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Form 990-PF

## Return of Private Foundation

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

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2015

Open to Public  
Inspection

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

Name of foundation THE ORCHARD FARM FOUNDATION		A Employer identification number 22-3626152
Number and street (or P O box number if mail is not delivered to street address) GRAHAM CAPITAL MGMT 40 HIGHLAND AV		B Telephone number (see instructions) (203) 899-3476
City or town, state or province, country, and ZIP or foreign postal code ROWAYTON, CT 06853		
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		C If exemption application is pending, check here ► <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 37,846	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,967,500			
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	10	10		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	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	1,967,510	10		0
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0		0
	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
	25 Contributions, gifts, grants paid	1,947,900			1,947,900
	26 Total expenses and disbursements. Add lines 24 and 25	1,947,900	0		1,947,900
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	19,610			
	b Net investment income (if negative, enter -0-)		10		
	c Adjusted net income(if negative, enter -0-)				

	<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>1</b>	Cash—non-interest-bearing . . . . .			
<b>2</b>	Savings and temporary cash investments . . . . .	14,861	37,846	37,846
<b>3</b>	Accounts receivable ► _____			
	Less allowance for doubtful accounts ► _____			
<b>4</b>	Pledges receivable ► _____			
	Less allowance for doubtful accounts ► _____			
<b>5</b>	Grants receivable . . . . .			
<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
<b>7</b>	Other notes and loans receivable (attach schedule) ► _____			
	Less allowance for doubtful accounts ► _____			
<b>8</b>	Inventories for sale or use . . . . .			
<b>9</b>	Prepaid expenses and deferred charges . . . . .			
<b>10a</b>	Investments—U S and state government obligations (attach schedule)			
<b>b</b>	Investments—corporate stock (attach schedule) . . . . .			
<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .			
<b>11</b>	Investments—land, buildings, and equipment basis ► _____			
	Less accumulated depreciation (attach schedule) ► _____			
<b>12</b>	Investments—mortgage loans. . . . .			
<b>13</b>	Investments—other (attach schedule) . . . . .			
<b>14</b>	Land, buildings, and equipment basis ► _____			
	Less accumulated depreciation (attach schedule) ► _____			
<b>15</b>	Other assets (describe ► _____)	3,375	0	0
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	18,236	37,846	37,846
<b>17</b>	Accounts payable and accrued expenses . . . . .			
<b>18</b>	Grants payable . . . . .			
<b>19</b>	Deferred revenue . . . . .			
<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .			
<b>22</b>	Other liabilities (describe ► _____)			
<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>24</b>	<b>Foundations that follow SFAS 117, check here ► <input type="checkbox"/></b>			
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>			
<b>25</b>	Unrestricted . . . . .			
<b>26</b>	Temporarily restricted . . . . .			
<b>27</b>	Permanently restricted . . . . .			
<b>28</b>	<b>Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/></b>			
	<b>and complete lines 27 through 31.</b>			
<b>29</b>	Capital stock, trust principal, or current funds . . . . .	0	0	
<b>30</b>	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>31</b>	Retained earnings, accumulated income, endowment, or other funds	18,236	37,846	
<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	18,236	37,846	
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	18,236	37,846	

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

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	18,236
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	19,610
<b>3</b>	Other increases not included in line 2 (itemize) ► _____	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	37,846
<b>5</b>	Decreases not included in line 2 (itemize) ► _____	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	37,846

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

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)		How acquired (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	Date sold (d) (mo, day, yr)
1a				
b				
c				
d				
e				
(e) Gross sales price		Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69		Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	(l)
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
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	{ If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  
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	(d) Distribution ratio (col (b) divided by col (c))
2014	1,739,580	14,490	120 053830
2013	1,237,780	9,062	136 590157
2012	1,353,310	9,722	139 200782
2011	1,553,630	11,196	138 766524
2010	2,805,458	31,398	89 351487
2	Total of line 1, column (d).		2 623 962780
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		3 124 792556
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.		4 25,958
5	Multiply line 4 by line 3.		5 3,239,365
6	Enter 1% of net investment income (1% of Part I, line 27b).		6 0
7	Add lines 5 and 6.		7 3,239,365
8	Enter qualifying distributions from Part XII, line 4.		8 1,947,900

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

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

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

**Part VII-A Statements Regarding Activities**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	<b>No</b>
<b>1b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	<b>1b</b>	<b>No</b>
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>			
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	<b>No</b>
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ <b>0</b> <b>(2)</b> On foundation managers <input type="checkbox"/> \$ <b>0</b>		
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <b>0</b>		
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	<b>2</b>	<b>No</b>
<b>3</b>	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	<b>3</b>	<b>No</b>
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	<b>No</b>
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>	<b>No</b>
<b>6</b>	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	<b>Yes</b>
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<b>7</b>	<b>Yes</b>
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
<b>b</b>	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	<b>8b</b>	<b>Yes</b>
<b>9</b>	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	<b>9</b>	<b>No</b>
<b>10</b>	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> <input type="checkbox"/>	<b>10</b>	<b>Yes</b>

**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		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? Website address ► N/A	13	Yes	
14	The books are in care of ► GRAHAM CAPITAL MANAGEMENT LP Located at ► 40 HIGHLAND AVENUE ROWAYTON CT	Telephone no ► (203) 899-3476 ZIP +4 ► 06853		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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 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 ►	16	Yes	No

**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
<b>1a</b>	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (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) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . .	1c	No
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . .	2b	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . .	3b	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	No
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? . . . . .	4b	No

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

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

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

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

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

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

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

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .  Yes  No  
*If "Yes," attach the statement required by Regulations section 53.4945–5(d).*

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

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .  
*If "Yes" to 6b, file Form 8870.*

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

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .

**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)**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	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	Expense account, (e) other allowances
KENNETH G TROPIN 260 WEST ROAD NEW CANAAN, CT 06840	PRESIDENT 1 00	0	0	0
KATHLEEN O TROPIN 260 WEST ROAD NEW CANAAN, CT 06840	TRUSTEE 1 00	0	0	0

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

**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		

**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	0	
b	Average of monthly cash balances. . . . .	1b	26,353	
c	Fair market value of all other assets (see instructions). . . . .	1c	0	
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	26,353	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0	
3	Subtract line 2 from line 1d. . . . .	3	26,353	
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	395	
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	25,958	
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	1,298	

**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	1,298	
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a		
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b		
c	Add lines 2a and 2b. . . . .	2c	0	
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,298	
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0	
5	Add lines 3 and 4. . . . .	5	1,298	
6	Deduction from distributable amount (see instructions). . . . .	6	0	
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,298	

**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	1,947,900	
b	Program-related investments—total from Part IX-B. . . . .	1b	0	
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	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,947,900	
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	0	
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	1,947,900	

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7				1,298
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .	2,803,888			
<b>b</b> From 2011. . . . .	1,553,070			
<b>c</b> From 2012. . . . .	1,352,824			
<b>d</b> From 2013. . . . .	1,237,327			
<b>e</b> From 2014. . . . .	1,738,855			
<b>f Total</b> of lines 3a through e. . . . .		8,685,964		
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ _____ 1,947,900				
<b>a</b> Applied to 2014, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2015 distributable amount. . . . .				1,298
<b>e</b> Remaining amount distributed out of corpus	1,946,602			
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,632,566			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) . . . . .	2,803,888			
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	7,828,678			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .	1,553,070			
<b>b</b> Excess from 2012. . . . .	1,352,824			
<b>c</b> Excess from 2013. . . . .	1,237,327			
<b>d</b> Excess from 2014. . . . .	1,738,855			
<b>e</b> Excess from 2015. . . . .	1,946,602			

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

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. <input type="text"/>			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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.			
b	85% of line 2a			
c	Qualifying distributions from Part XII, line 4 for each year listed			
d	Amounts included in line 2c not used directly for active conduct of exempt activities			
e	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			
a	"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			
(4)	Gross investment income			

**Part XV Supplementary Information (Complete this part only if the organization 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))

KENNETH G TROPIN

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

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

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

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

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

c Any submission deadlines

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

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b> See Additional Data Table				
<b>Total</b>			► 3a	1,947,900
<b>b Approved for future payment</b>				
<b>Total</b>			► 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	
<b>1</b> Program service revenue						
a						
b						
c						
d						
e						
f						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments						
<b>3</b> Interest on savings and temporary cash investments						
<b>4</b> Dividends and interest from securities					14	10
<b>5</b> Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
<b>6</b> Net rental income or (loss) from personal property						
<b>7</b> Other investment income						
<b>8</b> Gain or (loss) from sales of assets other than inventory						
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory						
<b>11</b> Other revenue a						
b						
c						
d						
e						
<b>12</b> Subtotal Add columns (b), (d), and (e)		0			10	
<b>13</b> Total Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13		10

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



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ABC OF NEW CANAAN PO BOX 355 NEW CANAAN, CT 06840	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
ACHIEVEMENT FIRST 403 JAMES STREET NEW HAVEN, CT 06513	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
AUTISM SPEAKS 5455 WILSHIRE BLVD LOS ANGELES, CA 90036	NONE	PUBLIC CHARITY	GENERAL SUPPORT	21,500
BACHMANN STRAUSS DYSTONIA & PARKINSONS FOUNDATION ONE GUSTAVE L LEVY PLACE BOX 1490 NEW YORK, NY 10029	NONE	PUBLIC CHARITY	GENERAL SUPPORT	12,500
BOYS & GIRLS HARBOR INC PO BOX 848 HOUSTON, TX 77001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
BUILDING HOMES FOR HEROES 65 ROOSEVELT AVE SUITE 105 VALLEY STREAM, NY 11581	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
CONGRESSIONAL MEDAL OF HONOR SOCIETY 40 PATRIOTS POINT ROAD MT PLEASANT, SC 29464	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
CONNECTICUT FOOD BANK PO BOX 8686 NEW HAVEN, CT 06531	NONE	PUBLIC CHARITY	GENERAL SUPPORT	60,000
FAMILY & CHILDREN'S AGENCY INC 9 MOTT AVENUE NORWALK, CT 06850	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
FRIENDS OF DARTMOUTH WATER POLO 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
FUTURE FIVE 135 ATLANTIC STREET STAMFORD, CT 06901	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
HEDGE FUND CARES 70 WEST 36TH STREET NEW YORK, NY 10017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
HOMES WITH HOPE 49 RICHMONDVILLE AVENUE SUITE 112 WESTPORT, CT 06880	NONE	PUBLIC CHARITY	SUPPORT THE HOMELESS BY PROVIDING FOOD, SHELTER & SOCIAL SERVICES	50,000
INNER - CITY FOUNDATION 238 JEWETT AVENUE BRIDGEPORT, CT 06606	NONE	PUBLIC CHARITY	GENERAL SUPPORT	30,000
INSPIRICA INC 141 FRANKLIN STREET STAMFORD, CT 06901	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
<b>Total.</b>				1,947,900

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
KIDS IN CRISIS ONE SALEM STREET COS COB, CT 06807	NONE	PUBLIC CHARITY	GENERAL SUPPORT	50,000
LONG ISLAND CARES INC 10 DAVIS DRIVE HAUPPAUGE, NY 11788	NONE	PUBLIC CHARITY	GENERAL SUPPORT	4,500
MEMORIAL SLOAN-KETTERING CANCER CENTER PO BOX 27106 NEW YORK, NY 10087	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
METROPOLITAN CLUB FOUNDATION INC 49 KNOLLWOOD ROAD ELMSFORD, NY 10523	NONE	PUBLIC CHARITY	GENERAL SUPPORT	600
MS NATIONAL SOCIETY 733 THIRD AVENUE NEW YORK, NY 10017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
NATIONAL FISH AND WILDLIFE FOUNDATION 1120 CONNECTICUT AVENUE WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	GENERAL SUPPORT	22,500
NEW CANAAN YMCA 564 SOUTH AVENUE NEW CANAAN, CT 06840	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
NORWALK FIRE FIGHTERS 121 CONNECTICUT AVENUE NORWALK, CT 06851	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
NORWALK POLICE FUND PO BOX 711 NORWALK, CT 06852	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
NORWALK POLICE UNION PO BOX 266 SOUTH NORWALK, CT 06856	none	PUBLIC CHARITY	GENERAL SUPPORT	2,500
PERSON-TO-PERSON 1864 POST ROAD DARIEN, CT 06820	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
ROBIN HOOD FOUNDATION 826 BROADWAY 7TH FLOOR NEW YORK, NY 10003	NONE	PUBLIC CHARITY	GENERAL SUPPORT	800,000
ROWAYTON ARTS CENTER 145 ROWAYTON AVENUE ROWAYTON, CT 06853	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,800
ROWAYTON HOSE COMPANY 177 ROWAYTON AVENUE ROWAYTON, CT 06853	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
ROWAYTON LIBRARY 33 HIGHLAND AVENUE ROWAYTON, CT 06852	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,500
<b>Total . . . . .</b>				1,947,900
► 3a				

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ROWAYTON SCHOOL PTA 1 ROTON AVENUE ROWAYTON, CT 06853	NONE	EXEMPT	GENERAL SUPPORT	9,000
SAFE HORIZON 2 LAFAYETTE STREET 3RD FLOOR NEW YORK, NY 10007	NONE	PUBLIC CHARITY	GENERAL SUPPORT	9,000
SERVICES FOR THE UNDERSERVED 303 7TH AVENUE 10TH FLOOR NEW YORK, NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
SHELTER FOR THE HOMELESS INC PO BOX 1252 STAMFORD, CT 06902	NONE	PUBLIC CHARITY	GENERAL SUPPORT	150,000
STAMFORD FAMILY YMCA 10 BELL STREET STAMFORD, CT 06901	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,800
STAMFORD HEALTH FOUNDATION 1351 WASHINGTON BLVD 202 STAMFORD, CT 06902	NONE	PUBLIC CHARITY	GENERAL SUPPORT	13,500
TEACH FOR AMERICA 315 WEST 36TH STREET 7TH FLOOR NEW YORK, NY 10018	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
THE BUONICONTI FUND 1095 NW 14TH TERRACE MIAMI, FL 33136	NONE	PUBLIC CHARITY	GENERAL SUPPORT	35,000
THE EVERGLADES FOUNDATION 18001 OLD CUTLER ROAD PALMETTO BAY, FL 33157	NONE	PUBLIC CHARITY	GENERAL SUPPORT	37,500
THE GREENWICH ROUNDTABLE 1 RIVER ROAD COS COB, CT 06807	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
THE HOTCHKISS SCHOOL PO BOX 800 LAKEVILLE, CT 06039	NONE	PUBLIC CHARITY	GENERAL SUPPORT	15,000
THE JOE TORRE SAFE AT HOME FOUNDATION PO BOX 3133 NEW YORK, NY 10162	NONE	PUBLIC CHARITY	GENERAL SUPPORT	13,500
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	NONE	PUBLIC CHARITY	GENERAL SUPPORT	13,500
THE NEAR & FAR AID ASSOCIATION INC PO BOX 717 SOUTHPORT, CT 06890	NONE	PUBLIC CHARITY	GENERAL SUPPORT	35,000
THE NORWALK SEAPORT ASSOCIATION 132 WATER STREET NORWALK, CT 06854	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
<b>Total . . . . .</b>				1,947,900
			► 3a	

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
THE OPEN DOOR SHELTER 1101 WESTERN AVENUE PITTSBURGH, PA 15233	NONE	PUBLIC CHARITY	GENERAL SUPPORT	130,000
THE PARENT-CHILD HOME PROGRAM 1415 KELLUM PLACE SUITE 101 GARDEN CITY, NY 11530	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
THE SALVATION ARMY 615 SLATERS LANE PO BOX 269 ALEXANDRIA, VA 22313	NONE	PUBLIC CHARITY	GENERAL SUPPORT	13,500
CONNECTICUT POLICE WORKING DOG ASSOCIATION 596 VAUXHALL STREET EXTENSION WATERFORD, CT 06385	NONE	PUBLIC CHARITY	ENHANCE TRAINING, EDUCATION & OVERALL PERFRMANCE OF POLICE DOGS IN CONNECTICUT	1,000
DARTMOUTH COLLEGE PARENTS FUND 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	NONE	PUBLIC CHARITY	GENERAL SUPPORT	25,000
DUCKS UNLIMITED ONE WATERFOUL WAY MEMPHIS, TN 38120	NONE	PUBLIC CHARITY	SUPPORT WETLANDS & WATERFOWL CONSERVATION	1,200
HAPPY HEARTS FUND 131 VARICK STREET 924 NEW YORK, NY 10013	NONE	PUBLIC CHARITY	REBUILDING SAFE, RESILIENT SCHOOLS IN AREAS IMPACTED BY NATURAL DISASTERS	10,000
HORIZONS NATIONAL 120 POST ROAD WEST SUITE 202 WESTPORT, CT 06880	NONE	PUBLIC CHARITY	INSTILLING LOW-INCOME STUDENTS WITH THE JOY OF LEARNING	10,000
LEUKEMIA & LYMPHOMA SOCIETY 61 BROADWAY SUITE 400 NEW YORK, NY 10006	NONE	PUBLIC CHARITY	SUPPORT RESEARCH TO CURE LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE & MYELOMA	5,000
MASHOMACK PRESERVE 47 SOUTH FERRY ROAD SHELTER ISLAND, NY 11964	NONE	PUBLIC CHARITY	CONSERVE THE LANDS & WATERS ON WHICH LIFE DEPENDS	5,000
ST LUKE'S LIFEWORKS 141 FRANKLIN STREET STAMFORD, CT 06901	NONE	PUBLIC CHARITY	BREAK THE CYCLE OF HOMELESSNESS BY HELPING PEOPLE ACHIEVE PERMANENT HOUSING & STABILITY	50,000
NAVY LEAGUE OF THE UNITED STATES 2500 WILSON BLVD SUITE 200 ARLINGTON, VA 22201	NONE	PUBLIC CHARITY	TO SERVE, SUPPORT & STAND WITH THE SEA SERVICES OF THE UNITED STATES	20,000
TREE CONSERVANCY OF DARIEN 25 OLD KINGS HIGHWAY NORTH SUITE 13 DARIEN, CT 06820	NONE	PUBLIC CHARITY	TO PRESERVE & ENHANCE THE TREE & FOEST RESOURCES OF DARIEN, CT	1,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>1,947,900</b>

## TY 2015 Other Assets Schedule

**Name:** THE ORCHARD FARM FOUNDATION**EIN:** 22-3626152

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
MISCELLANEOUS RECEIVABLE	3,375		

## TY 2015 Substantial Contributors Schedule

**Name:** THE ORCHARD FARM FOUNDATION

**EIN:** 22-3626152

Name	Address
KENNETH G TROPIN	260 WEST ROAD NEW CANAAN, CT 06840

## Schedule of Contributors

OMB No 1545-0047

2015

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

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**Name of the organization**

## THE ORCHARD FARM FOUNDATION

**Employer identification number**

22-3626152

**Organization type (check one)**

**Filers of:**

## Section:

Form 990 or 990-EZ

☒ 501(c)( ) (enter number) organization

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 foundation

Check 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 other 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 $\frac{1}{3}$ % 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 990PF, 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 ORCHARD FARM FOUNDATION

**Employer identification number**

22-3626152

**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	KENNETH G TROPIN 260 WEST ROAD  NEW CANAAN, CT 06840	\$ 1,967,500	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	
		\$	Person <input type="checkbox"/>
		\$	Payroll <input type="checkbox"/>
		\$	Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
		\$	Payroll <input type="checkbox"/>
		\$	Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
		\$	Payroll <input type="checkbox"/>
		\$	Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
		\$	Payroll <input type="checkbox"/>
		\$	Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/>
		\$	Payroll <input type="checkbox"/>
		\$	Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )

<b>Name of organization</b> THE ORCHARD FARM FOUNDATION		<b>Employer identification number</b> 22-3626152	
<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> THE ORCHARD FARM FOUNDATION	<b>Employer identification number</b> 22-3626152
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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.)* ► \$ \_\_\_\_\_