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हर या वास्त्राध्य

17.3

Form 990-PF

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.

OMB No. 1545-0052 2015

Department of the Treasury

_		landar year 2015 or tax year hoginning	1 3304	i and its separat				pen to Public Inspection
		lendar year 2015 or tax year beginning	-		, 2015	, and endi	A Employer identif	, 20
		FOUNDATION INC.					47-239521	
_		er and street (or P O. box number if mail is not delivered	to street	t address)		Room/suite		
	•	and Street (or F. O. BOX Hallyber it mail is not delivered	10 31166	r address;		Noonii/suite	1 '	
	C 0 0	MAGUITNEMON DI UD 7711 EL COD					(20	03) 569-5100
_		WASHINGTON BLVD, 7TH FLOOR town, state or province, country, and ZIP or foreign po	tal anda					
١	only or	town, state of province, country, and zir of loreign po-	iai cone				C If exemption applica	
	-m-	450DD GE 06001					pending, check here	5 ▶ L
		MFORD, CT 06901						
G	Che	ck all that apply Initial return	-	Initial return	-	oublic char	ty D 1. Foreign organiza	tions check here >
		Final return		Amended ref			2. Foreign organiza 85% test check!	
_		Address change		Name chang			computation .	
H	_	ck type of organization X Section 501					E If private foundation	n status was terminated
1		ection 4947(a)(1) nonexempt charitable trust		Other taxable pr			under section 507(t)(1)(A), check here . >
ı			_	method X Ca	ashAcc	crual	F If the foundation is	in a 60-month termination
		· · · · · · · · · · · · · · · · · · ·	•	pecify)			under section 507(b)(1)(B), check here . >
_				(d) must be on cas	h basis)			
L	'art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	, (ω,	Revenue and	(b) Net invi	estment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	е	expenses per books	incon		income	purposes
_		column (a) (see instructions))						(cash basis only)
	1	Contributions gifts grants, etc., received (attach schedule) .		337,218.				
	2	Check Attach Sch B						
	3	Interest on savings and temporary cash investments.						
	4	Dividends and interest from securities		_				
ø.	5a	Gross rents						
	Ь	b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a						
ă								
Revenue	Ĭ						FIVED	
è	7	Capital gain net income (from Part IV, line 2) .				- 1129	7	
_	8	Net short-term capital gain	·				सु	
	9 10 a	Income modifications			2	APR	1 8 2016 Si	
		and allowances	-		00	••••		
	ı	Less Cost of goods sold .		· · · · · · · · · · · · · · · · · · ·				
	ı	Gross profit or (loss) (attach schedule)				OGD	<u>EN, UI</u>	
	11 12	Other income (attach schedule)		337,218.			<u> </u>	
_				0.		-		
Ś	13	Compensation of officers, directors, trustees, etc						-
356	14 15	Other employee salaries and wages			-			
ē	15	Pension plans, employee benefits		71,170.				71,170.
ive Expenses	I Da	Legal fees (attach schedule) ATCH 1 Accounting fees (attach schedule) ATCH 2.		3,000.				3,000
Ş	"	Other professional fees (attach schedule).[3]		943.				943.
aţ	17		<u> </u>		L			743.
str	10	Taxes (attach schedule) (see instructions)			-			
Ξ	10	Depreciation (attach schedule) and depletion.	 				· · · · · · · · · · · · · · · · · · ·	
튽	30							
Ĭ	21	Occupancy		26,193.				26,193.
밀	22	Printing and publications			-			
<u>Б</u>	22		·	3,445.				3,445.
Ë	17 18 19 20 21 22 23 24	Other expenses (attach schedule) ATCH .4 Total operating and administrative expenses.						3,143
şra		Add lines 13 through 23	[104,751.				104,751.
ğ	25	Contributions, gifts, grants paid	<u> </u>	201,691.				201,691.
J	26	Total expenses and disbursements. Add lines 24 and 25		306,442.		0.	0	306,442
_	27	Subtract line 26 from line 12		· - <u></u>				
	a		[30,776.				1
	l	Net investment income (if negative, enter -0-)	 		-	0.		
	1	Adjusted net income (if negative, enter -0-).						
F		perwork Reduction Act Notice, see instructions					"	Form 990-PF (2015)

JSA For Paperwork Reduction Act Notice, see instructions. 5E1410 1 000 1753IS 1585

V 15-4.1F



_	- mt II	Balanca Chasta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
	art II		amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing		27,276.	27,276.
			cash investments	l I		
ł	3	Accounts receivable				
		Less allowance for dou	btful accounts >		<u> </u>	
	4	Pledges receivable ▶_				
		Less allowance for dou	btful accounts ▶			
ets	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)			
	7	Other notes and loans	receivable (attach schedule) 🕨			
		Less allowance for dou	ibtful accounts >			
	8	Inventories for sale or us	se			
Assets	9	Prepaid expenses and d	leferred charges			
⋖	10 a	Investments - U.S. and star	te government obligations (attach schedule).			
		•	e stock (attach schedule)			
	11	Investments - corporate Investments - land, building	e bonds (attach schedule)			
	'	and equipment basis				
		Less accumulated depreca (attach schedule)				
	12		loans			
	13 14	Investments - other (atti	ach schedule)			1
	' -	equipment basis Less accumulated deprecia	ation >			<u> </u>
		(attach schedule)				
	1	Other assets (describe				
	16		completed by all filers - see the page 1, item I)		27,276.	27,276.
_				i .	21,210.	21,210.
	17		accrued expenses			
w	18	, -				
Ę.	19				-	
Liabilities	20 21		ors, trustees, and other disqualified persons otes payable (attach schedule)			1
Ë	22		pe ►)			1
	* *	Office habitities (describ				1 1
	23	Total liabilities (add line	es 17 through 22)	0.	0.	
			llow SFAS 117, check here ▶			1
es			24 through 26 and lines 30 and 31.			
2	24	Unrestricted				
흅	25] *
	26	Permanently restricted				
or Fund Balances		Foundations that do	not follow SFAS 117,			
Ē			plete lines 27 through 31.			
0	27	Capital stock, trust prin	ncipal, or current funds) »· 1
ě	27 28 29 30 31	Paid-in or capital surplus, o	or land, bldg., and equipment fund			
SS	29	Retained earnings, accum	nulated income, endowment, or other funds		27,276.	-
/ *	30	Total net assets or fun	d balances (see instructions)	0.	27,276.	
ž	31	Total liabilities and	i net assets/fund balances (see			. 1
			· · · · · · · · · · · · · · · · · · ·	0.	27,276.	
			anges in Net Assets or Fund Bala		,	T
1			balances at beginning of year - Part		_	
_			ed on prior year's return)			0.
			I, line 27a			30,776.
			ıded ın line 2 (ıtemize) ▶		3	30 776
			TCU 5	• • • • • • • • • • • • •		30,776.
			in line 2 (itemize) ATCH 5	e line 6) - Part II selv	(b) kgg 30	3,500. 27,276.
_5	101	ai net assets or tuno	balances at end of year (line 4 minu	s wie oj - ran II, column ((b), line 30 6	21,210.

Page 3

Part IV Capital Gains	and Losses for Tax on Inv	restment Income			
(a) List and	d describe the kind(s) of property sold rick warehouse, or common stock, 200	•	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)
a			l		
b					
C					
d			i		
9					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	nss)
(e) Gross sales pnce	(or allowable)	plus expense of sale		(e) plus (f) min	
•			·		
<u> </u>					
	· · · · · · · · · · · · · · · · · · ·				-
		 			
<u>i</u>			 		
0		-d but he fewedships -= 42/24/00	-		
Complete only for assets	showing gain in column (h) and own			Gains (Col. (h) g	
(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	col.	(k), but not less Losses (from co	
1					
)					
					<u> </u>
			1		
					
Capital gain net income		f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		·
Net short-term capital ga	ain or (loss) as defined in sections	1222(5) and (6)		• •	
		structions). If (loss), enter -0- in 🕽			
•	• • • • • • • • • • • • • • • • • • • •		3		
		educed Tax on Net Investment I	_		
	not qualify under section 4940(e)	Do not complete this part. ar, see the instructions before making	ng any ent	nes.	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution (col (b) divided b	
2014				((-)	7 1
2013			+		
			1		
2012		·	 		
2011		 	ļ		
2010	<u> </u>		+		
Total of line 1, column (d	1)		2		0.
		de the total on line 2 by 5, or by the			
number of years the fou	ndation has been in existence if le	ess than 5 years	3		
Enter the net value of no	oncharitable-use assets for 2015	from Part X, line 5	4		36,244.
Enter the net value of his	michanicable-use assets for 2015	montrait, ine J			
			5		
Multiply line 4 by line 3			-		
Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
			1 1		
Add lines 5 and 6			7		
			1 T		
Enter qualifying distribut	ions from Part XII. line 4		8		306,442.
If line 8 is equal to or g Part VI instructions.	reater than line 7, check the box	x in Part VI, line 1b, and complete	that part	using a 1% ta	
4					
E1430 1 000				Form	n 990-PF (201
175315 1505	71	7 15-4 15		For	n 990-PF (201
1753IS 1585	V	/ 15-4.1F		For	n 990-PF (201

Form 990-PF (2015)

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Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Par	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a conti	rolled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions),		. 11		X
12	Did the foundation make a distribution to a donor advised fund over which the foun	idation or a disqualified	ı		
	person had advisory privileges? If "Yes," attach statement (see instructions)		. 12	ļ	X
13	Did the foundation comply with the public inspection requirements for its annual returns an	id exemption application?	13	X	
	Website address ► N/A				
14		ephone no. ▶ 203-56	9-400	0	
	Located at ▶ 680 WASHINGTON BLVD, 7TH FLOOR STAMFORD, CT	ZIP+4 ▶ <u>06901</u>			
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	▶ <u>[15</u>		1	
16		-		Yes	No
	over a bank, secunties, or other financial account in a foreign country?			<u></u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "	Yes," enter the name o	of		
	the foreign country				
Pal	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Requi		1 4	Yes	No.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies	S.	F.,	res	No
1a	a During the year did the foundation (either directly or indirectly)	n. v.			4
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		. &		- ` }
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		74		1
	disqualified person?	· · · · · · · · · · · · · · · · · · ·			` ;
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	·· [] ··· [] ···			. 4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?(5) Transfer any income or assets to a disqualified person (or make any of either available f		1,3%	1	¥
	the benefit or use of a disqualified person)?				
	(6) Agree to pay money or property to a government official? (Exception, Check "No" if the				<i>4</i>
	foundation agreed to make a grant to or to employ the official for a period aft				
	termination of government service, if terminating within 90 days.)		137	~	
ь	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions				, , ,
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	-	. 1b	N/	Δ
	Organizations relying on a current notice regarding disaster assistance check here		3 1	-	37.4
c	c Did the foundation engage in a prior year in any of the acts described in 1a, other t				
	were not corrected before the first day of the tax year beginning in 2015?	•			Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the fo	oundation was a private	1.25	-	*
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		ĺ		1
а	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d ar				
	6e, Part XIII) for tax year(s) beginning before 2015?	Yes X No	. 35%		3.74
	If "Yes," list the years 🕨 , ,		10,00		. 4
ь	b Are there any years listed in 2a for which the foundation is not applying the provision	ns of section 4942(a)(2)			. 1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying		- 1	 '	
	all years listed, answer "No" and attach statement - see instructions.)		. 2b	ļ	X
c	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list	st the years here.]	
_	· · · · · · · · · · · · · · · · · · ·				4
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterpris			l	-5
	at any time during the year?				- 1
b	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchas	•			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer				7 4
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beque		- 1	1	
	the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720 foundation had excess business holdings in 2015)			—	
4-	a Did the foundation invest during the year any amount in a manner that would jeopardize			N	/A
	b Did the foundation make any investment in a prior year (but after December 31, 1969)			†	``
•	charitable purpose that had not been removed from jeopardy before the first day of the tax			1	X
	the term of the te		Form 99	0-PF	

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

Total. Add lines 1 through 3

Form	990-PF (2015)	Page 7
Pa	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NOI		(1)
		0
		1
Tota	Il number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
-		
2		
-		
3		
J		
4		
	N. S. Suramoni of Program Poleted Investments	
	rt IX-B Summary of Program-Related Investments (see instructions)	A
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
		ļ
2		
		<u> </u>
,	Il other program-related investments. See instructions	
3	NONE	
		†

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions.)	gn foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<u> </u>
	purposes	_	
а	Average monthly fair market value of securities	1a	
ь	Average of monthly cash balances	1b	36,796.
c	Fair market value of all other assets (see instructions),	1c	<u> </u>
d	Total (add lines 1a, b, and c)	1d	36,796.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	36,796.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	552.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	36,244.
6	Minimum investment return. Enter 5% of line 5	6	1,812.
Par		ndations	·
1	Minimum investment return from Part X, line 6	1	1,812.
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
ь.	Income tax for 2015. (This does not include the tax from Part VI.)	1	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,812.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,812.
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	1,812.
Par	XII Qualifying Distributions (see instructions)	<u> </u>	-,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	306,442.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		······································
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	306,442.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		, ::
	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	306,442.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating wh	
	qualifies for the section 4940(e) reduction of tax in those years.		

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Pai	t XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7		·		1,812.
	Undistributed income, if any, as of the end of 2015			-	
	Enter amount for 2014 only				
	Total for prior years 20 13 ,20 12 ,20 11		······································	-	
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2014				
	Total of lines 3a through e	0.			
	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$306,442.				
а	Applied to 2014, but not more than line 2a				
ь	Applied to undistributed income of prior years	·			
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
	Applied to 2015 distributable amount	304,630.			1,812.
	Remaining amount distributed out of corpus	304,630.			
5	Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same		*		
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:			4	
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	304,630.			
ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount - see instructions				
T	Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2016				
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)				
۵			<u> </u>		
3	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	304,630.			
10	Analysis of line 9				
	Excess from 2011				
b	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014				
e	Excess from 2015 304, 630.				

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c Any submission deadlines

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

Part XV Supplementary Information ((continued)			Page 11
3 Grants and Contributions Paid Duri	ng the Year or Anni	oved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation	ature rayment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial complication	Todipion		
2 . G. 2				
ATCH 7				
		ļ		
Total			▶ 3a	201,691.
b Approved for future payment				
			i	
			[
		}		
		<u> </u>		
Total			<u> ▶ 3b</u>	

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er gross amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
_	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					(Oce manachona.)
b					
:					
·					
·					
g Fees and contracts from government agencies					
Membership dues and assessments					· - · · · · · · · · · · · · · · · · · ·
nterest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property			+		
Net rental income or (loss) from personal property			+		
Other (nvestment income					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
·			-		
·			+		
d e			-		
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcured XVI-B Relationship of Activities	ulations.) s to the A	ccomplishment of l	Exempt Pur	poses	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities	ulations.) s to the A y for whic	ccomplishment of l	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and (e)	ulations.) s to the A y for whic	ccomplishment of l	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities ne No. Explain below how each activity	ulations.) s to the A y for whic	ccomplishment of l	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcured to the color of	ulations.) s to the A y for whic	ccomplishment of l	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
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ne No. Explain below how each activity	ulations.) s to the A y for whic	ccomplishment of l	Exempt Pur	poses e) of Part XVI-A contrib	uted importantly to
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Form 990)-PF (20			NDATION INC.			-2395215		ge 13
Part X	(VII	Information Exempt Org		ansfers To and Transac	tions an	d Relationships With	Nonchar	itabl	e
ın	section	_		engage in any of the following section 501(c)(3) organization	-	_		Yes	No
a Tr	ansfe	rs from the repor	ting foundation to	o a noncharitable exempt orga	ınızatıon of	Ť	İ		
				• • • • • • • • • • • • • • • • • • • •					X
			• • • • • • • • •	• • • • • • • • • • • • • • • • •			1a(2)	-	X
		ansactions	noncharitable eve	empt organization			15/1	J	X
(2) Pur	chases of assets	from a noncharit	able exempt organization.			1b(2)	1	X
				r assets					Х
(4) Reir	nbursement arra	ngements				15(4)	_	X
(5) Loa	ns or Ioan guaran	tees,				1b(5)	 	X
				hip or fundraising solicitations , sts, other assets, or paid emplo				 	X
				es," complete the following s				fair n	
va	alue o	f the goods, othe	er assets, or serv	ices given by the reporting for	oundation.	. If the foundation receive	d less than	fair n	narke
				igement, show in column (d)					
(a) Line	no.	(b) Amount involved N/A	(c) Name of	noncharitable exempt organization	(d) De	scription of transfers, transactions,	and shanng arr	angeme	ents
		N/ A		1 - 1 - 1 - 1	N/A				
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di	escrib		(c) of the Code (d	ffiliated with, or related to, o other than section 501(c)(3)) o				′es 🔯	< No
		(a) Name of organization		(b) Type of organization		(c) Description of	relationship		
					+				
		penalties of perjum, I o	eclare that have exam	nned this return, including accompanying taxpayer) is based on all information of which	schedules and	statements and to the best of my	knowledge and	belief i	t is true
Sign	COITEC	t, and complete Declaration		raxpayer) is pased on all information of which		Mari	the IRS discu	es this	retum
Here				19/ 4/11/16		RECTOR with	the preparer	shown	
	Sign	ature of office of trust	ee - V	Dat e '	Trile	(see	instructions)?	Yes	Nc
	1	Print/Type reparer's	name	Preparer's signature		Date Check	if PTIN		
Paid		WILLIAM ZA	TORSKI	William a. 2a	broki	04/04/2016 self-emp	 "	3463	77
Prepa	arer	_		OUSECOOPERS LLP			13-40083	124	

973-236-4000

Use Only

Firm's address ► 400 CAMPUS DRIVE

FLORHAM PARK, NJ

07932

Schedule B

(Form 990, 990-EZ,

Name of the organization

Schedule of Contributors

OMB No 1545-0047

2015

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury

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

Employer identification number

H/3 FOUNDATION INC. 47-2395215 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I. II. and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

JSA 5E1251 2 000

Name of	organization H/3 FOUNDATION INC.		Employer identification number 47-2395215
Part I	Contributors (see instructions). Use duplicate cop	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	SPENCER HABER 92 HUSTED LANE GREENWICH, CT 06830-3935	\$337,218.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization H/3 FOUNDATION INC.

Employer identification number

47-2395215

Part II	Noncash Property (see instructions). Use duplicate copies of	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(D)	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization H/3 FOUNDATION INC. Employer identification number 47-2395215 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.) ▶\$_ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

ATTACHMENT 1

FEES
LEGAL
H
PART
990PE,
FORM

CHARITABLE PURPOSES	24,610. 140. 9,802. 4,643. 31,975.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS	24,610. 140. 9,802. 4,643. 31,975.
DESCRIPTION_	DAY PITNEY SIMPSON THACHER & BARTLETT FRANKFURT KURNIT KLEIN & SELZ GREENBERG TRAURIG GIBSON, DUNN & CRUTCHER TOTALS

ATTACHMENT 2

ATTACHMENT 2

FEES
ACCOUNTING
-
ы
PART
90PF,
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CHARITABLE PURPOSES	3,000.	3,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	3,000.	3,000.
		TOTALS
DESCRIPTION	PWC	

47-2395215

ATTACHMENT 3

1753IS 1585

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

EXPENSES PER BOOKS REVENUE AND CT LEGAL SOLUTIONS CT CORPORATION JULIE GAITHER DESCRIPTION

109. 365. 469.

943.

TOTALS

109. 365. 469. CHARITABLE PURPOSES

943.

ATTACHMENT 4

11
ENSES
EXPE
OTHER
-
H
PART
990PF,
ORM

REVENUE AND EXPENSES	PER BOOKS 1,286 1,049 850	5
	DESCRIPTION REGISTRATION FEES ADMINISTRATIVE EXPENSES EXEMPTION APPLICATION FEE TELECONERENCE FEES	CT FILING FEE

FER BOOKS	1,286.	1,049.	850.	210.	50.

TOTALS

445.
3,

CHARITABLE
PURPOSES
1,286.
1,049.
850.
210.

ATTACHMENT 4

H/3 FOUNDATION INC.

47-2395215

ATTACHMENT 5

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

BENEFITS REC'D FROM PUBLIC CHARITIES

3,500.

TOTAL

3,500.

V 15-4.1F

ATTACHMENT 6	CONS EXPENSE ACCT EE AND OTHER LANS ALLOWANCES	0.	0.0	.0	0.
4	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS				
II	COMPENSATION	0.	0	.0	0
LST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	DIRECTOR	DIRECTOR	GRAND TOTALS
FORM 990PE, PART VIII - LIST OF	NAME AND ADDRESS	SPENCER B. HABER 92 HUSTED LANE GREENWICH, CT 06830	JENNIFER PAIGE HABER 634 DUNKELD COURT SEVERNA, MD 21146	FRANCHESCA BIONDO 4 INDIAN KNOLL PLACE GREENWICH, CT 06831	

47-2395215

AMOUNT	5, 000.	663	15, 396	20, 000	22,500	52, 632
PURPOSE OF GRANT OR CONTRIBUTION	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES.	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A	N/A	N/A
RECIPIENT NAME AND ADDRESS	INSYNC EXOTICS P O BOX 968 WYLIE, TX 75098	ADOPT-A-DOG P O BOX 11135 GREENWICH, CT 06831	FRIENDS OF FELINES INC. P O BOX 8147 STAMFORD, CT 06905	MARYLAND ANIMAL SOCIETY INC P O BOX 5143 BALTIMORE, MD 21224	SUNDANCE INSTITUTE 1825 THREE KINGS DRIVE PARK CITY, UT 84060	FILM FORUM, INC 209 WEST HOUSTON STREET NEW YORK, NY 10014

ATTACHMENT 7

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ATTACHMENT 7 (CONT'D)

AMOUNT	7,500	15,000.	56,500	1,500.	5, 000
PURPOSE OF GRANT OR CONTRIBUTION	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES.	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES	TO SUPPORT CHARITABLE RELATED ACTIVITIES.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A	N/A
RECIPIENT NAME AND ADDRESS	INTER-NATION CULTURAL FOUNDATION P O. BOX 1271 KILAUEA, HI 96754	SCHOOL FOR FIELD STUDIES INC 100 CUMMINGS CENTER SUITE 534-G BEVERLY, MA 01915	THE HUMANE SOCIETY OF THE UNITED STATES 2100 L STREET, NW WASHINGTON, DC 20037	COMMUNITY CATS INC 402 OLD POST ROAD BEDFORD, NY 10506	NEW ROCHELLE HUMANE SOCIETY 70 PORTWAN ROAD NEW ROCHELLE, NY 10801

TOTAL CONTRIBUTIONS PAID

201, 691