Form	990-PF (2014)
			1 0(11)	(2017)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

_	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	120,877.
b	Average of monthly cash balances	1b	174,120.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	294,997.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	<u>.</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	294,997.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,425.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	290,572.
6_	Minimum investment return. Enter 5% of line 5	6	14,529.
P	art XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	14,529.
2a	Tax on investment income for 2014 from Part VI, line 5	ۼۣڮ <u>ڗ</u> ٛؠ	
Ь	income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	297.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,232.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,232.
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	14,232.
P.	art:XIII Qualifying Distributions (see instructions)	<del>*************************************</del>	
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	272	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	102,100.
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:	2	
а		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	102,100.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	102,100.
-	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	•	

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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,	Оограз	rears prior to 2010	2010	2014
line 7				14,232.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
b rotation prior years	,	0.		
3 Excess distributions carryover, if any, to 2014:	,			· · · · · · · · · · · · · · · · · · ·
a From 2009	د			
b From 2010				
c From 2011 107, 477.		<b>.</b>	,	
d From 2012 99, 224.				
e From 2013 160,535.		` .		
f Total of lines 3a through e	367,236.			•
_	301,230.	3	-	
4 Qualifying distributions for 2014 from Part XII, line 4: ►\$102, 100.		N	, ,	,
		•		, , , , , , , , , , , , , , , , , , ,
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		,
years (Election required - see instructions)		0.	<u> </u>	2
c Treated as distributions out of corpus	•			
(Election required - see instructions)	0.	The Age of the Control of the Contro		14 020
d Applied to 2014 distributable amount				14,232.
e Remaining amount distributed out of corpus	87,868.	lin jet	4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4	
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.		3.	0.
must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	455,104.		The fact that the same	<u> </u>
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		; · · · · · · · · · · · · · · · · · · ·	. , .,	0.
7 Amounts treated as distributions out of		,		<del></del>
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				<del></del>
not applied on line 5 or line 7	0.			
				<del></del>
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	455,104.			
	#JJ,104•			<del> </del>
10 Analysis of line 9:				
a Excess from 2010			ļ	
b Excess from 2011 107, 477.	-			
c Excess from 2012 99, 224.				
d Excess from 2013 160,535.				
e Excess from 2014 87,868.		<u> </u>		Farm 000 DE (0014)

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2014)

27-6961238 Page 11 Form 990-PF (2014) FOUNDATION

Part XV Supplementary Information (continued) FOUNDATION

3 Grants and Contributions Paid During the		Payment		<del> </del>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	oonii ibution	
a Paid during the year				
ALZHEIMER'S DISEASE RESEARCH	NONE	PUBLIC	MEDICAL PURPOSES	
22512 GATEWAY CENTER DRIVE				
CLARKSBURG, MD 20871				100
AMERICAN INSTITUTE FOR CANCER	NONE	PUBLIC	MEDICAL PURPOSES	
1759 R STREET NW				
WASHINGTON DC 20009				200
COLGATE UNIVERSITY	NONE	PUBLIC	EDUCATIONAL PURPOSES	
13 OAK DR				
HAMILTON NY 13346				10,000
CONNECTICUT PUBLIC BROADCASTING	NONE	PUBLIC	SOCIAL PURPOSES	
NETWORK	NONE	FOBBIC	BOCIAL FORFOSES	
1049 ASYLUM AVE				
HARTFORD CT 06105				100
FOUNDERS HALL	NONE	PUBLIC	SOCIAL PURPOSES	
193 DANBURY RD				
RIDGEFIELD CT 06877  Total SEE CO	ONTINUATION SHE	 የጥ(ያነ	▶ 3a	100 102 100
b Approved for future payment	MITINOALION DILL			102,100
NONE				
		-		
Tabel	<u> </u>		<b>▶</b> 3b	
Total				m <b>990-PF</b> (201

423611 11-24-14

Form **990-PF** (2014)

Part XVI-A Analysis of Income-Producing Activities

Tata area area unless otherwise industrial	Unrelated	business income	Excluded	d by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	711100111	
a NONE	- <del> </del>		<del>├</del> -		
b	-	<u> </u>	<del>  -</del>		
<u> </u>			┼┼		
d			<del>                                     </del>		
e	-				
g Fees and contracts from government agencies	-	<del></del>			
2 Membership dues and assessments	<del>                                     </del>	<del> </del>	<del>                                     </del>		
3 Interest on savings and temporary cash			<del>                                     </del>		
investments			14	17.	
4 Dividends and interest from securities			14	6,489.	
5 Net rental income or (loss) from real estate:				7 - 0, 405.	• •
a Debt-financed property					
b Not debt-financed property					· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other				-	
than inventory			14	8,557.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a NONE			ļ ļ		
b					
C	4 4				
d		<u>-</u> .			
e	_	-			
2 Subtotal. Add columns (b), (d), and (e)		0.	5,	15,063.	0.
3 Total Add line 12, columns (b), (d), and (e)				13	15,063.
See worksheet in line 13 instructions to verify calculations.)					<del></del>
Part XVI-B Relationship of Activities	to the Accor	nplishment of Ex	empt F	Purposes	
Line No. Explain below how each activity for which inc			contribute	ed importantly to the accomp	olishment of
the foundation's exempt purposes (other than	1 by providing lund	is for such purposes).		· · · · · · · · · · · · · · · · · · ·	
N/A					
	<del></del>	<del></del>			<del></del>
				<del></del>	
			_		
		<del> </del>	<u>-</u>	<u>-</u>	<del> </del>
					<del></del>
	<del></del>			<del></del>	
		· ·			· · · · · · · · · · · · · · · · · · ·
			•		·
-					<del></del>
23621 1-24-14					Form <b>990-PF</b> (2014)

12

THE PATRICIA M. AND ROBERT H. MARTINSEN Form 990-PF (2014) FOUNDATION 27-6961238 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described 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: (1) Cash 1a(1) (2) Other assets 1a(2) **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. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

Sign Here	and be	elief fit is true correct, and fifting the pectar after on one			May the IRS discuss this return with the preparer shown below (see instr.)?  X Yes N
Paid			 	self- employed	P00575756
Prepa Use C		print/Type preparer's name	3179237		
			Phone no. 914	-846-0100	
					- 000 DE

#### Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

### **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization

THE PATRICIA M. AND ROBERT H. MARTINSEN FOUNDATION

Employer identification number

27-6961238

Organization type (check one)					
Filers of:		ection:			
Form 990 or	990-EZ	501(c)( ) (enter number) organization	ı		
		4947(a)(1) nonexempt charitable trust no	nt treated as a private foundation		
		527 political organization			
Form 990-Pf	Ξ	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust tre	eated as a private foundation		
		501(c)(3) taxable private foundation			
•	a section 501(c)(	overed by the <b>General Rule</b> or a <b>Special Rul</b> (8), or (10) organization can check boxes for		ee instructions	
X For	r an organization	ing Form 990, 990-EZ, or 990-PF that receive e contributor. Complete Parts I and II See in			
Special Rul	es				
sec any	ctions 509(a)(1) a y one contributor	escribed in section 501(c)(3) filing Form 990 of 1 170(b)(1)(A)(vi), that checked Schedule A (Fo during the year, total contributions of the greated 1 Complete Parts I and II	orm 990 or 990-EZ), Part II, line 13, 16a, or 16	6b, and that received from	
yea	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III.				
yea is c pui	ar, contributions checked, enter h rpose. Do not co	escribed in section 501(c)(7), (8), or (10) filing clusively for religious, charitable, etc., purpose the total contributions that were received displete any of the parts unless the <b>General Rul</b> tc., contributions totaling \$5,000 or more dur	es, but no such contributions totaled more the iring the year for an <i>exclusively</i> religious, cha e applies to this organization because it rece	nan \$1,000. If this box ritable, etc ,	
but it must	answer "No" on	is not covered by the General Rule and/or th rt IV, line 2, of its Form 990, or check the box e filing requirements of Schedule B (Form 990	on line H of its Form 990-EZ or on its Form 9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

THE PATRICIA M. AND ROBERT H. MARTINSEN

Employer identification number

FOUNDATION

27-6961238

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT H. MARTINSEN  761 RIDGEBURY ROAD  RIDGEFIELD, CT 06877	\$95,740.	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PATRICIA M. AND ROBERT H. MARTINSEN FOUNDATION

27-6961238

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

Part II	Noncash Property (see instructions). Use duplicate copies of Part	In it additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	11,105 SHS DFA INTL SMALL CO PORT INSTL:DFIX	_	
		\$ 200,112.	12/03/14
(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
	-14	\$\$	90, 990-EZ, or 990-PF) (20

	(Form 990, 990-EZ, or 990-PF) (201		Page				
Name of orga		Employer identification number					
	TRICIA M. AND ROBERT H	. MARTINSEN					
FOUNDA	TION		27-6961238				
Part III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete of	butions to organizations described in	n section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious	. charitable, etc., contributions of \$1,000 or le	ss for the year (Enterthisinfo once)				
	Use duplicate copies of Part III if additional	l space is needed.					
(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, an	Relationship of transferor to transferee					
		· · · · · · · · · · · · · · · · · · ·					
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
j							
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
<u> </u>							
	(e) Transfer of gift						
	Tourist and a series and decree and	Deletionality of the set					
<del> </del>	Transferee's name, address, an	Relationship of transferor to transferee					
(a) No.	(1) B	, , , , , , , , , , , , , , , , , , , ,	/100				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_			_				
	(e) Transfer of gift						
	Tunnakanasla ana na addana	Dalahanahin at hara-taran ta tar					
<u> </u>	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
		<del></del>					
	<del></del>						

THE PATRICIA M. AND ROBERT H. MARTINSEN

27-6961238

	1			
3 Grants and Contributions Paid During the Y	<del></del>	<del></del>	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BOYS & GIRLS CLUB OF RIDEGEFIELD	NONE	PUBLIC	SOCIAL PURPOSES	
41 GOVERNOR STREET				
RIDGEFIELD CT 06877			<del></del>	100
JUDICIAL WATCH	NONE	PUBLIC	SOCIAL PURPOSES	
425 THIRD STREET, SW, SUITE 800				
WASHINGTON, DC 20024				100
NYU LANGONE MEDICAL CENTER	NONE	PUBLIC	MEDICAL PURPOSES	
550 FIRST AVENUE NEW YORK, NY 10016				81,000
PHI GAMMA DELTA EDUCATIONAL	NONE	PUBLIC	SOCIAL PURPOSES	
FOUNDATION PO BOX 4599				
LEXINGTON KY 40544				100
<del></del>			(77.73.1 Pressore	
RIDGEFIELD VISITING NURSE ASSOCIATION 90 EAST RIDGE	NONE	PUBLIC	MEDICAL PURPOSES	
RIDGEFIELD CT 06877				100
MDT COLDWA WANNE COCTOMY	NONE	PUBLIC	SOCIAL PURPOSES	
TRI COUNTY HUMANE SOCIETY 21287 BOCA RIO ROAD	NONE	POBLIC	SOCIAL PURPOSES	
BOCA RATON FL 33433				10,000
US OLYMPIC COMMITTEE	NONE	PUBLIC	SOCIAL PURPOSES	
1 OLYMPIC COMMITTEE	NONE	FOBLIC	BOCIAL FORFOSES	
COLORADO SPRINGS, CO 80909		<u> </u>		100
WOUNDED WARRIOR PROJECT INC.	NONE	PUBLIC	SOCIAL PURPOSES	
4899 BELFORT ROAD, SUITE 300				
JACKSONVILLE, FL 32256	<del> </del>	<del> </del>		100
			+	
	<u> </u>		1	
Total from continuation sheets				91,600

FORM 990-PF DIVIDENT	S AND INTER	EST FROM SECUR	ITIES S	TATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
DIVIDEND INCOME 15,046	8,55	6,489.	6,489.	<del></del>
TO PART I, LINE 4 15,046	8,55	7. 6,489.	6,489.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	3,200.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	3,200.	0.		0.
FORM 990-PF	TAX	ES	S	
	<del></del>			TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION  FOREIGN TAXES FEDERAL TAX PAID	EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE
FOREIGN TAXES	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES 0.
FOREIGN TAXES FEDERAL TAX PAID	EXPENSES PER BOOKS  218. 3,177.	NET INVEST-MENT INCOME  218. 0. 218.	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0. 0.
FOREIGN TAXES FEDERAL TAX PAID  TO FORM 990-PF, PG 1, LN 18	EXPENSES PER BOOKS 218. 3,177. 3,395.	NET INVEST-MENT INCOME  218. 0. 218.	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0. 0.
FOREIGN TAXES FEDERAL TAX PAID  TO FORM 990-PF, PG 1, LN 18  FORM 990-PF	EXPENSES PER BOOKS  218. 3,177.  3,395.  CORPORAT	NET INVEST-MENT INCOME  218. 0. 218.  E STOCK	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0. 0.  TATEMENT 4  AIR MARKET

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
ROBERT H. MARTINSEN	761 RIDGEBURY ROAD RIDGEFIELD, CT 06877		
PATRICIA M. MARTINSEN	761 RIDGEBURY ROAD RIDGEFIELD, CT 06877		
			<del></del>
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	6

NAME OF MANAGER

ROBERT H. MARTINSEN PATRICIA M. MARTINSEN