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OMB No 1545-0052

2015

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Form **990-PF****Return of Private Foundation**
or Section 4947(a)(1) Trust Treated as Private FoundationDepartment of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning , and ending

Name of foundation THE MANN FAMILY FOUNDATION INC			A Employer identification number 22-2776320	
Number and street (or P O box number if mail is not delivered to street address) P O BOX 1501, NJ2-130-03-31			B Telephone number (see instructions) 609-274-6834	
City or town PENNINGTON	State NJ	ZIP code 08534-1501		
Foreign country name			Foreign postal code	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☒ Address change ☐ Name change			C If exemption application is pending, check here ☐ D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation				
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 12,450,826		J Accounting method: ☒ Cash ☐ Accrual ☐ 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))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	12,868,570			
2 Check ☐ if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	1,623,693			
b Gross sales price for all assets on line 6a	10,877,506			
7 Capital gain net income (from Part IV, line 2)		1,623,693		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	14,492,263	1,623,693	0	
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)				
24 Total operating and administrative expenses. Add lines 13 through 23	0	0	0	0
25 Contributions, gifts, grants paid	625,810			625,810
26 Total expenses and disbursements. Add lines 24 and 25	625,810	0	0	625,810
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	13,866,453			
b Net investment income (if negative, enter -0-)		1,623,693		
c Adjusted net income (if negative, enter -0-)			0	

For Paperwork Reduction Act Notice, see instructions.

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Part 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	End of year (b) Book Value (c) Fair Market Value		
Assets	1 Cash—non-interest-bearing	5,640	6,200,827	6,200,827	
	2 Savings and temporary cash investments		5,439,127	5,433,443	
	3 Accounts receivable				
	Less allowance for doubtful accounts				
	4 Pledges receivable				
	Less allowance for doubtful accounts				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule)				
	Less allowance for doubtful accounts				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U.S. and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)		316,691	816,556	
	c 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)					
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 instructions Also, see page 1, item I)		5,640	11,956,645	12,450,826	
Liabilities		17 Accounts payable and accrued expenses			
		18 Grants payable			
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe)				
	23 Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds		11,956,645		
	28 Paid-in or capital surplus, or land, bldg, and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds	5,640			
30 Total net assets or fund balances (see instructions)	5,640	11,956,645			
31 Total liabilities and net assets/fund balances (see instructions)	5,640	11,956,645			

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,640
2 Enter amount from Part I, line 27a	2	13,866,453
3 Other increases not included in line 2 (itemize) ☐ COST BASIS ADJUSTMNET	3	36,996
4 Add lines 1, 2, and 3	4	13,909,089
5 Decreases not included in line 2 (itemize) ☐ EXCESS FMV OVER COST OF ASSETS CONTRIBUTED	5	1,952,444
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	11,956,645

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Page **3****Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 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.)
1a See Attached Statement				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
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	1,623,693
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	0

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.

(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	133,752	12,328	10.849448
2013	142,699	40,130	3.555918
2012	108,544	65,367	1.660532
2011	93,784	66,514	1.409989
2010	93,153	60,081	1.550457

2 Total of line 1, column (d)	2	19.026344
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	3.805269
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	12,264,063
5 Multiply line 4 by line 3	5	46,668,059
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	16,237
7 Add lines 5 and 6	7	46,684,296
8 Enter qualifying distributions from Part XII, line 4 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	8	625,810

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 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, check here ☐ and enter 1% of Part I, line 27b	1		32,474
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		0
3	Add lines 1 and 2	3		32,474
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		32,474
6	Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d	7		0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		32,474
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ☐ Refunded ☐	11		0

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
b		X
c		X
d		
e		
2		X
3		X
4a		X
4b	N/A	
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ UST-MLT, A DIVISION OF BANK OF AMERICA, N Telephone no ▶ 609-274-6834 Located at ▶ 1300 MERRILL LYNCH DRIVE PENNINGTON NJ ZIP+4 ▶ 08534-1501			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	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 the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶	16	Yes	No
				X

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.

		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 ☒ No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ No		
(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) ☐ Yes ☒ No		
b	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)? Organizations relying on a current notice regarding disaster assistance check here ▶ ☐	1b	N/A
c	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	X
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))		
a	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? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 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	N/A
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____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
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	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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	X

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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))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? 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)? 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? N/A 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? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	☐ Yes ☒ No ☐ Yes ☒ No ☐ Yes ☒ No ☐ Yes ☒ No ☐ Yes ☒ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☒ No ☐ Yes ☐ No ☐ Yes ☒ No ☐ Yes ☒ No	5b 6b 7b	N/A X N/A
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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	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MADLINE MANN 300 BUCK HOLLOW RD FAIRFAX, VT 05454	VP/SECRETARY 1 00	0		
PAMELA MANN 47 FERN ST LEXINGTON, MA 02173	PRESIDENT/TREA 2 00	0		
DAVID BARON 47 FERN ST LEXINGTON, MA 02421	1.00	0		
TRAVIS MANN-GOW 399 BUCK HOLLOW ROAD FAIRFAX, VT 05454	1 00	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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
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		

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 NONE	
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 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	1,056,398
b	Average of monthly cash balances	1b	11,394,427
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	12,450,825
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	12,450,825
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	186,762
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,264,063
6	Minimum investment return. Enter 5% of line 5	6	613,203

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.)

1	Minimum investment return from Part X, line 6	1	613,203
2a	Tax on investment income for 2015 from Part VI, line 5	2a	32,474
b	Income tax for 2015 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	32,474
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	580,729
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	580,729
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	580,729

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	625,810
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	625,810
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	625,810

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.

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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				580,729
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010	90,149			
b From 2011	90,459			
c From 2012	105,276			
d From 2013	140,699			
e From 2014	133,136			
f Total of lines 3a through e	559,719			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 625,810				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2015 distributable amount				580,729
e Remaining amount distributed out of corpus	45,081			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	604,800			
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				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	90,149			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	514,651			
10 Analysis of line 9				
a Excess from 2011	90,459			
b Excess from 2012	105,276			
c Excess from 2013	140,699			
d Excess from 2014	133,136			
e Excess from 2015	45,081			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling**b** Check box to indicate whether the foundation is a private operating foundation described in section☐ 4942(j)(3) or ☐ 4942(j)(5)**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
				0
b 85% of line 2a				0
c Qualifying distributions from Part XII, line 4 for each year listed				0
d Amounts included in line 2c not used directly for active conduct of exempt activities				0
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				0
3 Complete 3a, b, or c for the alternative test relied upon:				
a "Assets" alternative test—enter				
(1) Value of all assets				0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				0
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				0
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)				0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				0
(3) Largest amount of support from an exempt organization				0
(4) Gross investment income				0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**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).)

MILTON MANN

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

NONE

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 e-mail 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 <i>Paid during the year</i> See Attached Statement				
Total			▶ 3a	625,810
b <i>Approved for future payment</i> NONE				
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			14		
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	1,623,693	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e)		0		1,623,693	0
13	Total. Add line 12, columns (b), (d), and (e)				13 1,623,693	1,623,693

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | |
|---|---|----|
| 1 | <p>Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> | |
| a | <p>Transfers from the reporting foundation to a noncharitable exempt organization of</p> | |
| | <p>(1) Cash</p> | 1a |
| | <p>(2) Other assets</p> | 1a |
| b | <p>Other transactions</p> | |
| | <p>(1) Sales of assets to a noncharitable exempt organization</p> | 1b |
| | <p>(2) Purchases of assets from a noncharitable exempt organization</p> | 1b |
| | <p>(3) Rental of facilities, equipment, or other assets</p> | 1b |
| | <p>(4) Reimbursement arrangements</p> | 1b |
| | <p>(5) Loans or loan guarantees</p> | 1b |
| | <p>(6) Performance of services or membership or fundraising solicitations</p> | 1b |
| c | <p>Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> | 1 |
| d | <p>If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | |

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

- 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

**Sign
Here**

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.


Signature of officer or trustee

Date 5/17/16

► Board, President
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

LAWRENCE F MCGUIRE

Preparer's signature

2

Date	
------	--

5/10/2016

Check ☒ if self-employed

PTIN

P00364310

Firm's name	► PricewaterhouseCoopers, LLP
-------------	-------------------------------

Firm's EIN ▶ 13-4008324

Firm's address ► 600 Grant Street, Pittsburgh, PA 15219

Phone no	412-355-6000
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Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2015

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

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

THE MANN FAMILY FOUNDATION INC

Employer identification number

22-2776320

Organization type (check one)**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE MANN FAMILY FOUNDATION INC	Employer identification number 22-2776320
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MILTON MANN IRA-PERSHING LLC 69 STUDIO ROAD STAMFORD CT 06903 Foreign State or Province _____ Foreign Country _____	\$ 4,224,662	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
2	MILTON MANN IRA-STATE STREET BANK 69 STUDIO ROAD STAMFORD CT 06903 Foreign State or Province _____ Foreign Country _____	\$ 8,643,908	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
	_____ _____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization THE MANN FAMILY FOUNDATION INC	Employer identification number 22-2776320
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	36,000 UNITS PRECISION CAST PARTS	\$ 8,342,640	12/16/2015
1	116 UNITS ALPHABET INC SHS	\$ 87,295	12/3/2015
1	116 UNITS ALPHABET INC SHS	\$ 89,111	12/3/2015
1	1,021 UNITS BROWN & BROWN INC FLA	\$ 33,040	12/3/2015
1	1,018 UNITS BERKSHIRE HATHAWAY	\$ 135,048	12/3/2015
1	2 UNITS BERKSHIRE HATHAWAY DEL CL A \$5	\$ 397,602	12/3/2015

Name of organization
THE MANN FAMILY FOUNDATION INC

Employer identification number
22-2776320

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	140 UNITS CANADIAN NATURAL RES LTD	\$ 3,234	12/3/2015
1	33 UNITS COSTCO WHOLESALE	\$ 5,401	12/3/2015
1	709 UNITS CABELLAS INC	\$ 33,734	12/3/2015
1	634 UNITS DANAHER CORP DEL	\$ 59,945	12/3/2015
1	4,880 UNITS FASTENAL COMPANY	\$ 192,467	12/3/2015
1	372 UNITS GOLDMAN SACHS	\$ 68,894	12/3/2015

Name of organization
THE MANN FAMILY FOUNDATION INC

Employer identification number
22-2776320

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,812 UNITS IDEXX LAB INC DEL	\$ 126,876	12/3/2015
1	410 UNITS INT BUSS MACHINES	\$ 56,957	12/3/2015
1	796 UNITS JACOBS ENGN GRP INC	\$ 35,605	12/3/2015
1	98 UNITS LINEAR TECHNOLOGY CORP	\$ 4,380	12/3/2015
1	47 UNITS MONSANTO CO NEW DEL COM	\$ 4,538	12/3/2015
1	617 UNITS MOHAWK INDUSTRIES INC	\$ 113,614	12/3/2015

Name of organization THE MANN FAMILY FOUNDATION INC	Employer identification number 22-2776320
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Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	118 UNITS O'REILLY AUTO INC	\$ 29,898	12/3/2015
1	792 UNITS OMNICOM	\$ 58,687	12/3/2015
1	372 UNITS PERRIGO	\$ 54,159	12/3/2015
1	454 UNITS PRAXAIR	\$ 49,513	12/3/2015
1	616 UNITS SIRONA DENTAL SYSTEMS	\$ 68,943	12/3/2015
1	3,928 UNITS TJX COS INC NEW	\$ 274,332	12/3/2015

Name of organization
THE MANN FAMILY FOUNDATION INC

Employer identification number
22-2776320

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	822 UNITS TRIMBLE NAV LTD	\$ 18,791	12/3/2015
1	464 UNITS TIFFANY AND CO NEW	\$ 35,324	12/3/2015
1	1,396 UNITS VISA INC CL A SHARES	\$ 109,293	12/3/2015
1	7,737 UNITS VALEANT PHARMACEUTICALS	\$ 724,647	12/3/2015
1	452 UNITS WATERS CORP	\$ 57,657	12/3/2015
1	750 UNITS WALMART STORES INC	\$ 44,280	12/3/2015

Name of organization THE MANN FAMILY FOUNDATION INC	Employer identification number 22-2776320
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	284 UNITS WEST PHARMACEUTICAL	\$ 17,602	12/3/2015
1	1092 UNITS CRODA INTL	\$ 46,956	12/3/2015
1	3723 UNITS HISCOX	\$ 58,046	12/3/2015
1	1615 UNITS IMI PLC SHS	\$ 22,509	12/3/2015
1	9057 UNITS ROLLS ROYCE	\$ 81,499	12/3/2015
1	497 UNITS CIE FINANCIERE RICHEMONT	\$ 37,617	12/3/2015

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

[illegible]

Name of organization THE MANN FAMILY FOUNDATION INC	Employer identification number 22-2776320
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Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ 0.

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
			
	For	Prov	Country
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
			
	For	Prov	Country
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
			
	For	Prov	Country
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
			
	For	Prov	Country

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 1 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Alzheimers Disease And Related Disorders Association Inc

Street

200 Executive Blvd Suite 4B

City

Southington

State

CT

Zip Code

06489

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

200

Name

American Committee For The Weizmann Institute Of Science Inc

Street

633 3Rd Ave Fl 20

City

New York

State

NY

Zip Code

10017

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

200

Name

American Jewish World Service, Inc

Street

45 West 36th Street, 11th Floor

City

New York

State

NY

Zip Code

10018

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

3,000

Name

Anti-Defamation League

Street

605 3Rd Ave Fl 9

City

New York

State

NY

Zip Code

10158

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

500

Name

Baruch College Fund

Street

111 West 57th Street, Suite 420

City

New York

State

NY

Zip Code

10019

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

5,000

Name

Dana Farber Cancer Institute

Street

450 Brookline Avenue

City

Boston

State

MA

Zip Code

02215

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

1,000

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 2 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Doctors Without Borders USA, Inc

Street

333 7th Avenue, 2nd Floor

City

New York

State

NY

Zip Code

10001

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

2,000

Name

Domestic Violence Crisis Center

Street

777 Summer St Ste 400

City

Stamford

State

CT

Zip Code

06901

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

100

Name

Hope for Haiti Inc

Street

900 Broad Avenue South Unit 2C

City

Naples

State

FL

Zip Code

34102

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

600

Name

Horizons For Homeless Children, Inc.

Street

1705 Columbus Ave.

City

Roxbury

State

MA

Zip Code

02119

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

2,500

Name

Jewish Home for the Elderly of Fairfield County

Street

175 Jefferson Street

City

Fairfield

State

CT

Zip Code

06825

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

750

Name

Lund Family Center

Street

76 Glen Road

City

Burlington

State

VT

Zip Code

05401

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

2,000

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 3 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Memorial Sloan-Kettering Cancer Center

Street

1275 York Avenue

City

New York

State

NY

Zip Code

10065

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

1,000

Name

Southern Poverty Law Center Inc

Street

400 Washington Avenue

City

Montgomery

State

AL

Zip Code

36104

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

1,000

Name

Stamford Hospital Health Foundation Inc

Street

1351 Washington Blvd

City

Stamford

State

CT

Zip Code

06902

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

10,000

Name

Stamford Symphony Orchestra Inc

Street

263 Tresser Blvd

City

Stamford

State

CT

Zip Code

06901

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

250

Name

United Way of Western Connecticut

Street

Corporate Office 85 West Street

City

Danbury

State

CT

Zip Code

06810

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

180

Name

World Jewish Congress American Section Inc

Street

501 Madison Avenue

City

New York

State

NY

Zip Code

10022

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

100

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 4 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Temple Beth El

Street

City Stamford	State CT	Zip Code	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 10,500

Name

US Holocaust Memorial Council aka United States Holocaust Memorial Museum

Street

100 Raoul Wallenberg Pl SW

City Washington	State DC	Zip Code 20024	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 130

Name

Masorti Foundation For Conservative Judaism In Israel

Street

475 Riverside Dr Ste 832

City New York	State NY	Zip Code 10115	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 100

Name

Stamford Jewish Center Incorporated

Street

1035 Newfield Ave

City Stamford	State CT	Zip Code 06905	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 200

Name

Chron's & Colitis Foundation of America, Inc.

Street

386 Park Ave South, 17th Floor

City New York	State NY	Zip Code 10016	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 200

Name

University of Connecticut Foundation, Inc.

Street

2390 Alumni Drive, Unit 3206

City Storrs	State CT	Zip Code 06269	Foreign Country
Relationship None	Foundation Status PC		
Purpose of grant/contribution General Operating			Amount 3,000

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 5 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

The Committee for Accuracy in Middle East Reporting in America

Street

P O Box 35040

City

Boston

State

MA

Zip Code

02135

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

100

Name

Chinese Theater Works Inc

Street

3718 Northern Blvd Ste 105

City

Long Is City

State

NY

Zip Code

11101

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

1,200

Name

Partners In Health

Street

888 Commonwealth Avenue, 3rd Floor

City

Boston

State

MA

Zip Code

02215

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

1,000

Name

Fairfield County Hospice House Inc

Street

22 1st Street

City

Stamford

State

CT

Zip Code

06905

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

500,000

Name

United Jewish Federation Of Stamford

Street

1035 Newfield Ave

City

Stamford

State

CT

Zip Code

06905

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

24,000

Name

The University of Vermont Foundation

Street

411 Main Street

City

Burlington

State

VT

Zip Code

05401

Foreign Country**Relationship**

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

50,000

THE MANN FAMILY FOUNDATION INC

22-2776320 Page 6 of 6

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Massachusetts General Hospital

Street

165 Cambridge Street Suite 600

City

Boston

State

MA

Zip Code

02114

Foreign Country

Relationship

None

Foundation Status

PC

Purpose of grant/contribution

General Operating

Amount

5,000

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Long Term CG Distributions		Amount	Totals												
Short Term CG Distributions		0	Capital Gains/Losses							Gross Sales		Cost or Other Basis, Expenses, Depreciation and Adjustments		Net Gain or Loss	
		0	Other sales							10,877,506		9,253,813		1,623,693	
		0								0		0			
	Description	CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss
1	COSTCO WHOLESALE CORP	221601K105	X				12/16/2015	12/23/2015	5,333	1,404					3,929
2	DANAHER CORP DEL COM	235851102	X				12/16/2015	12/23/2015	59,060	15,901					43,159
3	FASTENAL COMPANY	311900104	X				12/16/2015	12/23/2015	197,835	79,145					118,690
4	GOLDMAN SACHS GROUP INC	38141G104	X				12/16/2015	12/23/2015	67,487	54,486					13,001
5	IDEXX LAB INC DEL 90.10	45168D104	X				12/16/2015	12/23/2015	131,505	21,658					109,847
6	INTL BUSINESS MACHINES	459200101	X				12/16/2015	12/23/2015	57,016	53,968					3,048
7	JACOBS ENGN GRP INC DEL	469814107	X				12/16/2015	12/23/2015	33,976	37,855					-3,919
8	LINEAR TECHNOLOGY CORP	535878106	X				12/16/2015	12/23/2015	4,242	2,648					1,594
9	MOHAWK INDUSTRIES INC	608190104	X				12/16/2015	12/23/2015	117,336	44,826					72,510
10	MONSANTO CO NEW DEL C	61166W101	X				12/16/2015	12/23/2015	4,645	5,406					-761
11	O'REILLY AUTOMOTIVE INC	67103H107	X				12/16/2015	12/23/2015	29,925	2,684					27,241
12	OMNICOM GROUP COM	681919106	X				12/16/2015	12/23/2015	60,224	19,837					40,387
13	PRAXAIR INC	74005P104	X				12/16/2015	12/23/2015	47,052	37,409					9,643
14	PRECISION CASTPARTS	740189105	X				12/15/2015	12/23/2015	8,342,710	8,346,600					-3,890
15	PRECISION CASTPARTS	740189105	X				12/16/2015	12/23/2015	188,406	55,676					132,730
16	SIRONA DENTAL SYSTEMS	82966C103	X				12/16/2015	12/23/2015	87,309	25,441					61,868
17	TLX COS INC NEW	872540109	X				12/16/2015	12/23/2015	276,240	51,751					224,489
18	TIFFANY & CO NEW	886547108	X				12/16/2015	12/23/2015	35,759	27,810					7,949
19	TRIMBLE NAV LTD	896239100	X				12/16/2015	12/23/2015	18,189	13,820					4,366
20	VALEANT PHARMACEUTICAL	91911K102	X				12/16/2015	12/23/2015	887,969	149,727					738,242
21	WAL-MART STORES INC	931142103	X				12/16/2015	12/23/2015	45,398	39,459					5,939
22	WATERS CORP	941848103	X				12/16/2015	12/23/2015	60,043	33,870					26,173
23	WEST PHARMACTL SVCS INC	955306105	X				12/16/2015	12/23/2015	17,351	5,217					12,134
24	PERRIGO CO PLC	987822103	X				12/16/2015	12/23/2015	54,560	57,788					-3,228
25	BROWN & BROWN INC FLA	115238101	X				12/16/2015	12/23/2015	32,316	21,941					10,375
26	CABELAS INC	126804301	X				12/16/2015	12/23/2015	32,608	45,490					-12,884
27	CANADIAN NATURAL RES LTD	136385101	X				12/16/2015	12/23/2015	3,017	1,958					1,059

Part II, Line 10b (990-PF) - Investments - Corporate Stock

		0	316,691	0	816,556
		0	316,691	0	816,556
1	Description	Num Shares/ Face Value	Book Value Beg of Year	Book Value End of Year	FMV End of Year
2	ALPHABET INC SHS CL C	0		27,746	88,030
3	ALPHABET INC SHS CL A	0		27,914	90,249
4	BERKSHIRE HATHAWAY INC CL A	0		174,760	395,600
5	BERKSHIRE HATHAWAY INC	0		59,297	134,417
6	VISA INC CL A SHRS	0		26,974	108,260

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

Long Term CG Distributions		0	Short Term CG Distributions		0	10,877,506	0	0	9,253,813	1,623,693	F M V as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adjusted Basis	Gains Minus Excess FMV Over Adj. Basis or Losses
Amount		0	0											
	Description of Property Sold	CUSIP #	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Adjustments	Cost or Other Basis Plus Expense of Sale	Gain or Loss	F M V as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adjusted Basis	Gains Minus Excess FMV Over Adj. Basis or Losses
1	COSTCO WHOLESALE CRP D	22160K105		12/16/2015	12/23/2015	5,333			1,404	3,929		0	0	3,929
2	DANAHER CORP DEL COM	235851102		12/16/2015	12/23/2015	59,060			15,901	43,159		0	0	43,159
3	FASTENAL COMPANY	311900104		12/16/2015	12/23/2015	197,835			79,145	118,690		0	0	118,690
4	GOLDMAN SACHS GROUP IN	38141G104		12/16/2015	12/23/2015	67,487			54,486	13,001		0	0	13,001
5	IDEXX LAB INC DEL \$0.10	45168D104		12/16/2015	12/23/2015	131,505			21,658	109,847		0	0	109,847
6	INTL BUSINESS MACHINES	459200101		12/16/2015	12/23/2015	57,016			53,968	3,048		0	0	3,048
7	JACOBS ENGR GRP INC DEL	489814107		12/16/2015	12/23/2015	33,976			37,895	-3,919		0	0	-3,919
8	LINEAR TECHNOLOGY CORP	535678106		12/16/2015	12/23/2015	4,242			2,648	1,594		0	0	1,594
9	MOHAWK INDUSTRIES INC	608190104		12/16/2015	12/23/2015	117,336			44,826	72,510		0	0	72,510
10	MONSANTO CO NEW DEL C	61168W101		12/16/2015	12/23/2015	4,645			5,406	-761		0	0	-761
11	O'REILLY AUTOMOTIVE INC	67103H107		12/16/2015	12/23/2015	29,925			2,884	27,241		0	0	27,241
12	OMNICOM GROUP COM	681919106		12/16/2015	12/23/2015	60,224			19,837	40,387		0	0	40,387
13	PRAXAIR INC	74005P104		12/16/2015	12/23/2015	47,052			37,409	9,643		0	0	9,643
14	PRECISION CASTPARTS	740188105		12/15/2015	12/23/2015	8,342,710			8,346,600	-3,890		0	0	-3,890
15	PRECISION CASTPARTS	740188105		12/16/2015	12/23/2015	188,406			55,676	132,730		0	0	132,730
16	SIRONA DENTAL SYSTEMS	82966C103		12/16/2015	12/23/2015	67,309			25,441	41,868		0	0	41,868
17	TJX COS INC NEW	872540109		12/16/2015	12/23/2015	276,240			51,751	224,489		0	0	224,489
18	TIFFANY & CO NEW	886547108		12/16/2015	12/23/2015	35,759			27,810	7,949		0	0	7,949
19	TRIMBLE NAV LTD	896239100		12/16/2015	12/23/2015	18,186			13,820	4,366		0	0	4,366
20	VALEANT PHARMACEUTICAL	91911K102		12/16/2015	12/23/2015	887,969			149,727	738,242		0	0	738,242
21	WAL-MART STORES INC	931142103		12/16/2015	12/23/2015	45,398			39,459	5,939		0	0	5,939
22	WATERS CORP	941848103		12/16/2015	12/23/2015	60,043			33,870	26,173		0	0	26,173
23	WEST PHARMACLT SVCS INC	955306105		12/16/2015	12/23/2015	17,351			5,217	12,134		0	0	12,134
24	PERRIGO CO PLC	997822103		12/16/2015	12/23/2015	54,560			57,786	-3,226		0	0	-3,226
25	BROWN & BROWN INC FLA	115256101		12/16/2015	12/23/2015	32,318			21,941	10,375		0	0	10,375
26	CABELAS INC	126804301		12/16/2015	12/23/2015	32,606			45,490	-12,884		0	0	-12,884
27	CANADIAN NATURAL RES LT	136385101		12/16/2015	12/23/2015	3,017			1,958	1,059		0	0	1,059

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
1	MADELINE MANN		300 BUCK HOLLOW RD	FAIRFAX	VT	05454		VP/SECRETARY	1 00	0		
2	PAMELA MANN		47 FERN ST	LEXINGTON	MA	02173		PRESIDENT/TREASURER	2 00	0		
3	DAVID BARON		47 FERN ST	LEXINGTON	MA	02421			1 00	0		
4	TRAVIS MANN-GOW		399 BUCK HOLLOW ROAD	FAIRFAX	VT	05454			1 00	0		