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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

2016

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 separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		dar year 2016 or tax year beginning		016, and			, 20
Na	me of fo	undation			A Employe	r identification number	er
ODY	SSEY R	E FOUNDATION			20-849370	4	_
Nu	mber an	d street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephon	e number (see instructi	ions)
300	FIRST	STAMFORD PLACE	1		972-318-61	100	
		n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend	ing, check here ▶
STA	MFORE	O, CT 06902			}		
			of a former pub	olic charity	D 1. Foreign	organizations, check	here ▶ □
		☐ Final return ☐ Amended i		·	1	_	
		☐ Address change ☐ Name char	nge			n organizations meeting here and attach compu	
H	Check	type of organization: X Section 501(c)(3) exempt p	rivate foundation	on		foundation status was	terminated under 🗌
		on 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶∟
		narket value of all assets at J Accounting method			E If the four	adation is in a 60 mont	h tormination
		f year (from Part II, col. (c), Other (specify)	_			ndation is in a 60-mont ction 507(b)(1)(B), check	
	line 16		on cash basis)		}		_
P	art I	Analysis of Revenue and Expenses (The total of			·		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(D) NEI	investment ncome	(c) Adjusted net income	`for charitable
		the amounts in column (a) (see instructions))	books	"	Come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	1,816,6	66			
	2	Check ► ☐ If the foundation is not required to attach Sch B	1,010,0				
:	3	Interest on savings and temporary cash investments		<u> </u>			
	4	Dividends and interest from securities					
	5a	Gross rents		 	-		
	b	Net rental income or (loss)					
a	6a	Net gain or (loss) from sale of assets not on line 10					
Ž	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
å	8	Net short-term capital gain					
	9	Income modifications		<u> </u>			
	10a	Gross sales less returns and allowances					i
	b	Less Cost of goods sold	 				
	c	Gross profit or (loss) (attach schedule)		0			
	11	Other income (attach schedule)	 -				
	12	Total. Add lines 1 through 11	1,816,6	66	0		
	13	Compensation of officers, directors, trustees, etc					
penses	14	Other employee salaries and wages					
SI (15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)		050	AEN/EI	7	
ũ	b	Accounting fees (attach schedule)			<u> </u>		
<u>8</u>	c	Other professional fees (attach schedule)	1.	= 1 AUC	ww 304-	18	
ati	17	Interest		≋∥ AUU	; 0 9 2017	<u> </u>	
Sti	18	Taxes (attach schedule) (see instructions)		"\			
三	19	Depreciation (attach schedule) and depletion		TOG	DEN. U	T	
Operating and Administrative	20	Occupancy					 '
Ă	21	Travel, conferences, and meetings				·	
P	22	Printing and publications					
G D	23	Other expenses (attach schedule)		<u> </u>			
Ē	24	Total operating and administrative expenses.					
La		Add lines 13 through 23		o	0	0	n
be	25	Contributions, gifts, grants paid					1,816,666
0	26	Total expenses and disbursements. Add lines 24 and 25	1,816,6		0	0	1,816,666
	27	Subtract line 26 from line 12:	2,020,0				2,020,000
	a	Excess of revenue over expenses and disbursements		0			ĺ
	b	Net investment income (if negative, enter -0-) .			0		
	C			-		0	

ISA

		Attached schedules and amounts in the description column	Beginning of year	End o	of year
176	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	287,000	0	
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		-	
		Less allowance for doubtful accounts ▶	1		
Ŋ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ąŝ	10a	Investments—U.S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)		-	
	11	Investments—land, buildings, and equipment: basis ▶		 	
	' '	Less: accumulated depreciation (attach schedule)	 		
	12	Investments—mortgage loans			
	13		ļ—————————————————————————————————————		
		Investments—other (attach schedule)		-	
	14	Land, buildings, and equipment: basis ▶			
	45	Less accumulated depreciation (attach schedule) ▶			
	15 16	Other assets (describe)	ļ		
	ם ד	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)			
	4.5		287,000	0	
	17	Accounts payable and accrued expenses	<u> </u>		
S	18	Grants payable			
Ĕ	19	Deferred revenue	 		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	<u></u>		
2	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			l
	23	Total liabilities (add lines 17 through 22)	0	0	
Ś	}	Foundations that follow SFAS 117, check here			
<u>2</u>		and complete lines 24 through 26 and lines 30 and 31.			
a	24	Unrestricted			
Ba	25	Temporarily restricted			
<u> </u>	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here ►			
Ē		and complete lines 27 through 31.		ļ	
S	27	Capital stock, trust principal, or current funds			
ë	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
155	29	Retained earnings, accumulated income, endowment, or other funds	287,000		
Ť.	30	Total net assets or fund balances (see instructions)	287,000	0	
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	287,000	0	
	rt III	Analysis of Changes in Net Assets or Fund Balances	7		
1		I net assets or fund balances at beginning of year—Part II, colu	imn (a), line 30 (must	1 1	
		of-year figure reported on prior year's return) .	• • • •	1	287,000
2		r amount from Part I, line 27a) 	0
3			***************************************		
4		lines 1, 2, and 3	•	. 4	287,000
5	Deci	reases not included in line 2 (itemize) 2015 OUTSTANDING CHECK	KS CLEARED IN 2016	5	287,000
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	e 30 6	0 000 PF

	(a) List and describe the	Losses for Tax on Invest kind(s) of property sold (e.g., real esta e, or common stock, 200 shs MLC Co	ate,		(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a							· · · · · · · · · · · · · · · · · · ·	
b								
С			_					
<u>d</u>								
<u>е</u>		(f) Depreciation allowed	T	(a) Cost or	other basis		(h) Gai	n or (loss)
	(e) Gross sales price	(or allowable)			nse of sale			(f) minus (g)
<u>a</u>			+				 	
<u>b</u>			+					
d								
е			I					
	Complete only for assets show	ring gain in column (h) and owned	d by the	foundation	on 12/31/69			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Exces over col	s of col (i) (j), if any	l 		t less than -0-) or rom col (h))
<u>a</u>								
b						-		
<u>c</u> d			+					
e e			 					 _
2	Capital gain net income or			enter in Pa		2		
3	If gain, also enter in Part I,	or (loss) as defined in section, line 8, column (c) (see instru	ns 1222 uctions)	(5) and (6)). If (loss)	•			
					1			
For c	Qualification Under ptional use by domestic private pr	r Section 4940(e) for Red	luced	Tax on N				
For of f sec Nas	Qualification Under ptional use by domestic priva- tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not de-	r Section 4940(e) for Red ate foundations subject to the this part blank. ection 4942 tax on the distrib qualify under section 4940(e).	luced e section outable a Do not	Tax on Non 4940(a) amount of complete	tax on net invest any year in the l this part.	ment i	ncome) eriod?	☐ Yes ☐ No
For of f sec Vas	Qualification Under ptional use by domestic priva- tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not do Enter the appropriate amou	r Section 4940(e) for Red ate foundations subject to the this part blank. ection 4942 tax on the distrib qualify under section 4940(e). int in each column for each years	luced e section outable a Do not	Tax on Non 4940(a) amount of complete	tax on net invest any year in the l this part. uctions before m	ment i	ncome) eriod?	
f sec Nas : f "Ye	Qualification Under ptional use by domestic priva- tion 4940(d)(2) applies, leave the foundation liable for the s s," the foundation does not of Enter the appropriate amount (a) Base period years endar year (or tax year beginning in)	r Section 4940(e) for Red ate foundations subject to the this part blank. ection 4942 tax on the distrib qualify under section 4940(e).	e section outable do not ear, see	Tax on Non 4940(a) amount of complete the instru	tax on net invest any year in the l this part.	ment i	eriod? any entries.	☐ Yes ☐ No (d) tribution ratio divided by col (c))
For of sections of the section of th	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sis," the foundation does not defent the appropriate amount (a) Base period years endar year (or tax year beginning in) 2015	ate foundations subject to the this part blank. ection 4942 tax on the distribution distribution and the each column for each young distribution dis	e section outable do not ear, see	Tax on Non 4940(a) amount of complete the instru	tax on net invest any year in the l this part. uctions before m (c) f noncharitable-use a	inco ment inco pase paking a ssets	eriod? any entries.	(d) tribution ratio
For of sections of the section of th	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sis," the foundation does not defented the appropriate amountain Base period years endar year (or tax year beginning in) 2015 2014	ate foundations subject to the this part blank. ection 4942 tax on the distribution distribution and the each column for each you had been subject to the ection 4942 tax on the distribution for each you had been subject to the ection 4940(e). Adjusted qualifying distribution column for each you had been subject to the ection and the	outable Do not ear, see	Tax on Non 4940(a) amount of complete the instru	tax on net invest any year in the I this part. uctions before m (c) f noncharitable-use a	ment in passe passes passes ssets 1,779 7,498	eriod? any entries.	(d) tribution ratio divided by col (c)) 247.7856 61.2772
For of sections of the section of th	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sis," the foundation does not contact the appropriate amount (a) Base period years endar year (or tax year beginning in) 2015 2014 2013	r Section 4940(e) for Red ate foundations subject to the this part blank. ection 4942 tax on the distrib qualify under section 4940(e). int in each column for each you (b) Adjusted qualifying distribution 2,9 1,66 2,5	outable : Do not ear, see 18,666 85,000 25,000	Tax on Non 4940(a) amount of complete the instru	tax on net invest any year in the I this part. uctions before m (c) f noncharitable-use a 1 2 1	case poase paking a ssets 1,779 7,498 7,648	eriod? any entries.	(d) tribution ratio divided by col (c)) 247.7856 61.2772 143.0757
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For C f sec Nas f "Ye 1 Cal	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sis," the foundation does not defend the appropriate amount (a) Base period years endar year (or tax year beginning in) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for number of years the foundation of the side o	ate foundations subject to the ate foundations subject to the this part blank. ection 4942 tax on the distributed for each year base period—diation has been in existence if	utable Do not ear, see ons 18,666 85,000 25,000 24,800 vide the less that	amount of complete the instru	tax on net invest any year in the lithis part. uctions before m (c) f noncharitable-use a 1 2' 1' 10 3:	nent in passe passes pa	eriod? any entries. (col (b))	(d) tribution ratio divided by col (c)) 247.7856 61.2772 143.0757 14.2260 54.5534 520.9179 104.1836
For C f sec Was s f "Ye 1 Cal	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sis," the foundation does not defend the appropriate amount (a) Base period years endar year (or tax year beginning in) 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio for number of years the foundation of the side o	ate foundations subject to the ate foundations subject to the this part blank. ection 4942 tax on the distributed for each year base period—diation has been in existence if the tincome (1% of Part I, line 27).	utable Do not ear, see ons 18,666 85,000 25,000 24,800 vide the less that	amount of complete the instru	tax on net invest any year in the lithis part. uctions before m (c) f noncharitable-use a 1 2' 1' 10 3:	nent in passe passes pa	eriod? any entries. (col (b))	(d) tribution ratio divided by col (c)) 247.7856 61.2772 143.0757 14.2260 54.5534 520.9179 104.1836

Part		instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 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			
	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 enter -0-)			
3	Add lines 1 and 2		. 0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0	ļ
6	Credits/Payments:]
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			l
b	Exempt foreign organizations—tax withheld at source			
C	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		0	
8 9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . > 9	-		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0	
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax Refunded 11		<u>0</u> 0	1
	VII-A Statements Regarding Activities			
1a	Dunng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		x
	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			^
С	Did the foundation file Form 1120-POL for this year?	1c		v
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$			X
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
3	If "Yes," attach a detailed description of the activities. 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		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	-	X
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		x
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	İ		
b	DELAWARE, CONNECTICUT 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	OL		
c	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b	<u>X</u>	
9	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		<u> </u>
10	names and addresses	10		v
			0-PF	(2016)

Part	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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	х	
14	Website address ► N/A The books are in care of ► PETER LOVELL Telephone no ► 203-977-			
17	Located at ► 300 STAMFORD PLACE, STAMFORD, CT. ZIP+4 ► 069002			• • • • • • • • • • • • • • • • • • •
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here.			
10	and enter the amount of tax-exempt interest received or accrued during the year . 15	•	•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	<i></i>	Yes	No
	over a bank, securities, or other financial account in a foreign country?.	16		x
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country ►			
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.	Ш	Yes	No
1a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
			4 53 100	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ▼ Yes □ No S (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . □ Yes ▼ No	IAIE	1EN I	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			ļ
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			į
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
_	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			İ
С	were not corrected before the first day of the tax year beginning in 2016?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?		l	
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	i l		
	(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	N/	<u>A</u>
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			ļ
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		1	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	. 1	1	1
	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	ļ		
	foundation had excess business holdings in 2016.)	3b	N/	A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
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?	4b		

	•										
	90-PF (2016)									P	age
	VII-B Statements Regarding Activities			4720	May Be F	Require	ed (continu	ed)	-, ,		
5a	 (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration directly. 	to influe c electi	ence legislation	•	•		,	K No K No	1		
	(3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other than					rıbed ir	Yes [No.	1 1		
	section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious						☐ Yes 🖸	K) No			
	purposes, or for the prevention of cruelty to							₹ No		1	
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice	regardi	ng disaster a:	ssistand	e (see insti			ed in	5b	N/A	
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	the four	ndation claim			the tax		▶ □			
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any on a personal benefit contract?	funds,	directly or in-		, to pay pr	emiums		☑ No		1	
b	Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870	ns, dire	ctly or indire	ctly, on	a persona	l benefi		<u>, , , , , , , , , , , , , , , , , , , </u>	6b		X
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	tax sh	elter transa	ction?	☐ Yes 🗓	No		1	
	If "Yes," did the foundation receive any proceed	s or hav	ve any net ind	come a	ttributable	to the t			7b	N/	A
Par	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Man	agers,	Highly Pai	id Er	nploye	es,	
1	and Contractors			<u> </u>		- / i					
	List all officers, directors, trustees, foundation		e, and average		mpensation		Contributions to	$\overline{}$			
	(a) Name and address	hou	rs per week ed to position	` (lf r	not paid, iter -0-)	emple	oyee benefit plai erred compensa	ns	(e) Exper other a		
TATE ——	MENT 2										
											
				<u></u>							
	Compensation of five highest-paid employed "NONE."	es (otn	er than thos	se incl	uded on I	ine 1			s). If no	ne, e	nte
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Compe	nsation	(d) Contribution employee ber plans and defe compensation	nefit erred	(e) Expenother a		
ONE											
			*			<u> </u>					
									_		

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

Part VII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Fiv	ve highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
113000		
		<u> </u>
Total nun	nber of others receiving over \$50,000 for professional services	
Part IX-	-A Summary of Direct Charitable Activities	
		
	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of tions and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NON	E	
2		
3		
4		.
		
Part IX-		
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>NON</u>	E	
		
2		
All other	program-related investments. See instructions	
3	program related investments coe instructions	
J		
Total Ad	d lines 1 through 3	
	u intes i unough 3	Form 990-PF (2016)

Part	see instructions.)	ign tound	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
þ	Average of monthly cash balances	1b	66,125
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	66,125
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	
3	Subtract line 2 from line 1d	3	66,125
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	992.00
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	65.133
6	Minimum investment return. Enter 5% of line 5	6	3,257
Part	Minimum investment return. Enter 5% of line 5 XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part)	oundatio	ns
1	Minimum investment return from Part X, line 6	1	3,257
2a	Tax on investment income for 2016 from Part VI, line 5	\$ -	
b	Income tax for 2016. (This does not include the tax from Part VI) . 2b	1.	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,257
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	3,257
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	3,257
Part	XII Qualifying Distributions (see instructions)		0,20,
- arc			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	15 V	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,816,666
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	[]	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	24	
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	1,816,666
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,816,666
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g whether	

Part	XIII Undistributed incom	ne (see instructio	ns)			·
1	Distributable amount for 201	6 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7					3,257
2	Undistributed income, if any, as o	ſ				
a	Enter amount for 2015 only					
b	Total for prior years 20,2					
3	Excess distributions carryover	1				
a	From 2011					
b	From 2012					•
C	From 2013					
d	From 2014	1,683,625			,	
e	From 2015	2,918,077	. ——— ——			
f	Total of lines 3a through e		9,482,847			
4	Qualifying distributions for 20° line 4: ► \$ 1816,666					
		-				
a	Applied to 2015, but not more	<u></u>				
b	Applied to undistributed incon (Election required—see instruc					
С	Treated as distributions out of	corpus (Election				
	required—see instructions) .					
d	Applied to 2016 distributable a	imount .				3,257
е	Remaining amount distributed	out of corpus	1,813,409			
5	Excess distributions carryover	applied to 2016				
	(If an amount appears in colur amount must be shown in colu					
6	Enter the net total of ear indicated below:	ch column as				
а	Corpus. Add lines 3f, 4c, and 4e	Subtract line 5	11,296,256			
b	Prior years' undistributed in		11,270,230			
	line 4b from line 2b			0		
С	Enter the amount of prior year	rs' undistributed				
•	income for which a notice of					
	been issued, or on which the					
	tax has been previously assess				,	
d	Subtract line 6c from line	e 6b Taxable				
	amount—see instructions			o		
е	Undistributed income for 201	5. Subtract line				
	4a from line 2a. Taxable	e amount—see				
	instructions .				0	
f	Undistributed income for 2016	Subtract lines				
	4d and 5 from line 1 This a	mount must be				
	distributed in 2017.					0
7	Amounts treated as distribution	ns out of corpus				
	to satisfy requirements impo					;
	170(b)(1)(F) or 4942(g)(3) (El-					
	required—see instructions) .					·
8	Excess distributions carryover	from 2011 not				
	applied on line 5 or line 7 (see	instructions) .	2,122,853			
9	Excess distributions carry	over to 2017.		5./t		
	Subtract lines 7 and 8 from line	e 6a .	9,173,403			,
10	Analysis of line 9	Ţ				
а	Excess from 2012	234,174				
b	Excess from 2013	2,524,118				•
c	Excess from 2014					
d	Excess from 2015	2,918,077				
e	Excess from 2016	1,813,409				

Page	10

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A. question 9	<u> </u>	
	If the foundation has received a ruling				/	
	foundation, and the ruling is effective fo			>		
b	Check box to indicate whether the four	·	_	ion described in se	ection 7 4942(i)(i	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u></u>	
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed	(4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4	(4) 40 15	(+)	(4, == 10	
ь	85% of line 2a	0	0	0	0	<u>0</u>
c	Qualifying distributions from Part XII,				-	
•	line 4 for each year listed	ĺ				
d	Amounts included in line 2c not used directly		<u> </u>			0
_	for active conduct of exempt activities .					
е	Qualifying distributions made directly	<u></u>			 	0
•	for active conduct of exempt activities	į				
	Subtract line 2d from line 2c	0	0	o	o	0
3	Complete 3a, b, or c for the	-				0
•	alternative test relied upon					
а	"Assets" alternative test—enter					
u	(1) Value of all assets	}				•
	(2) Value of assets qualifying under					0
	section 4942(j)(3)(B)(i)					•
b	"Endowment" alternative testenter 2/3		<u> </u>			0
	of minimum investment return shown in	Ì				•
С	Part X, line 6 for each year listed "Support" alternative test—enter				·	0
·	, ,					
	(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					0
	and 5 or more exempt				1	
	organizations as provided in					
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from					0
	an exempt organization					
	(4) Gross investment income					0
Part		n (Complete th	is nart only if th	ne foundation h	ad \$5 000 or mo	
	any time during the year-	•	•	io iounidation n	uu 40,000 Oi iiio	ne in assets at
1	Information Regarding Foundation					
	List any managers of the foundation		ted more than 2%	of the total contr	butions received b	ov the foundation
-	before the close of any tax year (but o					y and loandation
NONE	,	,		, -,, (
b	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	or an equally lar	ge portion of the
	ownership of a partnership or other en					g- p
NONE	, ,	• •		Ŭ		
2	Information Regarding Contribution	n. Grant. Gift. Loa	n. Scholarship. e	tc Programs:		
	Check here ▶ 🗓 if the foundation	•	•	-	organizations and	does not accept
	unsolicited requests for funds If the f	•	•		_	•
	other conditions, complete items 2a,			•	·	
а	The name, address, and telephone nu		dress of the perso	n to whom applica	ations should be ad	ddressed.
	,,					,
b	The form in which applications should	l be submitted and	information and r	materials they sho	uld include	
_	approanono onomo					
	Any submission deadlines:					
-	,					
d	Any restrictions or limitations on aw	vards, such as by	geographical ar	eas, charitable fie	elds, kinds of insti	tutions, or other
	factors	·	-			

	Supplementary Inform Grants and Contributions Pa	ation (conti	nued)				
3		aid During t	he Year or Approve	ed for Fut	ure Payment		
_	Recipient		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution		Amount
	Name and address (home or b	ousiness)	or substantial contributor	recipient	Contribution		
а	Paid during the year						
TATI	EMENT 3						1
IAII	EMEN I 3						
							1,816,666
							1,010,000
							1
							1
							1
							}
							ĺ
							ļ
							ļ
	Total			· .		> 3a	1,816,666
b	Approved for future payment		-				1,010,000
						Ì	
				l			
	Total					► 3b	

		M-A Analysis of Income-Producing Ad	- CIVICIO		,		
Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu (a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
1	Pro	gram service revenue	Dusiness code	7 1110 0111		Annount	(See instructions)
	а	NONE					
	b	NONE	 		1		
	c				 		
	d				ļ		
					 		
	e				 		
	Ť						
	g	Fees and contracts from government agencies					
2	Me	mbership dues and assessments					
3	Inte	rest on savings and temporary cash investments					
4		idends and interest from securities					
5		rental income or (loss) from real estate			 		
·		•	 		 		L
		The state of the s	-	-	 		
_		Not debt-financed property			 		
6		rental income or (loss) from personal property	ļ		ļ		
7	_	er investment income					
8	Gai	n or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events					
10	Gro	ss profit or (loss) from sales of inventory					
11		er revenue `a			··		
• •	b						
			-	-	 		
	C C		 		 	· ·	
	d			 -	 		
	е	 					
12		ototal. Add columns (b), (d), and (e)	L	0		0	0
						13	(
(See	wor	ksheet in line 13 instructions to verify calculation	s.)			13	(
(See	wor		s.)			13	
(See Pal Lin	wor	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
(See Pal Lin	wor it X e No	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		
(See Pal Lin	wor it X e No	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
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(See Pal Lin	wor it X e No	ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	t Purposes		

		Exempt Or	ganizations						
1	ın sed					y other organization describe ection 527, relating to politic		Yes	No
а	Trans	fers from the rea	porting foundation to	a noncharitable exemp	ot organization	of		,	
_	(1) C		portung roundation to		, o.g		1a(1)		Ū
		ther assets		•		•			X
				• •		•	1a(2)	ļ	X
b		transactions							~ ~.
	(1) S	ales of assets to	a noncharitable exe	mpt organization			1b(1)		X
	(2) P	urchases of asse	ets from a noncharita	able exempt organizatio	n		1b(2)		x
	(3) R	ental of facilities	, equipment, or othe	r assets			1b(3)		х
	(4) R	eimbursement a	rrangements				1b(4)		Х
		oans or loan gua	•				1b(5)		X
				ip or fundraising solicita	atione	·	1b(6)	_	
_				sts, other assets, or paid		•	1c		X
c d						Column (b) should always s		Ļ	X
(a) Line	value		on or sharing arrange		(d) the value of	If the foundation received lof the goods, other assets, or ription of transfers, transactions, and	r services	recei	ved.
i/A									
•				, , ,					
				· · · · · · · · · · · · · · · · · · ·					
									
									_
				·					
									
									
						· · · · · · · · · · · · · · · · · · ·			
2a						re tax-exempt organizations			
_				ther than section 501(c	رد)) or in secti	on 52// .		X	No
b	If "Ye	s," complete the	e following schedule						
		(a) Name of organ	ization	(b) Type of organi	zation	(c) Description of rel	ationship		
I/A									
	Unde	r penalties of penury 1	declare that I have examine	d this return, including accompa	invina schedules ani	d statements, and to the best of my kno	wledge and	belief it	is true
Sign				an taxpayer) is based on all infor		parer has any knowledge			
_		N25-201	10. N. DA	m 18-2-207			he IRS discu he preparer		
Here	ı —		In amount	,	V.P. OF TAX		nstructions)?		
	Sign	ature of officer or trus		Date	Title				
Paid		Print/Type preparer	rs name	Preparer's signature		Date Check	f PTIN		
repa	arer	L				self-employe	ed		
Jse (Firm's name ▶				Firm's EIN ▶			
ノンピし	Firm's address > Phone no								

Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Employer identification number

ODYSSE	RE FOUNDATION		
Organiz	zation type (check o	one)	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		☐ 527 political organization	
Form 99	00-PF	(x) 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
	nly a section 501(c)(ons	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling or property) from any one contributor. Complete Parts I and II. See instructions for deter contributions.	
Special	Rules		
	regulations under s 13, 16a, or 16b, and	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support to sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pand that received from any one contributor, during the year, total contributions of the great of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts	art II, line ter of (1)
	contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an the year, total contributions of more than \$1,000 exclusively for religious, charitable, scient onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II,	ntific,
	contributor, during contributions totals during the year for General Rule appl	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, contributions exclusively for religious, charitable, etc., purposes, but no such led more than \$1,000. If this box is checked, enter here the total contributions that were rean exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless olies to this organization because it received nonexclusively religious, charitable, etc., confirmed during the year	eceived s the
Caution	ı: An organizatıon th	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo	orm 990.

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization **Employer identification number ODYSSEY RE FOUNDATION** Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. Part I (b) (c) (d) (a) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person **ODYSSEYRE HOLDINGS CORP.** \mathbf{x} **Payroll** Noncash 300 STAMFORD PLACE (Complete Part II for noncash contributions) STAMFORD, CT. 06902 (b) (a) (c) (d) No. Total contributions Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) Total contributions (d) No. Name, address, and ZIP + 4 Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroli** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \Box Noncash

(Complete Part II for noncash contributions) Name of organization

ODYSSEY RE FOUNDATION

Page .

Employer identification number
20-8493704

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				
		\$					
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		\$					
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		\$					
No. om art I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions)	(d) Date received				
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No. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
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No. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		\$					
i			· -				

Schedule B	(Form	990,	990-EZ,	or	990-PF)	(201	6)	
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Page 4

Name of or	ganization			Employer identification number			
ODYSSEY RI	E FOUNDATION Exclusively religious, charitable, et (10) that total more than \$1,000 for						
	the following line entry. For organizate contributions of \$1,000 or less for the Use duplicate copies of Part III if add	tions completing Part III, er te year (Enter this informat	iter the total o	f exclusively religious, charitable, etc.,			
(a) No. from				(d) December of how sift is held			
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of g	ift				
-	Transferee's name, address, ar	nd ZIP + 4	Relationsh	nip of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	of gift (d) Description of how				
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-	Transferee's name, address, an	(e) Transfer of g	Relationship of transferor to transferee				
} .							
} .							
} .							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	e of gift (d) Description of how gift is held				
} .			-				
{ ·							
<u> </u>		(e) Transfer of g	ift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							
} -							
,							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-							
} -							
<u> </u>		(e) Transfer of gi	ift				
	Transferee's name, address, an		Relationship of transferor to transferee				
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OdysseyRe Foundation

FEIN: 20-8493704

Form 990-PF/ Part VII-B, Line 1(a)3 and 1b For the Tax Year ended 12/31/16

The Foundation accepted bookkeeping services from a disqualified person at no charge.

This act qualifies as an exception described in Reg Sec. 53-4941(d)-3.

OdysseyRe Foundation

FEIN: 20-8493704

Form 990-PF/ Part VIII, Section 1

Information about Officers and Directors

For the Tax Year ended 12/31/16

	(b) Title and	(c)	(d)	(e) Expense
Name & Address	avg hours	Compensation	Employee Benefits	Account
V Prem Watsa	Director	0	0	0
	1/2 Hour			
Andrew A Barnard	Director	0	0	0
	1/2 Hour			
Brandon W. Sweitzer	Chairperson	0	0	0
	1/2 Hour			
Jan Christiansen	Treasurer	0	0	0
	1/2 Hour			
Peter H. Lovell	Secretary	0	0	0
	1/2 Hour			
		_	_	
Janine M. Walter	Grant Review	0	0	0
	Officer			
	1/2 Hour			
	0.15	_		_
Kirk M Reische	Grant Review	0	0	0
	Officer			
	1/2 Hour			

The address for all Directors and Officers is: 300 First Stamford Place
Stamford, CT 06902

OdysseyRe Foundation FEIN: 20-8493704 Form 990-PF/ Part XV Grants and Contributions For the Tax Year ended 12/31/16

Recipient	Relationship	Status	Purpose		Amount	
AmeriCares Foundation, Inc 88 Hamilton Ave Stamford, CT 06902	N\A	Public Chanty	Emergency Response to Natural Disasters	\$	100,000	
AmeriCares Free Clinics, Inc. 88 Hamilton Ave. Stamford, CT 06902	N\A	Public Charity	Free Medical Clinics for Uninsured	\$	300,000	
North Suffolk Mental Health Association Inc 301 Broadway Chelsea, MA 02150	N\A	Public Charity	Repair and renovation on mental health facility	\$	250,000	
Prostate Cancer Foundation 1250 Fourth St Sana Monica, CA 90401	N\A	Public Charity	Cancer research of Neuronal Transdifferentiation Lethal Cancers	\$	166,666	
Stamford Health System, Inc. PO Box 9317 Stamford, CT 06904	N\A	Public Charity	Construction of Emergency and Trauma Center	\$	1,000,000	
				\$	1,816,666	