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DLN: 93491222003217

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

Inspection

For	caler	ndar year 2015, or tax year beginning	10-0	1-2015	, a	nd ending 0	9-30-2016	
	e of four	ndation LY FOUNDATION INC				A Employer ide	entification numb	er
ED	EK FAMI	LY FOUNDATION INC				06-1465369		
Num	ber and	street (or P O box number if mail is not delivered to street ac	dress)	Room/suite		B Telephone num	ber (see instruction	ns)
11	EDER R	OAD				(203) 934-8381		
		state or province, country, and ZIP or foreign postal code , CT 06516				C If exemption a	application is pendir	ng, check here
	anck all	that apply Initial return Initial return	of a fo	ormer public charity		D. F		
u cı	icck all	Final return A mended re		offiler public chartey		D 1. Foreign org	janizations, check h	lere P
		Address change Name chang					ganizations meeting	
—	ock tw	pe of organization $\sqrt{\text{Section 501(c)(3)}}$ exempt	arıvatı	a foundation			: here and attach co ndation status was	
		pe of organization			า	under section	507(b)(1)(A), che	ck here
				Cash √ Accru		F If the founda	tion is in a 60-mont	th termination
		from Part II, col (c),		pe on cash basis)		under section	507(b)(1)(B), che	ck here
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a) (see instructions))		Revenue and expenses per	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach						
		schedule)		383,760				
	2	Check ► ☐ If the foundation is not required to attach Sch B						
	3	Interest on savings and temporary cash investment	ents					
	4	Dividends and interest from securities	[129,417		129,417		
	5a	Gross rents	[
a)	b	Net rental income or (loss)						
Reverkie	6a	Net gain or (loss) from sale of assets not on line	10	251,596				
	b	Gross sales price for all assets on line 6a 2,845,994						
	7	Capital gain net income (from Part IV, line 2).				251,596		
	8	Net short-term capital gain						
	9	Income modifications	-					
	10a	Gross sales less returns and allowances Less Cost of goods sold						
	b c	Gross profit or (loss) (attach schedule)						
	11	Other Income (attach schedule)						
				764,773		381,013		
	12	Total. Add lines 1 through 11		704,773		0		0
	14	Other employee salaries and wages	-					
S	15	Pension plans, employee benefits	<u> </u>					
15e	16a	Legal fees (attach schedule)	- ⊢					
<u>8</u>	b	Accounting fees (attach schedule)						
Ë	c	Other professional fees (attach schedule)		-				
tive	17	Interest		-				
tra	18	Taxes (attach schedule) (see instructions) .		4,911		0		0
and Administrative Expenses	19	Depreciation (attach schedule) and depletion .	-					
重	20	Occupancy						
Ą	21	Travel, conferences, and meetings						
anc	22	Printing and publications	[
D:	23	Other expenses (attach schedule)	[9 ,722		19,722		0
Operating	24	Total operating and administrative expenses.						
be		Add lines 13 through 23	[24,633		19,722		0
0	25	Contributions, gifts, grants paid	[321,150				321,150
	26	Total expenses and disbursements. Add lines 24 a 25	nd	345,783		19,722		321,150
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disburseme	nts	418,990				
	b	Net investment income (if negative, enter -0-)				361,291		
		Adjusted net income(if negative, enter -0-) .			ı			1

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		of year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	167,394	919,32	20 919,320
	2	Accounts receivable	107,334	919,52	10 919,320
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	4	Less allowance for doubtful accounts			
	5	Grants receivable			+
	_	Receivables due from officers, directors, trustees, and other			
	6	disqualified persons (attach schedule) (see instructions)	400,000	200,00	200,000
	7	Other notes and loans receivable (attach schedule)	400,000	200,00	200,000
	,	Less allowance for doubtful accounts			
		Inventories for sale or use			
Sts	8	Prepaid expenses and deferred charges			
Assets	9				
Ä	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	3,454,967	3,172,13	34 4,134,091
	С	Investments—corporate bonds (attach schedule)	1,825,455	1,975,95	55 1,989,802
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)	11,380	10,77	77 🔧 10,777
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	5,859,196	6,278,18	7,253,990
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
TIC.	20	Loans from officers, directors, trustees, and other disqualified persons $% \left(1\right) =\left(1\right) \left(1\right) \left$			
ıal	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe •)			
	23	Total liabilities(add lines 17 through 22)	0		0
5		Foundations that follow SFAS 117, check here ▶			
		and complete lines 24 through 26 and lines 30 and 31.			
lan	24	Unrestricted			
Balance	25	Temporarily restricted			
Fund	26	Permanently restricted			
Fu		Foundations that do not follow SFAS 117, check here 🕨 🔽			
ō		and complete lines 27 through 31.			
ţs	27	Capital stock, trust principal, or current funds	0		0
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0
	29	Retained earnings, accumulated income, endowment, or other funds	5,859,196	6,278,18	36
Net	30	Total net assets or fund balances (see instructions)	5,859,196	6,278,18	36
	31	Total liabilities and net assets/fund balances (see instructions)	5,859,196	6,278,18	36
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	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		1	5,859,196
2		Enter amount from Part I, line 27a		2	418,990
3		Other increases not included in line 2 (itemize) ▶		3	0
4		Add lines 1, 2, and 3			6,278,186
5		Decreases not included in line 2 (itemize) ▶		_ 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—l	Part II, column (b), lı	ne 30 . 6	6,278,186

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	·	How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr)
1a	See Additional Data	Table				
ь						
С						
d						
		Depreciation allowe	d Cost	or other basis	Gair	or (loss)
(e	e) Gross sales price	(f) (or allowable)	l l	expense of sale		(f) minus (g)
а	See Addıtıonal Data	Table				
b						
С						
d						
e						
Со	mplete only for assets	showing gain in column (h) and owne	ed by the foundation	on 12/31/69	Gains (Col	(h) gain minus
	· · · · · · · · · · · · · · · · · · ·	A djusted basis		ess of col (ı)		ot less than -0-) or
(1)	FM V as of 12/31/69	(j) as of 12/31/69	(k) over	col (j), if any	(I) Losses	(from col (h))
а	See Additional Data	Table				
b						
c						
d						
e						_
3	Net short-term capit If gain, also enter in			in Part I, line 7	2	251,596
Part	In Part I, line 8 . V Qualification I	Under Section 4940(e) for R	educed Tax on	Net Investme	nt Income	
fsection	cional use by domestic j on 4940(d)(2) applies,	private foundations subject to the se	ection 4940(a) tax (on net investment	ıncome)	┌ Yes 🗸 No
[f"Yes,	" the foundation does n	ot qualify under section 4940(e) Do	o not complete this	part		
1 E N		unt in each column for each year, se	ee instructions befo	re making any ent		
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	itable-use assets	(d) Distributio (col (b) divided	n ratio
	2014	0		255,539		0 000000
	2013	273,450		6,094,577		0 044868
	2012	288,383		5,376,217		0 053641
	2011	217,981		4,740,243		0 045985
	2010	180,700		3,923,257		0 046059
2		n (d)			2	0 190553
3	the number of years	ratio for the 5-year base period—div the foundation has been in existence	e if less than 5 year	s	3	0 038111
4		f noncharitable-use assets for 2015		<u> </u>	4	6,785,480
5	Multiply line 4 by line	e 3. 			5	258,601
6	Enter 1% of net inve	stment income (1% of Part I, line 2 $^\circ$	7b)	[6	3,613
7	Add lines 5 and 6.			[7	262,214
8		ributions from Part XII, line 4			8	321,150
		r greater than line 7, check the box		_	part using a 1% ta	

CI	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ins)	
1a				
	and enter "N/A" on line 1 Date of ruling or determination letter			
	(attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		:	3,613
	here ▶ 🔽 and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			0
3	enter - 0 -) Add lines 1 and 2			3,613
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others		•	,013
7	enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5			3,613
6	C redits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3,480			
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			3,480
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			3
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed 9			136
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 2015 estimated tax Refunded 11			
	t VII-A Statements Regarding Activities		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	It participate or intervene in any political campaign?	1 a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions	41		
	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?	1 c		No
c d		10		NO
u	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \triangleright \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	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 changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions] ,	
	that conflict with the state law remain in the governing instrument?	6	Yes	
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	Yes	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	Tether and the last 7 has the foundation formula to a for			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	O.L.	V	
0	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addlesses 2	10	Yes	

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►ANDREW J EDER Telephone no ►(203)	934-	8381	
	Located at ▶11 EDER ROAD WEST HAVEN CT ZIP+4 ▶06516			
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	l No
10	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	163	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			110
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		i i	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No		İİ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No		i i	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		i i	
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🗸 No			
b	If any answer is "Yes" to $1a(1)$ – (6) , did any of the acts fail to qualify under the exceptions described in Regulations		ĺĺ	
	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			
	Γ			
С	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		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)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
a	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years ▶ 20, 20, 20		İ	
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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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	-aL-		
4~	If the foundation had excess business holdings in 2015)	3b		No
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		140
,	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

c	Statements Rega	arding Activities for	VVI	ich Form 4/20	мау	Be Requirea (Com	mue	ea)	
5a	During the year did the foundation	n pay or incur any amour	nt to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ıslatıon (section 49	45(e)) ⁷	es 🗔	✓ No		
	(2) Influence the outcome of any	specific public election	(see	section 4955), or to	carr	ry .				
	on, directly or indirectly, any	voter registration drive?			•	· · · · Y	es 「	✓ No		ļ
	(3) Provide a grant to an individu	ual for travel, study, or ot	hers	ımılar purposes?		┌ Y	es 🗔	✓ No		ļ
	(4) Provide a grant to an organiz									
	in section 4945(d)(4)(A)? (s				•	· · · · \ 🗆 Y	es	✓ No		
	(5) Provide for any purpose othe educational purposes, or for t					Y	oc [√ No		
b	If any answer is "Yes" to 5a(1)-							V 140	i i	i
	Regulations section 53 4945 or	• **							5b	
	Organizations relying on a currer	nt notice regarding disas	ter as	sistance check here	e		.▶			
							Γ	_		1
С	If the answer is "Yes" to questio	• • •								
	tax because it maintained expen				•		es	No		ļ
_	If "Yes," attach the statement requ	· -		• •						
6 a	Did the foundation, during the year personal benefit contract?	•				_	_			
h	·					'	es	✓ No	i i	 No
b	Did the foundation, during the ye. If "Yes" to 6b, file Form 8870	ar, pay premiums, unecci	yori	nunectry, on a perso	JIIdi L	Jeneni Contract.		•	6b	No
7a	At any time during the tax year,	was the foundation a part	y to a	a prohibited tax shel	ter tr	ansaction?	es 「	Z No		
	If yes, did the foundation receive	·		•		' '		•	 7b	i
	Information Abou	it Officers, Director							d Emp	loyees,
	t VIII and Contractors									
1	List all officers, directors, trustee	es, foundation managers	and t	heir compensation (see ii	nstructions). (d)				
	(a) Name and address	Title, and average hours per week (b) devoted to position	` `	Compensation(If not paid, enter -0-)	ı	Contributions to mployee benefit pla deferred compensi		(e)	•	e account, llowances
ANDRE	EW J EDER	PRESIDENT &		0	anu	deletted compens	0			0
11 E	DER ROAD	DIRECTOR		· ·			Ū			· ·
	THAVEN,CT 06516	2 00								
	N F EDER	SECRETARY 1 00		0			0			0
	DER ROAD T HAVEN,CT 06516									
	Compensation of five highest-paid	d employees (other than	thos	e included on line 1-	-see	instructions). If no	ne, ei	nter "	NONE."	
Nan	(a) ne and address of each employee more than \$50,000	Title, and ave hours per we (b) devoted to pos	ek	(c) Compensatio	n	Contribution employee ber plans and defe (d) compensati	nefit erred	(e)		e account, Ilowances
ИОИ	E									
	I number of other employees paid			l				\vdash		

Total. Add lines 1 through 3

	TEX Minimum Investment Return		Page 8
•	(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	6,765,353
b	A verage of monthly cash balances	1b	112,381
c	Fair market value of all other assets (see instructions)	1c	11,078
d	Total (add lines 1a, b, and c)	1d	6,888,812
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	6,888,812
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	103,332
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,785,480
6	Minimum investment return. Enter 5% of line 5	6	339,274
Pa	Distributable Amount (co. instructions) (Section 4042(1)(2) and (1)(5) private energing foundations and cor	6	
	(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	tain for	eign organizations
1	Minimum investment return from Part X, line 6	1	339,274
<u>-</u> 2a	Tax on investment income for 2015 from Part VI, line 5 2a 3,613		333,274
za b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	3,613
3	Distributable amount before adjustments Subtract line 2c from line 1	3	335,661
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	335,661
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	335,661
	Distributable amount as adjusted Subtract line 6 Hoff line 5 Effet fiele and off Part XIII, fine 1		333,001
ar	t XIII 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	321,150
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	321,150
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	3,613
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	317,537
	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		•

	m 990-PF (2015)	_			Page 9
Р	art XIII Undistributed Income (see instru	ctions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	'	,		335,661
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			236	
b			0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
c	From 2012				
d	From 2013				
	From 2014				
f	Total of lines 3a through e		0		
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2014, but not more than line 2a			236	
b	Applied to undistributed income of prior years		0	\top	
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election		0		
	required—see instructions)				320,914
	Applied to 2015 distributable amount		0		320,914
	Remaining amount distributed out of corpus				0
5	Excess distributions carryover applied to 2015		U		
	(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		0		
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
	Undistributed income for 2016 Subtract			<u> </u>	
Т	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				14,747
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)		<u> </u>		
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)		0		
٥	Excess distributions carryover to 2016.		+		
9	Subtract lines 7 and 8 from line 6a		0		
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				

	m 990-PF (2015)					Page 10
	art XIV Private Operating Foundat			1	า 9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	ıs a prıvate opera	ting foundation de	escribed in section	1	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(0, 1000)
	year listed					
	35% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
_	Part X, line 6 for each year listed					
C	"Support" alternative test—enter (1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization					
Рa	(4) Gross investment income rt XV Supplementary Information (Complete this	part only if th	⊥ ne organizatio	n had \$5.000 o	r more in
	assets at any time during the			g	45,555	
1	Information Regarding Foundation Managers:		20/ 611			
а	List any managers of the foundation who have c before the close of any tax year (but only if they					lation
	, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·	, (
	See Additional Data Table					
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				y large portion of th	e
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarsh	ip, etc., Programs:			
	Check here $\blacktriangleright \boxed{\checkmark}$ if the foundation only makes counsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and conditions	makes gifts, grar				
_						
а	The name, address, and telephone number or e	mail address of th	e person to whom	applications shou	ıld be addressed	
_	The form in which applications about the	uttod and informer !	ion and material	thou chould!	lo.	
D	The form in which applications should be subm	itted and imormat	ion and materials	they should includ	ic	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such factors	as by geographic	al areas, charitabl	le fields, kinds of i	nstitutions, or othe	r

Form 990-PF (2015)

Part XV Supplementary Information(continued)

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
Name and address (home or business) a Paid during the year See Additional Data Table	or substantial contributor	recipient	CONTRIBUTION	
Total			▶ 3a	321,150
b Approved for future payment				
Total			▶ 3h	1

nter gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
L Program	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
	<u> </u>					
f						
_	and contracts from government agencies ship dues and assessments					
Interes	t on savings and temporary cash					
Dividen	ds and interest from securities			14	129,417	
	tal income or (loss) from real estate					
	financed property					
Net ren	tal income or (loss) from personal y					
Otherir	nvestment income					
invento	(loss) from sales of assets other than ory			14	251,596	
	ome or (loss) from special events rofit or (loss) from sales of inventory					
	evenue a					
Subtota	I Add columns (b), (d), and (e)		0		381,013	
	dd line 12, columns (b), (d), and (e)			1	.3	381,013
(See wo	dd line 12, columns (b), (d), and (e). orksheet in line 13 instructions to verify B Relationship of Activities to	calculations) o the Accom	plishment of E	xempt Purpos	es	
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to
(See wo art XVI Line No.	dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify the color of the color o	calculations) The Accomplich income is re	plishment of E	xempt Purpos e) of Part XVI-A co	es ontributed importa	ntly to

Part XVII	Noncharitable				actions and F	Relationships	With			
1 Did the o	rganization directly or in				h any other organ	ızatıon described	ın			
section 5	01(c) of the Code (other	r than sec	tion 501(c)(3) o	rganızatıons) or	in section 527,	relating to politica	1 <u> </u>		Yes	No
organızat	ions?									
a Transfers	from the reporting four	idation to a	noncharitable e	exempt organiza	tion of					
	1						_	(1)		No
	erassets						1	1(2)		No
b Other tra										
	s of assets to a noncha							(1)		No
	hases of assets from a							(2)		No
	al of facilities , equipmei							(3)		No
	nbursement arrangemen							(4)		No
	s or loan guarantees.							(5)		No
	mance of services or m	•	_					(6)		No
_	f facilities, equipment, i	_	· ·					1c		No
of the god	wer to any of the above ods, other assets, or sen nsaction or sharing arm	rvices give	n by the reportii	ng foundation It	f the foundation re	eceived less than	fair market v		e	
(a) Line No	(b) Amount involved	(c) Name o	f noncharitable exe	mpt organization	(d) Description	of transfers, transaction	ons, and sharing	arrang	jemen	its
described √ No	indation directly or indiid in section 501(c) of the complete the following secondarization	ie Code (ot schedule	her than section	•	in section 527?.	·	on of relations		i	
the	ler penalties of perjury, best of my knowledge a rmation of which prepar *****	nd belief, i	t is true, correct					s base	d on	all
•	Signature of officer or ti	rustee		Date	Tıtle		with the p below (see instr	· _	_	
	Print/Type preparer's ROBERT SCHLESS	name	Preparer's Sign	ature	Date 2017-08-07	Check if self- employed ▶	PTIN P01:	23620)3	
Paid Preparer Use		LLP			1	Firm's EIN ▶ 06	5-1533315			
Only	Firm's address ► 855 MAIN STREET 6' 06604	TH FLR BR	IDGEPORT, CT			Phone no (203)	366-5876			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
150,000 DOW CHEMICAL	Р	2010-11-22	2015-11-16
100,000 BANK AMERICA CORP	Р	2008-12-12	2015-12-01
270 APPLE, INC	Р	1917-03-01	2016-04-06
7,010 691 CALAMOS GROWTH	Р		2016-04-06
5,797 472 COLUMBIA VALUE	Р		2016-04-06
72 FRONTIER COMMUNICATIONS	Р	2010-07-02	2016-04-06
1,369 HARBOR	Р	2009-11-30	2016-04-06
200 ISHARES NASDAQ	Р	2007-01-03	2016-04-06
13,452 89 LOOMIS SAYLES	Р		2016-04-06
7,989 26 MARISCO GROWTH	Р		2016-04-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
150,000		150,000	0
100,000		100,000	0
29,610		3,381	26,229
211,092		295,426	-84,334
237,001		249,361	-12,360
312		206	106
80,000		74,096	5,904
56,294		15,794	40,500
150,000		159,186	-9,186
120,000		150,645	-30,645

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			0
			0
			26,229
			-84,334
			-12,360
			106
			5,904
			40,500
			-9,186
			-30,645

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
550 MICROSOFT	Р	2000-04-28	2016-04-06
T ROWE PRICE BLUE CHIP GROWTH	Р		2016-04-06
ROYCE PREMIER INVESTMENT	Р		2016-04-06
3,000 STAPLES	Р		2016-04-06
18,644 315 TEMPLETON GLOBAL BOND	Р		2016-04-06
THIRD AVENUE SMALL CAP VALUE	Р		2016-04-06
THORNBURG INT'L VALUE	Р		2016-04-06
VANGUARD ST INVESTMENT	Р		2016-04-06
75,000 WAL-MART STORES	Р	2011-04-15	2016-04-06
200,000 JPMORGAN CHASE	Р	2011-06-23	2016-07-05

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
30,034		19,336	10,698
155,000		66,132	88,868
100,000		104,338	-4,338
33,443		28,500	4,943
210,308		245,087	-34,779
95,000		97,094	-2,094
80,000		89,194	-9,194
194,811		196,622	-1,811
75,000		75,000	0
200,000		200,000	0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (I) (k) over col (j), If any	col (k), but not less than -0-) or (I) Losses (from col (h))
			10,698
			88,868
			-4,338
			4,943
			-34,779
			-2,094
			-9,194
			-1,811
			0
			0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) Date acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 75,000 FFCB 2016-04-05 2016-07-08 Р 2012-01-12 200,000 COMMONWEALTH EDISON Р 2016-08-02 CAPITAL GAINS DIVIDENDS Ρ

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h					
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)		
75,000		75,000	0		
200,000		200,000	0		
262,080			262.000		

IJ	263,089			263,089				
F	Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I							
	Complete only for assets show	wing gain in column (h) and owned	by the foundation on 12/31/69	Gains (Col (h) gain minus				
	(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (l) Losses (from col (h))				
				0				
				0				
				263,089				

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5.000).

EILEEN FEDER

contributed more than \$5,000).

ANDREWJEDER

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ARTSPACE 555 ASYLUM STREET HARTFORD,CT 06105	NONE	501(C)(3)	CONTRIBUTION	10,000
CENTRAL CONNECTICUT STATE UNIV 1615 STANLEY STREET NEW BRITAIN,CT 06050	NONE	501(C)(3)	EDUCATIONAL SCHOLARSHIP	6,000
CIRCLE CAMPS 5124 HOLYROOD ROAD PITTSBURGH,PA 15213	NONE	501(C)(3)	CONTRIBUTION	500
COMMUNITY FOUNDATION OF GREATER NEW HAVEN 70 AUDUBON STREET NEW HAVEN,CT 06510	NONE	501(C)(3)	CONTRIBUTION	10,000
MISHKAN ISRAEL DAY CAMP 785 RIDGE ROAD HAMDEN,CT 06517	NONE	501(C)(3)	CONTRIBUTION	350
Total			▶ 3a	321,150

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CONSUMER REPORTS FOUNDATION 101 TRUMAN AVENUE YONKERS,NY 10703	NONE	501(C)(3)	CONTRIBUTION	1,000
CT COUNCIL FOR PHILANTROPHY 221 MAIN STREET HARTFORD,CT 06106	NONE	501 (C)(3)	CONTRIBUTION	2,800
CT LEGAL SERVICES 211 STATE STREET BRIDGEPORT,CT 06604	NONE	501(C)(3)	CONTRIBUTION	500
DENISON PEQUOT SEPOS NATURE CENTER 109 PEQUOTSEPOS ROAD MYSTIC,CT 06355	NONE	501(C)(3)	CONTRIBUTIONCONTRIBUTION	2,000
EASTERN CONNECTICUT STATE UNIV 83 WINDHAM STREET WILLIMANTIC,CT 06226	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	1,500
Total			▶ 3a	321,150

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 status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
ENDICOTT COLLEGE 376 HALE STREET BEVERLY,MA 01915	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	2,750
FOUNDATION FOR ARTS AND TRAUMA 370 JAMES ST SUITE 403 NEW HAVEN,CT 06513	NONE	501(C)(3)	CONTRIBUTION	10,000
FRANKLIN AND MARSHALL COLLEGE PO BOX 3003 LANCASTER,PA 17604	NONE	501 (C)(3)	CONTRIBUTION	2,000
FRIENDS OF HAMMONASSET PO BOX 271 MADISON,CT 06443	NONE	501(C)(3)	CONTRIBUTION	500
GATEWAY COMMUNITY COLLEGE FOUNDATION 20 CHURCH STREET NEW HAVEN,CT 06510	NONE	501 (C)(3)	CONTRIBUTION	1,000
Total			▶ 3a	321,150

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 | Amount |

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				
GUILFORD A BETTER CHANCE PO BOX 140 GUILFORD,CT 06437	NONE	501 (C)(3)	CONTRIBUTION	500
GUILFORD FOUNDATION PO BOX 35 GUILFORD,CT 06437	NONE	501(C)(3)	CONTRIBUTION	5,000
GUILFORD LAND TRUST PO BOX 200 GUILFORD,CT 06437	NONE	501(C)(3)	CONTRIBUTION	2,000
HOLDERNESS SCHOOL PO BOX 1879 PLYMOUTH,NH 03264	NONE	501(C)(3)	CONTRIBUTION	2,000
HYDE SCHOOL 88 BASSETT ROAD NORTH HAVEN,CT 06473	NONE	501(C)(3)	CONTRIBUTION	1,000
Total			▶ 3a	321,150

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 status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
JCC OF GREATER NEW HAVEN 360 AMITY ROAD WOODBRIDGE,CT 06525	NONE	501(C)(3)	CONTRIBUTION	10,000
LITERACY VOLUNTEERS 4 SCIENCE PARK NEW HAVEN,CT 06511	NONE	501(C)(3)	CONTRIBUTION	7,500
LONG WHARF THEATRE 222 SARGENT DRIVE NEW HAVEN,CT 06511	NONE	501(C)(3)	CONTRIBUTION	3,000
NEW HAVEN READS COMMUNITY BOOK BANK 45 BRISTOL STREET NEW HAVEN,CT 06511	NONE	501(C)(3)	CONTRIBUTION	10,000
PLANNED PARENTHOOD OF CT 345 WHITNEY AVENUE NEW HAVEN,CT 06511	NONE	501 (C)(3)	CONTRIBUTION	2,000
Total			▶ 3a	321,150

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				
SEA EDUCATION ASSOCIATION 4245 N FAIRFAX DR ARLINGTON,VA 22203	NONE	501(C)(3)	CONTRIBUTION	1,000
SOUTHERN CONNECTICUT STATE UNIV 501 CRESCENT STREET NEW HAVEN,CT 06515	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	5,750
UNITED WAY OF GREATER NEW HAVEN 370 JAMES ST SUITE 403 NEW HAVEN,CT 06513	NONE	501(C)(3)	CONTRIBUTION	35,000
UNIVERSITY OF CONNECTICUT 352 MANSFIELD ROAD MANSFIELD,CT 06269	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	9,250
UNIVERSITY OF UTAH 201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	2,000
Total			▶ 3a	321,150

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				
UNIVERSITY OF VERMONT 85 SOUTH PROSPECT STREET BURLINGTON,VT 05405	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	3,500
WESTFIELD STATE UNIV 577 WESTERN AVENUE WESTFIELD,MA 01086	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	1,250
RAISE THE ROOF HABITAT PO BOX 916 MADISON,CT 06443	NONE	501 (C)(3)	CONTRIBUTION	5,000
UNIVERSITY OF NEW HAVEN 300 BOSTON POST ROAD WEST HAVEN,CT 06516	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	10,000
COMMUNITY FUND FOR WOMEN AND GIRLS 70 AUDUBON STREET NEW HAVEN,CT 06510	NONE	501 (C)(3)	CONTRIBUTION	250
Total			▶ 3a	321,150

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				
ROSES FOR AUCTION 11 EDER ROAD WEST HAVEN,CT 06516	NONE	501 (C)(3)	CONTRIBUTION	1,000
CONNECTICUT MARCH OF DIMES 500 WINDING BROOK DRIVE GLASTONBURY,CT 06033	NONE	501 (C)(3)	CONTRIBUTION	500
SACRED HEART UNIVERSITY 5151 PARK AVENUE BRIDGEPORT,CT 06604	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	1,500
WEST HAVEN CHILD DEVELOPMENT CENTER 201 NOBLE STREET WEST HAVEN,CT 06516	NONE	501 (C)(3)	CONTRIBUTION	1,000
JEWISH FOUNDATION OF GREATER NEW HAVEN 360 AMITY ROAD WOODBRIDGE,CT 06525	NONE	501 (C)(3)	CONTRIBUTION	100,000
Total			▶ 3a	321,150

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 | Amount |

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
JUNTA INC FOR PROGRESSIVE ACTION 169 GRAND AVENUE NEW HAVEN,CT 06513	NONE	501 (C)(3)	CONTRIBUTION	500
SOLAR YOUTH INC 53 WAYFARER STREET NEW HAVEN,CT 06515	NONE	501 (C)(3)	CONTRIBUTION	1,000
A BROKEN UMBRELLA THEATRE 247 COLLEGE STREET NEW HAVEN,CT 06510	NONE	501 (C)(3)	CONTRIBUTION	2,000
HORIZONS AT FOOTE 50 LOOMIS PLACE NEW HAVEN,CT 06511	NONE	501 (C)(3)	CONTRIBUTION	1,000
NEW HAVEN FARMS PO BOX 8953 NEW HAVEN,CT 06532	NONE	501 (C)(3)	CONTRIBUTION	10,000
Total			▶ 3a	321,150

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

| Paginiant | If recipient is an individual | Equipation | Purpose of grant or Amount | Amount | Paginiant 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 | | | | |
| UNIVERSITY OF NEW HAVEN
300 BOSTON POST ROAD
WEST HAVEN,CT 06516 | NONE | 501 (C)(3) | EDUCATIONAL
SCHOLARSHIP | 25,000 |
| WOMEN AND FAMILY LIFE CENTER
96 FAIR STREET
GUILFORD,CT 06437 | NONE | 501 (C)(3) | CONTRIBUTION | 500 |
| EARLY CHILDHOOD ALLIANCE
237 HAMILTON STREET
HARTFORD,CT 06106 | NONE | 501 (C)(3) | CONTRIBUTION | 1,000 |
| CONNECTICUT FOOD BANK
74 LINWOOD AVENUE
FAIRFAIRFIELD,CT 06824 | NONE | 501 (C)(3) | CONTRIBUTION | 5,000 |
| UNIVERSITY OF THE ARTS
320 S BROAD STREET
PHILADELPHIA,PA 19102 | NONE | 501 (C)(3) | EDUCATIONAL
SCHOLARSHIP | 1,500 |
| Total | | | ▶ 3a | 321,150 |

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 | Amount |

Recipient	If recipient is an individual,		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				
CHABAD OF THE SHORELINE 800 VILLAGE WALK 327 GUILFORD,CT 06437	NONE	501 (C)(3)	CONTRIBUTION	1,000
JEWISH FAMILY SERVICE 1440 WHALLEY AVENUE NEW HAVEN,CT 06515	NONE	501 (C)(3)	CONTRIBUTION	500
WESTERN CONNECTICUT STATE UNIVERSITY 181 WHITE STREET DANBURY,CT 06810	NONE	501 (C)(3)	EDUCATIONAL SCHOLARSHIP	1,250
Total			▶ 3a	321,150

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491222003217
TY 2015 Investments Corporat	e Bonds Sche	dule

Name:	EDER FAMILY	FOUNDATION INC
EIN:	06-1465369	

Name of Bond

End of Year Book

Value

End of Year Fair

CORPORATE NOTES

1,975,955

Market Value

1,989,802

TY 2015 Investments Corporate Stock Schedule	

Name: EDER FAMILY FOUNDATION INC.

ETN: 06-1/65360

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

JANNEY MONTGOMERY SCOTT - COMMON STOCKS

JANNEY MONTGOMERY SCOTT - MUTUAL FUNDS

Name of Stock	End of Year Book Value	End of Mark

of Year Fair ket Value

DLN: 93491222003217

1,164,465

2,007,669

2,007,388

2,126,703

Description

efile GRAPHIC print - DO NOT PROCESS

ACCRUED INTEREST

As Filed Data -

Name: EDER FAMILY FOUNDATION INC.

EIN: 06-1465369

Beginning of Year -

Book Value

11,380

End of Year - Fair

DLN: 93491222003217

End of Year - Book

Value

10,777

Market Value

10,777

efile GRAPHIC print - DO NOT PROCESS

INVESTMENT FEES

Name: EDER FAMILY FOUNDATION INC.

As Filed Data -

19.722

	EIN: 06-1465369		
Description	Revenue and Expenses	Net Investment	T_i

Disbursements for

DLN: 93491222003217

Adjusted Net Income

Charitable Purposes

per Books

Income

19,722

EIN: 06-1465369

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

ANDREW EDER CLAT

James - FDFD FAMILY FOLINDATION INC

DLN: 93491222003217

Name: EDER FAMILY FOUNDATION INC

Name	Address
	11 EDER ROAD WEST HAVEN,CT 06516

11 EDER ROAD

WEST HAVEN, CT 06516

11 2015 Taxes Schedule

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Name: EDER FAMILY FOUNDATION INC

DLN: 93491222003217

EIN: 06-1465369

	Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Ī	FEDERAL EXCISE	4,911	0		0

efile GRAPHIC print	DO NOT PROCESS	As Filed Data -			DLN: 93491222003217
Schedule B (Form 990, 990-EZ, or 990-PF)			Ile of Contributors Form 990, 990-EZ, or 990-PF		OMB No 1545-0047
Department of the Treasury Internal Revenue Service	► Information ab	•	orm 990, 990-EZ, or 990-PF) and www irs gov/form990	its instructions is at	2015
Name of the organization EDER FAMILY FOUNDATION INC		Employer id 06-14653	dentification number		
Organization type (ch	eck one)			700 2.000	
Filers of:	Section:				
Form 990 or 990-EZ	501(c)(_)	(enter number) org	anization		
	4947(a)(1)	nonexempt charita	able trust not treated as a private	e foundation	
	527 politica	al organization			
Form 990-PF	√ 501(c)(3)	exempt private fou	ndation		
	4947(a)(1)	nonexempt charita	able trust treated as a private fou	undation	
	501(c)(3)	taxable prıvate fou	ndation		
Note. Only a section 50 General Rule	1(c)(/), (8), or (10) or	ganization can che	ck boxes for both the General Ru	ale and a Special Rule S	ee instructions
	=		hat received, during the year, co ts I and II See instructions for de	_	
Special Rules					
under sections : received from a	509(a)(1) and 170(b)(1	l)(A)(vı), that chec ring the year, total (Form 990 or 990-EZ that met the 3 ked Schedule A (Form 990 or 99 contributions of the greater of (1) s I and II	0-EZ), Part II, line 13, 16a	a, or 16b, and that
during the year,		nore than \$1,000 e	r (10) filing Form 990 or 990-EZ t x <i>clusively</i> for religious, charitabli lete Parts I, II, and III	_	
during the year, this box is chec purpose Do not	contributions exclusively ked, enter here the total complete any of the p	rely for religious, chall contributions that arts unless the Ge	r (10) filing Form 990 or 990-EZ thantable, etc., purposes, but no state are received during the year the rail Rule applies to this organismore during the year	such contributions totale for an <i>exclusively</i> religio ization because it receiv	d more than \$1,000 lf ous, charitable, etc ,

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

Name of organization EDER FAMILY FOUNDATION INC Employer identification number 06-1465369

Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
1			Person	▽
	EDER BROTHERS INC 11 EDER ROAD		Payroll	Г
		\$ 300,000	Noncash	_
	WEST HAVEN, CT06516		(Complete Part II for contributions)	noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
2			Person	▽
	ANDREW EDER CLAT 11 EDER ROAD		Payroll	Г
		\$ 83,760	Noncash	_
	WEST HAVEN, CT06516		(Complete Part II for contributions)	noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
	, mano, address, and En	Total contributions	Person	<u> </u>
			Payroll	
		<u>\$</u>	Noncash	Г
			(Complete Part II for contributions)	noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
			Person	
		s	Payroll	Г
			Noncash	Г
			(Complete Part II for contributions)	noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
			Person	Г
			Payroll	Г
		<u>\$</u>	Noncash	
			(Complete Part II for contributions)	noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
	, , , , , , , , , , , , , , , , , , , ,		Person	
			Payroll	·
		\$	Noncash	Г
			(Complete Part II for contributions)	noncash

Name of organization		Employer identification number		
EDER FAMILY FOUNDATION INC		06-1465369		
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
·				
(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	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	