

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93491168004076

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 instructions is at $\underline{www.irs.gov/form990pf}$.

Return of Private Foundation

Open to Public

						zniopeedion
For	caler	ndar year 2015, or tax year beginning 01-	01-2015	, and ending 1	2-31-2015	
	e of four	ndation ELD FOUNDATION		A Employer id	entification numb	er
	_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	LED TOOKENTON		13-7170245		
		street (or P O box number if mail is not delivered to street addres	s) Room/suite	B Telephone nur	mber (see instruction	ıs)
РО	BOX 237	70		(860) 210-0060)	
		state or province, country, and ZIP or foreign postal code		C If exemption	application is pendin	ng, check here 🕨 🦵
G C	neck all	that apply Initial return Initial return of a	former public charity			_
u c i	ieck dii	Final return Address change Name change	former public charity	2. Foreign o	ganizations, check h rganizations meeting k here and attach co	the 85%
		pe of organization Section 501(c)(3) exempt prival 947(a)(1) nonexempt charitable trust Other taxab		E If private for	undation status was in 507(b)(1)(A), chec	terminated
		t value of all assets at end JAccounting method	▼ Cash	F II the lounds	ation is in a 60-mont	
		rom Part II, col. (c), \$ 1,220,760	t be on cash basıs.)	under section	n 507(b)(1)(B), ched	ck here 🕨 l
Pa	rt 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 (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only
	1	Contributions, gifts, grants, etc , received (attach				
		schedule)				
	2	Check F if the foundation is not required to attach				
	_	Sch B	12	12		
	3	Dividends and interest from securities	25,662	25,662		
	5a	Gross rents	23,002	25,002		_
	b	Net rental income or (loss)				
Φ	6a	Net gain or (loss) from sale of assets not on line 10	56,356			
Revenue	ь	Gross sales price for all assets on line 6a 185,338				
<u>&</u>	7	Capital gain net income (from Part IV, line 2)		56,356		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total.Add lines 1 through 11	82,030	82,030		
	13	Compensation of officers, directors, trustees, etc	0	0		
	14	Other employee salaries and wages				
ě.	15	Pension plans, employee benefits				
유	16a	Legal fees (attach schedule)	l —			
Expenses	b	Accounting fees (attach schedule)		0		(
	C	Other professional fees (attach schedule)	6,571	0		(
Administrative	17	Interest				
붕	18	Taxes (attach schedule) (see instructions)		0		(
	19	Depreciation (attach schedule) and depletion				
듥	20	Occupancy				
and #	21	Travel, conferences, and meetings				-
	22	Printing and publications		0		,
Operating	23	Other expenses (attach schedule)	106	0		<u> </u>
e G	24	Total operating and administrative expenses.	8,415	0]
ð	25	Add lines 13 through 23	·			105,050
•	25	, , , , , , , , , , , , , , , , , , , ,	103,030			103,036
		Total expenses and disbursements. Add lines 24 and 25	113,465	0		105,050
	27	Subtract line 26 from line 12	24 425			
	a	Excess of revenue over expenses and disbursements	-31,435	82,030		
	b	Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)		82,030		
	C	najasted het meone (ii negative, enter -0-)				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book value	(b) book value	(c) Fall Planket Value
	2	Savings and temporary cash investments	144,942	40,625	40,625
	3	Accounts receivable	,	,	,
	•	Less allowance for doubtful accounts			
	4	Pledges receivable -			
	7	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	· ·	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts -			
	8	Inventories for sale or use			
쫉	9	Prepaid expenses and deferred charges			
Assets	_	Investments—U S and state government obligations (attach			
⋖	10a	schedule)			
	b	Investments—corporate stock (attach schedule)	904,612	982,393	1,180,135
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	18,298	0	0
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	1,067,852	1,023,018	1,220,760
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Liat	21	Mortgages and other notes payable (attach schedule)			
_	22	O ther liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
ရှိ	25	Temporarily restricted			
	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
ď	29	Retained earnings, accumulated income, endowment, or other funds	1,067,852	1,023,018	
Net	30	Total net assets or fund balances(see instructions)	1,067,852	1,023,018	
	31	Total liabilities and net assets/fund balances(see instructions)	1,067,852	1,023,018	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must agr	ee	_
		with end-of-year figure reported on prior year's return)		1	1,067,852
2		Enter amount from Part I, line 27a		2	-31,435
3		Other increases not included in line 2 (itemize)		_ 3	0
4		Add lines 1, 2, and 3		4	1,036,417
5		Decreases not included in line 2 (itemize) ►		<u>-</u> 5	13,399
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), line	e 30 . 6	1,023,018

the Part VI instructions

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 (b) D—Donation Co (mo, day, yr)	Date sold (d) (mo , day, yr)
1a See Additional Data Table	
b	
с	
d	
e	
(e) Gross sales price Depreciation allowed (f) (or allowable) Cost or other basis (g) plus expense of sale (h) (e) plus	or (loss) (f) minus (g)
a See Additional Data Table	
b	
с	
d	
e	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col	(h) gaın mınus
	less than -0-) or rom col (h))
a See Additional Data Table	
b	
с	
d	
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 Not short, term capital gain or (loss) as defined in sections 1332(5) and (6)	56,356
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	
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? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part	┌ Yes ┌ No
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 (col (b) divided	
2014 75,735 1,312,332	0 057710
2013 65,985 1,038,664	0 063529
2012 68,183 975,857	0 069870
2011 97,106 520,524 2010 44,742 520,524	0 186554 0 085956
2010 44,742 520,524 2 Total of line 1, column (d)	0 463619
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by	0 403019
the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	0 002724
The state of the following and dispersion for Early fille of the first the first terms of	0 092724
5 Multiply line 4 by line 3	1,269,879
5 Multiply line 4 by line 3	1,269,879 117,748
5 Multiply line 4 by line 3. 5 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 7 Add lines 5 and 6. 7	1,269,879

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

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	54 0(e),	, UI 4340—Set	= paye	: 10 OI	the ms	LIUCLIO	113)	
1a		- □)					
	and enter "N/A" on line 1 Date of ruling or determination letter								
	(attach copy of letter if necessary-see instructions)			(
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1				1,641
	here ► Tand enter 1% of Part I, line 27b			• 1					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	ations e	enter 4% of						
2	Tax under section 511 (domestic section $4947(a)(1)$ trusts and taxable foun enter $-0-$)	ndation	s only Other	s	2				0
3	Add lines 1 and 2			•	3				1,641
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	rs	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0		•	5				1,641
6	Credits/Payments		ī						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	,796					
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6с							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				1,796
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 2	2220 is	attached 📽	J	8				5
9	$\textbf{Tax}\ \textbf{due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount}\ \textbf{owed}\ \boldsymbol{.}$			•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amoun	t over	paid		10				150
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	150	Refunded	<u> </u>	11				0
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loc	al legislation	or di	d			Yes	No
	it participate or intervene in any political campaign?						1a	igsquare	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p for definition)?			ee In	struction	ons	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities			· ·	i	•	10		
	published or distributed by the foundation in connection with the activities.	allu co	pies or arry in	alciia	15				
c	Did the foundation file Form 1120-POL for this year?						1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) impos	• • دمططس	ring the year	•		•	10		
u	(1) On the foundation \Rightarrow \$ 0 (2) On foundation managers			0					
e	Enter the reimbursement (if any) paid by the foundation during the year for poli				osed				
_	on foundation managers \blacktriangleright \$0	icicui c	xpendicure to		oscu				
2	Has the foundation engaged in any activities that have not previously been rep	norted :	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.	portou	to the Inc						
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts aove	rnına instrur	nent	articles	:			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confi	=	=	-			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du						5		No
	If "Yes," attach the statement required by General Instruction T.	_	·						
6	Are the requirements of section 508(e) (relating to sections 4941 through 49 • By language in the governing instrument, or	45) sa	tisfied either						
	 By state legislation that effectively amends the governing instrument so th 	at no n	nandatory dir	ection	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?					· · ·	۳	163	
•	and Part XV.	• •	· · · ·	aic 11,	• •	,, 	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see ins	tructions)						
	►NY								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99								
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for l	art X	1 /) ›		_		
4.0	If "Yes," complete Part XIV				• •		9	\longmapsto	No
10	Did any persons become substantial contributors during the tax year? If "Yes,			_			10		NI-
	and addresses.						10	1 1	No

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶ <u>N/A</u>			
14	The books are in care of ▶JUDITH Z FRIEDMAN TRUSTEE Telephone no ▶(860))210	-0060	
	Located at ▶80 ROCKY MOUNTAIN ROAD ROXBURY CT ZIP+4 ▶06783			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		b [-
	and enter the amount of tax-exempt interest received or accrued during the year	• •	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т —
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)?			
	(6) Agree to pay money or property to a government official? (Exception. 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)			
ь	If any answer is "Yes" to 1a(1)–(6), did any 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	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?	1c		No
2	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 $4942(j)(5)$)			
а	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?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.).	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b	1	No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	ed)
5a	During th	e year dıd the foundatıor	рау	or incur any amoun	t to					
	(1) Carry	on propaganda, or other	wise	attempt to influenc	e leg	ıslatıon (section 49	45(e))?	√ No	
	(2) Influe	nce the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry		
	on, dı	rectly or indirectly, any	vote	registration drive?.				\ \ Yes \	√ No	
	(3) Provi	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		┌ Yes ि	√ No	
	(4) Provi	de a grant to an organıza	tıon	other than a charita	ble,	etc , organization de	scrib	ped		
	ın sec	tion 4945(d)(4)(A)? (se	e in	structions)				T Yes	√ No	
	(5) Provi	de for any purpose other	thar	religious, charitabl	e, sc	ientific, literary, or				
	educa	ational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No	
b	If any ans	swerıs "Yes" to 5a(1)–(5), d	ıd any of the transac	tions	fail to qualify under	the	exceptions described in		
	Regulatio	ns section 53 4945 or i	nac	urrent notice regard	ıng d	lisaster assistance	(see	instructions)?		5b
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	ssistance check her	e		_	
c	_	wer is "Yes" to question								
								T Yes 「	- No	
		attach the statement requ								
6a		undation, during the yea					prer	niums on		
		al benefit contract?		*					- No	
ь								benefit contract?		6b No
		o 6b, file Form 8870.		•		• • •				
7a		ne during the tax year, w	as tl	ne foundation a party	∕ to a	a prohibited tax shel	ter t	ransaction? TYes	- No	
ь		=				•		the transaction?		7b
								n Managers, Highly		Employees,
Ра	rt VIII	and Contractors		·		<u>, </u>				
1	List all off	icers, directors, trustees	, fo	ındation managers a	nd t	heir compensation (see i	nstructions).		
				Title, and average	(c)	Compensation(If		(d)		Evnance possunt
	(a) Na	me and address	l	hours per week		not paid, enter	l e	Contributions to mployee benefit plans		Expense account, other allowances
			(b)	devoted to position		-0-)		deferred compensation	(-,	
CHAY	E ZUCKERMA	N SHAPOT	TRU	STEE		0		0		0
		STREET APT1W	1 00)						
	/ YORK, NY									
	TH Z FRIEDM/		1	STEE		0		0		0
	ROCKY MO BURY,CT	UNTAIN RD	1 00	,						
	B ZUCKERMA		TDU	CTEE		0				
		RS RETREAT	1 00	STEE)		U		0		0
	ANNAH, G									
			emp	oloyees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE."
		(a)		Title, and aver	200			Contributions to		
Nai	me and add	ress of each employee p	aıd	hours per we		(c) Compensation	n	employee benefit	(-)	Expense account,
	mo	re than \$50,000		(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	other allowances
NON	 JE							(2)		
	<u> </u>									
									1	
Tota	l number o	f other employees paid o	ver	50,000						0

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (s	see instructions). If none, enter "NON	NF".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		• 0
Part IX-A Summary of Direct Charitable Activities		•
·	aught statutural information such as the number	or of
ist the foundation's four largest direct charitable activities during the tax year. Include rele rganizations and other beneficiaries served, conferences convened, research papers produ		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	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
· -		
3		I
3		

Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	1,195,226
b	Average of monthly cash balances	1b	93,991
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,289,217
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,289,217
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	19,338
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,269,879
6	Minimum investment return. Enter 5% of line 5	6	63,494
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	63,494
2a	Tax on investment income for 2015 from Part VI, line 5 2a 1,641		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	1,641
3	Distributable amount before adjustments Subtract line 2c from line 1	3	61,853
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	61,853
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	61,853
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	105,050
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	105,050
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	105,050
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed I	ncome (see instruc	ctions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015 fro	om Part XI. line 7					61,853
	Undistributed income, if any, as o						
	Enter amount for 2014 only				0		
b		20, 20		0			
3	Excess distributions carryover, i						
а	From 2010	18,923					
b	From 2011	71,412					
c	From 2012	21,959					
d	From 2013	14,856					
е	From 2014	11,913					
f	Total of lines 3a through e		139,063				
4	Qualifying distributions for 2015	from Part					
	XII, line 4 🕨 \$	105,050					
а	Applied to 2014, but not more th	an line 2a			0		
b	Applied to undistributed income of (Election required—see instruction)			0			
C	Treated as distributions out of co required—see instructions)	· · · · · · · · · · · · · · · · · · ·	0				
d	Applied to 2015 distributable am	ount					61,853
е	Remaining amount distributed ou	t of corpus	43,197				
5	Excess distributions carryover a	pplied to 2015	0				0
	(If an amount appears in column (c same amount must be shown	• •					
6	Enter the net total of each colun indicated below:	nn as					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	182,260				
b	Prior years' undistributed income line 4b from line 2b			0			
c	Enter the amount of prior years' u						
	income for which a notice of defic						
	been issued, or on which the sect			0			
	tax has been previously assessed						
	Subtract line 6c from line 6b Tax —see instructions			0			
е	Undistributed income for 2014 S 4a from line 2a Taxable amount-						
	instructions				0		
f	Undistributed income for 2016 S						
	lines 4d and 5 from line 1 This aid be distributed in 2015						0
7	A mounts treated as distributions						
	corpus to satisfy requirements in	posed by					
	section 170(b)(1)(F) or 4942(g)(0				
_	be required - see instructions).						
8	Excess distributions carryover fr applied on line 5 or line 7 (see ins		18,923				
9	Excess distributions carryover to						
-	Subtract lines 7 and 8 from line 6		163,337				
10	Analysis of line 9						
а	Excess from 2011	71,412					
b	Excess from 2012	21,959					
	Excess from 2013	14,856					
	Excess from 2014	11,913					
е	Excess from 2015	43,197					

P	art XIV Private Operating Foundation	ons (see instru	ctions and Part	VII-A, question	9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015, e					
b	Check box to indicate whether the organization is	s a private operat	ing foundation des	cribed in section		「 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) local
	Investment return from Part X for each year listed					
b 8	, 35% of line 2a					
c	Qualifying distributions from Part XII,					_
_	line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt					
	activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
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					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support					
	from an exempt organization					
В-	(4) Gross investment income				 	
Pa	rt XV Supplementary Information (Coassets at any time during the y			e organization	i nad \$5,000 o	r more in
1	Information Regarding Foundation Managers:	<u> </u>	actionsi			
а	List any managers of the foundation who have co					atıon
	before the close of any tax year (but only if they	have contributed	more than \$5,000) (See section 50)7(d)(2))	
	List any managers of the foundation who own 10°	% or more of the s	stock of a corporat	ion (or an equally	large portion of th	e
	ownership of a partnership or other entity) of whi					
2	Information Regarding Contribution, Grant, Gift,					
	Check here T if the foundation only makes corunsolicited requests for funds. If the foundation is					ns under
	other conditions, complete items 2a, b, c, and d	nakes gires, gran	is, etc (see mstru	ctions) to marviat	iais of organization	is under
а	The name, address, and telephone number or e-	mail address of th	e person to whom	applications shou	ıld be addressed	
	THE WINFIELD FOUNDATION CO JUDITH F					
	80 ROCKY MOUNTAIN RD					
	ROXBURY,CT 06783 (860)210-0060					
	· ,	had and		have a basselet some to the		
b	The form in which applications should be submit			•		DI E
	TYPED APPLICATION INCLUDING NAME OF PURPOSE/FUNCTION AND SPECIFIC REQUE		HAKITABLE ORG	ANIZATION, ADI	JKESS, CHARI FA	BLE
_	Any submission deadlines	- •				
	NONE NONE NONE					
	Any restrictions or limitations on awards, such a	is by geographics	lareas charitable	fields kinds of in	stitutions or othe	
u	factors	is by geographica	n arcas, charicable	, neida, killus ul III	sacucions, or othe	•
	NONE					

Form 990-PF (2015)				Page 11
Part XV Supplementary Inform		wayed for E	utura Daumant	
3 Grants and Contributions Paid	If recipient is an individual,		uture Payment	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
See Additional Data Table				
Total	<u> </u>	<u></u>	▶ 3a 	105,050
Approved for recare payment	I			
			<u> </u>	

Part XVI-A Analysis of Income-Produc	cing Activitie	s			Page 1 2
Enter gross amounts unless otherwise indicated		isiness income	Excluded by section	<u> </u>	(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See instructions)
a b					
c d					
e					
f g Fees and contracts from government agencies					
Membership dues and assessmentsInterest on savings and temporary cash investments			14	12	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	25,662	
a Debt-financed property b Not debt-financed property					
6 Net rental income or (loss) from personal property.					
7 Other investment income8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory			14	56,356	
1 Other revenue a					
b					
d					
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e)				82,030 13	82,030
e	calculations)		:	13	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities t	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
Subtotal Add columns (b), (d), and (e). Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to the accomplishment of the foundationship of of	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities t Line No. Explain below how each activity for whith the accomplishment of the foundations.	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities t Line No. Explain below how each activity for whith the accomplishment of the foundations.	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities t Explain below how each activity for wh the accomplishment of the foundation	calculations) o the Accom iich income is re	plishment of E	xempt Purpos e) of Part XVI-A c	es ontributed importa	82,030 ntly to

Part XVII	Information Re Noncharitable					action	s and I	Relationship	s With		
	rganization directly or i	ndırectly e	ngage	ın any of t	the following wit					Yes	s No
organızat	ions?										
a Transfers	from the reporting four	ndation to	a noncl	harıtable e	exempt organiza	ition of					
(1) Cash	1									1a(1)	No
(2) Othe	erassets									1a(2)	No
b O ther tra	nsactions										
(1) Sale	s of assets to a noncha	rıtable exe	empt or	ganızatıor	n					1b(1)	No
(2) Purc	hases of assets from a	noncharit	able ex	empt orga	inization					1b(2)	No
(3) Rent	al of facilities, equipme	nt, or othe	rasset	s						1b(3)	No
(4) Reim	nbursement arrangemer	nts								1b(4)	No
(5) Loan	s or loan guarantees.									1b(5)	No
(6) Perfor	mance of services or m	embership	or fun	draising s	olicitations					1b(6)	No
c Sharing o	of facilities, equipment,	maılıng lıs	ts, oth	er assets,	or paid employ	ees				1c	No
of the goo in any tra	swer to any of the above ods, other assets, or se insaction or sharing arr	rvices giv angement,	en by tl , show i	he reporti n column	ng foundation I (d) the value of	the fou the goo	ndation r ds, other	eceived less th assets, or ser	an fair mark vices receiv	et value ed	
(a) Line No	(b) Amount involved	(c) Name	of nonch	aritable exe	empt organization	(d) l	Description	of transfers, trans	actions, and sh	aring arrangem	ents
described	indation directly or indiding section 501(c) of the complete the following (a) Name of organization	ne Code (o schedule		an sectioi		ın sectio			cription of relati	·	√No
Sign the	der penalties of perjury, best of my knowledge a rmation of which prepar *****	and belief,	ıt ıs tru	ie, correct					han taxpaye May t returr	r) is based of the IRS discuss	this
	Signature of officer or t	rustee			Date	•	Title		below		
·	Print/Type preparer's EDWARD STAMBOVSKY	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ►	PTIN P	00434453	
Paid Preparer Use	Firm's name VIOLA CHRABASCZ Firm's address	REYNOLD)S & C () LLP				Firm's EIN 🕨	06-111986	6	
Only	103 PHOENIX AVEN	UE ENFIE	LD, CT	06082				Phone no (8)	50)741-30	38	

m 990PF Part IV - Capit	al Gains and Losses for Ta	x on Invest	ment Income -	- Columns a - d	I
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)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
8175 SHRS HARRIS C	Р	2015-06-01	2015-06-02		
300 SHRS MEDTRONI	Р	2015-01-27	2015-10-01		
500 SHRS DOW CHEMICAL			Р	2012-09-05	2015-10-01
1647 SHRS EXELIS			Р	1991-12-09	2015-06-01
1000 SHRS MEDTRON	IC INC		Р	2012-01-18	2015-01-27
500 SHRS WESTLAKE	CHEMICAL CO		Р	2012-09-05	2015-10-01
n 990PF Part IV - Capit	al Gains and Losses for Ta	x on Invest	ment Income -	- Columns e - h	I
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis Gain or (loss) (g) plus expense of sale (h) (e) plus (f) minus (, ,	
65			65		0
20,125			23,085		-2,960
21,204			14,500		6,704
40,755			34,230		6,525

20,125	23,085	-2,9
21,204	14,500	6,7
40,755	34,230	6,5
76.050	20 500	27.4

37,442	39,508		76,950			
8,645	17,594		26,239			
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I						
Gains (Col (h) gain minus	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
col (k), but not less than -0-) or (l) Losses (from col (h))	Excess of col (1) (k) over col (j), If any	A djusted basıs (j) as of 12/31/69	(i) F M V as of 12/31/69			
0						
-2,960						
6,704						
6,525						
37.442						

8,645

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
15-08 COLLEGE POINT AABR INC BOULEVARD / PO BOX 560247 COLLEGE POINT, NY 11356	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
AFRICAN MISSION HEALTHCARE FOUNDATION PO BOX 2783 WESTERVILLE,OH 43086	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	3,000
AFTER SCHOOL ARTS PROGRAM PO BOX 15 WASHINGTON DEPOT,CT 06794	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ALVIN AILEY DANCE FOUNDATION 405 WEST 55TH STREET NEW YORK,NY 10019	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
ALZHEIMER'S ASSOCIATION 225 NORTH MICHIGAN AVENUE- FLOOR 17 CHICAGO,IL 60601	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	5,000
ALZHEIMER'S ASSOCIATION- CONNECTICUT CHAPTER 2075 SILAS DEANE HIGHWAY / SUITE 100 ROCKY HILL,CT 060371395	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,000
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY,OK 73123	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	3,500
ANDY NORTH AND FRIENDS CANCER FUND - UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 537264090	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ANN & ROBERT H LURIE CHILDREN'S HOSPITAL OF CHICAGO 225 EAST CHICAGO AVENUE BOX 4	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CHICAGO,IL 606112991				
ARIZONA CHILDREN'S CHARITIES INC 1298 WOODRUFF ROAD GREENVILLE,SC 29607	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ATLANTIC THEATER COMPANY 76 NINTH AVENUE / SUITE 537 NEW YORK,NY 10011	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,500
BAY AREA SPORTS HALL OF FAME 465 CALIFORNIA STREET / SUITE 806 SAN FRANCISCO, CA 94104	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
BEAUFORT CHARITIES PO BOX 503 BEAUFORT,SC 29901	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
BIGHORN INSTITUTE PO BOX 262 PALM DESERT, CA 922610262	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
BOBBY NICHOLS FOUNDATION 15391 CANONGATE DRIVE FT MYERS,FL 33912	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
Total			▶ 3a	105,050

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
BOOKS FOR AFRICA 253 EAST 4TH STREET SUITE 200 ST PAUL, MN 55101	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET - 8TH FLOOR NEW YORK,NY 10022	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,000
BUCKNELL UNIVERSITY ONE DENT DRIVE LEWISBURG,PA 17837	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	1,000
BUILDING HOMES FOR HEROES 65 ROOSEVELT AVENUE / SUITE 105 VALLEY STREAM, NY 11581	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CALL TO CURE - UNIVERSITY OF SOUTHERN CALIFORNIA ADM 160 MC 4017 LOS ANGELES, CA 90089	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	2,500
CHILDREN'S HOME FOUNDATION 2130 NORTH KNOXVILLE PEORIA,IL 61603	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CHILDREN'S HOME FOUNDATION 2130 NORTH KNOXVILLE PEORIA,IL 61603	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CHIP IN FOR CARLY'S CLUB - ROSWELL PARK CANCER INSTITUTE ELM CARLTON STREET BUFFOLO,NY 14263	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CJR MEMORIAL FOUNDATION 1114 DEWBERRY DRIVE HAWLEY,PA 18428	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
COLUMBIA GRAMMAR & PREPARATORY SCHOOL 5 WEST 93RD STREET NEW YORK,NY 10025	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	5,000
CORVIAS FOUNDATION 210 5TH AVENUE SOUTH / SUITE 202 EDMONDS, WA 98020	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
CRAGMONT ASSEMBLY INC 1233 NORTH FORK ROAD BLACK MOUNTAIN,NC 28711	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
DANIEL MURPHY SCHOLARSHIP FUND 309 WEST WASHINGTON SUITE 1250 CHICAGO,IL 60606	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE - 2ND FLOOR NEW YORK, NY 100015004	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
DRUG CRISIS IN OUR BACKYARD 62 BRITTANY LANE CARMEL,NY 10512	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
Total			▶ 3a	105,050

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
EARL HAYNES TRIBUTE COASTAL HERITAGE SOCIETY INC 303 MARTIN LUTHER KING BOULEVARD SAVANNAH,GA 31401	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
EAST LAKE FOUNDATION 2606 ALSTON DRIVE SE ATLANTA, GA 30317	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
EMMAUS COMMUNITY OF PITTSBURGH 2821 SARAH STREET PITTSBURGH,PA 15203	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ERNIE KAULBACK MEMORIAL FUND - BRIDGEPORT HOSPITAL FOUNDATION INC 267 GRANT STREET BRIDGEPORT,CT 06610	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
FAMILIES WITH CHILDREN FROM CHINA PO BOX 237065 NEW YORK,NY 10023	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
FIRST TEE OF WINSTON SALEM 100 CAMBRIDGE PLAZA DRIVE / SUITE B WINSTON SALEM,NC 27104	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE SUITE 420 ROCKVILLE,MD 208505168	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMSHELP SUPPORT PROGRAMS	1,000
FRESH AIR FUND 633 THIRD AVENUE NEW YORK, NY 10017	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
FRIENDS OF CALLAWASSIE ISLAND 176 CALLAWASSIE DRIVE CALLAWASSIE ISLAND, SC 29909	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
GENESIS WOMEN'S SHELTER AND SUPPORT 4411 LEMMON AVENUE / SUITE 201 DALLAS,TX 75219	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
GEORGE ARCHER MEMORIAL FOUNDATION FOR LITERACY 1300 SOUTH EL CAMINO REAL 525 SAN MATEO,CA 94402	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
HADASSAH 40 WALL STREET NEW YORK,NY 10005	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
HELEN AND ROBERT APPEL ALZHEIMER'S RESEARCH - WEILL CORNELL MEDICINE 1300 YORK AVENUE BOX 314 NEW YORK,NY 10065	NONE		HELP SUPPORT PROGRAMS	1,000
HIMALAYAN CATARACT PROJECT PO BOX 55 WATERBURY,VT 05676	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,500
Total			▶ 3a	105,050

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
IN GOD'S LOVE WE DELIVER 166 AVENUE OF THE AMERICAS NEW YORK,NY 10013	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ISRAELI PALESTINIAN COOPERATIVE FOR ECONOMIC EXP PO BOX 5003 WOODBURY,CT 06798	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,500
JEWISH FEDERATION OF WESTERN CT 444 MAIN STREET NORTH SOUTHBURY,CT 06488	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
MAP INTERNATIONAL 4700 GLYNCO PARKWAY BRUNSWICK,GA 31525	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,500
MARTIN KLAIBER MEMORIAL GOLF TOURNAMENT 43702 BURNING SANDS TERRACE LEESBURG, VA 20176	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
MIGHTY OAKS FOUNDATION 27919 JEFFERSON AVENUE - SUITE 203 TEMECULA,CA 92590	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
MISSION YMCA 4080 MISSION STREET SAN FRANCISCO,CA 94112	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
NATIONAL KIDNEY FOUNDATION OF LOUISIANAN 8200 HAMPSON STREET - SUITE 425 NEW ORLEANS, LA 70118	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
NEW YORK CARES 65 BROADWAY NEW YORK,NY 10006	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
NEW YORK TIMES NEEDIEST CASES FUND 4 CHASE METROTECH CENTER BROOKLYN,NY 11245	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
NORTHEAST ARC 64 HOLTEN STREET DANVERS,CT 01923	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
OFFICER HAROLD L VITALE MEMORIAL FUND INC 20 BRISTOL ROAD PEABODY,MA 01960	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
PARK CITY FOUNDATION PO BOX 681499 PARK CITY,UT 84068	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	9,250
PATRIOT FOUNDATION PO BOX 5069 PINEHURST,NC 28374	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
PILOBOUS INC PO BOX 388 WASHINGTON DEPOT, CT 06794	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
Total			▶ 3a	105,050

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year				
PULMONARY FIBROSIS FOUNDATION 811 WEST EVERGREEN AVE SUITE 204 CHICAGO,IL 60642	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	3,000
RANDY JONES FOUNDATION INC 11618 BOULTON AVENUE SAN DIEGO,CA 92128	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
ROXBURY LAND TRUST PO BOX 51 ROXBURY,CT 06783	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
SALMON DEFENSE FUND PO BOX 7431 OLYMPIA,WA 98507	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
SAVANNAH JEWISH FEDERATION 5111 ABERCORN STREET SAVANNAH,GA 31405	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,000
SEEDS OF PEACE 370 LEXINGTON AVE-SUITE 2103 NEW YORK,NY 10017	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
STATER BROS CHARITIES PO BOX 150 SAN BERNANDINO,CA 92402	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
SUNSHINE THROUGH GOLF FOUNDATION 11855 ARCHER AVENUE LEMONT,IL 60439	NONE	PUBLIC CHARITY	HEL SUPPORT PROGRAMS	500
SUSAN B ANTHONY PROJECT 179 WATER STREET TORRINGTON,CT 06790	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
SWING FOR SIGHT 1717 K STREET NW / SUITE 900 WASHINGTON, DC 20006	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
SYMPHONY SPACE 2537 BROADWAY AT 95TH STREET NEW YORK,NY 100256990	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
THE FIRST TEE OF CENTRAL OHIO 7309 EAST LIVINGSTON AVENUE REYNOLDSBURG,OH 43068	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
THE HEALING PLACE 2409 WILDWOOD STREET / PO BOX 2765 MUSCLE SHOALS,AL 356622765	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
THE PARKINSON COUNCIL 111 PRESIDENTIAL BOULEVARD / SUITE 141 BALA CYNWYD,PA 19004	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
THE SOUTHERN POVERTY LAW CENTER INC 400 WASHINGTON AVENUE MONTGOMERY,AL 36102	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
Total				105,050

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
TIGER GOLF GATHERING FOUNDATION 501-8 OLD GREENVILLE HWYPMB330 CLEMSON,SC 29631	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,300
TRICKLE UP 104 WEST 27TH STREET FLOOR 12 NEW YORK,NY 100016210	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	2,500
TROOPS DIRECT INC ONE FERRY BUILDING SUITE 200 SAN FRANCISCO, CA 94111	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
TWO HUNDRED CLUB OF THE COASTAL EMPIRE PO BOX 1922 SAVANNAH,GA 31402	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
UJA FEDERATION OF NEW YORK 130 EAST 59TH NEW YORK,NY 10022	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	1,000
VAL SKINNER FOUNDATION PO BOX 213 BAYHEAD,NJ 08742	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
VANDERBILT UNIVERSITY - PMB 407727 2301 VANDERBILT PLACE NASHVILLE,PA 362407727	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	5,000
WALKING WITH ANTHONY 9903 SANTA MONICA BOULEVARD / SUITE 1024 BEVERLY HILLS, CA 90212	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
WASHINGTON MONTESSORI SCHOOL 240 LITCHFIELD TURNPIKE NEW PRESTON,CT 06777	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	6,500
WESTOVER SCHOOL 1237 WHITTEMORE ROAD MIDDLEBURY,CT 06762	NONE	EDUCATIONAL INSTITUT	HELP SUPPORT PROGRAMS	2,000
WOMEN GOLFERS GIVE BACK 409 MERION HILL LANE WEST CONSHOHOCKEN,PA 19428	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
YOUNG LIFE - BUFFALO SOUTH NY DIVISION PO BOX 520 COLORADO SPRINGS,NY 80901	NONE	PUBLIC CHARITY	HELP SUPPORT PROGRAMS	500
Total			▶ 3a	105,050

TY 2015 Accounting Fees Schedule

Name: THE WINFIELD FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & TAX PREPARATION	1,500	0		0

TY 2015 Investments Corporate Stock Schedule

Name: THE WINFIELD FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
WALGREEN CO	6,353	18,479
MOHAWK INDUSTRIES	13,105	51,703
ІП	64,253	28,075
EXELIS	0	0
XYLEM	16,558	29,091
ABB LTD SPONS ADR	42,066	35,460
APPLIED MATERIALS INC DELAWARE	39,723	61,611
ILLINOIS TOOL WORKS INC	25,763	46,340
MEDTRONIC INC	53,865	53,844
MERCK & CO INC	39,243	52,820
MICROSOFT CORP	42,658	83,220
PAYCHEX INC	25,390	42,312
PROCTER & GAMBLE CO	33,340	39,705
ROCKWELL COLLINS INC	28,645	46,150
ROYAL DUTCH SHELL PLC	36,680	23,020
STATOIL HYDRO ASA	37,820	20,940
VADAFONE GROUP PLC	45,530	32,260
JOHN WILEY & SONS INC CL A	42,008	45,030
DOW CHEMICAL COMPANY	0	0
SPECTRA ENERGY	34,572	28,728
WESTLAKE CHEMICAL CORP	0	0
AIR PROD & CHEMICALS INC	35,256	52,044
AUTODESK INC	45,596	73,116
STRYKER CORP	41,845	55,764
SYNOPSYS INC	26,287	31,927
VERISK ANALYTICS INC	26,329	30,752
WILLIAMS COMPANIES	16,118	11,565
ZIMMER HOLDINGS INC	40,826	51,295
VECTRUS INC	122	1,901
CORNING, INC.	20,102	21,936

Name of Stock	End of Year Book Value	End of Year Fair Market Value
DIAGEO PLC	42,700	43,628
EBAY INC.	24,543	27,480
PAYPAL HOLDINGS INC.	21,788	25,340
HARRIS CORPORATION	13,309	14,599



TY 2015 Investments - Other Schedule

Name: THE WINFIELD FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
VERIZON STOCK RECEIVABLE	AT COST	0	0	l

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491168004076

TY 2015 Other Decreases Schedule

Name: THE WINFIELD FOUNDATION

Description	Amount
BASIS ADJUSTMENT MEDTRONIC MERGER	13,399

TY 2015 Other Expenses Schedule

Name: THE WINFIELD FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	97	0		0
POSTAGE	9	0		0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491168004076

TY 2015 Other Professional Fees Schedule

Name: THE WINFIELD FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEE	6,571	0		0

TY 2015 Taxes Schedule

Name: THE WINFIELD FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COMMONWEALTH OF MASS	35	0		0
FOREIGN TAXES PAID	203	0		0