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Department of the Treasury

Internal Revenue Service

DLN: 93491224003366

OMB No 1545-0052

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

, and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation Donna and Stuart Farber Family Foundation Inc 26-1606299 % STUART FARBER BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 31 Singing Oaks Drive **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Weston, CT 068831147 G Check all that apply Initial return of a former public charity Initial return **D 1.** Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 937,500 Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) income purposes ıncome books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 2 Check F 🔽 if the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 23,672 23.672 Dividends and interest from securities Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6,977 6a Revenue b Gross sales price for all assets on line 6a 432,513 Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) c 11 Other income (attach schedule) Total.Add lines 1 through 11 . . 30,649 30,649 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). 16a Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . C **17** 囱 7,765 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications . . . 13,070 囫 13.070 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. 20.835 Add lines 13 through 23 20.835 54,200 54,200 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 75,03 20,835 54,200 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -44,386 a 9,814 Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
|---------------|--------|---|------------------------|--------------------|-----------------------|
| | 1 | Cash—non-interest-bearing | ., | | |
| | 2 | Savings and temporary cash investments | 63,545 | 59,906 | 59,906 |
| | 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 🟲 | | | |
| ا م | 8 | Inventories for sale or use | | | |
| Sets Sets | 9 | Prepaid expenses and deferred charges | | | |
| AŞ | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | 603,603 | 551,191 | 671,841 |
| | 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) | 172,206 | 190,461 | 203,617 |
| | 14 | Land, buildings, and equipment basis 🟲 | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 | O ther assets (describe 🟲) | 2,226 | 2,136 | 2,136 |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | ınstructions Also, see page 1, item I) | 841,580 | 803,694 | 937,500 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | 0 | 6,500 | |
| bilities | 19 | Deferred revenue | | | |
| 틝 | 20 | Loans from officers, directors, trustees, and other disqualified persons $% \left(1\right) =\left(1\right) \left(1\right) \left$ | | | |
| <u>e</u> | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe 🟲) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | 0 | 6,500 | |
| ام. | | Foundations that follow SFAS 117, check here 🕨 🦵 | | | |
| Fund Balances | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| 틸 | 24 | Unrestricted | | | |
| 器 | 25 | Temporarily restricted | | | |
| 핌 | 26 | Permanently restricted | | | |
| 리 | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | |
| 5 | | and complete lines 27 through 31. | | | |
| 낉 | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 841,580 | , | |
| ĕ | 30 | Total net assets or fund balances(see instructions) | 841,580 | 797,194 | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 841,580 | 803,694 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column | ı (a), lıne 30 (must a | gree | _ |
| | | with end-of-year figure reported on prior year's return) | | | 841,580 |
| 2 | | Enter amount from Part I, line 27a | | | -44,386 |
| 3 | | Other increases not included in line 2 (itemize) | | | |
| 4 | | Add lines 1, 2, and 3 | | 4 | 797,194 |
| 5 | | Decreases not included in line 2 (itemize) ▶ | | _ 5 | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)— | Part II. column (b) I | ne 30 . 6 | 797.194 |

| Part 1 | Capital Gains ar | nd Los | ses for Tax on Inve | estme | ent Income | | | | | |
|--------------|---|-----------|---|---------|-------------------------|---------------------------------------|-------------------|--|-------------------------------|--|
| | | • | s) of property sold (e g , r r common stock, 200 shs | | • | How acquire P—Purchas (b) D—Donation | e (6) | Date acquired (mo , day, yr) | Date sold (d) (mo , day, yr) | |
| 1 a | MERRILL LYNCH - SHO | ORT TE | RM COVERED | | | Р | | | | |
| | MERRILL LYNCH - LOI | NG TER | M COVERED | | | Р | | | | |
| | MERRILL LYNCH - LOI | NG TER | M NONCOVERED | | | Р | | | | |
| d | CAPITAL GAIN DIVID | | | | | Р | | | | |
| | CAFITAL GAIN DIVID | /LINDS | | | | Г | | | | |
| e | | | | | | | _ | | | |
| (e | e) Gross sales price | | Depreciation allowe (f) (or allowable) | ed | | or other basis expense of sale | | | or (loss) (f) minus (g) | |
| a | 152 | ,751 | | | | 175,2 | 34 | -22, | | |
| b | 203 | ,635 | | | | 181,7 | 85 | | 21,968 | |
| C | 75 | ,497 | | | | 68,6 | 35 | | 6,862 | |
| d | | | | | | | | | 630 | |
| е | | | | | | | | | | |
| Со | mplete only for assets sho | owina a | aın ın column (h) and own | ed bv | the foundation | on 12/31/69 | | Gains (Col | (h) gain minus | |
| | | Ť | A djusted basis | | | ess of col (ı) | | • | ot less than -0-) o i | |
| (I) | FMV as of 12/31/69 | | (j) as of 12/31/69 | | (k) over | col (j), if any | (I) | Losses | (from col (h)) | |
| а | | | | | | | | | -22,483 | |
| ь | | | | | | | | | 21,850 | |
| | | | | | | | | | 6,862 | |
| d | | | | | | | | | | |
| | | | | | | | | | | |
| 2 | Capital gain net income | | Ĺ | If (lo | ss), enter -0- | n Part I, line 7 in Part I, line 7 | } | 2 | 6,977 | |
| 3 | Net short-term capital | gaın or | (loss) as defined in section | ons 12 | (22(5) and (6) | | | | | |
| | If gain, also enter in Pa in Part I, line 8 | rt I, lın | e 8, column (c) (see instr • • • • • | | s) If(loss), er | nter - 0 - • • | $\Big\}\Big _{:}$ | 3 | | |
| Part | V Qualification Un | der S | ection 4940(e) for I | Redu | ced Tax on | Net Investm | ent l | Income | | |
| | nonal use by domestic privon 4940(d)(2) applies, lea | | - | ection | 14940(a) tax (| on net investme | ıt ınco | me) | | |
| | foundation liable for the s the foundation does not | | | | | | period | ار | ▼ Yes No | |
| 1 Ent | ter the appropriate amoun | t ın eac | ch column for each year, s | see ins | tructions befo | re makıng any e | ntries | | | |
| | (a) period years Calendar or tax year beginning in) | Adjust | (b) ed qualifying distributions | Net | (c) value of nonchar | table-use assets | | (d) Distributio (col (b) divided | n ratio | |
| | 2014 | | | | | | | | | |
| | 2013 | | | | | | | | | |
| | 2012 | | | 1 | | | | | | |
| | 2011 | | | | | | | | | |
| | 2010 | | | | | | | | | |
| 2 | Totalof line 1, column (| d) | | | | | 2 | | | |
| 3 | the number of years the | e founda | he 5-year base period—d ation has been in existenc | e if le | ss than 5 year | s | 3 | | | |
| 4 | | | itable-use assets for 201 | | • | | 4 | | | |
| 5 | | | | | | | 5 | | | |
| 6 | Enter 1% of net investr | ment in | come (1% of Part I, line 2 | 27b). | | | 6 | | | |
| 7 | Add lines 5 and 6 | | | | | | 7 | | | |
| 8 | Enter qualifying distribu | utions f | rom Part XII, line 4 | | | | 8 | | | |
| | If line 8 is equal to or g the Part VI instructions | | han line 7, check the box | ın Pai | t VI, line 1b, a | and complete tha | t part | using a 1% ta | x rate See | |

| FCL | Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49 | 54U(E), | , UI 4340—SC | e pag | = 10 OL | rue ins | LIUCLIC | 'IIS) | |
|-----|---|------------|----------------|----------|-----------|---------|---------|----------|-------|
| 1a | | - ┌ | | 1 | | | | | |
| | and enter "N/A" on line 1 Date of ruling or determination letter | | | l | | | | | |
| | (attach copy of letter if necessary-see instructions) | | | ĺ | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | | | ļ | 1 | | | | 196 |
| | here Fand enter 1% of Part I, line 27b | | | • | | | | | |
| С | All other domestic foundations enter 2% of line $27b$ Exempt foreign organizal Part I, line 12 , col (b) | ations 6 | enter 4% of | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter $-0-$) | ndation | s only Othe | ers | 2 | | | | |
| 3 | Add lines 1 and 2 | | | • | 3 | | | | 196 |
| 4 | Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter -0-) | ndatıor | ns only Othe | ers | 4 | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, e | nter - 0 |) | • | 5 | | | | 196 |
| 6 | Credits/Payments | 1 | Ī | | | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | 1,250 | | | | | |
| 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 | | | | 1,250 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2 | 2220 is | attached | | 8 | | | | |
| 9 | Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed . | | | | 9 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amoun | nt over | paid | | 10 | | | | 1,054 |
| 11 | | 1,054 | Refunded | <u> </u> | 11 | | | | |
| Par | t VII-A Statements Regarding Activities | | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state | e, or loc | al legislatio | n or d | ıd | | | Yes | No |
| | it participate or intervene in any political campaign? | | | | | | 1a | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for p | | | see In | structi | ons | 1 | | |
| | for definition)? | | | | | • | 1b | | No |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities | and co | pies of any n | nateria | ıls | | | | |
| _ | published or distributed by the foundation in connection with the activities. | | | | | | 4 - | | NI- |
| | Did the foundation file Form 1120-POL for this year? | • • | | | | • | 1c | | No |
| a | Enter the amount (if any) of tax on political expenditures (section 4955) impos | | | r | | | | | |
| _ | (1) On the foundation * \$ (2) On foundation managers | - | | | acad. | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for poli | ilicai e | xpenditure t | ax IIIIµ | oseu | | | | |
| 2 | on foundation managers * \$ Has the foundation engaged in any activities that have not previously been rep | norted | to the IDS2 | | | | 2 | | No |
| 2 | If "Yes," attach a detailed description of the activities. | porteu | to the IKS. | | | | | | NO |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in it | te gove | rning instru | mont | articlo | _ | | | |
| 3 | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confi | _ | = | - | | 5 | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more d | | | _ | | | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | _ | | | | | 4b | | -110 |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction du | | | | | | | | No |
| • | If "Yes," attach the statement required by General Instruction T. | ing cir | c year I I | • | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 49 | 45) sa | tisfied eithe | r | | | | | |
| • | By language in the governing instrument, or | 15,54 | cionica cicno | | | | | | |
| | By state legislation that effectively amends the governing instrument so th | nat no n | nandatory di | rectio | ns | | | | |
| | that conflict with the state law remain in the governing instrument? | | | | | | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | ?If "Yes | s," complete i | Part II | , col. (c |), | | | |
| | and Part XV. | | | | | | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (| see ins | structions) | | | | | | |
| | <u>CT</u> | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99 | 90-PF | to the Attori | ney | | | | | |
| | General (or designate) of each state as required by General Instruction G? If | "No," at | tach explana | tion . | | | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the r | meanın | g of section | 4942 | (3)(3) | | | | |
| | or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s | ee inst | ructions for | Part X | (IV)? | | | | |
| | If "Yes," complete Part XIV | | | | | | 9 | igsquare | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes, | " attach | n a schedule i | listing | their n | ames | | | |
| | and addresses. | | | | | | 10 | | No |

| Pai | Statements Regarding Activities (continued) | | | |
|-----|---|------|-------|----------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ►N/A | | | |
| 14 | The books are in care of ▶STUART FARBER Telephone no ▶(212 |)608 | -9400 | |
| | Located at ▶31 SINGING OAKS DRIVE WESTON CT ZIP+4 ▶06883 | | | |
| 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 | | . , | |
| 16 | | | Yes | |
| 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? | 16 | res | No No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | 10 | | INO |
| | Accounts (FBAR) If "Yes", enter the name of the foreign country | | | |
| Dai | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| FGI | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1 2 | During the year did the foundation (either directly or indirectly) | | 163 | NO |
| 10 | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? 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 V No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | ıf the foundatıon 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)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| 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 | | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2015? Ves No | | | |
| | If "Yes," list the years • 2012, 2013, 2014, 20 | | | |
| Ь | 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 | Yes | |
| _ | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 20 | 163 | |
| С | ► 20 | | | |
| За | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| Ju | any time during the year? | | | |
| ь | 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 | | | |
| | ıf the foundation had excess business holdings in 2015.) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | No |

| Pai | Statements Rega | rding Activities for | which Form 4/20 | May Be Required (Cont | tinued) | | | | | |
|----------|---|-----------------------------------|--|-----------------------------------|----------------------|--|--|--|--|--|
| 5a | During the year did the foundation | n pay or incur any amoun | t to | | | | | | | |
| | (1) Carry on propaganda, or other | rwise attempt to influenc | e legislation (section 49 | 45(e))? Yes | √ No | | | | | |
| | (2) Influence the outcome of any | | | | | | | | | |
| | | | r registration drive? | | | | | | | |
| | | | ther than a charitable, etc., organization described | | | | | | | |
| | | | | | | | | | | |
| | in section 4945(d)(4)(A)? (se | | | | Z No | | | | | |
| | (5) Provide for any purpose other | | | | 110 | | | | | |
| | educational purposes, or for t | - · | | Yes F | Z No. | | | | | |
| L | | | | , , | NO | | | | | |
| b | Regulations section 53 4945 or i | | | | 5b | | | | | |
| | | | | _ | | | | | | |
| | Organizations relying on a curren | | | | | | | | | |
| С | If the answer is "Yes" to question | | | | | | | | | |
| | tax because it maintained expend | | | Yes | No | | | | | |
| | If "Yes," attach the statement requ | | | | | | | | | |
| 6a | Did the foundation, during the yea | | | • | _ | | | | | |
| | a personal benefit contract? | | | TYes | / No | | | | | |
| b | Did the foundation, during the yea | ir, pay premiums, directly | y or indirectly, on a pers | onal benefit contract? | . 6b No | | | | | |
| | If "Yes" to 6b, file Form 8870. | | | | | | | | | |
| 7a | At any time during the tax year, v | vas the foundation a party | y to a prohibited tax she | lter transaction? Yes | √ No | | | | | |
| b | If yes, did the foundation receive | any proceeds or have an | y net income attributabl | e to the transaction? | . 7b | | | | | |
| Do | Information About | t Officers, Directors | s, Trustees, Founda | ation Managers, Highly | Paid Employees, | | | | | |
| | and Contractors | | | | | | | | | |
| 1 | List all officers, directors, trustees | s, foundation managers a | nnd their compensation (| | Τ | | | | | |
| | | Title, and average | (c) Compensation(If | (d) Contributions to | Expense account, | | | | | |
| | (a) Name and address | hours per week | not paid, enter | employee benefit plans | (e) other allowances | | | | | |
| | | (b) devoted to position | -0-) | and deferred compensation | | | | | | |
| STUA | RT FARBER | president | 0 | | | | | | | |
| | inging Oaks Drive | 0 | | | | | | | | |
| | ton,CT 068831147 | | | | | | | | | |
| 2 | Compensation of five highest-paid | employees (other than | those included on line 1- | | nter "NONE." | | | | | |
| | (a) | Title, and aver | - 1 | Contributions to employee benefit | Expense account, | | | | | |
| Nar | ne and address of each employee p more than \$50,000 | hours per wee (b) devoted to pos | | | (e) other allowances | | | | | |
| | more than \$50,000 | (b) devoted to pos | icion | (d) compensation | | | | | | |
| | | | | | | | | | | |
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| | | — | | | | | | | | |
| - | I number of other employees paid | | | | | | | | | |
| | | | | | | | | | | |

| Form 990-PF (2015) | | Page 7 |
|---|--|-------------------|
| Part VIII and Contractors (continued) | tees, Foundation Managers, High | y 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 |
| | | |
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| | <u></u> | |
| 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 re organizations and other beneficiaries served, conferences convened, research papers pro | | Expenses |
| 1 N/A | duceu, etc | |
| 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 | A mount |
| 1 NONE | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| Total. Add lines 1 through 3 | | <u> </u> |
| | | 1 |

Part X Minimum Investment Return

| Pa | (All domestic foundations must complete this part. Foreign foundations, see instructions | s.) | |
|-----|--|--------|--------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | | |
| а | A verage monthly fair market value of securities | 1a | 950,044 |
| b | A verage of monthly cash balances | 1b | 69,164 |
| c | Fair market value of all other assets (see instructions) | 1c | 2,136 |
| d | Total (add lines 1a, b, and c) | 1d | 1,021,344 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 1,021,344 |
| 4 | Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ $\!$ of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 15,320 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 1,006,024 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 50,301 |
| Pai | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.) | taın f | oreign organizations |
| 1 | Mınımum ınvestment return from Part X, line 6 | 1 | 50,301 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 2a 196 | | |
| b | Income tax for 2015 (This does not include the tax from Part VI) 2b | | |
| c | Add lines 2a and 2b | 2c | 196 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 50,105 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 50,105 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 50,105 |
| | Qualifying Distributions (see instructions) | | |
| 1 | A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 54,200 |
| | 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 | 0 |
| 3 | A mounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | 0 |
| ь | Cash distribution test (attach the required schedule). | 3b | 0 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 54,200 |
| 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 | 54,200 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years | erthe | ioundation qualifies for |

| P | art XIIII Undistributed Income (see insti | ructions) | | | |
|----|--|---------------|----------------------------|--------------------|--------------------|
| | | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| 1 | Distributable amount for 2015 from Part XI, line 7 | | | | 50,105 |
| 2 | Undistributed income, if any, as of the end of 2015 | | | | |
| а | Enter amount for 2014 only | | | 51,691 | |
| b | Total for prior years 2013, 2012, 2011 | | 16,350 | | |
| 3 | Excess distributions carryover, if any, to 2015 | | | | |
| а | From 2010 | | | | |
| ь | From 2011 | | | | |
| c | From 2012 | | | | |
| d | From 2013 | | | | |
| е | From 2014 0 | | | | |
| f | Total of lines 3a through e | |) | | |
| 4 | Qualifying distributions for 2015 from Part | | | | |
| | XII, line 4 🕨 \$ 54,200 | | | | |
| а | Applied to 2014, but not more than line 2a | | | 51,691 | |
| 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 | | _ | | 2,509 |
| е | Remaining amount distributed out of corpus | |) | | |
| 5 | Excess distributions carryover applied to 2015 | | 0 | | 0 |
| | (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: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b | Prior years' undistributed income Subtract line 4b from line 2b | | 16,350 | | |
| 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) | | 16,350 | | |
| | tax has been previously assessed | | , | | |
| | Subtract line 6c from line 6b Taxable amount —see instructions | | | | |
| е | Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see | | | | |
| | instructions | | | | |
| f | Undistributed income for 2016 Subtract | | | | |
| Ī | lines 4d and 5 from line 1 This amount must be distributed in 2015 | | | | 47,596 |
| 7 | A mounts 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 | | | | |
| ٥ | applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2016. | | | | |
| 3 | Subtract lines 7 and 8 from line 6a | | | | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2011 | | | | |
| | Excess from 2012 | | | | |
| | Excess from 2013 | | | | |
| d | Excess from 2014 | | | | |
| е | Excess from 2015 0 | | | | |

- 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 If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 54,200 **b** Approved for future payment

| Form 990-PF (2015) Part XVI-A Analysis of Income-Produc | ing Activitie | s | | | Page 1 2 |
|--|----------------------|----------------|-----------------------|---------------------|--------------------------------------|
| Enter gross amounts unless otherwise indicated | | ısıness income | Excluded by section | <u> </u> | (e) Related or exemp function income |
| 1 Program service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | (See Instructions) |
| a b | | | | | |
| c d | | | | | |
| e | | | | | |
| g Fees and contracts from government agencies Membership dues and assessments | | | | | |
| Investments | | | 14 | 23,672 | |
| Net rental income or (loss) from real estate | | | 14 | 23,672 | |
| a Debt-financed propertyb Not debt-financed property | | | | | |
| Net rental income or (loss) from personal property | | | | | |
| Other investment income | | | | | |
| Inventory | | | 18 | 6,977 | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a b | | | | | |
| c d | | | | | |
| e | | | | | |
| Subtotal Add columns (b), (d), and (e) Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify | | | : | 30,649 13 | 30,649 |
| art XVI-B Relationship of Activities to | the Accom | | | | |
| Explain below how each activity for whether the accomplishment of the foundation's instructions) | | | | | |
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| Form 990-PF | (2015) | | | | | | | | | Рa | ge 13 |
|--------------------------|--|--------------------------------|--------|-------------------------|--|-----------------------|--------------------------------------|--|-----------------|---------|--------------|
| Part XVII | Information R Noncharitable | | | | | sactio | ns and Relat | tionships With | | | |
| | rganization directly or i | ındırectly eng | age i | ın any of t | he following wi | | | | | Yes | No |
| organızat | ions? | | | | | | | | | | |
| a Transfers | from the reporting fou | ndation to a n | ionch | narıtable e | exempt organiz | ation o | f | | | | |
| (1) Cash | 1 | | | | | | | | 1a(1) | | No |
| (2) Othe | erassets | | | | | | | | 1a(2) | | No |
| b Other tra | nsactions | | | | | | | | | | |
| (1) Sale: | s of assets to a noncha | arıtable exemp | pt or | ganızatıor | 1 | | | | 1b(1) | | No |
| (2) Purc | hases of assets from a | noncharitable | e exe | empt orga | nızatıon | | | | 1b(2) | | No |
| (3) Rent | al of facilities, equipme | ent, or other a | sset | s | | | | | 1b(3) | | No |
| (4) Reim | bursement arrangeme | nts | • | | | | | | 1b(4) | | No |
| (5) Loan | s or loan guarantees. | | | | | | | | 1b(5) | | No |
| (6) Perfor | mance of services or m | nembership oi | r fund | draising s | olicitations | | | | 1b(6) | | No |
| c Sharing o | f facılıtıes, equipment, | mailing lists, | othe | er assets, | or paid employ | ees. | | | 1c | | No |
| of the god in any tra | wer to any of the above ods, other assets, or se nsaction or sharing arr | ervices given rangement, sh | by th | ne reportır n column | ng foundation I (d) the value o | If the fo f the go | oundation receiv oods, other asse | ed less than fair mark ts, or services receiv | et value ed | | |
| (a) Line No | (b) Amount involved | (c) Name of r | nonch | arıtable exe | mpt organization | (d |) Description of tran | sfers, transactions, and sh | arıng arra | ngemer | nts |
| | | | | | | | | | | | |
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| 2a Is the four | ındatıon dırectly or ındı | rectly affiliate | od wi | ıth or rela | ited to one or i | nore ta | v-evemnt organ | ızatıone | | | |
| described | in section 501(c) of t | he Code (othe | | | | | | | | s 🔽 | No |
| D II Tes, | complete the following (a) Name of organizatio | | I | (b |) Type of organiza | ation | | (c) Description of relat | ionship | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Und | ler penalties of perjury, | . I declare tha | at I h | ave exam | nined this retur | n. ınclu | dıng accompany | ing schedules and st | tement | s.and | to |
| the | best of my knowledge | and belief, it is | s tru | e, correct | | | | | | | |
| Sign | rmation of which prepa | rer has any ki | nowle | edge | I | | | D. | I IDC I | | _ |
| Here L | **** | | | | 2016-05-15 | L. | ***** | retur | | | |
| | Signature of officer or t | tructoo | | | Date | — y | Tıtle | | the prepar I | er shov | vn |
| | | | | | Date | | | (see | ınstr)? | Yes | No |
| | Print/Type preparer' | s name | Pre | eparer's S | ıgnature | | Date | Check if self- employed ► | PTIN | | |
| | | | | | | | | | | | |
| Paid | Firm's name ► Berdon LLP | | | | | | | Firm's EIN ▶ | | | |
| Preparer Use Only | | | | | | | | —— | | | |
| Omy | 360 Madison Ave Ne | ew York, NY | 100: | 17 | | | | Phone no | | | |
| | | , | | | | | | | | | |
| | | | | | | | | | | | |

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

| Recipient | If recipient is an individual, | Foundation | Purpose of grant or contribution | A mount |
|---|--|------------------------|--|---------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | Contribution | |
| a Paid during the year | | | | |
| HOMES WITH HOPE 49 RICHMONDVILLE AVENUE SUITE 112 WESTPORT,CT 06880 | none | PC | providing meals to the needy | 500 |
| MISCELLANEOUS miscellaneous weston,CT 06883 | NONE | PC | various charitble purposes | 1,150 |
| WESTON WARM UP FUND po box 1254 weston,CT 06883 | NONE | PC | financial assitance to low income families and elderly | 1,000 |
| WESTON ARTS INC PO box 1124 weston, CT 06883 | NONE | PC | to promote and develop art | 1,000 |
| WESTON VOLUNTEER FIRE DEPARTMENT 56 NORFIELD ROAD WESTONC,CT 06883 | NONE | PC | TO PROMOTE SAFETY | 2,500 |
| NATIONAL ABILITY CENTER PO BOX 682799 PARK CITY,UT 84068 | NONE | PC | PROVIDING EXPERIENCES TO DISABLED INDIVIDUALS INDIVIDUALS | 3,500 |
| CORNELL DEPARTMENT OF ATHLETICS 144 EAST AVENUE 380 OAKWOOD ROAD ITHACA,NY 14850 | NONE | PC | SUPPORT EDUCATIONAL INSTITUTION EXTRACURRICULAR ACTIVITIES | 2,500 |
| FIBROMAMELLAR CANCER FUND 20 HORSENECK LANE GREENWICH,CT 06830 | NONE | PC | CANCER RESARCH | 3,000 |
| HOSPICE FOUNDATION OF AMERICA 1710 RHODE ISLAND AVE NW SUITE 400 WASHINGTON, DC 20036 | NONE | PC | PROVIDE CARE FOR INDIVIDUALS HAVING TERMINAL ILLNESSES | 2,000 |
| CONNECTICUT HUMANE SOCIETY 455 POST ROAD WESTPORT, CT 06880 | NONE | PC | TO PROMOTE HUMANE TREATMENT OF ANIMALS | 1,200 |
| WESTON EMERGENCY MEDICAL SERVICES 52 NORFIELD ROAD WESTON,CT 06883 | NONE | PC | FOR HEALTHCARE SERVICES | 3,500 |
| GUIDING EYES 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS,NY 10598 | NONE | PC | FOR SUPPORT TO GUIDE DOGS | 1,000 |
| RELAY FOR LIFE PO BOX 22718 OKLAHOMA CITY,OK 731231718 | NONE | PC | FOR CANCER RESEARCH | 2,000 |
| ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105 | NONE | PC | FOR MEDICAL RESEARCH | 2,000 |
| ALS THERAPY DEVELOPMENT INSTITUTE 300 TECHNOLOGY SQUARE SUITE 400 CAMBRIDGE,MA 02139 | NONE | PC | FOR ALS RESEARCH | 1,000 |
| Total | | | ▶ 3a | 54,200 |

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

| Recipient | If recipient is an individual, | Foundation | Purpose of grant or | A mount |
|---|--|------------------------|--|---------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | |
| a Paid during the year | | | | |
| CONNECTICUT SCIENCE CENTER 250 COLUMBUS BLVD HARTFORD,CT 06103 | NONE | PC | FOR THE FURTHERANCE OF SCIENCE | 5,000 |
| PINK AID PO BOX 5157 WESTPORT,CT 06881 | NONE | PC | FOR BREAST CANCER RESEARCH | 1,000 |
| SILVERMINE ARTS CENTER 1037 SILVERMINE ROAD NEW CANAAN,CT 06840 | NONE | PC | FOR FURTHERANCE OF THE ARTS | 1,000 |
| BROADWAY HOUSING COMMUNITIES 583 RIVERSIDE DRIVE NEW YORK,NY 10031 | NONE | PC | SUPPORT LOWINCOME HOUSING & SUPPORT SERVICES | 3,250 |
| SMILOW CANCER CONNECTICUT 20 YORK STREET NEW HAVEN,CT 06519 | NONE | PC | CANCER RESEARCH | 1,500 |
| SUSAN G KOMEN FOR THE CURE 5005 LBJ FREEWAY SUITE 250 DALLAS,TX 75244 | NONE | PC | SUPPORT BREAST CANCER RESEARCH | 2,000 |
| WOUNDED WARRIOR PROJECT ROOM 320 370 7TH AVENUE NEW YORK, NY 10001 | NONE | PC | SUPPORT THE NATION'S WOUNDED VETERANS | 500 |
| WESTON EDUCATION FUND PO BOX 1093 WESTON,CT 06883 | NONE | PC | SUPPORT INITIATIVES THAT CULTIVATE MEANINGFUL LEARNING EXPERIENCES CONNECTED WITH LOCAL EDUCATIONAL INSTITUTIONS | 1,000 |
| WESTPORT COUNTRY PLAYHOUSE 25 POWERS CT WESTPORT, CT 06880 | NONE | PC | FOR FURTHERANCE OF THE ARTS | 1,100 |
| KIDS IN CRISIS 1 SALEM STREET COS COB,CT 06807 | NONE | PC | PROVIDE COUNSELING AND EDUCATIONAL PROGRAMS TO UNDERPRIVILEGED CHILDREN | 1,000 |
| AMERICAN RESEARCH SOCIETY 132 W 32ND STREET NEW YORK,NY 10001 | NONE | PC | CANCER RESEARCH | 1,000 |
| SPECIAL OLYMPICS 1133 19TH STREET NW WASHINGTON,DC 20036 | NONE | PC | PROVIDING EXTRACURRICULAR ACTIVITIES TO DISABLED INDIVIDUALS | 1,000 |
| THE FRIENDS OF LEVITT PAVILLION 40 JESUP ROAD WESTPORT, CT 06880 | NONE | PC | FOR FURTHERANCE OF THE ARTS | 500 |
| CORNELL SOCCER 130 E SENECA STREET ITHICA,NY 14850 | NONE | PC | TO SUPPORT EDUCATIONAL INSTITUTION ATHLETIC PROGRAM | 5,000 |
| RIDE CLOSER TO FREEDOM YALE-NEW HAVEN HOSPITAL PO BOX 1849 NEW HAVEN, CT 065089979 | NONE | PC | TO SUPPORT CANCER RESEARCH | 1,500 |
| Total | | | ▶ 3a | 54,200 |

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|--------------------------------------|-----------------|---------------------|
| | | |

TY 2015 All Other Program Related Investments Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Category | Amount |
|----------|--------|
| NONE | |

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

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| | | |

TY 2015 Investments Corporate Stock Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|------------------|---------------------------|----------------------------------|
| CORPORATE STOCKS | 551,191 | 671,841 |

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| | | |

TY 2015 Investments - Other Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|-------------------------------|-----------------------|------------|----------------------------------|
| MUTUAL FUNDS/CLOSED END FUNDS | AT COST | 190,461 | 203,617 |

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TY 2015 Other Assets Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Descr | iption | Beginning of Year - Book Value | End of Year - Book Value | End of Year - Fair Market Value |
|------------------------|--------|-----------------------------------|-----------------------------|------------------------------------|
| DUE FROM MERRILL LYNCH | | 2,226 | 2,136 | 2,136 |

TY 2015 Other Expenses Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------|--------------------------------|--------------------------|---------------------|--|
| INVESTMENT FEES | 13,070 | 13,070 | | |

TY 2015 Taxes Schedule

Name: Donna and Stuart Farber Family Foundation

Inc

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------|--------|--------------------------|------------------------|---|
| FOREIGN TAX | 410 | 410 | | |
| INTERNAL REVENUE SERVICE | 7,355 | 7,355 | | |