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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For	calendar year 2015, or tax year beginning	, 2015	5, and ending			
DO	NITTE CAMILY COUNTAINS THE	-		Α	Employer identification nu	mber
	LITTLE FAMILY FOUNDATION INC. POND STREET	•		В	46-5209373 Telephone number (see ins	tructions
	FORD, CT 06460				860 908-7575	ductions)
				С	If exemption application is	pending, check here
G	Check all that apply Initial return	Initial return of a for	mer public charity	t		
	Final return	Amended return		D	1 Foreign organizations, che	ck here.
	Address change	Name change	_		2 Foreign organizations mee	ting the 85% test, check
<b>H</b> (	Check type of organization X Section 50	1(c)(3) exempt private			here and attach computation	
1 -	Section 4947(a)(1) nonexempt charitable		private foundation	E	If private foundation status under section 507(b)(1)(A)	
	air market value of all assets at end of year from Part II, column (c), line 16)	counting method $X$ C Other (specify)	Cash Accrual	İ		·
<b>&gt;</b>	```´\	, column (d) must be o	n cash hasis )	F	If the foundation is in a 60 under section 507(b)(1)(B)	
Par		(a) Revenue and	1			
	Expenses (The total of amounts in	expenses per books	(b) Net investmer income	п	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					purposes (cash basis only)
	(see instructions) )					(cash basis only)
	Contributions, offs, grants, etc, received (attach schedule)  Ck Lifthe foundation is not required to attach Sch B	100,000.				
	Z Ck ► if the foundation is not required to attach Sch B					
	3 Interest on savings and temporary cash investments					
<b>a</b>	4 Dividends and interest from securities 5 a Gross rents					
3	<b>b</b> Net rental income or (loss)					W. T. L. W. T. W. T. L. W. T. W. W. T. W. W. T. W. W. T. W. W. T. W. W. T. W. W. T.
ਰ ਰਾR	6 a Net gain or (loss) from sale of assets not on line 10					
× ₹	b Gross sales price for all assets on line 6a					
Z É	7 Capital gain net income (from Part IV, line 2)					
S N	Net short-term capital gain     Income modifications					
ר E	10 a Gross sales less RECEIVED					
ជ	allowances b Less Cost of	70				
<u> </u>	goods sold CO C Gross profit or (loss pureats schedule) 3 1 2016	080				
7 <b>5</b>	11 Other income (attach schedule)	<u>                                      </u>				
ロコルファンク	OCDEN UT					
	12 Total. Add Imes Librough TV	100,000.	-	0.	0.	
	<ul><li>13 Compensation of officers, directors, trustees, etc</li><li>14 Other employee salaries and wages</li></ul>	0.				
	14 Other employee salaries and wages 15 Pension plans, employee benefits	<del></del>				<del></del>
	16 a Legal fees (attach schodule)					<del></del>
į	b Accounting fees (attach sch) SEE ST 1	975.				
	c Other prof fees (attach sch) SEE ST 2	10,920.				
P :	17 Interest 18 Taxes (attach scheduleXsee instrs)		<u> </u>			
R j	10 0					
1	1	2,000.				
N Y						
A E	22 Printing and publications.	<del></del>			<u> </u>	
A E	23 Other expenses (attach schedule)		· · · · ·	$\neg$		
1		2,576.	·	1	-	<u>2,576.</u>
Ě	24 Total operating and administrative expenses. Add lines 13 through 23	16,471.				2,576.
	25 Contributions, gifts, grants paid PART XV	13,250.			-	13, 250.
	26 Total expenses and disbursements. Add lines 24 and 25	29,721.		<u>,                                    </u>		
	27 Subtract line 26 from line 12:	43,141.		0.	0.	15,826.
	a Excess of revenue over expenses and disbursements				Ţ	
	b Net investment income (if negative, enter -0-)	70,279.			·	
	C Adjusted net income (if negative, enter -0-)			<u>)</u>	0.	

Par	t II	Balance Sheets	column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interes	t-bearing	75, 695.	141,974.	141, 974.
	2		rary cash investments	75,055.	141,3/4.	141,314.
	1		- 1			
		Less: allowance for			w	, 48.20
	4	Pledges receivable				
	'	Less allowance for	doubtful accounts		*	^ ~
	5	Grants receivable				<u> </u>
	6		cers, directors, trustees, and other		- · · · · ·	
		disqualified persons (atta	ch schedule) (see instructions)			İ
_	7	Other notes and loans red	eivable (attach sch)			
A S S E T		Less: allowance for	doubtful accounts ►			****
š	8	Inventories for sale	or use .			
F	9	Prepaid expenses a	nd deferred charges			
S	10 a	a Investments – U.S obligations (attach s	and state government chedule)			
	ſ	Investments — corporate	, , , , , , , , , , , , , , , , , , , ,			
	(	: Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment: basis	buildings, and			
		Less: accumulated deprec (attach schedule)	nation •			
	12	Investments - morte				
	13		(			
	14	Land, buildings, and				
		Less: accumulated deprec (attach schedule)			4,000.	4,000.
		Other assets (descri	completed by all filers	75.605	445.054	
_	17	Accounts payable ar	Also, see page 1, item I)	75,695.	145,974.	145,974.
Ţ	18	Grants payable	id accrued expenses		<del></del>	
A B	19	Deferred revenue	_			
- 1	20		tors, trustees, & other disqualified persons			
L	21		s payable (attach schedule)			
Т	22	Other liabilities (desi	· · · · · · · · · · · · · · · · · · ·			
Î E S		•	<del></del>			
S	23	Total liabilities (add		0.	0.	
		and complete lines 2	llow SFAS 117, check here X 24 through 26 and lines 30 and 31.			
N F E U T N		Unrestricted		75,695.	145,974.	
ΪŇ	25	Temporarily restricte	<u> </u>			
D	26	Permanently restrict				*
A B S A E L		Foundations that do and complete lines 2	not follow SFAS 117, check here > 27 through 31.			
ΕL	27	Capital stock, trust p	rincipal, or current funds			
SN	28	Paid-in or capital surplus,	or land, bldg., and equipment fund			
O E	29	Retained earnings, accumu	lated income, endowment, or other funds			
RS	30		und balances (see instructions)	75,695.	145,974.	
	31	Total liabilities and r (see instructions)	net assets/fund balances	75,695.	145,974.	
Part	: 111 /	·	ges in Net Assets or Fund Balance	73,093.	143,374.	
1	Total	net assets or fund ba	plances at beginning of year - Part II, colum		ree with	
	end-c	of-year figure reported	f on prior year's return).	, , , , , , , , , , , , , , , , , , ,	1	75,695.
		amount from Part I,			2	70,279.
		ncreases not included in lir	e 2 (itemize)		3	
		ines 1, 2, and 3	•		4	145,974.
		ses not included in line 2 (i		- <u>-</u>	5	
6	ıotal	net assets or fund ba	lances at end of year (line 4 minus line 5)	<ul> <li>Part II, column (b), lir</li> </ul>	ne 30 <b>6</b>	145,974.

(a) List and descri	I Losses for Tax on Investmer be the kind(s) of property sold (e.g., i use; or common stock, 200 shares Mi	real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A		<del> </del>			<del> </del>
b					
С					
d			<del></del>		
e			<del></del>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) n	
a					
b					
с					· · · · · · · · · · · · · · · · · · ·
ď					
e					
	owing gain in column (h) and owned b	by the foundation on 12/31.	/69	(I) Gains (Col	. (h)
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any		aın mınus col. (k), l an -0-) <b>o</b> r Losses (f	out not less
а					
b					
С					
d					
e					
2 Capital gain net income or (r		enter in Part I, line 7 ter -0- in Part I, line 7	. 2		
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5	) and (6).		-	
If gain, also enter in Part I, I in Part I, line 8	ine 8, column (c) (see instructions). I	f (loss), enter -0-	. 3	,	
	er Section 4940(e) for Reduce	d Tax on Net Investm	ent Income	1	
	e this part blank. ection 4942 tax on the distributable a ualify under section 4940(e) Do not c	• •	ase period?	Yes	No
1 Enter the appropriate amount in	n each column for each year, see the ins	structions before making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets (col.	(d) Distribution (b) divided by	
2014					
2013					
2012					
2011					
2010					
		<del></del>		<u> </u>	
2 Total of line 1, column (d).			2		
	the 5-year base period — divide the toon has been in existence if less than		пе 3		
4 Enter the net value of nonch	arıtable-use assets for 2015 from Par	t X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment :	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		<del></del>
8 Enter qualifying distributions	,		8		
If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% tax ra	ate See the	

Form 990-PF (2015) DOOLITTLE FAMILY FOUNDATION INC.	46-5209			F	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 – see instr	uction	15)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	7		**		
Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	├ ··· <u>1</u>				0.
check here. ▶ and enter 1% of Part I, line 27b.					
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		4			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	1				
foundations only Others enter -0-).	2				0.
<b>3</b> Add lines 1 and 2	. 3				0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others ente	r -0-) <b>4</b>				0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0.
6 Credits/Payments					
a 2015 estimated tax pmts and 2014 overpayment credited to 2015.					
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 6 d					
7 Total credits and payments Add lines 6a through 6d .	7	Ì			0.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			_	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10				
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax Refunded	► 11				
Part VII-A   Statements Regarding Activities					
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it			Yes	No
participate or intervene in any political campaign?	aid it		1a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political numbers					
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 ь		Х
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publisi	hed				<del> </del>
or distributed by the foundation in connection with the activities.	160				
c Did the foundation file Form 1120-POL for this year?			1 c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					<u> </u>
(1) On the foundation >\$ 0. (2) On foundation managers >\$		0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers ►\$	חו				
<u></u>			1		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If 'Yes,' attach a detailed description of the activities.					
3 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? If 'Yes,' attach a conformed copy of the char	;		_		١.,
	iges .		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4 b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required by General Instruction T		İ	Ì		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or					ļ
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that co</li> </ul>	nflict		_		
with the state law remain in the governing instrument?		1	6	<u> X</u>	ļ
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV			7	_X	<u> </u>
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	<b>^</b>		ĺ		
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			0.6	17	
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation.			8 b	<u> X</u>	<del> </del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942 for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' or the taxable year beginning in 2015 (see instructions for Part XIV)?	(j)(3) or 4942	(1)(5)		32	
		NIV	9	<u>X</u>	
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nand addresses SEE STAT	ames EMENT ←		10	v	1
BAA SEE STATE	PAIRIMI O	Fo	rm <b>99</b> (	X LPF (2	2015)
		. 0			/

	000 DE (2015) DOOL TEET E ENVITEY EOUND ET ON THE			_	, _	
	rm 990-PF (2015) DOOLITTLE FAMILY FOUNDATION INC.  Art VII-A   Statements Regarding Activities (continued)	46-	·520937	3	F	Page 5
	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	-	Х
12	2 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person advisory privileges? If 'Yes,' attach statement (see instructions)	on had		12		Х
13	B Did the foundation comply with the public inspection requirements for its annual returns and exemption	applica	ition?	13	Х	
14	Website address ► N/A  The books are in care of ► PATTY GIANNATTASIO Telephone	no ►	860 9	 08 <b>-</b> 7	 575	
	Located at ► 109 SCOTT ROAD EAST LYME CT ZIP + 4 ►	<u>063</u>				 
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	N/A	. •	∐ N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority cleank, securities, or other financial account in a foreign country?	ver a		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				·	
Pa	art 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
1:	<ul><li>a During the year did the foundation (either directly or indirectly)</li><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li></ul>	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	_ ີ <sub>Yes</sub>	⊥ X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	XNo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	Yes	X No			
i	<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)?	,	_	1 b	N,	/A
	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?			1 c		х
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)):					
i	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes	XNo			
	If 'Yes,' list the years ► 20 , 20 , 20					
ı	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942( (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a <b>all</b> years listed, answer 'No' and attach statement — see instructions.)	a)(2) a)(2) to		2 b	N	/A
•	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years h  20 , 20 , 20 , 20	ere				
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
ı	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 holdings in 2015).	I		26	<sub>R.T</sub>	/3
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			3 b 4 a	N,	/A X

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**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?

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Manage and Contractors (continued)	rs, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If nor	
	of service (c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as t	to number of
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 SEE STATEMENT 7	
2	15,826.
<sup>2</sup>	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2 Amount
1 N/A	
<u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	▶ 0.
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Part	see instructions.)	reign to	undations,
1 F	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:  Average monthly fair market value of securities	1 a	
b A	Average of monthly cash balances .	1 b	127,008.
c F	Fair market value of all other assets (see instructions)	1 c	
d 7	Total (add lines 1a, b, and c)	1 d	127,008.
e F	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(	(attach detailed explanation)   1 e   0.		
2 /	Acquisition indebtedness applicable to line 1 assets	2	0.
3 3	Subtract line 2 from line 1d	3	127,008.
	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,905.
5 !	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	125,103.
6 I	Minimum investment return. Enter 5% of line 5	6	6,255.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► X and do not complete this part.)	ting fou	
1 N	Minimum investment return from Part X, line 6 N/A	1	
2a 7	Fax on investment income for 2015 from Part VI, line 5		
bІ	ncome tax for 2015 (This does not include the tax from Part VI)  2b	1	
c A	Add lines 2a and 2b .	2 c	
3 [	Distributable amount before adjustments, Subtract line 2c from line 1	3	
<b>4</b> F	Recoveries of amounts treated as qualifying distributions	4	
5 A	Add lines 3 and 4	5	
6 [	Deduction from distributable amount (see instructions)	6	
7 [	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
	XII Qualifying Distributions (see instructions)		
1 / a E	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	15,826.
<b>b</b> F	Program-related investments — total from Part IX-B	1 b	
2 /	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3 A a S	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
<b>b</b> (	Cash distribution test (attach the required schedule)	3 b	
4 (	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	15,826.
5 F	oundations 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 <i>A</i>	Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,826.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.		
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Part XIII Undistributed Income (see ınstru	uctions)	N/A		
	(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				-
Ine 7  2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			* Ann	
<b>b</b> Total for prior years: 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015.	-			
a From 2010				
<b>b</b> From 2011				
<b>c</b> From 2012				
<b>d</b> From 2013				
<b>e</b> From 2014				
f Total of lines 3a through e	w w			
4 Qualifying distributions for 2015 from Part				
XII, line 4 ► \$				
a Applied to 2014, but not more than line 2a			** *	
· ·				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)		-		:
<b>d</b> Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015				
(If an amount appears in column (d), the same amount must be shown in column (a) )				
(4),				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has				
been issued, or on which the section 4942(a)				
tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions	<u></u>			
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016		1		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2010 not				
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9	-			
a Excess from 2011				
<b>b</b> Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

1 a If the foundation has received a ruling or dete	ermination letter that it			e ruling	
is effective for 2015, enter the date of the <b>b</b> Check box to indicate whether the founda		ating foundation de	ecribad in castion	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	ating loundation de	Prior 3 years	A 4342()(3) 01	4342()(3)
income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for each year listed	0.	(6) 2014	(6) 2013	(0) 2012	0.
<b>b</b> 85% of line 2a.					0.
c Qualifying distributions from Part XII, line 4 for each year listed	15,826.	15,419.			31,245.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>	15,826.	15,419.			31,245.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter	ĺ				
(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	4,170.	2,298.			6,468.
c 'Support' alternative test - enter	3,2131				
(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 p	part only if the f	foundation had	\$5,000 or more	in
assets at any time during th	_ <del>_</del>	tructions.)			
Information Regarding Foundation Managers a List any managers of the foundation who have close of any tax year (but only if they have JOHN C. DOOLITTLE	e contributed more tha	n 2% of the total con nan \$5,000) (See s	ntributions received t section 507(d)(2))	by the foundation befo	re the
<b>b</b> List any managers of the foundation who own	10% or more of the s	tock of a corporation	(or an equally large	portion of the owners	ship of
a partnership or other entity) of which the NONE	foundation has a 10	% or greater intere	st		· · · · · · · · · · · · · · · · · · ·
2 Information Regarding Contribution, Gran	nt, Gift, Loan, Schola	rship, etc, Progran	ns:		<del></del>
Check here ► X if the foundation only marequests for funds. If the foundation make complete items 2a, b, c, and d.					
a The name, address, and telephone number of	r e-mail address of the	person to whom ap	plications should be	addressed:	
<b>b</b> The form in which applications should be	submitted and inform	nation and materials	s they should include	de.	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograph	ical areas charitah	le fields kinds of in	etitutions or other	factors
- , ary resultations of infinitations of awards, s	Justi as by geograph	iodi dieda, CildilldD	ic licius, kiilus Of If	isatutions, or other	aci013,

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any Foundation Recipient Purpose of grant or contribution Amount status of foundation manager or recipient Name and address (home or business) substantial contributor a Paid during the year TEAM IMPACT NONE PC TO IMPROVE THE 12,250. 3 BATTERYMARCH PARK 5TH FL QUALITY OF LIFE FOR CHILDREN FACING QUINCY MA 02169 LIFE-THREATENING AND CHRONIC ILLNESSES THROUGH SPORTS PARTICIPATION. GUIDING EYES FOR THE BLIND NONE PC PROVIDE TRAINING FOR 1,000. 611 GRANITE SPRINGS ROAD GUIDE DOGS FOR YORKTOWN HEIGHTS NY 10598 PEOPLE WHO ARE BLIND, VISUALLY IMPAIRED, OR ON THE AUTISM SPECTRUM. **►** 3a **Total** 13,250. b Approved for future payment Total ► 3b

### Part XVI-A Analysis of Income-Producing Activities

Enter gros	s amounts unless otherwise indicated.	Unrelate	d business income	Excluded by	section 512, 513, or 514	
	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (See instructions)
a						
b						
С						
d						
е						
f						
g Fees	and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Interes	st on savings and temporary cash investments					
4 Divid	ends and interest from securities					
5 Net r	ental income or (loss) from real estate					
a Debt-	-financed property					
<b>b</b> Not d	debt-financed property					
	ntal income or (loss) from personal property			<del>-  </del>		
	r investment income					
	r (loss) from sales of assets other than inventory			<del>  </del>		
	ncome or (loss) from special events.			<del> </del>		
	s profit or (loss) from sales of inventory			+		
	r revenue.			<del></del>		
a a	revenue			<del> </del>		
ь b		_	_	+ +-		
				<del>                                     </del>		
d				<del> </del>		
е	otal. Add columns (b), (d), and (e)		•	ļ		
12 Subt						
				<del></del>	12	
13 Total	. Add line 12, columns (b), (d), and (e)	ne )		<u> </u>	13	0.
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation				-	0.
13 Total (See works	. Add line 12, columns (b), (d), and (e)		shment of Exemp	ot Purpose	-	0.
13 Total (See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			es .	

# Form 990-PF (2015) DOOLITTLE FAMILY FOUNDATION INC. 46-5209373 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempt Organiz	zations					-			
descrit	e organization directly bed in section 501(c) of g to political organizat	of the Code (d	engage in any o other than section	of the following on 501(c)(3) o	g with any rganizatio	other organizati	lon 1 527,		Yes	No
	ers from the reporting		a a nancharitahl	lo avamnt ara	nizotion .	o f				ĺ
(1) Ca		i louridation to	o a nonchantable	e exempt orga	anization (	or:		1 - (1)		٠,,
` '	her assets					•	•	1 a (1)	-	X
. ` '								1 a (2)		Х
	transactions:							ا شد د د		*** *
	lles of assets to a non							1 b (1)		X
	rchases of assets from			janization				1 b (2)		_X
• •	ntal of facilities, equip	•	er assets					1 b (3)		X
• •	imbursement arrange							1 b (4)		Х
٠,	ans or loan guarantee							1 b (5)		X
	rformance of services							1 b (6)		X
c Sharin	g of facilities, equipme	ent, mailing li	ists, other assets	s, or paid emp	loyees.	• •		1 c		X
<b>d</b> If the a the goo any tra	answer to any of the a ds, other assets, or ser ansaction or sharing ai	bove is 'Yes,' vices given by rrangement, s	complete the for the reporting four show in column	ollowing schedundation. If the (d) the value of	fule Colu foundation of the goo	mn <b>(b)</b> should all received less that ods, other assets	ways show the fair an fair market value i , or services receiv	market valu n ed.	ue of	
(a) Line no.	(b) Amount involved	(c) Name	of noncharitable exe	mpt organization	(	(d) Description of tra	insfers, transactions, and	sharing arran	gement	s
N/A										
			-							
				-						
		_								
									_	
			• •							
							_		-	
_					-	_				
describ	oundation directly or ind led in section 501(c) o complete the following	of the Code (o	other than section	to, one or mor n 501(c)(3)) o	e tax-exen r in section	npt organizations on 527?		Yes	X	 No
(á	a) Name of organization	on	<b>(b)</b> Typ	e of organizat	ion	(4	c) Description of re	ationship		
N/A								· ·		
				· -						
							_			
				<del></del>						
Sign   correct	penalties of perury, I declare t, and complete Declaration (	e that I have exam of preparer (other	nined this return, inclu than taxpayer) is bas	iding accompanyin sed on all informati	g schedules a on of which p	and statements, and to preparer has any know	o the best of my knowledge vledge	May the IF this return	RS discu	iss .
lere		V	1	1 21 /1	<u>(</u>	PRESIDENT		preparer s (see ipstru	hown be	elow
Sign	ature of officer or trustee			Date /		Title		X	Yes	No
	Print/Type preparer's nam	ne	Preparer's	signature	<u> </u>	Date /	Check	PTIN		
Paid	JAMES A. RAY	NER CPA		C(C)	Lmc7	PA 5/9/1	6 self-employed	P01216	182	
Preparer		EWITZ BAI	LOSIE WOLL	ACK RAYNE	K & GI	ROUX/LLC	Firm's EIN ► 06-1			
Jse Only		6 ELM ST			<del>V. 31</del>		33_1			
···· <b>y</b>	_	LD SAYBRO		475			Phone no. (860	388-4	451	
BAA			01 00-	<u> </u>	·		1. 10.10.101	Form <b>991</b>		2015

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

### **Schedule of Contributors**

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

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

DOOLITTLE FAMILY FOUNDATION I	NC.	46-5209373
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation
	527 political organization	
	o pointed. organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the <b>General</b>	Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribut	ling \$5,000 or more (in money or
property) from any one contributor. Comple	te Parts I and II. See instructions for determining a contribut	or's total contributions.
Special Rules		
For an organization described in section 50	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1	ort test of the regulations
received from any one contributor, during the	be year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1 Complete Parts I and II.	2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Form 990	0-EZ, line 1 Complete Parts I and II.	
The for an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fi	rom any one contributor
during the year, total contributions of more	than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit	erary, or educational
purposes, or for the prevention of cruelty to	children or animals Complete Parts I, II, and III.	-
Π		
	I(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fir r religious, charitable, etc., purposes, but no such contribution	
	e total contributions that were received during the year for a	
	ny of the parts unless the General Rule applies to this organ	
it received nonexclusively religious, charitab	le, etc, contributions totaling \$5,000 or more during the yea	r >
Caution An organization that is not sourced by	the Coneral Bule and/or the Santal Bules does not 61- Calif	adula B (Farm 900, 000 F7, a-
990-PF), but it <b>must</b> answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Sche 2, of its Form 990; or check the box on line H of its Form 9	990-EZ or on its Form 990-PF.
Part I, line 2, to certify that it does not meet the	filing requirements of Schedule B (Form 990, 990-EZ, or 99	0-PF).

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Par
Name of org	anuzation TTLE FAMILY FOUNDATION INC.	' -	er identification number 209373
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space		203373
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN C. DOOLITTLE		Person X Payroll
	31 POND ST	\$100,000.	·
	MILFORD, CT 06460	-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 i		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Page

1 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

of Part II

Name of organization
DOOLITTLE FAMILY FOUNDATION INC

BAA

Employer identification number

46-5209373 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. from Part I (d) Date received (b) (c) FMV (or estimate) Description of noncash property given (see instructions) N/A (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (b)
Description of noncash property given (a) No. from Part I (d) Date received (c) FMV (or estimate) (see instructions)

1 to

of Part III

Name of organization
DOOLITTLE FAMILY FOUNDATION INC.

Employer identification number 46-5209373

DOODI	THE TIME TOOKER INC.	40 3203373	
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)	<b>►</b> \$	N/A
	Llea duplicate comica of Dort III if additional cases in accided		

	Ose duplicate copies of Part III if additional	space is fleeded.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
		(e) Transfer of gift			
	Transferee's name, addres	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	Relationship of transferor to transferee			
(a)	(b)	(c)	(d)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, addres	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	Relationship of transferor to transferee			
		i			

2015	PAGE 1	
	DOOLITTLE FAMILY FOUNDATION INC.	46-520937
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTANT FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 975. TOTAL \$ 975. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
ADMINISTRATIVE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 10,920.  TOTAL \$ 10,920. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 19 ALLOCATED DEPRECIATION		
	OR YR EPR METHOD RATE LIFE YR DEPR INCOM  200DB 0.3333 2,000	
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
CT FILING FEE DUES & SUBSCRIPTIONS OFFICE SUPPLIES & EXPENSES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 50. 1,579. 947. TOTAL \$ 2,576. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES  \$ 50. 1,579. 947. \$ 2,576.

2015

### FEDERAL STATEMENTS

PAGE 2

DOOLITTLE FAMILY FOUNDATION INC.

46-5209373

**STATEMENT 5** FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		 BASIS	_	ACCUM. DEPREC.		BOOK VALUE	F	AIR MARKET VALUE
MISCELLANEOUS	TOTAL	\$ 6,000. 6,000.	\$ \$	2,000. 2,000.	\$ \$	4,000. 4,000.	\$	4,000. 4,000.

**STATEMENT 6** FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR \_\_\_\_ ADDRESS OF SUBSTANTIAL CONTRIBUTOR

JOHN C. DOOLITTLE

31 POND STREET MILFORD, CT 06420

STATEMENT 7 FORM 990-PF, PART IX-A, LINE 1 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

DIRECT CHARITABLE ACTIVITIES

EXPENSES

THE DOOLITTLE FAMILY FOUNDATION SEEKS TO FUND ORGANIZATIONS FOR EDUCATION, HEALTH, RELIGIOUS AND CHARITABLE PURPOSES. A SPECIAL EMPHASIS IS PLACED ON PROGRAMS THAT SUPPORT THE NEEDS OF THOSE INDIVIDUALS IMPACTED BY LIFE ALTERING OR LIFE THREATENING DISEASE OR CIRCUMSTANCE. IN ADDITION, THE FOUNDATION SEEKS TO SUPPORT NOT FOR PROFIT ORGANIZATIONS THAT PROVIDE INTENTIONAL CHARACTER DEVELOPMENT TRAINING FOR ATHLETES THROUGH SPORT.

15,826.