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Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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 calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation Magaro Family Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite 46-1558048 B Telephone number (see instructions) 1248 Oenoke Ridge City or town State ZIP code 203-972-5856 **New Canaan** CT 06840 Foreign country name Foreign postal code Foreign province/state/county C If exemption application is pending, check here G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, Address change ■ Name change check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation E. If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here 4,120,124 (Part I, column (d) must be on cash basis.) line 16) ► \$ Part Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily expenses per income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 178,000 1 2 Check ▶☐ if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold ь Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . 12 Total. Add lines 1 through 11 . . . n 178,000 13 Compensation of officers, directors, trustees, etc. 6,696 Operating and Administrative Expenses 14 Other employee salaries and wages . 15 Pension plans, employee benefits . 16a Legal fees (attach schedule) . Accounting fees (attach schedule) . . 3 Other professional fees (attach schedule) 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy . . . 21 Travel, conferences, and meetings 22 Printing and publications . . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 6.696 25 Contributions, gifts, grants paid 171,250 171,250 26 Total expenses and disbursements. Add lines 24 and 25 171,250 177.946 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements . **Net investment income** (if negative, enter -0-) . 0 Adjusted net income (if negative, enter -0-) .

Form 990-PF (2014)

Pa	art-II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	year
		should be for end-or-year amounts only (See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value
	1	Cash—non-interest-bearing	745		799	799
	2	Savings and temporary cash investments		·_ 		
	3	Accounts receivable				ا لــــــــــــــــــــــــــــــــــــ
	ŀ	Less allowance for doubtful accounts				
	4	Pledges receivable	1)
		Less. allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ą	10a	Investments—U S. and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)		_	Ţ	
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	2,403,122	4,119	.325	4,119,325
	14	Land, buildings, and equipment basis		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7.2.2	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	1	Less accumulated depreciation (attach schedule)				
	15	Other assets (describe)				-
	16	Total assets (to be completed by all filers—see the				
		ınstructions. Also, see page 1, ıtem I)	2,403,867	4,120	124	4,120,124
	17	Accounts payable and accrued expenses			, , ,	1,125,121
' A	18	Grants payable				
Liabilities	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			\neg	
ap	21	Mortgages and other notes payable (attach schedule)			\neg	
	22	Other liabilities (describe				* ,
	23	Total liabilities (add lines 17 through 22)	0			1
		Foundations that follow SFAS 117, check here	 		─~	•
Balances	1	and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted	2,403,867	4,120	124	
<u>a</u>	25	Temporanly restricted	2,400,001	7,120	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	26	Permanently restricted				
nd		Foundations that do not follow SFAS 117, check here				
Fur		and complete lines 27 through 31.	1			
Net Assets or	27	Capital stock, trust principal, or current funds				
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds				j
As	30	Total net assets or fund balances (see instructions)				•
e	31	Total liabilities and net assets/fund balances (see	2,403,007	7,120	/, 124	
Z	1	instructions)	2,403,867	4 120),124	•
P	art III	Analysis of Changes in Net Assets or Fund Balances		4,120	,, , <u>,</u> , , , , 4	
		net assets or fund balances at beginning of year—Part II, column (a)) line 30 (must sarso)	with		
		of-year figure reported on prior year's return)	, mie oo (must agree i	rvid (1	2,403,867
2		and a supply from Book I. Nov. 07	• • • •	•	2	
3			e in Market Value of O	ther Investm	3	1 716 202
4		Page 4. 0 and 0			4	1,716,203
5		eases not included in line 2 (itemize)			5	4,120,124
-		net assets or fund balances at end of year (line 4 minus line 5)—Par)	6	A 120 124
		r al	, ooranni (b), iine 30	<u>,</u>	U	4,120,124

Partiv C	(a) List and describe th	LOSSES FOR TAX ON INVESTI le kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a				D Bonation			
b					•		
С							
d							
е							
(e) Gros	s sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g)
а							
b							
c							<u></u>
<u>d</u>	- 						·
<u>e</u>							
Compl	ete only for assets sh	owing gain in column (h) and owned	by the foundation	on 12/31/69		(I) Gains (Co	(h) gain minus
(ı) F M V	as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any			t less than -0-) or rom col (h))
a							
b							
C							
d							· - ····
<u>e</u>			<u> </u>				
2 Capital	gain net income or	(net canital inset)	also enter in Pa), enter -0- in Pai	?	2		0
		or (loss) as defined in sections 1					
lf gaın,	also enter in Part I,	line 8, column (c) (see instructio	ns) If (loss), ent	er -0- in 🚶			
Part I, I	ine 8	<u> </u>	<u></u>	<u> </u>	3		0
		section 4942 tax on the distributa qualify under section 4940(e). Do			e perio	od?	☐ Yes 🗓 No
	···	unt in each column for each year	 		ng anv	entries.	 -
	(a)	(b)	1	(c)	1		(d)
	e period years (or tax year beginning in)	Adjusted qualifying distribution	s Net value	of noncharitable-use as	sets		tribution ratio divided by col. (c))
- Calcilaar year	2013		0,250	1.00	5,669	(00: (0)	0 169290
	2012		3,200		1		0.000000
	2011						0 000000
	2010						0.000000
	2009						0.000000
		-					
2 Total o	f line 1, column (d)				\	2	0.169290
3 Averag	e distribution ratio f	or the 5-year base period—divide	e the total on line	e 2 by 5, or by the			
numbe	r of years the found	lation has been in existence if les	s than 5 years		.	3	0.169290
4 Enter t	he net value of none	charitable-use assets for 2014 fro	om Part X, line 5			4	3,090,209
5 Multiply	y line 4 by line 3					5	523,141
6 Enter 1	% of net investmen	it income (1% of Part I, line 27b)				6	
7 Add lin	es 5 and 6					7	523,141
		ns from Part XII, line 4				8	171,250
If line 8		ter than line 7, check the box in F		and complete that	part us		

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b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$\\$ (2) On foundation managers \$\\$\$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$\\$\$ 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 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a Did the foundation, termination, dissolution, or substantial contraction during the year? 4b 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 state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 To be the salese to which the foundation reports or with which it is registered (see instructions) Figure 1 the activation of the activities and corporation of the activities. 1 to 1 the activities. 1 to 2 the activities. 1 to 3 the activities. 1	Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ns)				
c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tau that section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 Subtitle A (notione) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) Credits/Payments: 2 Old estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations—Lax withheld at source Tax paid with application for extension of fine to file (Form 8888) Each trust of the section of the section 4947(a)(1) trusts and taxable toundations only. Others enter -0-) Each trust of the section of the section 4947(a)(1) trusts and taxable toundations only. Others enter -0-) Crats paid with application for extension of time to file (Form 8888) Each trust of the section of the se		Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)					
c All other domastic 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 3 0 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment incomes. Subtract line 4 from line 3. 17 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3. 17 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3. 17 zero or less, enter -0- 5 Tax based on investment incomes. Subtract line 4 from line 3. 17 zero or less, enter -0- 5 Tax based with application for extension of time to file (Form 8868) 6 C 6 Backup withholding erroeously withheld 7 Total credits and payments. Add lines 6 a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here 9 Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owad 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owad 11 Ciniter he amount of line 10 to be: Credited to 2015 estimated tax. 12 Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Dut it spend more than 5 100 duning the year (either directly or indirectly) for political purposes (see instructions for the definition)? 15 If the answer is "Yes" to a or 1b, statch a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 16 Did the foundation New Section 508(e) (relating to expenditures (section 4955) imposed during the year? 16 Enter the amount (if any) of tax on political expenditures (section	b						
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Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					$\overline{}$		
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	þ	· · ·			<u> </u> -	 	
or 4942(j)(5) for calendar 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				_8b	 ×	₩-	
"Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9				 	·	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		=		۱ _			
140 1	4.5		•	-	\vdash	X	
	10	and a difference	<u> </u>	10		X	

▶ 20 , 20 , 20 , 20

foundation had excess business holdings in 2014.)

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

If "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

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

. . .

N/A

Х

3b

4a

4b

Yes X No

(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

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

<u></u>	Form 990-PF (2014
Total. Add lines 1 through 3	>
3	
All other program-related investments. See instructions	
4	
2	
•	
1	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Part IX-B Summary of Program-Related Investments (see instructions)	
4	
1	
•	
3	
2	1, 7,20
turtner their own exempt activities and programs.	 171,25
1 Chantable Giving - The foundation makes charitable donations to public charities to help these organizations further their own exempt activities and programs.	
organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	Expenses
Part IX-A Summary of Direct Charitable Activities	
	-
otal number of others receiving over \$50,000 for professional services	•
	1
	
IONE	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "l	

Part	, 	n founda	tions,
1	see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		 -
•	purposes	1.72	
а	Average monthly fair market value of securities	1-1-1	2 127 072
b	Average of monthly cash balances	1a 1b	3,127,973
c	Fair market value of all other assets (see instructions)	1c	9,295
d	Total (add lines 1a, b, and c)	1d	2 427 260
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	3,137,268
•	4 o / otto ob indetector of a contract of a		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,137,268
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see	1	3,137,200
•	instructions)	4	47,059
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,090,209
6	Minimum investment return. Enter 5% of line 5	6	154,510
Part			134,310
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	11	154,510
2a	Tax on investment income for 2014 from Part VI, line 5		134,310
ъ	Income tax for 2014 (This does not include the tax from Part VI)	- ;;	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	154,510
4	Recoveries of amounts treated as qualifying distributions	4	104,010
5	Add lines 3 and 4	5	154,510
6	Deduction from distributable amount (see instructions)	6	101,010
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	154,510
			104,010
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	171,250
b	Program-related investments—total from Part IX-B	1b	,200
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	,	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	171,250
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	171,250
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe		
	qualifies for the section 4940(e) reduction of tax in those years		

1 Distributable amount for 2014 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2014. a Enter amount for 2013 only	
2 Undistributed income, if any, as of the end of 2014. a Enter amount for 2013 only	
a Enter amount for 2013 only	
b Total for prior years. 20, 20	
3 Excess distributions carryover, if any, to 2014.	
a From 2009	
b From 2010	
c From 2011	
d From 2012	
e From 2013	
f Total of lines 3a through e 0	1
4 Qualifying distributions for 2014 from Part XII,	
	1
tine 4. ► \$ 171,250	
a Applied to 2013, but not more than line 2a	
b Applied to undistributed income of prior years	ŀ
(Election required—see instructions)	
c Treated as distributions out of corpus (Election	Ì
required—see instructions)	
d Applied to 2014 distributable amount .	<u> 154,510</u>
e Remaining amount distributed out of corpus 16,740	1
5 Excess distributions carryover applied to 2014	
(If an amount appears in column (d), the same	
amount must be shown in column (a))	
6 Enter the net total of each column as	
indicated below:	
	ļ
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	
b Pnor years' undistributed income Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed	-
income for which a notice of deficiency has	į
been issued, or on which the section 4942(a)	Ĭ
tax has been previously assessed	
d Subtract line 6c from line 6b Taxable	
amount—see instructions	
e Undistributed income for 2013. Subtract line	
4a from line 2a Taxable amount—see	
instructions	
f Undistributed income for 2014 Subtract lines	
4d and 5 from line 1. This amount must be	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0
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)	
8 Excess distributions carryover from 2009 not	
applied on line 5 or line 7 (see instructions) .	
9 Excess distributions carryover to 2015.	
Subtract lines 7 and 8 from line 6a 16,740	
10 Analysis of line 9	
a Excess from 2010	
b Excess from 2011	
c Excess from 2012	
. 5	
	0-PF (2014)

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

c Any submission deadlines.

factors.

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Ye

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
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	Contribution				
a Paid during the year							
Rye Country Day School	None	PC		250			
3 Grandview Ave							
Rye, NY 10580		1					
Harvard University	None	PC		125,000			
Harvard University							
Cambridge, MA 02138			-				
Yale University	None	PC		10,000			
Yale University							
New Haven, CT 06520							
The Children's School	None	PC		5,000			
118 Scofield Road			l				
Stamford, CT 06903							
Kukio Community Fund	None	PC		2,500			
827 Fort Street Mall							
Honolulu, HI 96813							
Town School for Boys	None	PC		2,500			
2750 Jackson Street							
San Francisco, CA 94115							
City Ballet Foundation	None	PC		1,000			
32 Otis Street							
San Francisco, CA 94103							
Proof School	None	PC		15,000			
555 Post Street							
San Francisco, CA 94102							
Tipping Point	None	PC		10,000			
220 Montgomery Street Ste 850							
San Francisco, CA 94104			!				
			1				
		1					
Total	<u> </u>		> 3a	171 250			
b Approved for future payment	i : : : :	· ·	► 3a	171,250			
b Approved for fatare payment							
			1				
		1					
		1					
		}					
	1	l					
Total							

	VEA . Analysis of Income-Producing Adross amounts unless otherwise indicated		CIRCOS INCOMO	Evaluded by seet	top 512 512 or 514	<u> </u>
_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
	rogram service revenue					(occ mendencine)
a						
b					<u> </u>	
C		-	·			
d						
e				<u></u>		
T						
g	Fees and contracts from government agencies			 		
	embership dues and assessments	· -	•	-		
	terest on savings and temporary cash investments .					
	vidends and interest from securities	<u> </u>	, ,		, A + May	1.01 21 .
	et rental income or (loss) from real estate	-1 ,	(v)		Sant with	A 5
a	Debt-financed property			ļ		
	Not debt-financed property					
	et rental income or (loss) from personal property	<u> </u>				
	ther investment income					
	ain or (loss) from sales of assets other than inventory	<u> </u>				
	et income or (loss) from special events .			ļ		
	ross profit or (loss) from sales of inventory .					
11 0	ther revenue a					
b				<u></u>		
С						
d						
е						
			۱ .			1 .
	ubtotal Add columns (b), (d), and (e) .	<u>'</u>	0	,	0	<u> </u>
13 To	otal. Add line 12, columns (b), (d), and (e)				13	<u> </u>
13 To (See w	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation	s.)				<u> </u>
13 To (See w	otal. Add line 12, columns (b), (d), and (e)	s.)				<u> </u>
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part X Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(
13 To See wo Part S Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the Activity for which income	s.) Accomplishm ne is reported in c	ent of Exemp	t Purposes	13	(

	•	Exempt Org	ganizations				• • • • • • • • • • • • • • • • • • • •			
1	Did	the organization d	lirectly or indirectly eng	gage in any of the following w	ith any othe	er organizati	ion describ	ed	Yes	s No
	ın s	ection 501(c) of the	e Code (other than se	ction 501(c)(3) organizations	or in section	n 527, relat	ting to politi	ıcal		
	orga	anizations?								
а	Trai	nsfers from the rep	porting foundation to a	noncharitable exempt organ	zation of:					
	(1)	Cash						. 1a(1)	X
	(2)	Other assets						1a(2)	X
		er transactions:								
	(1) Sales of assets to a noncharitable exempt organization							1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization							. 1b(2)	X
	(3)	Rental of facilities,	, equipment, or other a	assets				. 1b(3)	X
	(4)	Reimbursement ar	rrangements					1b(4)	_ X_
		Loans or loan gua						<u>1b(</u>	5)	X
				or fundraising solicitations				1b(6)	X
				, other assets, or paid emplo						X
d	If the	e answer to any of t	the above is "Yes," com	plete the following schedule. Co	olumn (b) sho	ould always s	show the fai	r market		
	valu	e of the goods, other	er assets, or services give	ven by the reporting foundation	If the found	ation receive	ed less than	fair market		
			T	t, show in column (d) the value	of the good:	s, other asse	ts, or servic	es received.		
(a) Line	no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Descr	ption of transfe	ers, transaction	ns, and sharing a	rangem	ents
	_	····	-							
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	\dashv									
2a	le th	ne foundation direc	atly or indirectly affiliate	ed with, or related to, one or	more tay ay	omat araaa	izatione			
-4	des	cribed in section 5	601(c) of the Code (oth	er than section 501(c)(3)) or	in section 5	27?	izations	. 🔲 Yes		No
			following schedule						·	
		(a) Name of organ		(b) Type of organization	T		(c) Description	n of relationship		
		<u>·</u>					.,			
		*****			-					
									•	
							-			
-	Und	er penalties of perjury, I dec	clare that I have examined this retu	um, including accompanying schedules and	statements, and to	the best of my kn	nowledge and bel	ief, it is true,		
Sign	com	ect, and complete Declarati	property other than taxpaye	er) is based on all information of which prepa	rer has any knowl	edge		May the IRS disc	iss this re	tum
Here	🕨	Cle 1	16/20	ecrebe "/14/1/ Se	cretary			with the preparer		
	Sı	gnature of officer or trus	stee	Date Title		-		(see instructions)	'LXIYe	s No
Do: 4		Print/Type preparer	's name	Preparer's signature		Date	Check	k 🗍 if PTIN		
Paid		Greg McRay		Greg McRay		11/13/20			28109	3
Prepa		Eirm'o nomo	Foundation Group, Ir				Firm's EIN ▶			
Use (וחכ	Firm's address		Pike, Ste 610, Nashville, TN 3	7217		Phone no	(615) 361-		
	_									

Schedule B

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

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Magaro Family Foundation	ı, In <u>c</u>		46-1558048
Organization type (check	one)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1	i) nonexempt charitable trust not treated as a priv	vate foundation
	527 politic	cal organization	
Form 990-PF	X 501(c)(3)	exempt private foundation	
	4947(a)(1	1) nonexempt charitable trust treated as a private	foundation
	501(c)(3)	taxable private foundation	
	· ·	eneral Rule or a Special Rule. anization can check boxes for both the General R	ule and a Special Rule See
General Rule			
	y or property) from any	0-EZ, or 990-PF that received, during the year, co by one contributor. Complete Parts I and II. See in	
Special Rules			
regulations under 13, 16a, or 16b, a	sections 509(a)(1) an nd that received from	on 501(c)(3) filing Form 990 or 990-EZ that met thend 170(b)(1)(A)(vı), that checked Schedule A (For in any one contributor, during the year, total contrib Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	rm 990 or 990-EZ), Part II, line butions of the greater of (1)
contributor, during	the year, total contrib	on 501(c)(7), (8), or (10) filing Form 990 or 990-E2 butions of more than \$1,000 exclusively for religion the prevention of cruelty to children or animals	ous, charitable, scientific,
contributor, during contributions total during the year fo General Rule app	g the year, contribution led more than \$1,000. r an exclusively religion plies to this organization	on 501(c)(7), (8), or (10) filing Form 990 or 990-E2 ons exclusively for religious, charitable, etc., purpo . If this box is checked, enter here the total contri ous, charitable, etc., purpose Do not complete ai ion because it received nonexclusively religious, or	oses, but no such butions that were received ny of the parts unless the chantable, etc., contributions
		y the General Rule and/or the Special Rules does	

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

Name of organization

Magaro Family Foundation, Inc

Part L Contributors (see instructions) Use duplicate copies of Part Lif additional space is needed

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is r	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Alex & Diviya Magaro 1248 Oenoke Ridge New Canaan CT 06840 Foreign State or Province Foreign Country	\$178,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organizationEmployer identification numberMagaro Family Foundation, Inc46-1558048

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

	rganization amily Foundation, Inc		Employer identification number			
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.)					
	Use duplicate copies of Part III if additional spa	ace 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, and ZIP		Relationship of transferor to transferee			
(a) No. from	For Prov Country (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
	(e) Transfer of gift					
	Transferee's name, address, and ZIP		onship of transferor to transferee			
(a) No.	For Prov Country					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	(e) Fransfer of giπ Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	Transferos S name, adaress, and En		onship of transferor to transferee			
	For Prov Country					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, and ZIP	+ 4 Relati	Relationship of transferor to transferee			
	For Dray					

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

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				2,403,122	4,119,325	4,119,325
			Basis of	Book Value	Book Value	FMV
	Asset De	sset Description	Vafuation	Beg of Year	End of Year	End of Year
~	Limited Partnership - Medallion Capital Investi FMV	Medallion Capital Investr	FMV	2,403,122	4,119,325	4,119,325

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

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Magaro Family Foundation, Inc

Name Check "X" Expense Street City State Zp Code Foreign Country Title Per Week Compensation Benefits Account Expense Street	т-	_		10	10	
Name Check "X" Street City State Zip Code Foreign Country Title Per Week Compensation President & 0.50 0.00 Avg Hrs Compensation President & 0.50 0.00 Benefits 1248 Denoke Ridge New Canaan CT 06840 06840 0.00 Director 0.50 0.00 0.00	Expense	Account				
Name Check "X" if Business Street City State Zip Code Foreign Country Pres 5 1248 Oenoke Ridge New Canaan CT 06840 Din 1248 Oenoke Ridge New Canaan CT 06840 Din 161 Cherry Street New Canaan CT 06840 Sec			0	0	0	
Name Check "X" if Business Street City State Zip Code Foreign Country Pres 5 1248 Oenoke Ridge New Canaan CT 06840 Din 1248 Oenoke Ridge New Canaan CT 06840 Din 161 Cherry Street New Canaan CT 06840 Sec		Compensation	0	0	969'9	
Name Check "X" if Business Street City State Zip Code Foreign Country Pres 5 1248 Oenoke Ridge New Canaan CT 06840 Din 1248 Oenoke Ridge New Canaan CT 06840 Din 161 Cherry Street New Canaan CT 06840 Sec	Ava Hrs	Per Week	0 20	0 20	0.50	
Name Check "X" if Business Street City State Zip Code 5 1248 Oenoke Ridge New Canaan CT 06840 1248 Oenoke Ridge New Canaan CT 06840 161 Cherry Street New Canaan CT 06840		Title	President & Treasurer	Director	Secretary	
Name of Business Street City 1248 Oenoke Ridge New Canaan 1248 Oenoke Ridge New Canaan 161 Cherry Street New Canaan		Foreign Country				
Name of Business Street City 1248 Oenoke Ridge New Canaan 1248 Oenoke Ridge New Canaan 161 Cherry Street New Canaan		Zip Code	06840	06840	06840	
Name of Business Street City 1248 Oenoke Ridge New Canaan 1248 Oenoke Ridge New Canaan 161 Cherry Street New Canaan		State	CI	•	1	
Name if Business 1248 Oenoke F				1	New Canaan	
Name if Business				1248 Oenoke Ridge	161 Cheтy Street	
	Check "X"	if Business				
		Name	Diviya Magaro	Alex Magaro	At P Trebing	3