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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

▶ 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

OMB No 1545-0052

2015
Open to Public Inspection

101	Caic	ildar year 2015 or tax year beginning		, and ei	naing		
Name of foundation						A Employer identification	number
r	ΉE	LAWRENCE A. BOSSIDY FO	06-1188527				
		and street (or PO box number if mail is not delivered to street			Room/suite	B Telephone number	
4	52	WEST MOUNTAIN ROAD				2034319832	
Cit	y or	town, state or province, country, and ZIP or foreign p	oostal code			C If exemption application is p	
R	ID	GEFIELD, CT 06877				C w shamphon approcash is p	
G	Chec	k all that apply: Initial return	Initial return of a f	ormer public c	harity	D 1. Foreign organizations	s, check here
		Final return	Amended return	,			
		Address change	Name change			Foreign organizations me check here and attach co	eting the 85% test,
H (Chec	k type of organization: X Section 501(c)(3) e	xempt private foundation			E If private foundation sta	·
] s	ection 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation		under section 507(b)(1)	
1 F	air m	arket value of all assets at end of year J Account	ing method X Cash	Accr	ual	F If the foundation is in a	
(fi	rom		ther (specify)			under section 507(b)(1)	
	- \$	2,636,524. (Part I, coll.	ımn (d) must be on cash i	basis)			
Pa	îrt	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	5,206.	义。1.6条件		TO SECURITY TO THE SECOND SECO	年 200 0年
	2	Check If the foundation is not required to attach Sch. 8		T		NOTE AND T	
	3	Interest on savings and temporary cash investments	37.		37.		STATEMENT: 2
	4	Dividends and interest from securities	65,678.	6.	5,678.		STATEMENT 3.
	5 8	Gross rents					相關
	t	Net rental income or (loss)	Mario L. M.	NE** 1-	- 41 - 50	a SIMMO	granter :
a	6a	Net gain or (floss) from sale of assets not on line 10 Gross sales price for all	597,710.			多,2000年4 大型	STATEMENT 1
2	t	assets on line 6a	25. Y. W. W. W.		% %	R DE MEA	ACTAL WILLS
Revenue	7	Capital gain net income (from Part IV, line 2)			7,290.		
4	8	Net short-term capital gain	2 / W.A	47 E 481.	í. ·.	APP a a	is a mate 101
	9	Income modifications Gross sales less returns	× × × × × × × × × × × × × × × × × × ×	•• 5 '	<u> </u>	ALL AS	CURE-PH
		and allowances			* :	I I I I I I I I I I I I I I I I I I I	2 4 6
		Less Cost of goods sold	> `````` .	<u> </u>		Navia Octobria	Market Comment
	ľ	Gross profit or (loss)	0 444	<u> </u>		•	
	11	Other income	8,444.	1 25	0.	0.	STATEMENT 4
	12	Total. Add lines 1 through 11	677,075.	1,25.	3,005.	0.	
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	2,706.	<u> </u>	0.	0.	0.
	14	Pension plans, employee benefits	2,700.		· ·		<u>U•</u>
ģ		Legal fees	·	<u> </u>		-	
nse	10a	Accounting fees STMT 5	2,500.		0.	0.	0.
Expenses	, ,	Other professional fees	2,300.		0.		
	47	Interest					
Ě	18	Taxes STMT 6	8,444.		0.	0.	0.
Administrative	19	Depreciation and depletion	0,111.				
Ē	20	Occupancy		·····			
þ	21	Travel, conferences, and meetings	· · ·				
pue /	22	Printing and publications					
		Other expenses STMT 7	150.		150.	0.	0.
Operating	24	Total operating and administrative		_		-	<u> </u>
era	-•	expenses. Add lines 13 through 23	13,800.		150.	0.	0.
O	25	Contributions, gifts, grants paid	1,389,663.				1,389,663.
		Total expenses and disbursements.	, , , , , , , , , , , , , , , , , , , ,				_,,
	-	Add lines 24 and 25	1,403,463.	1	150.	0.	1,389,663.
	27					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	a	Excess of revenue over expenses and disbursements	-726,388.				
		Net investment income (if negative, enter -0-)		1,252	2,855.	······································	
	С	Adjusted net income (if negative, enter -0-)	4			0.	
52350	1		***************************************				

11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

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A counter screwable P Less allowance for doubthal accounts P Search screwable Recewables due from thices, drectors, brustess, and other dospatidated presons 7 dat. 1, 336. 1, 336. 1, 336. 7 don't this relative receivable 9 Prepade agreement for doubthal accounts P 10 Receivables due from thices, drectors, brustess, and other dospatidated for screwable 9 Prepade agreement of doubthal accounts P 10 Receivables for said or use 9 Prepade agreement of doubthal accounts P 10 Receivables for said or use 9 Prepade agreement of doubthal accounts P 10 Receivables for some p 1 Restmits—including a date of the said		1	Cash - non-interest-bearing	30,426.	965,072	965,072	÷		
Less: allowance for doubtful accounts		2	Savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·				
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26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Pard-in or capital surplus, or land, bldg., and equipment fund 30 Total net assets or fund balances 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 31 Total net assets or fund balances in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a 30 Other increases not included in line 2 (itemize) SEE STATEMENT 8 3 7,520. 4 Add lines 1, 2, and 3 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 III, column (b), line 30 Form 990-PF (2015)	ဦ	1 -		·		-	!		
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31 Total liabilities and net assets/fund balances 3,175,988. 2,457,120. Part III	Š	30	Total net assets or fund balances	3,1/5,988.	2,457,120	닉	1		
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Form 990-PF (2015)						,	_		
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				(b) How acquired (c) P - Purchase			ED STATEMENT (c) Date acquired (d) Date so		e sold	
2-story brick warehouse; or common stock, 200 shs. MLC Co.)), b	- Purchase - Donation	(mo., c	lay, yr.)	(mo., da	iy, yr.)	
1a			···········							
b										
<u>c</u>					<u> </u>					
0					L					_
e					Ц,					
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (
a										
b										
G										
d										
e 2,207,839.				<u>1,020,54</u>	<u>9.</u>				1,187,	290.
Complete only for assets showing			he foundation	on 12/31/69				Col. (h) gain		
(1) F.M.V. as of 12/31/69		Adjusted basis of 12/31/69		cess of col. (i) col. (j), if any				not less thar (from col. (l		
<u>a</u>						_				
<u>b</u>				·						
<u>c</u>			<u></u>							
<u>d</u>									1 107	200
<u>e</u>					$\overline{}$				1,187	290.
2 Capital gain net income or (net cap	oital loss)	If gain, also enter If (loss), enter -0-			}	2			1,187	290.
3 Net short-term capital gain or (loss	s) as defined	l ın sections 1222(5) an	d (6):		١,					
If gain, also enter in Part I, line 8, o	column (c).				 					0
If (loss), enter -0- in Part I, line 8 Part V* Qualification Ur	der Sec	tion 4940(e) for	Reduced	Tax on Net	Inve	stment Inc	ome			0.
(For optional use by domestic private										
from optional use by domestic private If section 4940(d)(2) applies, leave thi		•	340(a) tax on	net mvestment m	COINE	•)				
										mar
Was the foundation liable for the secti				•	iods				Yes	X No
If "Yes," the foundation does not qualif Enter the appropriate amount in ea					ntriac					
(a)	acii coldiiii		Structions bei	ore making any er			<u> </u>		(d)	
Base periód years Calendar year (or tax year beginnin	(In)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchai	ritable-use asset	s	Distrib	(d) oution ratio ided by col.	(c))
2014	y 		3,553.		3	,991,53	3.	(00% (8) 0.1		4180
2013			5,686.			,131,73				4347
2012			6,650.			,283,77				2380
2011		1,95	4,891.			,415,00				9479
2010			8,650.			,731,05				8216
		 								
2 Total of line 1, column (d)							_ 2		2.09	8602
3 Average distribution ratio for the 5	-year base p	eriod - divide the total o	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existen	ce if less tha	ın 5 years					3		41	9720
							İ			
4 Enter the net value of noncharitable	e-use assets	for 2015 from Part X, I	ıne 5				4		3,079,	766.
5 Multiply line 4 by line 3							5		1,292,	<u>639.</u>
5 Enter 1% of net investment income	e (1% of Par	t I, line 27b)					6_		12,	529.
- 4441 - 6 - 15									1 205	1.00
7 Add lines 5 and 6							7	ļ	<u>1,305</u> ,	TOR.
8 Enter qualifying distributions from	Part XII, lin	e 4					8		1,389,	663.
If line 8 is equal to or greater than	line 7, checl	the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax rate.				
See the Part VI instructions										

523521 11-24-15

Part VI Excise Tax Based on Investment Income (Section 4940(b), 4940(b), or 4940(c),	Part VI Excise Tax Based on Investment Income (Section 4940)		<u> </u>	118827	/	Page 4
Date of ruling or determination letter: Somestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b.		· · · · · · · · · · · · · · · · · · ·	140 - 3	see instru	Jetion:	<u>sj</u>
b Domestic foundations that meet the section 4947(a) requirements in Part V, check here ► X and enter 1% of Part I, line 127b. a All other domestic foundations enter 2% of line 27b. Exempl foreign organizations enter 4% of Part I, line 12, cot. (b). 2						
of Part, line 27b. a All other dimenstrict foundations entite 2% of line 27b. Exempt foreign organizations entire 4% of Part, line 12, cot. (b). 2 Tax under section 511 (domestic section 4947(a)(1) brusts and taxable foundations only, Others enter-0-) 3 Add lines 1 and 2 5 Subtile A (incompliax) (domestic section 4947(a)(1) brusts and taxable foundations only, Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3.1 taz or ol less, enter-0- 5 Credits/Payments. 2 D15 estimated tax payments and 2014 overpayment cedited to 2015 5 Exempt foreign organizations—tax withheld at source 6 Tax paid with application for extension of time to file (Form 8888) 6 Exempt foreign organizations—tax withheld at source 6 Exempt foreign organizations—tax withheld at source 7 Total credits and payments. Add lines 6 at through 64 8 Enter any penalty for underpayment of estimated tax Check here I if Form 2220 is statisched 8 Enter any penalty for underpayment of estimated tax Check here I if Form 2220 is statisched 9 Tax der, if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total chines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total chines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total chines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the tother directly or indirectly) or indirectly or indirectly or indir						
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2 0 0 3 3 4.2 inc.st and 2 3 12, 5.29 . A doll lines 1 and 2 3 12, 5.29 . Subbitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 1 ax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 1.2, 5.29 . Credits/Pyments. 2 015 estimated tax payments and 2014 overpayment credited to 2015 5 8a 8, 444 . Exempt foreign organizations - star withheld at source 6b	•		!	•		
3 12,529. 4 2.0 bitch lark (nomes) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from kine 3. If zero or less, enter -0- 5 Credit/Payments. 6 Descript/Payments. 6 2015 estimated tax payments and 2014 overpayment credited to 2015 6 Exempt foreign organizations - tax withheld at source 6 Exempt foreign organizations - tax withheld at source 7 Total credits and payments. Add hinse 5a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here in the Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here in the Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here in the form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower 10 Overpayment. Ill file or 5 more than the total of lines 5a and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Returned ▶ 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 1b did it speed more than \$100 during the year (either directly) for political purposes (see instructions for the definition? 1if 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 1 deter the remotivement (if any) of tax or political campages, by \$0 . 2 Enter the remotivement (if any) of tax or political expenditure tax imposed on foundation managers. ▶ \$0 . 2 Enter the remotivement (if any) of tax or political expenditure tax imposed on foundation managers. Provided the		· · · · · · · · · · · · · · · · · · ·				
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c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withhold 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 8,444.				.
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8 Enter any penalty for underpayment of estimated tax. Check here	7 Total credits and payments. Add lines 6a through 6d		7	dames	8.4	44.
3 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 9 4,085.	8 Enter any penalty for underpayment of estimated tax. Check hereif Form 2220 is atta	ached		· · ·		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be. Oredited to 2015 estimated tax ► Refunded ► 11 Part VII-A Statements Regarding Activities Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pollucal campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pollucal campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pollucal campaign? 1b Durit spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1b Durit spend more than \$100 during the year (either directly) or indirectly) for political expenditures (see instructions for the definition)? 1b Durit spend more than \$100 during the year (either directly) or indirectly) for political expenditures (see instruction of the activities of the foundation in the political expenditures (section 4955) imposed during the year (e.g., and the foundation in the participate of the spenditures (section 4955) imposed during the year (e.g., and the foundation of the activities of the foundation managers. ► \$ 0.					4.0	85.
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	•		─ ~			<u> </u>
Part VIII-A Statements Regarding Activities	•	Refunded				—
1a During 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? 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 c Did the foundation like Form 1120-PDL for this year? (1) On the foundation like Form 1120-PDL for this year? (2) On foundation managers. \(\) \		Tricianaca P				
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)? 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-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. \(\Display \int \int \int \int \int \int \int \int		lation or did it participate or intervene	ın		Yes	No
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4a X b If "Yes," has it filed a tax return on Form 990-T for this year?	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	98		3	-	X
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	The any persons decome substantial continuotors during the tax year? If "Yes" attach a schedul	le listing their names and addresses			O. DE	

Part VII-B Statements Regarding Activities for Which F		aguirad	06-11882	27 Page 6
	Offiti 4720 Iviay be n	equirea _{(contin}	ued)	 _
5a During the year did the foundation pay or incur any amount to:	- 4045(-)\0		es X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,	· · · · · · · · · · · · · · · · · · ·	S A NO	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire		es X No	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			3 (AL) NO	
4945(d)(4)(A)? (see instructions)	11 062611060 111 2668011		es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or aducational nurnoses or fo		S 21 NO	
the prevention of cruelty to children or animals?	or cadeational purposes, or in		s X No	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i		5 <u>21</u> 140	
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii ricgulations	N/A	
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 fr		ned	· -	
expenditure responsibility for the grant?		//A	s No	
If "Yes," attach the statement required by Regulations section 53 4945		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		į	1 1 1
a personal benefit contract?	pay promisento on	☐ Y _ℓ	s X No	wi.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
LAWRENCE A. BOSSIDY	TRUSTEE			
452 WEST MOUNTAIN ROAD				
RIDGEFIELD, CT 06877	1.00	0.	0.	0.
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		ļ		
		Ì		
Componentian of five highest need annulations (ather these these	hudad on line 4) Massa	mtor INCALE II		
2 Compensation of five highest-paid employees (other than those incl		enter "NUNE."	(d) Contributions to	(a) Evnance
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
NONE	devoted to position		compensation	allowances
NONE				
· · · · · · · · · · · · · · · · · · ·				
				<u></u>
	-			
Total number of other employees paid over \$50,000			<u> </u>	0
יסינפו חנווווויפו טו טנווכו פוווייוטאַככּי אָפוֹיני טיאָכוּ אָסט,טטט			Farm	990-PF (2015)

Form 990-PF (2015) THE LAWRENCE A. BOSSIDY FOUNDATION 0	<u>6-1188</u>	527	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compe	nsation
NONE			
Total number of others receiving over \$50,000 for professional services	•		0
PartilX=At Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	
1 N/A	_		
	-		0.
2			
	-		
	\dashv		
3	-		
	\neg		
4			
	7		
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 NOT APPLICABLE			
	7		
			0.
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3			0.
	Forr	ո 990-PF	(2015)

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Form 990-PF (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				141,459.
2 Undistributed income, if any, as of the end of 2015			77	
a Enter amount for 2014 only			0.	
b Total for prior years.				
		0.		· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2015. a From 2010 435, 673.				
4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				
b From 2011 1,835,391. c From 2012 143,841.				
d From 2013 2,269,159.	.5			
e From 2014 1,295,572.	* **	*		· ·
f Total of lines 3a through e	5,979,636.			
4 Qualifying distributions for 2015 from			^	8 8 m
Part XII, line 4 ▶\$ 1,389,663.	1. (A)			~ y+ 5
a Applied to 2014, but not more than line 2a	. **	*	0.	w *
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	**	N N
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	**	\$	
d Applied to 2015 distributable amount				141,459.
e Remaining amount distributed out of corpus	1,248,204.	yr. My		* ,
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.			<u> </u>
must be shown in column (a))	\$ 4.	3.74	***	· · · · · • • · · · · · • · · · · · · ·
6 Enter the net total of each column as indicated below:		***	-	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,227,840.			·
b Prior years' undistributed income. Subtract			S	\$
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 2014. Subtract line				· · · · · · · · · · · · · · · · · · ·
4a from line 2a Taxable amount - see instr.	. , ,		0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must	, * _{ex}	Ŕ	4	
be distributed in 2016				<u> </u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		····	
8 Excess distributions carryover from 2010	425 672			
not applied on line 5 or line 7	435,673.			
9 Excess distributions carryover to 2016 Subtract lines 7 and 8 from line 6a	6 792 167			
Subtract lines 7 and 8 from line 6a	6,792,167.			· · · · · · · · · · · · · · · · · · ·
0 Analysis of line 9 a Excess from 2011 1,835,391.				
b Excess from 2012 143,841.	ļ			
c Excess from 2013 2, 269, 159.]	
d Excess from 2014 1,295,572.			1	
e Excess from 2015 1, 248, 204.	a.			

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Form **990-PF** (2015)

Part XIV: Private Operating F	RENCE A. BO				0(N/A	6-118	<u>8527</u>	Page 1
1 a If the foundation has received a ruling of					N/A			
foundation, and the ruling is effective fo								
b Check box to indicate whether the foun	•	•	s section		42(j)(3) or	1042	?(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	Touridation described in	Prior 3 years		12([](3) 01	1 4342	(1)(3)	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	- 	(d) 2012	,——	(e) Tot	al let
	(4) 2010	(0) 2014	(0) 2010	 	(4) 2012		(0)101	-
investment return from Part X for								
each year listed								
b 85% of line 2a	ļ <u>.</u>			_				
c Qualifying distributions from Part XII,			:					
line 4 for each year listed		· · · · · · · · · · · · · · · · · · ·	<u> </u>					
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities			-					
e Qualifying distributions made directly				ľ				
for active conduct of exempt activities.						İ		
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the alternative test relied upon:								
a "Assets" alternative test - enter:								
(1) Value of all assets							_	
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)						\longrightarrow		
b "Endowment" alternative test - enter 2/3 of minimum investment return								
shown in Part X, line 6 for each year						1		
listed	<u></u>							
c "Support" alternative test - enter:								
(1) Total support other than gross								
investment income (interest, dividends, rents, payments on								
securities loans (section								
512(a)(5)), or royalties)								
(2) Support from general public				I				
and 5 or more exempt organizations as provided in				ł				
section 4942(j)(3)(B)(iii)								
(3) Largest amount of support from							· · · · · ·	
an exempt organization						Ì		
(4) Gross investment income								
Part XV Supplementary Info			the foundat	ion had	1 \$5,000 o	r more	in assets	5
at any time during t	he year-see instr	uctions.)						
1 Information Regarding Foundation	n Managers [.]							
a List any managers of the foundation wh	o have contributed more	than 2% of the total contr	butions received b	y the foun	dation before	the close o	f any tax	
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)						
LAWRENCE A. BOSSIDY								
b List any managers of the foundation wh	o own 10% or more of the	e stock of a corporation (or an equally large	portion of	the ownership	o of a partn	ership or	
other entity) of which the foundation ha	s a 10% or greater interes	it .						
NONE								
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pro	grams:					
Check here X if the foundation of	only makes contributions t	to preselected charitable o	organizations and o	does not a	ccept unsolicit	ed requests	s for funds. I	f
the foundation makes gifts, grants, etc.								
a The name, address, and telephone num	ber or e-mail address of the	he person to whom applic	ations should be a	ddressed:				
, , ,		, , , , , , , , , , , , , , , , , , , ,						
b The form in which applications should be	e submitted and informat	ion and materials they sh	ould include					
c Any submission deadlines								
d Any restrictions or limitations on award	s, such as by geographica	Il areas, charitable fields,	kınds of institution	s, or other	factors			
		· · · · · · · · · · · · · · · · · · ·						
523601 11-24-15					_	Fr	orm 990-P	'F (2015

Form 990-PF (2015)

Rart XVI-A	Analysis of Income-Producing	Activities

	Unrelated	d business income	Evolu	ded by section 512, 513, or 514	
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	Amont	Torredori income
a			 	. <u> </u>	
b			 		
·		· · · · · · · · · · · · · · · · · · ·		_	
d		•••	╆		
e		 -	1	 	
			<u> </u>		
g Fees and contracts from government agencies		 	-		
2 Membership dues and assessments			_		
3 Interest on savings and temporary cash	1			2.5	
investments	1		14		
4 Dividends and interest from securities	<u> </u>		14	65,678.	
5 Net rental income or (loss) from real estate					
a Debt-financed property				·	
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	1 1				
than inventory			18	597,710.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a FEDERAL TAX OVERPAYMENT			14	_8,444.	
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	* 7/100	0.		671,869.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	6-4-66
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accor	nplishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which incor	me is reported in	column (e) of Part XVI-A	contrib	uted importantly to the accomp	plishment of
▼ the foundation's exempt purposes (other than t	y providing fun	ds for such purposes).			
1 NOT APPLICABLE					
			_		
			_		
					
	· ·			<u> </u>	
	·				
				<u> </u>	
		· · · · · · · · · · · · · · · · · · ·			
		 		···	
-					
					
				·	
		-,- · · · ·			

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Signature of officer or trustee Title Date Print/Type preparer's name Prepar Date Check _____ if self- employed Paid NEIL J. TENDLER P00179356 Preparer Firm's EIN ► 46-4409177 Firm's name ► ECHELON ADVISORS. Use Only Firm's address ▶ 63 TAYLOR AVE. Phone no. (732) 903-7338 MANASQUAN, NJ 08736

Form 990-PF (2015)

X Yes

Here

Schedule B

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

Department of the Treasury Internal Revenue Service

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

2015

Name of the organization

Employer identification number

T	HE LAWRENCE A. BOSSIDY FOUNDATION	06-1188527							
Organization type (check	one)								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
, ,	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions							
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor.	•							
Special Rules									
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from							
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductions to children or animals. Complete Parts I, II, and III	• •							
year, contributions is checked, enter purpose Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section	ore than \$1,000 If this box s, chantable, etc ,							
but it must answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990 or check the box on line H of its Form 990-EZ or on its F t the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)								

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) (2015)

Name of organization

Employer identification number

ጥሀር	T. AMDENICE	7	PUCCTUA	FOUNDATION
THE	LAWKENCE	Α.	BOSSIDI	LOUNDATION

06-1188527

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LARRY BOSSIDY 452 WEST MOUNTAIN ROAD RIDGEFIELD, CT 06877	5,206.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	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 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
522452 10 25		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE LAWRENCE A. BOSSIDY FOINDATION

06-1188527

E LAWRENC	CE A. BOSSIDY FOUNDATION		-1188527
art II Nonce	ash Property (see instructions). Use duplicate copies of P	art 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.		(c)	
from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		=	
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
453 10-26-15	 		990, 990-EZ, or 990-PF) (

Name of org	anization	.	Employer identification number
THE LA	WRENCE A. BOSSIDY FOUNI	ΡΑΤΤΟΝ	06-1188527
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additions	ributions to organizations described in columns (a) through (e) and the follow i, charitable, etc., contributions of \$1,000 or le	n section 501(c)(7), (8), or (10) that total more than \$1,000 for
(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, a	nd 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
	-	(e) Transfer of gift	
	Transferee's name, address, ar	10 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
-		(e) Transfer of gift	
	Transferee's name, address, ar	-	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
-		(1) 7	
	Transferea's name address an	(e) Transfer of gift	Polationship of transferor to transfero
	Transferee's name, address, ar	M ZIF T *	Relationship of transferor to transferee

THE LAWRENCE A. BOSSIDY FOUNDATION Part IV | Capital Gains and Losses for Tax on Investment Income

Part IV Capital Gains and Los	ses for Tax on Investment Income				
(a) List and	describe the kind(s) of property so ck warehouse, or common stock, 2	ld, e.g., real estate,	(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 971 SHS HONEYWE		oo sho. MEO Oo.	D - Donation D	04/26/04	
b 8,750 SHS HONEY		ET.	D	04/26/04	
c 1,000 SHS HONEY				04/26/04	
d 715 SHS HONEYWE	LL INTL INC DEL		D	04/26/04	
e 206 SHS HONEYWE			D	04/26/04	
1 170 SHS HONEYWE			D	04/26/04	
g 321 SHS HONEYWE			D D	04/26/04	
h 9,303 SHS HONEY	WELL INTL INC D	EL	D	12/21/12	11/16/15
1				 	
k	·				
		·····			
m					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (foss) plus (f) minus (g)	
a 100,099.		33,854.			66,245.
b 907,242.		305,069.			602,173.
c 102,043. d 74,773.		34,865.			67,178.
d 74,773. e 21,088.		24,928. 7,182.			49,845. 13,906.
t 17,403.	·	5,927.			$\frac{13,900.}{11,476.}$
g 32,860.	* * * * * * * * * * * * * * * * * * * *	11,192.			21,668.
h 952,331.		597,532.			354,799.
1	·				
k					
m I	·				
n	 				
0	- · 				
Complete only for assets showing	gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess but r	of col. (h) gain over not less than "-0-")	col (k),
a					66,245.
b					602,173.
C					67,178.
0				 -	49,845. 13,906.
f		<u> </u>			$\frac{13,906.}{11,476.}$
g					21,668.
h					$\frac{21,3001}{354,799}$.
J					
<u>k</u>					
m				·	
0					
Capital gain net income or (net cap	ital loss) { If gain, also enter	in Part I, line 7	2	1.:	187,290.
3 Net short-term capital gain or (loss		, I			
If gain, also enter in Part I, line 8, c		· (°)			
If (loss), enter "-0-" in Part I, line 8			3 [0.

3 Grants and Contributions Paid During the				
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	
RIDGEFIELD BOYS & GIRLS CLUB	N/A		NON-CASH CONTRIBUTION	
CIUGEFIEDD BOIS & GINES CHUB	N/A		NON-CASH CONTRIBUTION	51,49
ZVNA	N/A		CASH GIFT	88,66
				·_
SANKATY HEAD FDN	N/A		CASH GIFT	20.00
· · · · · · · · · · · · · · · · · · ·			-	20,00
DIOCESE OF BRIDGEPORT - BISHOP'S SCHOLARSHIP FUND	N/A		CASH GIFT	
SCHOLARSHIF FUND				
RIDGEPORT, CT				1,000,00
THE FRIENDS OF RIDGEFIELD PARKS &	N/A		CASH GIFT	
RECREATION			CASIN STATE	55,00
NANTUCKET COTTAGE HOSPITAL	N/A		CASH GIFT	5,000
NANTUCKET CHARITY CLASSIC	N/A		CASH GIFT	10.000
		·		10,000
OWN OF RIDGEFIELD	N/A		CASH GIFT	
				20,00
AUTISM SPEAKS	N/A		CASH GIFT	
				50,00
Total from continuation sheets				1,300,16

FORM 990-PF 0	GAIN OR (LOSS)	FROM SALE	OF A	ASSETS		STA	TEMENT 1
(A) DESCRIPTION OF PROPERTY	?			MANNER CQUIRED	DA ACQU	TE IRED	DATE SOLD
971 SHS HONEYWELL INTL	INC DEL		DC	NATED	04/2	6/04	04/06/15
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C.		(F) OR LOSS
100,099.	62,008.		0.		0.		38,091.
(A) DESCRIPTION OF PROPERTY	······································			MANNER CQUIRED	DA ACQU		DATE SOLD
8,750 SHS HONEYWELL INT	L INC DEL		DC	NATED	04/2	6/04	04/10/15
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LOSS
907,242.	558,775.		0.		0.		348,467.
(A) DESCRIPTION OF PROPERTY				MANNER CQUIRED	DA' ACQU		DATE SOLD
1,000 SHS HONEYWELL INT	L INC DEL		DC	NATED	04/2	6/04	05/11/15
(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)			(F)
SALES PRICE	TIME OF ACQ.	SALE		DEPRE		GAIN	OR LOSS
102,043.	63,860.		0.		0.		38,183.
(A) DESCRIPTION OF PROPERTY	•			ANNER CQUIRED	DA ⁴		DATE SOLD
715 SHS HONEYWELL INTL	INC DEL		DC	NATED	04/2	6/04	06/23/15
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	~		(F) OR LOSS
74,773.	45,660.	DAUE	0.		0.	GVIN	29,113.

DESCRIP	(A) PTION OF PROPERTY	<u>. </u>			MANNER CQUIRED		TE URED	DATE SOLD
206 SHS	HONEYWELL INTL	INC DEL		DC	ONATED	04/2	6/04	11/16/15
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)	_		(F)
	SALES PRICE	TIME OF ACQ.	SALE		DEPRE		GAIN	OR LOSS
	21,088.	13,155.		0.		0.	_	7,933.
DESCRIP	(A) PTION OF PROPERTY	·			MANNER CQUIRED		TE URED	DATE SOLD
170 SHS	HONEYWELL INTL	INC DEL		DC	NATED	04/2	6/04	11/16/15
	(B)	(C)	(D)		(E)			(F)
	GROSS SALES PRICE	VALUE AT TIME OF ACQ.	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOSS
	17,403.	10,856.		0.		0.		6,547.
	(A) PTION OF PROPERTY HONEYWELL INTL	_		A(MANNER CQUIRED ONATED	ACQU	TE IRED 6/04	DATE SOLD 11/16/15
321 SnS			(5)	DC		04/2		
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F) OR LOSS
	32,860.	20,499.		0.		0.		12,361.
DESCRIP	(A) TION OF PROPERTY	,			MANNER CQUIRED	DA ACQU	TE IRED	DATE SOLD
9,303 S	HS HONEYWELL INT	L INC DEL		DC	NATED	12/2	1/12	11/16/15
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)			(F)
	SALES PRICE	TIME OF ACQ.	SALE	OF	DEPRE	c.	GAIN	OR LOSS
	952,331.	835,316.	*****	0.		0.		117,015.
					- -			
CAPITAL	GAINS DIVIDENDS	FROM PART IV						0.
	O FORM 990-PF, P							597,710.

FORM 990-PF INTERE	ST ON SAVIN	IGS AN	ID TEMP	ORAR	Y C	ASH II	IVESTMENTS	S'	PATEMENT 2
SOURCE			(A) REVEN PER BO	IUE	ì				(C) ADJUSTED NET INCOME
MERRILL LYNCH				37	•		37.		0.
TOTAL TO PART I, LI	NE 3			37	 • = =		37.		0.
FORM 990-PF	DIVIDENDS	AND	INTERE	ST F	ROM	SECUI	RITIES	S'	гатемент 3
SOURCE	GROSS AMOUNT	G	APITAL GAINS VIDENDS		REVI	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
MERRILL LYNCH	65,678.	-	0	<u> </u>	65	5,678	65,67	78.	0.
TO PART I, LINE 4	65,678.		0		65	5,678	65,67	78.	0.
FORM 990-PF DESCRIPTION		TO		(A REVEI	NUE		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME
FEDERAL TAX OVERPAY	MENT				8,4	444.	C	<u> </u>	0.
TOTAL TO FORM 990-P	F, PART I,	LINE	11		8,4	144.	C	— - •- =	0.
FORM 990-PF		ACC	COUNTIN	G FE	ES			S'	FATEMENT 5
DESCRIPTION		(A EXPEN PER E	ISES	NET I			(C) ADJUSTEI NET INCOM		(D) CHARITABLE PURPOSES
TAX RETURN PREPARAT	ION	2	2,500.			0.		0.	0.
TO FORM 990-PF, PG	1, LN 16B	2	2,500.			0.		0.	0.

FORM 990-PF	TAX	ES	STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FEDERAL TAX PAYMENT	8,444.	0.	0.	0.		
TO FORM 990-PF, PG 1, LN 18	8,444.	0.	0.	0.		
FORM 990-PF	OTHER E	XPENSES	S	гатемент 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
BANK CHARGES	150.	150.	0.	0.		
TO FORM 990-PF, PG 1, LN 23	150.	150.	0.	0.		

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 8
DESCRIPTION	AMOUNT
DIFFERENCE BETWEEN FMV AND BOOK COST OF STOCK GIFTED BY FOUNDATION OTHER ADJUSTMENT	7,412.
TOTAL TO FORM 990-PF, PART III, LINE 3	7,520.

FÖRM 990-PF CORPORATE STOCK	ζ	STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
12,133 SHS - HONEYWELL	0.	0.
20,000 SHS - HONEYWELL	0.	0.
600 SHS - MERCK	29,688.	31,692.
2,110 SHS - MERCK	104,403.	111,450.
2,110 SHS - MERCK	104,403.	111,450.
2,000 SHS - MERCK	98,960.	105,640.
2,110 SHS - MERCK	104,403.	111,450.
2,110 SHS - MERCK	104,403.	111,450.
567 SHS - MERCK	28,055.	29,949.
10,206 SHS - HONEYWELL	916,397.	1,057,035.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,490,712.	1,670,116.