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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation THE GUSTI BRANDT FOUNDATION C/O CITRIN COOPERMAN & CO LLP		<b>A Employer identification number</b> 13-6185337	
Number and street (or P O box number if mail is not delivered to street address) 529 FIFTH AVENUE		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10017		<b>B</b> Telephone number (see instructions)  (212) 697-1000	
<b>G</b> Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/>  <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 1,863,188		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )			

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities . . . . .	5,690	5,690		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	1,207			
	<b>b</b> Gross sales price for all assets on line 6a 37,748				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . .		1,207		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	230,149	230,149		
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	237,046	237,046		
	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	3,700	1,233		2,467
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . .	1,988	0		1,988
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	552	0		552
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	6,240	1,233		5,007
	<b>25</b> Contributions, gifts, grants paid . . . . .	85,899			85,899
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	92,139	1,233		90,906
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursement</b>	144,907			
	<b>b Net investment income</b> (if negative, enter -0-)		235,813		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

<b>Part II</b> <b>Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	24,639	23,670	23,670
	<b>2</b>	Savings and temporary cash investments . . . . .	3,007	362	362
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b>	Grants receivable . . . . .			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)	30,260	22,743	22,683
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	34,902	22,066	21,656
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .	145,775	145,832	145,100
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b>	Investments—mortgage loans . . . . .			
	<b>13</b>	Investments—other (attach schedule) . . . . .	1,734,457	1,904,868	1,647,832
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>Liabilities</b>	<b>15</b>	Other assets (describe ▶ _____)	1,885	1,885	1,885
	<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,974,925	2,121,426	1,863,188
	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<b>18</b>	Grants payable . . . . .			
	<b>19</b>	Deferred revenue . . . . .			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b>	Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b>	Other liabilities (describe ▶ _____)	0	1,521	
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	1,521	
<b>Net Assets or Fund Balances</b>		<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b>	Unrestricted . . . . .			
	<b>25</b>	Temporarily restricted . . . . .			
	<b>26</b>	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	1,974,925	2,119,905	
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,974,925	2,119,905	
	<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,974,925	2,121,426	

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

<b>1</b>	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) . . . . .	<b>1</b>	1,974,925
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	144,907
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	73
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	2,119,905
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	2,119,905

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase D—Donation (b)	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1 a	543 UNITS OF REYNOLDS AMERICAN INC	P	2015-06-12	2015-06-12
b	325 UNITS OF LORILLARD INC	P	2014-04-30	2015-06-12
c	675 UNITS OF WELLS FARGO UTILITIES AND HIGH INCOME FUN	P	2014-11-12	2015-12-15
d	6000 UNITS OF US TREASURY NOTE 1 6250% 1/15/15	P	2009-07-09	2015-01-15
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 39		39	0
b 23,234		19,618	3,616
c 7,032		9,349	-2,317
d 7,443		7,535	-92
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			0
b			3,616
c			-2,317
d			-92
e			

2	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	1,207
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	91,298	1,830,916	0 049865
2013	87,166	1,804,655	0 048301
2012	72,507	1,832,046	0 039577
2011	33,914	1,742,264	0 019465
2010	9,510	1,357,762	0 007004

2	Total of line 1, column (d).	2	0 164212
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 032842
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,870,060
5	Multiply line 4 by line 3.	5	61,417
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,358
7	Add lines 5 and 6.	7	63,775
8	Enter qualifying distributions from Part XII, line 4.	8	90,906

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

**Part VI** **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	2,358
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	2,358
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	2,358
<b>6</b>	Credits/Payments		
<b>a</b>	2015 estimated tax payments and 2014 overpayment credited to 2015	<b>6a</b>	2,000
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868). . . . .	<b>6c</b>	1,000
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	3,000
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	7
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	635
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <b>▶</b> 635 <b>Refunded</b> <b>▶</b>	<b>11</b>	0

**Part VII-A** **Statements Regarding Activities**

<b>1a</b>	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>Yes</b>	<b>No</b>
<b>1a</b>				<b>No</b>
<b>b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>		<b>No</b>
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>		<b>No</b>
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ _____ <b>0</b> <b>(2)</b> On foundation managers <b>▶</b> \$ _____ <b>0</b>			
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____ <b>0</b>			
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>		<b>No</b>
<b>3</b>	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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>		<b>No</b>
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>		<b>No</b>
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>		
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>		<b>No</b>
<b>6</b>	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 remain in the governing instrument? . . . . .	<b>6</b>	<b>Yes</b>	
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	<b>Yes</b>	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> NY _____			
<b>b</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) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	<b>Yes</b>	
<b>9</b>	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>		<b>No</b>
<b>10</b>	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>		<b>No</b>

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>CITRIN COOPERMAN CO LLP</u> Telephone no ► <u>(212) 697-1000</u> Located at ► <u>529 FIFTH AVENUE NEW YORK NY</u> ZIP+4 ► <u>10017</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <b>15</b>			
<b>16</b>	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part 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.			<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" 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 ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <b>1b</b>			
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>			
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . . <b>1c</b>			<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
<b>b</b>	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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <b>2b</b>			
<b>c</b>	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 ► 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2015 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i> ). . . . . <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	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 2015?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No **5b**

Organizations relying on a current notice regarding disaster assistance check here. ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No **6b** No

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RUTH BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR AS NEEDED 0 00	0	0	0
ROBERT BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR AS NEEDED 0 00	0	0	0
GARY BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR AS NEEDED 0 00	0	0	0
JOHN BRANDT 1 WEST ELM STREET GREENWICH, CT 06830	DIRECTOR AS NEEDED 0 00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

**Total** number of other employees paid over \$50,000. ☐ **0**

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. 0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0



**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	220,686
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	42,575
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	1,635,277
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	1,898,538
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	1,898,538
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	28,478
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	1,870,060
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	93,503

**Part XI Distributable Amount**(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	93,503
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	2,358
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	2,358
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	91,145
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	91,145
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	91,145

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	90,906
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	90,906
<b>5</b>	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). . . . .	<b>5</b>	2,358
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	88,548

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 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				91,145
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			85,836	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .				
b From 2011. . . . .				
c From 2012. . . . .				
d From 2013. . . . .				
e From 2014. . . . .				
f Total of lines 3a through e. . . . .	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 90,906				
a Applied to 2014, but not more than line 2a			85,836	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2015 distributable amount. . . . .				5,070
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				86,075
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 not applied on line 5 or line 7 (see instructions). . .	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	0			
10 Analysis of line 9				
a Excess from 2011. . . .				
b Excess from 2012. . . .				
c Excess from 2013. . . .				
d Excess from 2014. . . .				
e Excess from 2015. . . .				

## Part XIV

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**b** Check box to indicate whether the organization is a:

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	


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## Part XV

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

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

Part XV

Supplementary Information(continued)

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			▶ 3a	85,899
b Approved for future payment				
Total . . . . .			▶ 3b	0

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Yes	No
-----	----

	<b>No</b>
--	-----------

	<b>No</b>
--	-----------

	<b>No</b>
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	<b>No</b>
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No

	<b>No</b>
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	<b>No</b>
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	<b>No</b>
--	-----------

	<b>No</b>
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e

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes  
☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<div style="border-bottom: 1px solid black; text-align: center;">*****</div> Signature of officer or trustee	<div style="border-bottom: 1px solid black; text-align: center;">2016-11-14</div> Date	<div style="border-bottom: 1px solid black; text-align: center;">*****</div> Title
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May the IRS discuss this return with the preparer shown below  
 (see instr.)? ☐ Yes ☒ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name JOHN REPETTI	Preparer's Signature	Date 2016-11-14	Check if self-employed <input type="checkbox"/>	PTIN P00163823
	Firm's name ▶ CITRIN COOPERMAN & CO LLP			Firm's EIN ▶	22-2428965
	Firm's address ▶ 529 FIFTH AVENUE NEW YORK, NY 100174683			Phone no	(212) 697-1000

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
AJC WESTCHESTERFAIRFIELD 165 E 56TH ST NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	650
AMERICAN BALLET THEATRE 890 BROADWAY 3RD FL NEW YORK,NY 10003	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
AMERICAN CANCER SOCIETY 125 W 31ST STREET NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	455
ANTI-DEFAMATION LEAGUE 605 3RD AVE NEW YORK,NY 10158	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
ASPCA 520 8TH AVE FL 7 NEW YORK,NY 10018	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,290
AUTISM ALLIANCE OF MICHIGAN 26500 AMERICAN DR SOTHFIELD,MI 48034	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
BABY BUGGY 306 W 37TH ST FL 8 NEW YORK,NY 10018	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
BALLET THEATRE FOUNDATION 890 BROADWAY NEW YORK,NY 10003	NONE	PUBLIC CHARITY	GENERAL SUPPORT	180
BERKSHIRE SCHOOL 245 NORTH UNDERMOUNTAIN ROAD SHEFFIELD,MA 01257	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
BIRTHRIGHT ISRAEL FOUNDATION 521 5TH AVE NEW YORK,NY 10175	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,500
BRaille INSTITUTE OF AMERICA 741 NORTH VERMONT AVENUE LOS ANGELES,CA 90029	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
BREAST CANCER RESEARCH FOUNDATION 60 E 56TH ST FL 8 NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
CARLOS OTIS CLINIC 78 FOUNDERS HILL ROAD STRATTON,VT 05360	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
CENTRAL PARK CONSERVANCY 14 EAST 60TH ST NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
CHILDREN'S RADIO FOUNDATION 169 STONEHILL ROAD BEDFORD,NY 10506	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
<b>Total</b> . . . . . ▶ <b>3a</b>				85,899

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
COLBY COLLEGE 4000 MAYFLOWER HILL DR WATERVILLE, ME 04901	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
COLUMBIA COLLEGE 1130 AMSTERDAM AVE NEW YORK, NY 10027	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
COLUMBIA LAW SCHOOL 435 WEST 116TH STREET NEW YORK, NY 10027	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
CONGREGATION EMANU-EL OF WESTCHESTER 2125 WESTCHESTER AVENUE EAST RYE, NY 10580	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,850
CORNELL UNIVERSITY 144 EAST AVE ITHACA, NY 14850	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
CROHN'S & COLITLIS FOUNDATION OF AMERICA 733 THIRD AVENUE SUITE 510 NEW YORK, NY 10017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	600
DIABETES FOUNDATION (AMERICAN DIABETES ASSOCIATION) 1701 NORTH BEAVREGARD ST ALEXANDRIA, VA 22311	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
DOCTORS WITHOUT BORDERS 333 7TH AVE NEW YORK, NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,398
EQUINE ADVOCATES P O BOX 354 CHATHAM, NY 12037	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
ETHICAL CULTURE FIELDSTON SCHOOL 3901 FIELDSTON RD BRONX, NY 10471	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,000
FJC PINK AID 520 EIGHTH AVENUE 2005 NEW YORK, NY 10018	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
FENWAY GOLF CLUB CHARITABLE FUND PO BOX 7 SCARSDALE, NY 105830007	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
FRIENDS OF ISRAEL PO BOX 908 BELLMAWR, NJ 08099	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
GREEN VILLAGE INITIATIVE 325 LAFAYETTE ST UNIT 9101 BRIDGEPORT, CT 06604	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
GREENWICH HOSPITAL FOUNDATION 5 PERRYRIDGE RD GREENWICH, CT 06830	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				85,899



Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
HARLEM VILLAGE ACADEMIES 35 WEST 124TH STREET NEW YORK,NY 10027	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
HIMALAYAN CATARACT PROJECT PO BOX 55 WATERBURY,VT 05676	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,398
ISRAEL CANCER RESEARCH FUND 295 MADISON AVE STE 1030 NEW YORK,NY 10017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	180
LEUKEMIA & LYMPHOMA SOCIETY 61 BROADWAY 400 NEW YORK,NY 10006	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG,MD 20871	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
MAMARONECK UNION FREE SCHOOL DISTRICT 1000 W BOSTON POST RD MAMARONECK,NY 10543	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NEW YORK,NY 10028	NONE	PUBLIC CHARITY	GENERAL SUPPORT	430
MISCELLANEOUS CHARITIES C/O CITRIN COOPERMAN CO LLP NEW YORK,NY 10017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,650
MOMA 11 W 53RD ST NEW YORK,NY 10019	NONE	PUBLIC CHARITY	GENERAL SUPPORT	140
MONTEFIORE MEDICAL CENTER 111 EAST 210TH STREET BRONX,NY 10467	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
MUSEUM OF ARTS AND DESIGN 2 COLUMBUS CIR NEW YORK,NY 10019	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
MUSEUM OF MODERN ART 11 W 53RD STREET NEW YORK,NY 10019	NONE	PUBLIC CHARITY	GENERAL SUPPORT	360
NATIONAL FOUNDATION FOR CANCER RESEARCH 4600 EAST-WEST HIGHWAY 600 BETHESDA,MD 20814	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200
NYCA CHARTER SCHOOL 433 E 100TH ST NEW YORK,NY 10029	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	300
<b>Total . . . . . ▶ 3a</b>				85,899

Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
PROJECT RETURN 360 W 125TH STREET NEW YORK,NY 10027	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
SCARSDALE PBA 50 TOMPKINS ROAD SCARSDALE,NY 10583	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200
SCARSDALE VOLUNTEER AMBULANCE CORP 5 WEAVER ST SCARSDALE,NY 10583	NONE	PUBLIC CHARITY	GENERAL SUPPORT	750
SOLOMON R GUGGENHEIM FOUNDATION 1071 5TH AVE NEW YORK,NY 10128	NONE	PUBLIC CHARITY	GENERAL SUPPORT	125
SPIRIT ROCK MEDITATION CENTER 5000 SIR FRANCIS DRAKE BOULEVARD BOX 169 WOODACRE,CA 94973	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
THE BRIDGE 188 WHITLEY CHURCH RD PRINCETON,NC 27569	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
THE REGENTS OF THE UNIV OF MICHIGAN 1018 FULLER ST ANN ARBOR,MI 48104	NONE	PUBLIC CHARITY	GENERAL SUPPORT	900
THE SUMMER CAMP THREE SISTERS PARK CHIIOCOTHE,IL 61523	NONE	PUBLIC CHARITY	GENERAL SUPPORT	150
UJA FEDERATION 130 E 59TH ST NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
UNITARIAN CHURCH ON WESTPORT 10 LYONS PLAINS RD WESTPORT,CT 06880	NONE	PUBLIC CHARITY	GENERAL SUPPORT	330
UNITED JEWISH APPEAL 130 EAST 59TH STREET NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
UNIVERSITY OF MICHIGAN 500 S STATE ST ANN ARBOR,MI 48109	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
WESTCHESTER REFORM TEMPLE 255 MARMARONECK AVE SCARSDALE,NY 10583	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,850
WESTPORT ARTS CENTER 51 RIVERSIDE AVE WESTPORT,CT 06880	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
WHITE COLUMNS 320 W 13TH ST NEW YORK,NY 10014	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
<b>Total . . . . . ▶ 3a</b>				85,899

**Form 990PF Part XV Line 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WHITE PLAINS HOSPITAL 41 E POST RD WHITE PLAINS,NY 10601	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK,NY 10014	NONE	PUBLIC CHARITY	GENERAL SUPPORT	665
WOUNDED WARRIOR PROJECT 370 7TH AVE SUITE 1802 NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,398
<b>Total . . . . .</b> ▶ <b>3a</b>				85,899

**TY 2015 Accounting Fees Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CITRIN COOPERMAN	3,700	1,233		2,467

**TY 2015 Investments Corporate Bonds Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP  
**EIN:** 13-6185337

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
25000 BARCLAYS BK PLC NTS, DUE 01/14/21	25,977	24,913
20000 GE CAPITAL FIN, 2.20%, DUE 8/20/18	20,000	20,227
70000 GOLDMAN SACHS BK, 00.9500%, DUE 07/25/16	70,000	70,099
30000 AT&T INC NTS B/E	29,855	29,861

**TY 2015 Investments Corporate Stock Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
325 LORILLARD INC	0	0
220 WP CAREY INC REIT	15,284	12,980
188 UNITS OF REYNOLDS AMERN INC	6,782	8,676

## TY 2015 Investments Government Obligations Schedule

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

**US Government Securities - End of  
Year Book Value:**

22,743

**US Government Securities - End of  
Year Fair Market Value:**

22,683

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

**TY 2015 Investments - Other Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LIMITED PARTNERSHIP INTEREST IN NORTHWOOD PLAZA L.P.	AT COST	1,889,440	1,635,277
1121 WELLS FARGO ADVANTAGE UTILS	AT COST	15,428	12,555



**TY 2015 Other Assets Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
OTHER INVESTMENTS	1,885	1,885	1,885

**TY 2015 Other Expenses Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	250	0		250
BANK CHARGES	152	0		152
ANNUAL FEES - UBS	150	0		150

**TY 2015 Other Income Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER MISC INCOME	0	0	0
NET RENTAL INCOME FROM NORTHWOOD PLAZA LTD PARTNERSHIP	230,149	230,149	230,149

## TY 2015 Other Increases Schedule

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Description	Amount
PRIOR PERIOD ADJUSTMENT	73

**TY 2015 Other Liabilities Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP

**EIN:** 13-6185337

Description	Beginning of Year - Book Value	End of Year - Book Value
OVERDRAFT CITIBANK CHECKING	0	1,521

**TY 2015 Taxes Schedule**

**Name:** THE GUSTI BRANDT FOUNDATION  
C/O CITRIN COOPERMAN & CO LLP  
**EIN:** 13-6185337

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	1,988	0		1,988