

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation DAVID AND EUNICE BIGELOW FOUNDATION		A Employer identification number 06-1535327	
Number and street (or P O box number if mail is not delivered to street address) 134 East Ave		Room/suite	B Telephone number (see instructions) (203) 227-7470
City or town, state or province, country, and ZIP or foreign postal code Norwalk, CT 06851		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 6,221,492		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis )			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	294,829			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	41	41		
	4 Dividends and interest from securities . . .	176,533	176,533		
	5a Gross rents . . . . .				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	609,735			
	b Gross sales price for all assets on line 6a 2,124,142				
	7 Capital gain net income (from Part IV, line 2) . . .		609,735		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	1,108	1,108		
	12 Total. Add lines 1 through 11 . . . . .	1,082,246	787,417		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .				
	c Other professional fees (attach schedule) . . . . .	22,575	22,575		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	8,200	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	2,505	0		2,505
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	33,280	22,575		2,505
	25 Contributions, gifts, grants paid . . . . .	373,285			373,285
	26 Total expenses and disbursements. Add lines 24 and 25	406,565	22,575		375,790
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	675,681			
	b Net investment income (if negative, enter -0-)		764,842		
c Adjusted net income(if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	-77,502	-254,596	-254,596
	2	Savings and temporary cash investments . . . . .	214,492	606,878	606,878
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ 2,000 Less allowance for doubtful accounts ▶ _____	2,000	2,000	2,000
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)	0	56,313	55,380
	b	Investments—corporate stock (attach schedule) . . . . .	2,012,682	2,114,883	3,075,878
	c	Investments—corporate bonds (attach schedule) . . . . .	2,160,937	2,529,592	2,545,532
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	235,402	168,622	190,420
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	4,548,011	5,223,692	6,221,492	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	4,548,011	5,223,692	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	4,548,011	5,223,692	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	4,548,011	5,223,692		

Part 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 agree with end-of-year figure reported on prior year's return)	1	4,548,011
2	Enter amount from Part I, line 27a . . . . .	2	675,681
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	5,223,692
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)—Part II, column (b), line 30 .	6	5,223,692

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

(a) List and describe the kind(s) of property sold (e g , real estate, 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 )
<b>1 a</b> Schwab - Publicly Traded Securities - ST			
<b>b</b> Schwab - Publicly Traded Securities - LT			
<b>c</b> Capital Gains Dividends	P		
<b>d</b>			
<b>e</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 459,936		421,920	38,016
<b>b</b> 1,660,838		1,092,487	568,351
<b>c</b> 3,368			3,368
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			38,016
<b>b</b>			568,351
<b>c</b>			3,368
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	609,735
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	312,175	5,281,287	0 059110
2014	298,385	4,885,754	0 061072
2013	282,258	4,223,692	0 066827
2012	344,406	3,819,225	0 090177
2011	184,787	3,547,480	0 052090

<b>2</b> Total of line 1, column (d)	2	0 329276
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 065855
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	5,652,132
<b>5</b> Multiply line 4 by line 3	5	372,221
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	7,648
<b>7</b> Add lines 5 and 6	7	379,869
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	375,790

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	15,297
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	15,297
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	15,297
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	9,951
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	9,951
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	5,346
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

<b>1a</b>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	Yes	No
<b>b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>		No
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>		No
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ 0 (2) On foundation managers <input type="checkbox"/> \$ _____ 0			
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0			
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	<b>2</b>		No
<b>3</b>	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>		No
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>		No
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>		
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>		No
<b>6</b>	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes	
<b>7</b>	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 . . . . .	<b>7</b>	Yes	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT			
<b>b</b>	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes	
<b>9</b>	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .	<b>9</b>		No
<b>10</b>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>		No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>Gunn Godfrey and Allison</b> Telephone no <b>(203) 227-7470</b>			

Located at **134 East Ave Norwalk CT** ZIP+4 **06851**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

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

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> <b>1b</b>			
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <b>4a</b>			<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? <b>4b</b>			<b>No</b>

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

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>5b</b>		
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <i>If "Yes" to 6b, file Form 8870</i>	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

**Total** number of other employees paid over \$50,000. . . . . ☐ Yes ☒ No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	5,490,167
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	248,038
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	5,738,205
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	5,738,205
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	86,073
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	5,652,132
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	282,607

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	282,607
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	15,297
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	15,297
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	267,310
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	267,310
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	267,310

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	375,790
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	375,790
<b>5</b>	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).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	375,790

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



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

		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b>	Distributable amount for 2016 from Part XI, line 7				267,310
<b>2</b>	Undistributed income, if any, as of the end of 2016				
<b>a</b>	Enter amount for 2015 only. . . . .			0	
<b>b</b>	Total for prior years 20____, 20____, 20____		0		
<b>3</b>	Excess distributions carryover, if any, to 2016				
<b>a</b>	From 2011. . . . .				
<b>b</b>	From 2012. . . . . 57,472				
<b>c</b>	From 2013. . . . . 83,597				
<b>d</b>	From 2014. . . . . 65,610				
<b>e</b>	From 2015. . . . . 57,880				
<b>f</b>	<b>Total</b> of lines 3a through e. . . . .	264,559			
<b>4</b>	Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 375,790				
<b>a</b>	Applied to 2015, but not more than line 2a			0	
<b>b</b>	Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b>	Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b>	Applied to 2016 distributable amount. . . . .				267,310
<b>e</b>	Remaining amount distributed out of corpus	108,480			
<b>5</b>	Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b>	<b>Enter the net total of each column as indicated below:</b>				
<b>a</b>	Corpus Add lines 3f, 4c, and 4e Subtract line 5	373,039			
<b>b</b>	Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b>	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b>	Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b>	Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b>	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b>	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b>	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b>	<b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	373,039			
<b>10</b>	<b>Analysis of line 9</b>				
<b>a</b>	Excess from 2012. . . . . 57,472				
<b>b</b>	Excess from 2013. . . . . 83,597				
<b>c</b>	Excess from 2014. . . . . 65,610				
<b>d</b>	Excess from 2015. . . . . 57,880				
<b>e</b>	Excess from 2016. . . . . 108,480				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					

**3** Complete 3a, b, or c for the alternative test relied upon

**a** "Assets" alternative test—enter

(1) Value of all assets . . . . .

(2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .

**b** "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .

**c** "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3) Largest amount of support from an exempt organization . . . . .

(4) Gross investment income . . . . .

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
See Additional Data Table

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

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

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

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

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

**c** Any submission deadlines

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	373,285
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	41	
<b>4</b> Dividends and interest from securities. . . .			14	176,533	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			14	1,108	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	609,735	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .		0		787,417	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		787,417

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign  
Here**

\* \* \* \* \*

Title

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  David L Godfrey	Preparer's Signature	Date	Check if self-employed <input checked="checked" type="checkbox"/>	PTIN  P00232920
Firm's name ▶ Allison & Godfrey				Firm's EIN ▶ 06-1175330
Firm's address ▶ 134 East Avenue  Norwalk, CT 06851				Phone no (203) 227-7470

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
David C Bigelow	President 0 00	0	0	0
5 Broadview Road Westport, CT 06880				
Eunice J Bigelow	VP/Treasurer 0 00	0	0	0
5 Broadview Road Westport, CT 06880				
David L Godfrey	Secretary 0 00	0	0	0
134 East Ave Norwalk, CT 06851				
Cynthia R Bigelow	Director 0 00	0	0	0
284 Hemlock Road Fairfield, CT 06824				
Lori Bigelow	Director 0 00	0	0	0
4 River Ridge Lane Wilton, CT 06897				

**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).**

David C Bigelow
Eunice J Bigelow
Cynthia R Bigelow
Lori Bigelow

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Action for Bridgeport Community Development Inc 1070 Park Avenue Bridgeport, CT 06604	None	PC	Total Learning Program	5,000
Bigelow Center for Senior Activities 100 Mona Terrace Fairfield, CT 06824	None	PC	General	9,000
Bridge House 880 Fairfield Ave Bridgeport, CT 06605	None	PC	General	10,000
Bridgeport Hospital Foundation Inc PO Box 5000 Bridgeport, CT 06610	None	PC	Norma Pfriem Cancer Center	15,000
Bridgeport Rescue Mission 1088 Fairfield Ave Bridgeport, CT 06605	None	PC	General	8,000
Bullard Haven Technical College 500 Palisade Avenue Bridgeport, CT 06610	None	PC	Scholarship Fund	10,000
Burroughs Community Center 2470 Fairfield Avenue Bridgeport, CT 06605	None	PC	General	6,000
Cardinal Shehan Center 1494 Main St Bridgeport, CT 06604	None	PC	General	9,000
Caroline House 574 Stillman St Bridgeport, CT 06608	None	PC	General	5,000
Catholic Charities of Fairfield 238 Jewett Avenue Bridgeport, CT 06606	None	PC	General	3,000
Center for Family Justice 753 Fairfield Ave Bridgeport, CT 06604	None	PC	General	17,000
Central Park Conservancy 14 E 60th Street New York, NY 10022	None	PC	General	1,000
Combat Wounded Coalition 1220 Executive Blvd Suite 109 Chesapeake, VA 23320	None	PC	General	5,000
Connecticut Audobon Society 314 Unquowa Rd Fairfield, CT 06824	None	PC	General	2,000
Connecticut Challenge 250 Pequot Avenue Southport, CT 06890	None	PC	General	4,000
Total . . . . . ► 3a				373,285



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Connecticut Food Bank PO Box 8686 New Haven, CT 06531	None	PC	General	18,000
Connecticut Yankee Council 60 Wellington Rd Milford, CT 064600032	None	PC	General	5,000
Domestic Violence Crisis Center 777 Summer Street Stamford, CT 06901	None	PC	General	5,000
Easter Seals of Coastal Fairfield County 733 Summer Street Stamford, CT 06901	None	PC	General	3,000
Fairfield Theater Company 70 Sanford St Fairfield, CT 06824	None	PC	General	1,000
Fairfield University 1073 North Benson Rd Fairfield, CT 068245195	None	PC	General	15,000
Fairfield YMCA 841 Old Post Road Fairfield, CT 06824	None	PC	General	14,000
Girl Scouts of America PO Box 5046 New York, NY 10087	None	PC	General	1,000
Grasmere By the Sea 1 Post Road Fairfield, CT 06824	None	PC	General	7,000
Homes For the Brave 655 Park Avenue Bridgeport, CT 06605	None	PC	General	2,500
Homes With Hope 49 Richmondville Ave Suite 112 Westport, CT 06880	None	PC	General	5,000
Horizons at GFA 35 Beachside Ave PO Box 998 Greens Farms, CT 06838	None	Public	General	6,000
Human Services Council of Mid Fairfield County One Park St Norwalk, CT 06851	None	PC	General	6,500
Innocence Project 100 Fifth Avenue 3rd Floor New York, NY 10011	None	PC	General	10,000
Janus Center for Youth In Crisis 180 Fairfield Ave Bridgeport, CT 06604	None	PC	General	5,000
Total . . . . . ►				373,285
3a				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Joe Torre Safe at Home Foundation PO Box 3133 Grand Central Station New York, NY 10163	None	PC	General	5,000
Kennedy Center Inc 2440 Reservoir Avenue Trumbull, CT 06611	None	PC	General	5,000
LifeBridge Community Services 475 Clinton Ave Bridgeport, CT 06605	None	PC	General	2,000
Mercy Learning Center 637 Park Ave Bridgeport, CT 06604	None	PC	General	10,000
Neighborhood Studio of Fairfield County 391 East Washington Ave Bridgeport, CT 06608	None	PC	General	5,000
Norwalk Community College 188 Richards Avenue Norwalk, CT 06854	None	PC	General	10,000
Norwalk Hospital Foundation 34 Maple Street Norwalk, CT 06856	None	PC	General	10,000
Operation Hope 636 Old Post Road Fairfield, CT 06824	None	PC	General	9,000
Pilot House PO Box 1553 Fairfield, CT 06825	None	PC	General	5,000
Pivot Ministries Inc 485 Jane Street Bridgeport, CT 06608	None	PC	General	2,500
Ralphola Taylor Community Center YMCA 790 Central Ave Bridgeport, CT 06607	None	PC	General	5,000
Sacred Heart University 5151 Park Avenue Fairfield, CT 06825	None	PC	David & Eunice Bigelow Scholarship	15,000
St Catherine Academy 760 Tahmore Drive Fairfield, CT 06825	None	PC	Scholarship Assistance	3,000
St Vincent's Medical Center Foundation 2800 Main St Bridgeport, CT 06606	None	PC	Swim Across the Sound	5,000
St Vincent's Medical Center Foundation 2800 Main St Bridgeport, CT 06606	None	PC	General	5,000
Total . . . . . ►				373,285
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STAR 182 Wolfpit Avenue Norwalk, CT 06851	None	PC	Storm Safety	5,000
Town of Fairfield Parks & Rec 75 Mill Plain Road Fairfield, CT 06824	None	PC	Sandcastle Playground	17,285
University of Bridgeport 126 Park Avenue Bridgeport, CT 06604	None	PC	Bigelow Family Foundation Scholarship Fund	15,000
University of New Haven 300 Boston Post Rd West Haven, CT 06516	None	PC	General	5,000
Urban Impact of Black Rock PO Box 3716 Bridgeport, CT 06605	None	PC	General	2,500
Wakeman's Boys and Girls Clubs 2414 Fairfield Ave Bridgeport, CT 06605	None	PC	General	9,000
YMCA Camp Hi-Rock 162 East St Mt Washington, MA 10258	None	PC	General	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				373,285

**TY 2016 Investments Corporate Bonds Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
100M ADT Corp 3.5% 7/15/22	87,625	94,875
50M AMC Networks Inc 4.75% 12/15/21	51,300	50,375
100M Ashland Inc 4.75% 8/15/22	99,687	103,500
15M Ball Corp 4% 11/15/23	13,641	14,756
100M Ball Corp 5.75% 5/15/2021	101,445	104,750
30M Cedar Fair LP 5.25% 3/15/21	30,968	30,900
75M Clean Harbor 5.25% 08/01/2020	76,487	76,688
50M Clean Harbor 5.125% 06/01/2021	50,325	51,000
100M Constellation Brands Inc 6% due 5/01/2022	110,066	112,750
100M Dow Chemical Co 4.25% due 9/15/23	101,199	100,368
80M Dow Chemical Co 4.30% due 9/15/23	80,807	80,302
93M Energy Transfer EQ 5.875% 1/15/2024	93,731	95,790
50M Energy Transfer EQ 7.500% 10/15/2020	52,765	55,625
50M Ford Motor Credit 3.65% 2/20/23	50,275	48,923
25M Ford Motor Credit 4.25% 9/20/2022	25,456	25,734
25M Lear Corp 4.75% due 01/15/2023	25,619	25,750
100M Lear Corp 5.25% due 01/15/2025	104,471	104,750
125M Levi Strauss 6.875% 5/1/2022	134,029	131,250
120M Mastec Inc 4.875% 3/15/2023	117,820	117,000
123M Olin Corporation 5.5% 8/15/22	124,906	127,151

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
75M Royal Caribbean Cruises 5.250% 11/15/2022	74,149	79,688
20M Service Corp Intl 4.5% 11/15/2020	19,795	20,400
80M Service Corp Intl 8% 11/15/2021	92,733	93,200
20M Service Corp Intl 7.625% 10/01/2018	22,609	21,800
80M Spirit Aerosyss 5.25% 3/15/2022	68,551	67,438
20M Tenneco Inc 5.000% 7/15/2016	19,657	19,650
120M Tenneco Inc 6.875% 12/15/2020	125,332	124,050
70M Time Warner Cable 8.75% 02/14/2019	83,133	78,878
100M Treehouse Foods 4.875% 3/15/2022	101,262	103,000
100M Triumph Group 4.875% 04/01/2021	99,200	93,250
50M Tupperware 4.75% 6/1/2021	51,754	53,405
35M Weyerhauser Co 7.125% 07/15/2023	41,090	41,561
75M William Carter 5.25% 8/15/21	78,330	77,625
110M Zebra Technologies 7.25% 10/15/22	119,375	119,350

**TY 2016 Investments Corporate Stock Schedule**

**Name:** DAVID AND EUNICE BIGELOW FOUNDATION  
**EIN:** 06-1535327

Name of Stock	End of Year Book Value	End of Year Fair Market Value
175 Alphabet Inc Cl C	69,972	135,069
145 Amazon Inc	54,215	108,731
1200 Apple Inc	47,807	138,984
500 Berkshire Hathaway Cl B	19,669	81,490
4000 Blue Buffalo Pet Products	70,325	96,160
1000 Celgene Corp	24,663	115,750
1500 Cerner Corp	91,685	71,055
1800 Cognizant Tech Solutions	23,103	100,854
800 Deere & Co	67,726	82,432
2000 Dunkin Brands Group Inc	84,659	104,880
850 Facebook Inc Cl A	68,890	97,793
3000 General Electric Co	92,111	94,800
360 Illumina Inc	51,237	46,094
1000 Jacobs Engineering Group	5,514	57,000
1200 Kansas City Southern	88,887	101,820
800 Monsanto Co	55,398	84,168
500 Palo Alto Networks	75,482	62,525
3000 Paypal Holdings Inc	80,471	118,410
700 Pepsico Inc	37,215	73,241
62 Priceline Group	71,399	90,896
3200 Quanta Services Inc	65,175	111,520
1600 Quintiles Transnational Hldgs	83,704	121,680
1200 Resmed Inc	11,688	74,460
3010 Under Armour Cl C	89,513	75,762
700 United Parcel Service	43,166	80,248
1500 Visa Inc Cl A	20,979	117,030
1000 Wal-mart Stores	50,480	69,120
1000 Walt Disney Co	106,687	104,220
3250 Alexandria Re 6.45% Pfd	83,685	81,526
5000 Charles Schwab C 6% Pfd	126,083	126,350

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
2000 First Republic 6.7% Pfd	50,545	50,200
5000 Hospitality Properties Pfd Stck Series D	127,053	126,100
3000 Vornado Real 6.625% Pfd Ser G	75,697	75,510

**TY 2016 Investments Government Obligations Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327**US Government Securities - End  
of Year Book Value:**

0

**US Government Securities - End  
of Year Fair Market Value:**

0

**State & Local Government  
Securities - End of Year Book  
Value:**

56,313

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

55,380



**TY 2016 Investments - Other Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
125 Allergan PLC 5.5% PFD	AT COST	104,177	95,308
900 American Tower Corp REIT	AT COST	64,445	95,112

**TY 2016 Other Expenses Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Event Management	2,505	0		2,505

## TY 2016 Other Income Schedule

**Name:** DAVID AND EUNICE BIGELOW FOUNDATION

**EIN:** 06-1535327

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Portfolio Income	1,108	1,108	1,108

**TY 2016 Other Professional Fees Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Investment Fees	22,575	22,575		0

**TY 2016 Taxes Schedule****Name:** DAVID AND EUNICE BIGELOW FOUNDATION**EIN:** 06-1535327

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Federal Excise Tax	8,200	0		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u></b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> DAVID AND EUNICE BIGELOW FOUNDATION	<b>Employer identification number</b> 06-1535327

**Organization type** (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

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

<b>Name of organization</b> DAVID AND EUNICE BIGELOW FOUNDATION	<b>Employer identification number</b> 06-1535327
--	---

<b>Part I Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	David and Eunice Bigelow	\$ 143,379	Person <input checked="" type="checkbox"/>
	5 Broadview Rd		Payroll <input type="checkbox"/>
	Westport, CT 06880		Noncash <input checked="" type="checkbox"/>
			(Complete Part II for noncash contributions )
<u>2</u>	AmGraph	\$ 10,000	Person <input checked="" type="checkbox"/>
	90 Versailles Road		Payroll <input type="checkbox"/>
	Versailles, CT 06383		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
<u>3</u>	International Marketing Systems	\$ 25,000	Person <input checked="" type="checkbox"/>
	Two Corporate Dr Ste 136		Payroll <input type="checkbox"/>
	Shelton, CT 06484		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
<u>4</u>	16W Marketing LLC	\$ 5,000	Person <input checked="" type="checkbox"/>
	75 Union Ave 2nd Floor		Payroll <input type="checkbox"/>
	Rutherford, NJ 07070		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
<u>5</u>	Wausau Container Corporation	\$ 5,000	Person <input checked="" type="checkbox"/>
	8000 Highland Dr PO Box 1285		Payroll <input type="checkbox"/>
	Wausau, WI 544021285		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
<u>6</u>	New York Yankees	\$ 5,000	Person <input checked="" type="checkbox"/>
	One East 161st Street		Payroll <input type="checkbox"/>
	Bronx, NY 10451		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )

<b>Name of organization</b> DAVID AND EUNICE BIGELOW FOUNDATION	<b>Employer identification number</b> 06-1535327
--	---

<b>Part II</b> <b>Noncash Property</b>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1000 sh Celgen, 1000 sh Coca Cola Co, 2000 sh Cognizant Technology, 7122 sh KMI, 1000 sh Visa Inc	\$ 507,525	2016-11-29
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	



<b>Name of organization</b> DAVID AND EUNICE BIGELOW FOUNDATION	<b>Employer identification number</b> 06-1535327
--	---

<b>Part III</b>	<b>Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____</b> 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	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	