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

Do not enter social security numbers on this form as it may be made public.

	Dep	partme	ent of the Treasury Revenue Service	<b>∫</b>	► Do not e	nter socia	al security numbers 0-PF and its separa	on this form a	e it may be a	anda wate	(2016)
			endar year 2016	or tax year be	ginning		and its separa	te instructions , and 6		rs.yuv/jorm990pf.	open to Public Inspection
			of foundation	<del></del>	<u></u>			, and t		A Employer identifica	tion number
		ALI	EX G. NA	SON FO	UNDATION	INC	•			34-175714	
1	Nu	umber	and street (or P O b	oox number if ma	il is not delivered to	street addre	ess)		Room/suite		19
03		117	77 HIGH	RIDGE	ROAD				111	B Telephone number (203)856-	-5299
84		STF	MFORD,	ovince, countr	y, and ZIP or forei	ıgn postal	code			C If exemption application	
	G	Chec	k all that apply:		tial return		Initial return of a	former public o	harity	D 1. Foreign organization	ons, check here
					dress change	<u> </u>	Name change		. 6	Foreign organizations check here and attach	meeting the 85% test
	H		k type of organiza		Section 501(c)(	3) exempt	private foundation		7		-
	늗	S	ection 4947(a)(1)	) nonexempt c	haritable trust	Other	taxable private foun			E If private foundation s under section 507(b)	status was terminated (1)(A), check here
	(f	air III From ►\$	Part II, col (c),	lıne 16)	of year J Acco	Other (s	specify)	X Accr	ual	F If the foundation is in under section 507(b)	a 60-month termination
			II Analysis of Re	evenue and Ex	(00000		d) must be on cash				
	_	T .	(The total of amoinecessarily equal	unts in columns I the amounts in	(b), (c), and (d) may no column (a) )	ot e	(a) Revenue and expenses per books	(b) Net in		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
,		1	Contributions, g	gifts, grants, e	tc., received					N/A	(oddii oddia omy)
)		3	Interest on savings cash investments	f the foundation is no s and temporary	t required to attach Sch. B	·					
		4	Dividends and ii		ecurities		96,773.	9	6,773.		COLO OFFICE A
7		5a	Gross rents						0,113.		STATEMENT 1
' '		i _	Net rental income of								. ATTIN 2
	ne	6a	Net gain or (loss) fr Gross sales price f assets on line 6a				76,584.			1	1100
	Revenue	7	assets on line 6a Capital gain net inc		434,696	<u>-</u>		7	<u> </u>		7 2011
	æ	8	Net short-term of		v, iiiie 2)	-	· · · · · · · · · · · · · · · · · · ·		5,584.		ייייי לייייייייייייייייייייייייייייייי
125	<u> </u>	9	Income modifica	ations				<del> </del>			PENIFIE APITY I
SCANNED 107	\$	10a	Gross sales less re and allowances	turns						<del></del>	Nelli-
- 🔰	Ď	ŀ	Less Cost of good	<b></b>			ambandani seperan iyo desa da naga a				the second control of
2			Gross profit or (I	loss)	-		2 202				
≥ #		12	TRES LES	VED	· [	<u> </u>	3,383.		3,383.		STATEMENT 2
	<del>j  </del>	-	Compensation of or		Mistees etc		176,740. 100,000.		740.		
_ :_	;	<u>B</u>	Other employee	salafles and w	ages		100,000.		,,000.	<del></del>	50,000.
7 Z			Other employees Pension plans, e	mployee bene	<u>&amp;                                     </u>		34,072.	17	7,036.		17,036.
೨ ೬ ಜಿ	nses	16a	Legal-fees Accounting lees	N LIT					<del></del>		17,030.
5 6	, ğ	0	Accounting fees.  Other profession		<b></b> \$TMT 3		27,957.	13	,978.		13,979.
2018 4 7 1	e H	17	Interest	iai tees		<u> </u>					
2 26	and Administrative Expen	18	Taxes		STMT 4	<del> </del>	11,857.		,268.		1 010
ر در	nistr	19	Depreciation and	depletion		-	11,037.		, 200.		4,018.
) ]	喜	20	Occupancy				16,326.	8	,163.		8,163.
<b>C</b>	ğ	21	Travel, conference		ngs		3,383.		,690.		1,691.
•	au	22	Printing and publ	lications	CMM		, ,				= 70220
			Other expenses  Total operating a	and administ-	STMT 5	ļ	4,291.	1	,057.		3,234.
	Dera		expenses. Add li				197,886.	۵۵	100	-	
	ō		Contributions, gif			-	71,000.	98	,192.	<del></del>	98,121.
			Total expenses a								71,000.
-	_		Add lines 24 and				268,886.	98	,192.		169,121.
	- [3		Subtract line 26 fi				00 115				
			Excess of revenue ov Net investment in			<u> </u>	-92,146.				
			n dinetad nat ince		ve, enter -U-)	<del></del>			,548.		

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

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ALEX G. NASON FOUNDATION INC.

Form 990-PF (2016)

U	Part IV Capital Gains	and Losses for Tax on In	vestment	t Income					
_		tibe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs			( <b>6)</b> Ho P - F D - I	w acquired Purchase Donation		acquired day, yr.)	( <b>d</b> ) Date sold (mo., day, yr.)
1	TD AMERITRADE					Р	VARI	OUS	12/31/16
	b TD AMERITRADE					P	VARI	OUS	12/31/16
_	CHARLES SCHWAB					P	VARI	OUS	07/01/16
-	d CAPITAL GAINS	DIVIDENDS							
	e								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) ( (e) plu	Gain or (loss is (f) minus	) (g)
	a 1,062,674.			1,030,50					32,166.
	b 245,129.			204,54					40,587.
_	c 126,605.	_		123,06	2.				3,543.
	d 288.	_							288.
_	e								
_	Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69				Col. (h) gain	
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ccess of col. (1)		C		not less that (from col. (	
_		as of 12/3 //09	UVEI	col. (j), if any				<u> </u>	32,166.
_	<u>a</u>		ļ			<del></del>			40,587.
_	<u>b</u>	<del></del>	<del> </del>						
_	<u>c</u>		<b></b>						3,543.
_	d		<del> </del>						288.
_	e		L	<del></del>		<del></del>			
2	Capital gain net income or (net ca	pital loss) { If gain, also enter	r in Part I, line - in Part I, line	7 7	}[	2			76,584.
3	Net short-term capital gain or (los	s) as defined in sections 1222(5) ar	nd (6);			1			
	If gain, also enter in Part I, line 8,				}	1			
_	If (loss), enter -0- in Part I, line 8				4	3		N/A	·
U	Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inves	stment In	come		
(F	or optional use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment in	come.)				
1£	controls 4040(d)(2) applies Jacus th	us port blank							
11	section 4940(d)(2) applies, leave th	is part blank.							
W	as the-foundation liable for the sect	ion 4942 tax on the distributable am	าดีนทิt of any ye	ear in the base per	10d2_				Yes X No
		ify under section 4940(e). Do not co			<u> </u>				
1		each column for each year; see the i	nstructions be	fore making any er	ntries				
	(a) Base period years	(b)			(c)			Distrib	(d) oution ratio
	Calendar year (or tax year beginning			Net value of nor			- 1	(col. (b) div	ided by col. (c))
	2015		3,340.			757,00			.062108
_	2014	34	2,394.		4,	719,56	8.		.072548
	2013	39	2,576.		5,:	123,21	8.		.076627
	2012	42	3,396.		5,	575,01	7.		.075945
	2011	45	0,699.		6,	727,39	3.		.066995
2	Total of line 1, column (d)						2		.354223
	, , ,	5-year base period - divide the total (	on line 2 by 5.	or by the number	of years	3			
	the foundation has been in exister			,	•		3		.070845
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						<u> </u>	<del></del>
4	Enter the net value of noncharitab	le-use assets for 2016 from Part X,	line 5				4	1	3,927,652.
-								<del> </del>	<del></del>
5	Multiply line 4 by line 3						5	}	278,255.
٠								<del> </del> -	
R	Enter 1% of net investment incom	ne (1% of Part 1 line 27h)					6		785.
,	Enter 170 of not investment incom	(1. are i, mile 21 b)					<u> </u>	<del>                                     </del>	
7	Add lines 5 and 6						7		279,040.
,	אמע וווונים ט מווע ט						<del>  '-</del>	<del> </del>	2,3,0401
8	Enter qualifying distributions from	n Part XII, line 4					8		169,121.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	plete that part using	g a 1%	tax rate.			

Orm 990-PF (2016) ALEX G. NASUN FOUNDATION INC		34-1/5/149	
Part VI   Excise Tax Based on Investment Income (Section 4			uctions)
1a Exempt operating foundations described in section 4940(d)(2), check here			
	necessary-see instructions)		1 661
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%		1,571.
of Part I, line 27b		(	li E
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	, , , , ,	_ (	•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y. Others enter -0-)	2	0.
3 Add lines 1 and 2		3	1,571.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	ly. Others enter -0-)	4	<del>1</del>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u>}</u> -	5	1,571.
6 Credits/Payments:	1. 1 21 225	Ì	l I
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 21,825.	ì	1
b Exempt foreign organizations - tax withheld at source	66		
c Tax paid with application for extension of time to file (Form 8868)	6c	1	
d Backup withholding erroneously withheld	_6d	-	24 00'5
7 - Total credits and payments. Add lines 6a through 6d	<u> </u>		21,825.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	attached	8	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶↓	9	20 254
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpai			20,254.
11 Enter the amount of line 10 to be. Credited to 2017 estimated tax	20,254. Refunded ►	_11	0.
Part VII-A Statements Regarding Activities			TSZ. 154.
1a During the tax year, did the foundation attempt to influence any national, state, or local l	egislation or did it participate or intervene i	<del></del>	Yes No
any political campaign?		1 <u>a</u>	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pu		<del></del>	Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	es and copies of any materials publishe	ed or	
distributed by the foundation in connection with the activities		manue on the	
c Did the foundation file Form 1120-POL for this year?		1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during			
(1) On the foundation > \$ 0 . (2) On foundation mana			
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	enditure tax imposed on foundation	Ì	1 1 '
managers. > \$0 .			-   - <u></u> -
2 Has the foundation engaged in any activities that have not previously been reported to t	he IRS?	- 2	$\bar{\mathbf{x}}_{-}$
- If-"Yes," attach a detailed description of the activities		1	1
3 Has the foundation made any changes, not previously reported to the IRS, in its govern			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha		3_	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	year?	4 <u>a</u>	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		46	Х
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	ear?	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	ed either;	Ì	
<ul><li>By language in the governing instrument, or</li></ul>		ĺ	) )
<ul> <li>By state legislation that effectively amends the governing instrument so that no mand</li> </ul>	atory directions that conflict with the state I	aw _	:
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
8a Enter the states to which the foundation reports or with which it is registered (see instru	uctions) >		
CT			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	he Attorney General (or designate)	_	
of each state as required by General Instruction G? If "No," attach explanation		8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of	of section 4942(j)(3) or 4942(j)(5) for calen	dar	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes		9	X Ø
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a so		10	X
		Form 99	<b>0-PF</b> (2016)

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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3b

4a

N/A

art VII-B. Statements Regarding Activities for Which	Form 4/20 May Be I	Required (contin	ued)		
a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		<del></del>	s X No		
(2) Influence the outcome of any specific public election (see section 4955); (	or to carry on, directly or indir			- 1	ł
any voter registration drive?		Y	s X No	ĺ	ĺ
(3) Provide a grant to an individual for travel, study, or other similar purposes	5?	Y	es X No		ľ
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				İ
4945(d)(4)(A)? (see instructions)		Y	s X No		- (
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or			ŀ	i
the prevention of cruelty to children or animals?		Y	s X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described	ın Regulations	}	ļ	- 1
section 53 4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	from the tax because it mainta	ined	1	}	}
expenditure responsibility for the grant?	Ŋ	I/A 🗀 Y	s D No	l	ļ
If "Yes," attach the statement required by Regulations section 53 494	15-5(d)		1		
a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		1	•	1
a personal benefit contract?		Y	s X No	į	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a j	personal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870			7		
a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No		- (
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b	
art VIII Information About Officers, Directors, Trust	tees, Foundation Ma	nagers, Highly	7		
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their	<del></del>				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e)	Expense ount, other
(a) name and address	to position	enter -0-)	and deterred compensation	all	owances
				}	
				ļ	_
SE STATEMENT 10		100,000.	34,072.	1	0
		<del> </del>	<del></del>		
	_}				
					<del>-</del> -
	<u> </u>			-	<del></del> -
					<del></del> -
	- - - - - -			_	<del>-</del>
					<del></del>
					<del>-</del>
Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e)	Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000		enter "NONE."		accó	Expense punt, other owning of the commence of
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	ount, othe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	accó	Expense runt, othe owances

Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	1/5/.	149 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		<del></del>
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE	}	
		<del></del>
The Loumber of others vecasioned over \$50,000 for professional acquired		0
Total number of others receiving over \$50,000 for professional services  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
1 N/A	<del></del>	
	ı	
2		
3		
4		<del> </del>
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1- N/A		Amount
-1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
	Forn	n <b>990-PF</b> (2016)

1 · 1

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
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	3,439,495. 547,969.
b	Average of monthly cash balances	1b	547,969
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1đ	3,987,464
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •	. i	
2	Acquisition indebtedness applicable to line 1 assets	2	0 .
3	Subtract line 2 from line 1d	3	3,987,464.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	59,812.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,927,652
6	Minimum investment return Enter 5% of line 5	6	196,383
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here   ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	196,383.
2 a	Tax on investment income for 2016 from Part VI, line 5 2a 2 1,571.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	!	
C	Add lines 2a and 2b	2c	1,571
3	Distributable amount before adjustments, Subtract line 2c from line 1	3	194,812.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	194,812.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	194,812.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	169,121.
þ	Program-related investments - total from Part IX-B	1b	0.
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:		
-8	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	169,121.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	169,121.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies fo	or the section

Part XIII Undistributed Income	e (see instructions)			-1757149 F
	(a)	(b)	(0)	
1 Distributable amount for 2016 from Part XI, line 7	Corpus	Years prior to 2015	(c) 2015	( <b>d</b> ) 2016
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only				194,8
b Total for prior years:				
			0	•
3 Excess distributions carryover, if any, to 2016	.	0.		
a From 2011 114,879	·			<del> </del>
b From 2012 144, 645	- 1			}
c From 2013 136, 415	-1			
dFrom 2014 106, 416	-1 1			1
eFrom 2015 45,490	<u>-</u>	ł		
f Total of lines 3a through e	<b>-</b>			
4 Qualifying distributions for 2016 from	547,845.	1		
Part XII, line 4: > \$ 169.121				
Part XII, line 4: >\$ 169,121	1			
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)	1	- 1		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.	1		
d Applied to 2016 distributable amount	0.			
e Remaining amount distributed out of cornus	0.			160 101
TYPES distribution	25,691.			169,121
must be shown in column (a) )	23,691.			25,691
Enter the net total of each column as indicated below:			$\int$	
Corpus Add lines 3f, 4c, and 4e Subtract line 5	522,154.			
Prior years' undistributed income Subtract	322,134,			
- Ine 4b from line 2b				
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.		
Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
Undistributed income for 2015, Subtract line		0.		
4a from line 2a. Taxable amount - see instr				
Indistributed income for 2016, Subtract			0.	
ines 4d and 5 from line 1. This amount must			<del></del>	
e distributed in 2017	1	1	1	
Amounts treated as distributions out of			1	-
orpus to satisfy requirements imposed by				0.
ection 170(b)(1)(F) or 4942(g)(3) (Election			1	
iay be required - see instructions)	_	ĺ	1	
xcess distributions carryover from 2011	0.			
of applied on line 5 or line 7	00 100			
ccess distributions carryover to 2017.	89,188.			
obtract lines 7 and 8 from line 6a	422			
nalysis of line 9:	432,966.		j	
= / U 1 3 1 1			<u> </u>	
		1	1	
		}		
cess from 2015 45,490.			1	
	1		T T	

Part XIV. Private Operating F	oundations (see ins		-A. guestion 9)	N/A	3/149 Page 10
1 a If the foundation has received a ruling of	<del></del>	<del></del>	1	11/11	
foundation, and the ruling is effective for					
<b>b</b> Check box to indicate whether the found	•	•	n section	4942(j)(3) or 494	12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	l described in	Prior 3 years	10 (2())(0) (1	12(1)(0)
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	<del>`</del>		<del>  ` '</del>	<del>  ` ′ - ·  </del>	
each year listed		ì		}	
b 85% of line 2a	ļ <del></del>	<del> </del>	<del> </del>	<del> </del>	<del></del>
c Qualifying distributions from Part XII,		<del> </del>		<del> </del>	
line 4 for each year listed	Į			[	
d Amounts included in line 2c not	<u> </u>	<del> </del>	<del> </del>	<del> </del>	
used directly for active conduct of		1		}	
<ul> <li>exempt activities</li> </ul>	1		/	1	
e Qualifying distributions made directly	<u> </u>		<del> </del>	<del>                                     </del>	<del></del>
for active conduct of exempt activities.	l l			}	
Subtract line 2d from line 2c			/	[	
3 Complete 3a, b, or c for the	<del> </del>	<del> </del>	<del> '</del>	<del> </del>	
alternative test relied upon:			, · ·		
a "Assets" alternative test - enter: (1) Value of all assets		/		1	
, ,	<del></del>	<del> </del>	<del> </del>	<del> </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	<b> </b>	/		}	
b "Endowment" alternative test - enter	<del></del>	<del></del>	<del> </del>	<del> </del>	<del></del>
2/3 of minimum investment return	ļ	/	ļ		
shown in Part X, line 6 for each year listed		1			
c "Support" alternative test - enter:	<del></del>	<del> </del>	<del></del>	<del> </del>	<del></del>
(1) Total support other than gross	j	1		1	
investment income (interest,	1	/	<b> </b>	{	
dividends, rents, payments on			ł	{	
securities loans (section 512(a)(5)), or royalties)		!	ļ		
(2) Support from general public	<del></del>	<del> </del>		<del> </del>	
and 5 or more exempt	/				
organizations as provided in -'- — -section 4942(j)(3)(B)(iii) — — —	<i></i> -				
(3) Largest amount of support from		<del> </del>	<del> </del>	<del> </del> -	
an exempt organization		İ		\ 	
(4) Gross investment income	- <u> </u>	<del></del>	<del></del>	<del> </del>	<del></del>
Part XV   Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or mo	re in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	_	than 2% of the total conti	ributions received by the	foundation before the close	of any tax
year (but only if they have contributed in			,		<b>,</b>
ALEXANDER G. NASON					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation (	or an equally large portio	n of the ownership of a par	tnership or
other entity) of which the foundation has					- <b>,</b> -
NONE					
2 Information Regarding Contributi	ion, Grant, Gift, Loan	Scholarship, etc., Pr	ograms:		
Check here X if the foundation o				ot accept unsolicited reque	sts for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, co	mplete items 2a, b, c, and c	i.
a The name, address, and telephone number	ber or e-mail address of t	the person to whom appli	cations should be addres	sed:	
,		,			
b The form in which applications should b	e submitted and informa	tion and materials they sh	rould include:	<del></del>	
,,		ŕ			
c Any submission deadlines:		<del></del>			
• /					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields.	kinds of institutions, or o	ther factors.	<del> </del>
			•		
623601 11-23-16			_		orm <b>990-PF</b> (2016)

3 Grants and Contributions Paid During the		Payment	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient	**	
a Paid during the year				
ALDRICH MUSEUM	NONE	501(C)(3)	TO SUPPORT EDUCATION	
258 MAIN STREET			PROGRAMS AND TO ENRICH	
RIDGEFIELD, CT 06877		ľ	THE COMMUNITY BY	
			PROVIDING DIVERSE ART	
		ļ	PROGRAMS	1,000
BALLET SCHOOL OF STAMFORD	NONE	501(C)(3)	TO SUPPORT ARTISTIC	
201 SUMMER ST., 2ND FL	10.12	551(0)(3)	TALENTS OF ITS	
STAMFORD, CT 06901			STUDENTS THROUGH	
			SCHOLARSHIPS TO	
			PROVIDE DANCE	1,000
AND INC. INV. TALERIN	YONE		TO GUNDONE ST.	
CARING UNLIMITED PO BOX 590	NONE	501(C)(3)	TO SUPPORT SAFETY PLANNING FOR	
SANFORD ME 04073			INDIVIDUALS AND	
		1	FAMILIES AFFECTED BY	
		}	DOMESTIC ABUSE	1,000
CHOATE ROSEMARY HALL	NONE	501(C)(3)	TO SUPPORT EDUCATION	
333 CHRISTIAN ST	1012	101(0)(3)	THROUGH FINANCIAL AID	
VALLINGFORD, CT 06492			TO STUDENTS	2,000
DIVINE WORD OF MISSIONARIES	NONE	501(C)(3)	TO SUPPORT MISSIONARY	
835 WAUKEGAN ROAD		1	WORK	
TECHNY, IL 60082				2,000
	NTINUATION SHEE	FT(S)	<u>▶ 3a</u>	71,000
b Approved for future payment				
			}	
NONE			1	
			]	
	+	<del> </del>	<del> </del>	
			† <u> </u>	
	-		1	
			}	

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

	Unrelated	business income	Evelu	ded by section 512, 513, or 514	
There gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7 (mount	
a b	- }		1		<del></del>
С	<del>-     -</del>	<del></del>	1	<del></del>	<del></del>
d	-		1		<del></del>
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			ابيا		
4 Dividends and interest from securities	<u> </u>		14	96,773.	<del></del>
5 Net rental income or (loss) from real estate:	<b> </b>				<del></del>
a Debt-financed property		<del></del>			
b Not debt-financed property	<del></del>	<del></del>	-		
6 Net rental income or (loss) from personal	- [				
7 Other investment income	<del></del>		14	3,383.	
8 Gain or (loss) from sales of assets other		<del></del>	<del>  -                                   </del>	3,303.	
than inventory			18	76,584.	
9 Net income or (loss) from special events			<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory	-		1		
11 Other revenue:					
a	{		} }		
b					
С					
d					
e	_				
12-Subtotal: Add columns (b), (d); and (e)			للل	176,740.	0.
13 Total. Add line 12, columns (b), (d), and (e)	_			13	176,740.
See worksheet in line 13 instructions to verify calculations.					
Part XVI-B Relationship of Activities	s to the Acco	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other th			contrib	outed importantly to the accom	plishment of
the foundation's exempt purposes (other th	an by providing ron	<u> </u>			
		<del></del>			<del></del>
<del></del>					
				· · · · · · · · · · · · · · · · · · ·	
					<del></del>
					<del></del>
				·	
				<del></del>	
		<del></del>		<del></del>	<del></del>
					<del></del>

-orm 990	_		G. NASUN				<del></del>	34-17			ge 13
Part )	(VII			sfers To a	and Transaction	s an	id Relations	hips With Nonch	naritabl	е	
4 5 1		Exempt Organ		. ( 1) ( - 1)				5041		157	
		ganization directly or indir						on 501(c) of	j	Yes	МО
		other than section 501(c)				rganiza	ations?				
		from the reporting founda	ation to a nonchanta	bie exempt or	gamzation of.					-	v
	Cash	assets							1a(1)		X
		assets sactions:							1a(2)		
		of assets to a noncharital	hle evemnt organiza	tion					16(1)	{	Х
		ases of assets from a no							16(1)	-	X
		of facilities, equipment,	•	Ji garrizanari					1b(3)	$\vdash$	X
		oursement arrangements							1b(4)	-1	X
		or loan guarantees							1b(5)	1	X
• •		mance of services or me	mbership or fundrai	sing solicitatio	ons				1b(6)		Х
		facilities, equipment, ma	•	-					1c		X
<b>d</b> If th	e answ	er to any of the above is	"Yes," complete the	following sche	edule. Column (b) shoul	d alwa	ys show the fair m	arket value of the goods	s, other ass	ets,	
or s	ervices	given by the reporting fo	oundation. If the four	ndation receiv	ed less than fair market	value	in any transaction	or sharing arrangement	, show in	•	
colu	ımn (d	) the value of the goods,	other assets, or serv	rices received.							
(a)Line no	· T	(b) Amount involved	(c) Name of	f noncharitable	e exempt organization		(d) Description	of transfers, transactions, ar	nd sharing ar	rangeme	nts
				N/A							
					- <u> </u>						
					<del></del>						
	<u> </u>		<u></u>		<del></del>						
	<del></del>		ļ					<del> </del>			
							<b> </b>				
	→—		<del> </del>				<del></del>				
	┼─		<del> </del>	<del></del>			<del> </del>	_ <del></del>			
	+-					= -	<del> </del>				
	7										
	+-		<del></del>		<del></del>		<del></del>				
2a  s t	ne four	dation directly or indirect	tly affiliated with or i	related to one	or more tax-exempt or	nanizat	tions described				
		501(c) of the Code (other	•	-	•	gumzu			Yes	X	l No
		mplete the following sch		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						(_F-	
		(a) Name of org	janization		(b) Type of organizati	on		c) Description of relation	nship		
		N/A			<u> </u>						
		penalties of perjury declare lief, it is true, portect, and con						best of my knowledge	May the IRS o	iscuss ti	nis
Sign		////	1/20-	••	را سار			S	hown below	(see inst	r)?
Here		1/0-4	Open	<u> </u>	3/(5/1		PRESID	ENT	X Yes	L	No
	Sign	ature of officer or trustee		T5	Date		Title	Access Teat & Tage			
		Print/Type preparer's na	ıme	Preparer's s	signature	10	Date	Check X if PTIN	V		
Daid		STEVEN I.	CD3	}				self- employed	00120	0.40	
Paid Prena	ror	RISBRIDGER		OWETTA	TTD			Firm's EIN ▶ 06-	00130		
Prepa Use 0		Firm's name ► REY	MOTIDS & K	COMRPTY	7 11115			FIRM'S EIN ► U 6	11435	22	
Jac (	,,,,,	Firm's address ▶ 90	CROVE OF	ਅਜ਼ਜ਼ਹ	<del></del>			<del> </del>			
			DGEFIELD,		877			Phone no. 203-4	438_n	161	
		1/2	~~~ <u>~~~</u> ,	<u> </u>	<del>- , ,</del>			11 110110 110. 2100	<u></u>		

3 Grants and Contributions Paid During the	rear (Gentinaation)			
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 business)	or substantial contributor	recipient	357111.5211511	
DOCTORS WITHOUT BORDERS	NONE	501(C)(3)	TO SUPPORT THE	
333 7TH AVE, 2ND FL	ľ		DELIVERY OF MEDICAL	
NEW YORK, NY 100015004		i	CARE TO THOSE TRAPPED	
		1	IN SOME OF THE WORST	
	ì	1	CRISES GLOBALLY	1,000
ENVIRONMENTAL LEARNING CENTER	NONE	501(C)(3)	TO SUPPORT	,
255 LIVE OAK DR		1	ENVIRONMENTAL TEACHING	
VERO BEACH, FL 32963		1	PROGRAMS FOR THE	
•	l l	1	PROTECTION OF THE	
		1	ENVIRONMENT	1,000
GEORGE WASHINGTON CARVER FOUNDATION	NONE	501(C)(3)	TO SUPPORT EDUCATIONAL	
7 ACADEMY STREET	Į.	}	ENRICHMENT AND	
NORWALK, CT 06850		1	RECREATIONAL PROGRAMS	
,		1	TO LOW-INCOME YOUTH	1,000
				<u> </u>
HEALING HEARTS PEDIATRIC & THERAPY	4	501(C)(3)	NON-PROFIT PURPOSES OF	
CENTER	1		ORGANIZATION	
48 UNION ST.	j		1	
STAMFORD , CT 06906	· f	4	<b>1</b>	1,000
HIBISCUS CHILDREN'S CENTER	NONE	501(C)(3)	TO SUPPORT THE CENTER	
1145 12TH ST	1		THAT PROVIDES SAFETY,	
VERO BEACH, FL 32960	1		SHELTER, AND RECOVERY	
·	İ	1	PROGRAMS TO ABUSED	
			CHILDREN/FAMILIES.	2,500.
HOMELESS FAMILY CENTER	NONE	501(C)(3)	TO SUPPORT THE CENTER	
715 FOURTH PLACE	1	l	THAT PROVIDES SAFETY	
VERO-BEACH, FL -32962			AND SHELTER FOR	
	<u> </u>		HOMELESS FAMILIES.	2,000.
INDIAN RIVER LAND TRUST	NONE	501(C)(3)	TO SUPPORT THE	
1904 12TH COURT		1	PRESERVATION OF	
VERO BEACH, FL 32960	1		ENVIRONMENTALLY	
		1	IMPORTANT LAND/WATER	
			RESOURCES OF INDIAN	3,000.
INSTITUTE OF NAUTICAL ARCHAEOLOGY	NONE	501(C)(3)	TO SUPPORT THE STUDY	
PO BOX DRAWER HG	}	1	OF ARCHEOLOGY/NAUTICAL	
COLLEGE STATION, TX 778415137			SCIENCE THROUGH	
	i	1	DISCOVER OF ANCIENT	
		1	SHIPWRECKS	1,000.
MARTHA'S TABLE	NONE	501(C)(3)	INITIATE PROGRAMS FOR	=,
2114 14TH STREET			HEALTHY EATING FOR	
WASHINGTON, DC 20009		1	THOSE IN NEED TO	
,			SUPPORT STRONGER	
			CHILDREN, FAMILIES AND	2,000.
	<del></del>	<del> </del>	<del>                                     </del>	
MCKEE BOTANICAL GARDEN	NONE	501(C)(3)	TO SUPPORT THE	
350 US 1		1	REVITALIZATION PROGRAM	
VERO BEACH, FL 32962			OF THE BOTANICAL	
•	1	1	GARDEN	1,000.
Total from continuation sheets		·	<del></del>	64,000.

ALEX G. Part XV   Supplementary Information	NASON FOUNDAT	ION INC.	34-175	7149
3 Grants and Contributions Paid During the Y			<del></del>	<del></del>
Recipient	If recipient is an individual,	1	<del></del>	<del></del>
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
		<del>                                     </del>		
		1		
NEW MORAN INC	NONE	501(C)(3)	TO CONVERT AN OLD COAL	
PO BOX 8502		1	PLANT TO BUILD A	
BURLINGTON, VT 05402		<u> </u>	CULTURAL HUB.	1,000
NEW YORK FOUNDATION FOR THE ARTS	NONE	501(C)(3)	TO SUPPORT THE	
155 AVENUE OF THE AMERICAS, 6TH FL		Ì	SERVICES PROVIDED FOR	
NEW YORK, NY 100131507			ARTISTS AND THE	
			CONTINUATION OF	
		<del> </del>	INNOVATIVE	1,000
NICAPHOTO	NONE	501(C)(3)	TO SUPPORT EDUCATION	
13 NEWTOWN TERRACE		[""	ART, AND PERSONAL	
NORWALK, CT 06851			DEVELOPMENT OF POVERTY	
			STRICKEN CHILDREN	4 000
	<del> </del>	+	DIATEREM CHILIDREM	4,000
OBEY FOUNDATION	NONE	501(C)(3)	TO SUPPORT CHILDREN	
PO BOX 25163			AND FAMILIES WHO NEED	
CHARLOTTE, NC 28229			FOOD AND SHELTER IN	
			AFRICA	1,000
OCEAN RESEARCH AND CONSERVATION ASSOC	NONE	501(C)(3)	TO SUPPORT THE SEARCH	
1420 SEAWAY DRIVE, 2ND FL			FOR THE MEANS TO	
FORT PIERCE, FL 34949			PREVENT THE	
•			CONTAMINATION OF LOCAL	
			FRESH WATERWAYS	3,000
				<del></del>
OPEN DOOR SHELTER NORWALK CT	NONE	501(C)(3)	TO SUPPORT WIDE	
4 MERRITT STREET		1	RANGING SERVICES FOR	
NORWALK, CT 06854			THE HOMELESS AND	
			WORKING POOR	1,000
PMC - JIMMY FUND	NONE	501(C)(3)	TO SUPPORT THE	
10 BROOKLINE PLACE WEST, 6TH FL			INNOVATIVE WORK OF	
BROOKLINE, MA 024457295			MEDICAL STAFF AT THE	
			DANA-FARBER CANCER	
	Louin	F04 (5) (2)	INSTITUTE	1,000.
PROMINDFUL, INC	NONE	501(C)(3)	TO SUPPORT THE	
1177 HIGH RIDGE ROAD			PROMOTION OF HEALTH	
STAMFORD, CT 06905			AND WELLNESS THROUGH	
		1	HOLISTIC AND	F 656
	<del> </del>	<del> </del>	INTEGRATIVE PRACTICES	5,000
			1	
RIVERSIDE CHILDREN'S THEATRE	NONE	501(C)(3)	TO SUPPORT CHILDREN'S	
3280 RIVERSIDE PARK DRIVE		, , - ,	CULTURAL EDUCATION IN	
VERO BEACH, FL 32963			THEATRE ARTS	2,500
		<del>                                     </del>	<del></del>	
SARATOGA MUSEUM	NONE	501(C)(3)	TO SUPPORT THE	
104 CONSTITUTION AVE.			EXHIBITS AND CULTURAL	
SARATOGA, WY 82331	<u> </u>	<u></u>	EVENTS AT THE MUSEUM	1,000
Total from continuation sheets				

3 Grants and Contributions Paid During the		·,····		
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 business)	or substantial contributor	recipient		
SAVE THE CHILDREN	NONE	501(C)(3)	TO SUPPORT THE HEALTH,	
4 WILTON ROAD			EDUCATION, AND	
WESTPORT, CT 06880			PROTECTION OF CHILDREN	
	1	1	IN THE POOREST AREAS	
		<u> </u>	OF THE WORLD	3,000
SOUTH HERO LAND TRUST	NONE	501(C)(3)	TO SUPPORT THE LAND	
PO 280X 455	1		CONSERVATION AND	
SOUTH HERO, VT 05486			VOLUNTEER INITIATIVES	1,000
300111 11210, 11 03400			VOZONIZBA INITIATIVED	
ST DEMETRIOS GREEK ORTHODOX CHURCH	NONE	501(C)(3)	TO SUPPORT THE CHURCH	
400 SKYWAY DR.			1	
CAMARILLO, CA 93010		-		1,000
ST EDWARDS SCHOOL	NONE	501(C)(3)	TO SUPPORT THE	
1895 ST. EDWARD'S DR.	İ		EDUCATION OF CHILDREN	
VERO BEACH, FL 32963		ļ		5,000
SUN GROVE MONTESSORI	NONE	501(C)(3)	TO SUPPORT THE	
5610 OLEANDER AVE.	101.2		EDUCATION AND TRAILING	
FORT PIERCE, FL 34982			OF STAFF TO BENEFIT	
TORT FIBROI, ID 34302			THE CHILDREN	5,000
SUSTAINABLE HARVEST	NONE	501(C)(3)	EDUCATE FARMERS BY	
PO BOX 1447			PARTNERING WITH	
ELLSWORTH, ME 04605			FAMILIES TO PRESERVE	
	-		THE ENVIRONMENT THRU	
	ł		SUSTAINABLE HARVEST.	1,000
SYRACUSE UNIVERSITY	NONE	501(C)(3)	TO SUPPORT SEVERAL	<del></del>
SYRACUSE UNIVERSITY	ì		HEALTH AND WELLNESS	
SYRACUSE, NY 13244			PROGRAMS AT THE	
			UNIVERSITY	
	<u> </u>		;LISTTOTAL 50000	5,000
TRIPLE GEM SOCIETY	NONE	501(C)(3)	TO SUPPORT THE	
P.Q. BOX 713			HUMANITARIAN	
PRINCETON, NJ 08542	<b>,</b>		INITIATIVES WORLDWIDE	
			TO BRING PEACE AND	
	<del></del>	<u> </u>	HARMONY TO SUFFERING	1,000
VERO BEACH OPERA	NONE	501(C)(3)	TO SUPPORT THE OPERA	
49 ROYAL PALM PT			AND ARTISTS THAT SERVE	
VERO BEACH, FL 32960		<del> </del>	THE COMMUNITY	2,000
VNA & HOSPICE FOUNDATION	NONE	501(C)(3)	TO SUPPORT THE HOME	
1110 35TH LN.			HEALTH AND HOSPICE	
	i	1	CARE FOR THE COMMUNITY	4,000

INITIATE PROGRAMS FOR HEALTHY EATING FOR THOSE IN NEED TO SUPPORT STRONGER CHILDREN, FAMILIES AND COMMUNITY.

NAME OF RECIPIENT - NEW YORK FOUNDATION FOR THE ARTS

TO SUPPORT THE SERVICES PROVIDED FOR ARTISTS AND THE CONTINUATION OF

INNOVATIVE INITIATIVES.

TO SUPPORT THE PROMOTION OF HEALTH AND WELLNESS THROUGH HOLISTIC AND INTEGRATIVE PRACTICES TO BALANCE THE MIND AND BODY

NAME OF RECIPIENT - PROMINDFUL, INC

NAME OF RECIPIENT - TRIPLE GEM SOCIETY

TO SUPPORT THE HUMANITARIAN INITIATIVES WORLDWIDE TO BRING PEACE AND HARMONY TO SUFFERING PEOPLE

. .

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECU	RITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
CHARLES SCHWAB TD AMERITRADE	8,799. 88,262.	2	0.	8,799 87,974		
TO PART I, LINE 4	97,061.	2	88.	96,773	. 96,773.	
FORM 990-PF		OTHER	INCO	ME	S	TATEMENT 2
DESCRIPTION			RE		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
VANGUARD NATURAL RE VANGUARD NATURAL RE TD AMERITRADE VANGUARD NATURAL RE	SOURCES	_		1,809. 937. 146. 491.	1,809. 937. 146. 491.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =		3,383.	3,383.	
FORM 990-PF		ACCOUNT	ING	FEES		TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		27,957	•	13,978.		13,979.
TO FORM 990-PF, PG	1, LN 16B	27,957	•	13,978.		13,979.

FORM 990-PF	TAX	ES 	S	TATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED \ NET INCOME	(D) CHARITA PURPOS	
PAYROLL TAXES FILING FEES EXCISE TAXES FOREIGN TAXES	7,935. 50. 1,571. 2,301.	3,967. 0. 0. 2,301.		3,9	68. 50. 0.
TO FORM 990-PF, PG 1, LN 18	11,857.	6,268.		4,0	18.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LIABILITY INSURANCE OFFICE EXPENSE OTHER EXPENSES	2,176. 2,093. 22.	0. 1,046. 11.		2,1	
TO FORM 990-PF, PG 1, LN 23	4,291.	1,057.		3,2	34.
FORM -990-PF OTHER INCREASES	S-IN NET ASS	ETS OR FUND BA	LÂNCES S	TATEMENT	6
DESCRIPTION				AMOUNT	
UNREALIZED GAIN NONDIVIDEND DISTRIBUTION			<del></del> -	35,64 3,50	
TOTAL TO FORM 990-PF, PART I	II, LINE 3			39,1	53.

FORM 990-PF	ORPORATE STOCK	<del></del>	STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
EQUITIES		3,146,362.	3,450,974.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	3,146,362.	3,450,974.
FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 8
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER OFFICE EQUIPMENT PRINTER COMPUTER	2,633. 870. 180. 2,386.	2,633. 870. 180. 2,386.	0. 0. 0.
TOTAL TO FM 990-PF, PART II, LN 1	6,069.	6,069.	0.
FORM 990-PF	OTHER ASSETS		STATEMENT 9
- DESCRIPTION	BEGINNING OF YR-BOOK VALUE	END OF YEAR BOOK VALUE	FAIR_MARKET
DIVIDENDS DUE FROM BROKER	0.	195.	0.
TO FORM 990-PF, PART II, LINE 15	0.	195.	0.

	IST OF OFFICERS, D ND FOUNDATION MANA		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ALEXANDER G. NASON 47 ROBIN HOOD ROAD STAMFORD, CT 06907	PRESIDENT/TREA		34,072.	0.
LUCIE BURKE 4311 SECOND SQUARE SW VERO BEACH, FL 32968	SECRETARY 0.00	0.	0.	0.
VINCENT BURKE 4311 SECOND SQUARE SW VERO BEACH, FL 32968	DIRECTOR 0.00	0.	0.	0.
SOFIA BLANCHARD 95 SURF LAND VERO BEACH, FL 32963	CHAIRMAN 0.00	0.	0.	0.
ALEXANDRA NASON 20 SUMMER STREET NEW CANAAN, CT 06840	DIRECTOR 0.00	0.	0.	0.
STEPHEN NASON 223 5TH STREET SE WASHINGTON, DC 20003	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	2 6, PART VIII	100,000.	34,072.	0.

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PAGE
990-PF
FORM

Description Adjusted Method Life 2 to Database Bass and Database Bass of D	Asset				1	F		990-PF	PF						
OPPICE EQUIPMENT  0.4/06./09 5.00 HTG7 2,633. 11317. 1,316. 1,316. 1,916	ŝ	Description	Date Acquired			No No			Section 179 Expense	Reduction In Basis		Beginning	<u> </u>	Current Year	_
Objects Equitment 07/24/02 20008 5.00 MH17 870. 435. 435. 435. 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0			04/06/09		_			+-			1	Depreciation	ſ	Deduction	Accumulated Depreciation
TOTAL 990-PF DG 1 DEPR  TOTAL	~~~	OFFICE EQUIPMENT	07/24/09					<del></del>		1,317.	1,316.	1,316.	,	0	1,316.
ONFUTER  TOTAL 930-PF FO 1 DEFR  TOTAL 930-PF FO 1 DEFR  TOTAL 930-PF FO 1 DEFR  4,318. 1,751. 1,751. 0.0.	m ,	PRINTER	03/04/11			M 7	- 87. 		•	435.	435.	435.		•	435.
TOTAL 930-PP PG 1 DEPR  4,316. 1,751. 1,751. 0.	4	СОМРИТЕЯ	07/29/11			<u>↓</u>	- 10 - 2 386			180.				0	
		* TOTAL 990-PF PG 1 DEPR			;		690'9			2,386.	1,751.	1,751.		0 0	1,751.
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\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(D) - Asset disposed