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# Form **990-PF**

# enartment of the Treas

Department of the Treasury Internal Revenue Service

# 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. 
► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2016

Open to Public Inspection

For cale	endar year 2016 or tax year beginning	7/01 , 2016	and ending 6/3	0 , 2017	
			Α	Employer identification num	nber
	E AND JANET SARGENT			06-1553701	<del></del>
	ITABLE FOUNDATION		В	Telephone number (see insti	ructions)
	RCHESTER ROAD		<b>├</b> -		
DAKII	EN, CT 06820		C	If exemption application is	pending, check here 🕨 🗌
G Che	ck all that apply   Initial return	Initial return of a form	ner nublic charity		
<b>u</b> One	Final return	Amended return	D D	1 Foreign organizations, chec	k here
	Address change	Name change		2 Foreign organizations meet	ing the 85% test, check
U Cho		1(c)(3) exempt private f	oundation	here and attach computation	n
n Cile	Section 4947(a)(1) nonexempt charitable		private foundation E	If private foundation status	was terminated
	<u></u>			under section 507(b)(1)(A)	. check here
	market value of all assets at end of year J Ac n Part II, column (c), line 16)	counting method. X C	<b>└</b> 1		
► \$		Other (specify)	F	If the foundation is in a 60- under section 507(b)(1)(B)	
		l, column (d) must be or	casn basis.)	under section 307(b)(T)(b)	, check here
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces	expenses per books	income	Income	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see instructions) )				
	1 Contributions, gifts, grants, etc , received (attach schedule)	108,174.		<u> </u>	
	2 Check ► I If the foundation is not required to attach Sch	<sup>3</sup>		<del>                                     </del>	
	3 Interest on savings and temporary cash investments	279.	279.	[	!
	4 Dividends and interest from securities	11,387.	11,387.	-	
	5 a Gross rents	11,307.	11,507.		
	b Net rental income or (loss)				
R	6 a Net gain or (loss) from sale of assets not on line 10	79,551.			
E	b Gross sales price for all assets on line 6a 145, 887.				
Ž	7 Capital gain net income (from Part IV, line 2)		79,551.	· · · · · · · · · · · · · · · · · · ·	<del></del>
É	8 Net short-term capital gain			0.	
υ	9 Income modifications				
E	10 a Gross sales less returns and				
	allowances b Less Cost of	<u> </u>			
	goods sold				
	C Gross profit or (loss) (attach schedule).				
	11 Other income (attach schedule)				
	SEE STATEMENT 1		24 24 2		
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	199,586.	91,217.	0.	
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	0.			
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
A D	<b>b</b> Accounting fees (attach sch) SEE ST 2	1,750.	1,750.		
M	C Other professional fees (attach sch)	1,730.	1,750.	<del> </del>	
ON	17 Interest				
O PERAT	18 Taxes (attach schedule (see instrs) STE STM 8	211.	211.		
ŘŔ	19 Depreciation (attach	211.		<del> </del>	
ŶŶ	schedule) and depletion.		•	<b>i</b>	
N V G E	20 Occupancy NOV 30 21	7 2			
	Z1 Traver, conferences, and incentings				
A E N X D P	22 Printing and publications	100		<u> </u>	
DP	23 Other expenses (attach schedule)	205	205		
Ň	SEE STATEMENT 4	305.	305.	<del>-</del>	
Ě	24 Total operating and administrative expenses. Add lines 13 through 23	2,266.	2,266.		
5	25 Contributions, gifts, grants paid PART XV	124,000.	2,200.	<del>                                     </del>	124,000.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	126,266.	2,266.	0.	124,000.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	72 220			
		73,320.	00 OF1	ļ	
	b Net investment income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)		88,951.	0.	
	- Animaren mer micoline (in medaniste, euter -0-)	ı	i	, 0.	i

Parl		Balance Sheets  Addating screening and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	CIIU U	<del></del>
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
•		Cash — non-interest-bearing .	64.000	24 272	24 272
	2	Savings and temporary cash investments	64,260.	34,272.	34,272.
	3	Accounts receivable .   Less: allowance for doubtful accounts			
		Pledges receivable			
	4	Less. allowance for doubtful accounts			
	5	Grants receivable			
	_				<del></del>
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A		Less allowance for doubtful accounts ▶			
A S E T	8	Inventories for sale or use			
Ę	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – U.S. and state government			
		obligations (attach schedule)		16,193.	25,012.
		Investments — corporate stock (attach schedule)	223,760.	242,085.	249,524.
		: Investments — corporate bonds (attach schedule)	ļ		
	11 	Investments — land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments — mortgage loans.			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less. accumulated depreciation (attach schedule)			
	Į.	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	288,020.	292,550.	308,808.
L	17	Accounts payable and accrued expenses			
I A	18	Grants payable			
A B	19	Deferred revenue			,
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
E U T N	25	Temporarily restricted			
D	26				
A B S L L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
SNC	28	Paid-in or capital surplus, or land, bldg., and equipment fund	200 000	000 550	
O É R S	29	Retained earnings, accumulated income, endowment, or other funds	288,020.	292,550.	
RS	30	Total net assets or fund balances (see instructions)  Total liabilities and net assets/fund balances	288,020.	292,550.	
	3'	(see instructions)	288,020.	292,550.	
Par	t III	Analysis of Changes in Net Assets or Fund Balanc			
1	Tota	I net assets or fund balances at beginning of year - Part II, colu	ımn (a), line 30 (must ag	ree with	
•		of-year figure reported on prior year's return)		1	288,020.
2		r amount from Part I, line 27a		3	73,320.
3		Increases not included in line 2 (itemize)			261 240
4		Innes 1, 2, and 3 ases not included in line 2 (itemize)  SEE STATEMENT	5	5	361,340.
5 6		ases not included in line 2 (itemize)  SEE STATEMENT  I net assets or fund balances at end of year (line 4 minus line 5)			68,790. 292,550.
<u> </u>	iola	rifict assets of furid balances at end of year (thre 4 minus lifte 5)	, , aren, column (b), n	10 30 .	494,330.

rar ,	(a) List and describe	the kind(s) of property sold (e.g., ouse, or common stock, 200 shares	real estate, s MI C Company)	How acquired — Purchase — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	SEE STATEMENT 6					
b						
С						
d	<u> </u>					
е				<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
<u>a</u>						
b	<del>`</del>				<del></del>	
c					···	
e						
		l ving gain in column (h) and owned	by the foundation on 12/31/69		(I) Count (Col	(b)
	(i) F M.V. as of 12/31/69	(i) Adjusted basis	(k) Excess of col. (i)		(I) Gains (Col gain minus col (k), b	ut not less
	(1) F M.V. as 01 12/51/09	as of 12/31/69	over col (j), if any		an -0-) or Losses (fr	
а					<del></del>	
ь	)					
C						
d						
е						
2	Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	2		79,551.
3	Net short-term capital gain or (	(loss) as defined in sections 1222(5	5) and (6)			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions). I	f (loss), enter -0-	3		-23.
Pär		r Section 4940(e) for Reduce	d Tax on Net Investmen	t Income		
Was	es,' the foundation does not qua	this part blank ction 4942 tax on the distributable a alify under section 4940(e). Do not deach column for each year; see the in	complete this part.	•	Yes	X No
		(b)	(c)		(d)	
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution (col (b) divided	
	2015	117,389.	304,4	104.		0.385636
	2014	124,841.	422,5			0.295438
	2013	116,488.	444,6			0.261995
	2012	88,427.	356,5			0.248039
	2011	87,056.	383,3	373.		0.227079
2	Total of line 1, column (d)			2		1.418187
3	Average distribution ratio for the number of years the foundation	he 5-year base period — divide the n has been in existence if less thar	total on line 2 by 5, or by the 15 years	3		0.283637
4	Enter the net value of nonchar	ritable-use assets for 2016 from Pa	rt X, line 5	4		279,747.
5	Multiply line 4 by line 3			5		79,347.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		890.
7	Add lines 5 and 6			7		80,237.
8	Enter qualifying distributions fr	rom Part XII, line 4		8		124,000.
	If line 8 is equal to or greater that Part VI instructions.	an line 7, check the box in Part VI, line	e 1b, and complete that part using	g a 1% tax	rate See the	

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and addresses

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X

8b X

9

10

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

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

b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

(or designate) of each state as required by General Instruction G? If 'No.' attach explanation

			,	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No 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		х
13		13	Х	
	Website address ► N/A			
14	The books are in care of ► BRUCE SARGENT Telephone no ►			
	Located at ► 1 DORCHESTER ROAD DARIEN CT ZIP + 4 ► 06820			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	, >	
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	! !		
Par	rt 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.		Yes	No
1 a	a During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			i
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		'	,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	ł		l
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(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 )  Yes X No			t
ł	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	<u>N</u>	
	Organizations relying on a current notice regarding disaster assistance check here			ĺ
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1 c		X
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))			
a	a 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?  Yes X No			
	If 'Yes,' list the years ► 20 _ , 20 , 20		1	1
ı	<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see instructions.)	2 b	N	Ā
•	c 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			l
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
ı	b If 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	3 b	N	/A
4 :	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
	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?	4 b		x
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Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu		40454.00	О	,	
Carry on propaganda, or otherwise attemption	-		∐ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	•		No		
(3) Provide a grant to an individual for travel,	•	•	Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charıtable, etc , organ s)	ization described	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a a current notice regar	qualify under the exce ding disaster assistance	ptions e	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [	]	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	•	N/A Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5–5(d)			
6a Did the foundation, during the year, receive at on a personal benefit contract?	-		Yes  X	No .	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene	it contract?	6ь	<u> </u>
7a At any time during the tax year, was the found	dation a party to a prob	ubited tax shelter transa	action? Yes X	No	
<b>b</b> If 'Yes,' did the foundation receive any procee				N/A 76	- 1
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manage			<del></del>
and Contractors					
1 List all officers, directors, trustees, foundation					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other al	e account, llowances
BRUCE SARGENT	PRESIDENT	0.	0.		0
ONE DORCHESTER ROAD	0				
DARIEN, CT 06820					
JANET SARGENT ONE DORCHESTER ROAD DARIEN, CT 06820	VICE PRESIDE 0	0.	0.		0
		  -  -			
O Commenced in a fifty bished with a set of the set of		"			
2 Compensation of five highest-paid employees (of		on line 1 — see instructio	(d)Contributions to	<u>.</u>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense other al	e account, lowances
NONE					
				<del> </del>	
		7.5		<del></del>	
		<del></del>			
Total number of other employees paid over \$50,000	TEE 402061 1/	74646		Form 000	0

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see in		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
		_
Total number of others receiving over \$50,000 for professional services		
		0
PartiX-A* Summary of Direct Charitable Activities		
Let the foundation's four largest direct charitable activities during the tay year. Include relevant statistics	of information such as the number of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	in mormation such as the number of	Expenses
1 N/A		
2		
3		
4		
`		
Part IX-B   Summary of Program-Related Investments (see instru	ctions)	_
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
=		
N/A		
2		
All other program-related investments See instructions.		<del></del>
3		
Total. Add lines 1 through 3	<b>•</b>	0.
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see instructions.)	reign fol	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities.	1 a	240,708.
<b>b</b> Average of monthly cash balances	1 b	43,299.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	284,007.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	ļ <u>-</u>	_
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	284,007.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	4,260.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	279,747.
6 Minimum investment return. Enter 5% of line 5	6	13,987.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► and do not complete this part.)	ting four	ndations
1 Minimum investment return from Part X, line 6	1	13,987.
2a Tax on investment income for 2016 from Part VI, line 5	325. 61 1860 176	
<b>b</b> Income tax for 2016 (This does not include the tax from Part VI)	(京) (大)	
c Add lines 2a and 2b	2 c	890.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	13,097.
4 Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5 Add lines 3 and 4	5	13,097.
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	13,097.
Part XII Qualifying Distributions (see instructions)		
<ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:</li> <li>a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26</li> </ul>	1 a	124,000.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
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: a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	124,000.
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	890.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	123,110.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years		
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## Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	<b>(c)</b> 2015	<b>(d)</b> 2016
1 Distributable amount for 2016 from Part XI, line 7				13,097.
2 Undistributed income, if any, as of the end of 2016				13,097.
a Enter amount for 2015 only			0.1	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011 68, 275.	j			
<b>b</b> From 2012 71,348.				
c From 2013 96, 281.				
<b>d</b> From 2014 105, 531.				
e From 2015 117,500.				
f Total of lines 3a through e	458,935.			
4 Qualifying distributions for 2016 from Part				
XII, line 4. • \$ 124,000.				
a Applied to 2015, but not more than line 2a			0.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus		0.		
(Election required — see instructions)	0.			
<b>d</b> Applied to 2016 distributable amount				13,097.
e Remaining amount distributed out of corpus	110,903.			
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
			Ì	
6 Enter the net total of each column as		+		•
indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		j		
	569,838.		-	
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2016. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2017.				_
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by	i		İ	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
	<u> </u>			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	68,275.			
9 Excess distributions carryover to 2017.	33/2/31			
Subtract lines 7 and 8 from line 6a	501,563.			
10 Analysis of line 9				
<b>a</b> Excess from 2012 71, 348.			ł	
<b>b</b> Excess from 2013 96, 281.			]	
c Excess from 2014 105, 531.		1		
d Excess from 2015 117,500.		ł		
e Excess from 2016 110, 903.				<del></del>

Bort VIV District One AND JANET				06-155370	
Part XIV Private Operating Founda					N/A
1 a If the foundation has received a ruling or det is effective for 2016, enter the date of the	ermination letter that ruling	it is a private operati	ing toundation, and tr	ne ruling	
<b>b</b> Check box to indicate whether the founda	tion is a private ope	erating foundation d	lescribed in section	4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
income from Part I or the minimum investment return from Part X for	(a) 2016	<b>(b)</b> 2015	(c) 2014	<b>(d)</b> 2013	(6) 1014.
each year listed					
<b>b</b> 85% of line 2a					<u> </u>
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter			<u> </u>		
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	e in
assets at any time during th  Information Regarding Foundation Mana		structions.)			
a List any managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more th	an 2% of the total co than \$5,000) (See	ontributions received section 507(d)(2).)	by the foundation be	fore the
<b>b</b> List any managers of the foundation who owr a partnership or other entity) of which the	n 10% or more of the foundation has a 10	stock of a corporation	n (or an equally large	portion of the owne	rship of
NONE					
2 Information Regarding Contribution, Grant,	Gift, Loan, Scholarsh	ip. etc Programs			
Check here ► ☐ If the foundation only ma	akes contributions to p	preselected charitable	e organizations and o	does not accept unso	olicited
requests for funds If the foundation makes g complete items 2a, b, c, and d	ifts, grants, etc. (see	instructions) to indivi	iduals or organization	ns under other condit	ions,
a The name, address, and telephone number o	r e-mail address of th	ne person to whom ap	pplications should be	addressed:	-
SEE STATEMENT 7	<del></del>			·	
<b>b</b> The form in which applications should be	submitted and infori	mation and materia	ils they should inclu	de	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines:					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geograpl	hical areas, charital	ble fields, kinds of i	nstitutions, or othe	r factors <sup>.</sup>
SEE STATEMENT FOR LINE 2A					
BAA	TEE	EA0310L 12/16/16			Form <b>990-PF</b> (2016)

Part XV, Supplementary Information (co 3 Grants and Contributions Paid During the Y	ontinued) ear or Approved for Fut	ure Paymer	nt .	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year SEE ENCLOSED SCHEDULE VARIOUS ADDRESSES VARIOUS CITIES NY 10170	NONE		SEE ATTACHED	124,000.
Total			▶ 3	a 124,000.
<b>b</b> Approved for future payment	T	1	1	124,000.
Total	<u> </u>	1.	▶ 3	b

Part A	Analysis of income-Producing	ACUVILLES				
Enter gr	oss amounts unless otherwise indicated.	Unrelated	d business income	Excluded by	section 512, 513, or 514	(e)
<b>1</b> Pr	ogram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
а						
ь <u> —</u>		1				
c —		† †	<del></del>			· · · · · · · · · · · · · · · · · · ·
_d_	<del></del>	† †		<del>                                     </del>		<del>-</del>
	<del></del>	+ +		+ +		
, -		+ +		+ +		
' <u>-</u>	as and soutposts from sourcement assesses	<del></del>	<del></del>	-		· · · · · · · · · · · · · · · · · · ·
-	es and contracts from government agencies	<del> </del>				
	embership dues and assessments	<b>—</b>				
	erest on savings and temporary cash investments			14	279.	
-	vidends and interest from securities			14	11,387.	
	et rental income or (loss) from real estate					
<b>a</b> De	ebt-financed property					
b No	ot debt-financed property			1 1		
<b>6</b> Ne	t rental income or (loss) from personal property					
<b>7</b> Of	her investment income			18	195.	
-	n or (loss) from sales of assets other than inventory		<del></del>	18	79,551.	
-	et income or (loss) from special events.	<b> </b>	· · · · · · · · · · · · · · · · · · ·	+	19,331.	
	oss profit or (loss) from sales of inventory	<del> </del>				
	-	<b>-</b>		+		
	her revenue:	ļ				
a_		+ +		++		
ь_		1 1				<del></del>
c_						
d						
		1				
е						
` _	ibtotal Add columns (b), (d), and (e)				91,412.	
12 St	ubtotal Add columns (b), (d), and (e)				91,412. <b>13</b>	91,412.
12 St		ons )				91,412.
12 St 13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculate		shment of Exem	pt Purpose	13	91,412.
12 St 13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation.  VI-B Relationship of Activities to the	Accompli:			13 es	
12 St 13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation.  INI-B Relationship of Activities to the	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	
12 St 13 To (See wo Part X	o. Explain below how each activity for which is accomplishment of the foundation's exempt	Accompli:			13 es	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<del></del>								· ·	
de	scribed	rganization direct d in section 501(c o political organiz	) of the Code (or	ngage in any ther than secti	of the following w ion 501(c)(3) orga	ith any o nization	other organization s) or in section 5	า 27,	1	Yes	No
a Tr	ansfers	from the reporti	ng foundation to	a noncharitab	le exempt organiz	ation of	f				
(1)	Cash								1 a (1)		<u>X</u>
(2)	Other	r assets							1 a (2)		X
<b>b</b> Ot	her tra	nsactions.									-
(1)	Sales	of assets to a n	oncharitable exe	mpt organizat	ion				1 b (1)		_X_
(2)	) Purch	nases of assets fr	rom a noncharita	able exempt or	ganızatıon				1 b (2)		<u>X</u>
(3)	) Renta	al of facilities, eq	uipment, or othe	r assets					1 b (3)		X
(4)	) Reim	bursement arrang	gements						1 b (4)		<u>X</u>
(5)	) Loan	s or loan guarant	ees						1 b (5)		X
	•	rmance of servic		•	-				1 b (6)		X
c St	naring o	of facilities, equip	ment, mailing lis	sts, other asse	ts, or paid employ	/ees			1 c		X
<b>d</b> If the ar	the ans goods trans	swer to any of the , other assets, or s action or sharing	e above is 'Yes,' services given by arrangement, s	complete the the reporting fo how in column	following schedule bundation If the foundation of the value of the val	Colum ndation in the good	nn <b>(b)</b> should alw received less than ls, other assets,	ays show the fair market va or services re	fair market val alue in eceived	ue of	
(a) Line		(b) Amount involved			kempt organization		Description of trans			ngemen	ts
N/A			1		· · · · · · · · · · · · · · · · · · ·	<u> </u>	•	· · · · · · · · · · · · · · · · · · ·			
			1			İ			-		
				-		İ					
								_			
_					· · · · <del>-</del>						
						j					
							-				
-											
		<del></del>									
de	escribe	ndation directly or d in section 501(c complete the follo	c) of the Code (o	d with, or relate ther than sect	ed to, one or more to non 501(c)(3)) or i	ax-exem n sectio	ipt organizations n 527?		Yes	X	No
	(a)	Name of organiz	ation	<b>(b)</b> Ty	pe of organization	1	(c	<b>)</b> Description	of relationship		
N/A											
							<u> </u>				
				1			. [				
Sign	Under percorrect,	enalties of perjury, I de and complete Declarat	clare that I have exam tion of preparer (other	nined this return, in than taxpayer) is t	cluding accompanying s based on all information	chedules a of which p	and statements, and to reparer has any know	the best of my kr ledge	May the	IRS disc	cuss
Here	X	12.112	and I		1200, 12,20	// P	PRESIDENT		this return preparer	shown	below
	Signat	ture of officer or trustee	- Jes		Date		Title		(see inst	Yes	No
		Print/Type preparer's		Prepare	r's signature	. /	Date	Check	If PTIN	1	
ם בי		DAVID BELK	TN	דעוברו	D BELKIN	l Bel	11-8-1	self-employe		3500	
Paid	×0×	Firm's name	REITMAN &			2,000			L1-3460692		
Prepa		Firm's name Firm's address	420 LEXINO	_			<u>-</u>		1 3400032		
Use O	nıy	i iiii s audiess	NEW YORK,	NY 10170	141 1400			Phone no	(212) 599-	0410	)
BAA		1	MEN IORK,	141 101/0			<del></del>	L	Form <b>9</b> 9		
									1 01111 3		( · ·)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

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

OMB No 1545-0047

2016

Name of the organization BRUCE AND JANET SARGENT		Employer identification number
CHARITABLE FOUND	ATION	06-1553701
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	ivate foundation
•	501(c)(3) taxable private foundation	
Check if your organization is covered by the General	ral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) or	ganization can check boxes for both the General Rule and a	Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-E	EZ, or 990-PF that received, during the year, contributions to lete Parts I and II. See instructions for determining a contrib	staling \$5,000 or more (in money or outor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi	501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup b, that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 the year, total contributions of the greater of (1) \$5,000 or (190-EZ, line 1 Complete Parts I and II	. 16a. or 16b. and that
For an organization described in section 5 during the year, total contributions of mor purposes, or for the prevention of cruelty	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received e than \$1,000 <i>exclusively</i> for religious, charitable, scientific, to children or animals. Complete Parts I, II, and III	from any one contributor, literary, or educational
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose Don't complete.	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribute the total contributions that were received during the year for any of the parts unless the <b>General Rule</b> applies to this organish, etc., contributions totaling \$5,000 or more during the y	itions totaled more than an <i>exclusively</i> religious, anization because
990-PF), but it <b>must</b> answer 'No' on Part IV, I	the General Rule and/or the Special Rules doesn't file Sche line 2, of its Form 990; or check the box on line H of its Forn e filing requirements of Schedule B (Form 990, 990-EZ, or 9	n 990-EZ or on its Form 990-PF,

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part
Name of org	AND JANET SARGENT	-	er identification number 553701
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space		.555701
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRUCE & JANET SARGENT		Person
	1 DORCHESTER ROAD	\$ <u>28,170</u>	! ' 보
	DARIEN, CT 06820	•	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BRUCE & JANET SARGENT		Person Payroll
	1 DORCHESTER ROAD	\$25,014.	Noncash X
	DARIEN, CT 06820		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BRUCE & JANET SARGENT		Person Payroll
	1 DORCHESTER ROAD	\$33,000.	Noncash X
	DARIEN, CT 06820		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BRUCE & JANET SARGENT		Person Payroll
	1 DORCHESTER ROAD	\$21,990.	Noncash X
	DARIEN, CT 06820		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll
		\$ 	Noncash (
			(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
	 	\$	Noncash
			(Complete Part II for noncash contributions)
BAA	TEEA0702L 08/09/16	Schedule B (Form 99	0. 990-EZ. or 990-PF) (2016)

1 to

of Part II

Name of organization
BRUCE AND JANET SARGENT

06-1553701

Employer identification number

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
1	1000 SHARES EMC	\$_	28,170.	6/20/16
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
2	25000 CALIFORNIA CNTY CALIF TOB SECU MUNICIPAL BONDS	\$_	25,014.	6/27/17
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3	2000 SHARES HEWLETT PACKARD ENTERPRISE	\$_	33,000.	6/27/17
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4	500 SHARES APPLIED MATERIALS INC	\$_	21,990.	6/14/17
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_		
BAA	Sche	dul	e B (Form 990, 990-E2	, or 990-PF) (2016)

	3 (Form 990, 990-EZ, or 990-PF) (2016)		Page 1 to 1 of Part III
tame of organ	nization AND JANET SARGENT		Employer identification number $06-1553701$
Pán III.		ne year from any one contribute ompleting Part III, enter the total o (Enter this information once. See i	ations described in section 501(c)(7), (8), or. Complete columns (a) through (e) and f exclusively religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a)	(6)	(6)	(d)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift	Relationship of transferor to transferee
ļ	i i alibieree 5 maille, adures	7	relationship of transferor to transferee

2016	FEDERAL STATEMENTS	PAGE 1
CLIENT SARGENT	BRUCE AND JANET SARGENT CHARITABLE FOUNDATION	06-1553701
11/07/17 STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		03·12PM
OTHER INVESTMENT INCOME	(A)         (B)         NET           REVENUE         INVESTMENT         INCOME           PER BOOKS         INCOME         INCOME   TOTAL \$\frac{\$ 195.}{\$ 195.} \frac{\$ \$ 0.}{\$ \$ 0.}	(C) ADJUSTED NET INCOME \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 1,750. \$ 1,750. \$  TOTAL \$ 1,750. \$ 1,750. \$  (C)  INVESTMENT ADJUSTED NET INCOME NET INC	
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		
EXCISE TAX FORRIGN TAX	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 111. \$ 111.  100. 100.  TOTAL \$ 211. \$ 211.	(D) CHARITABLE PURPOSES  0. \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
PARTNSHIPS - INVESTMENT	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 305. \$ 305.  TOTAL \$ 305. \$ 305. \$ 305. \$ \$ 05.	

2016

# **FEDERAL STATEMENTS**

PAGE 2

**CLIENT SARGENT** 

BRUCE AND JANET SARGENT CHARITABLE FOUNDATION

06-1553701

11/07/17

03 12PM

STATEMENT 5 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

COST ADJUSTMENT FOR CONTRIBUTED SECURITIES

TOTAL \$ 68,790.

# STATEMENT 6 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	(D) NOW	(C) DATE	(D) DATE
DESCRIPTION	ACQUIRED	ACQUIRED	SOLD
ALS INC	PURCHASED	10/12/2012	6/15/2017
	PURCHASED	5/07/2002	7/28/2016
	PURCHASED	1/23/2006	9/13/2016
GS INC	PURCHASED	11/25/2013	11/25/2016
L VALUE TR INC	PURCHASED	9/26/2016	9/26/2016
L VALUE TR INC	PURCHASED	12/27/2016	12/27/2016
	PURCHASED	3/24/2017	3/24/2017
LUE TR INC	PURCHASED	6/27/2017	6/27/2017
RD ENTERPRISE	PURCHASED	11/23/2012	6/27/2017
	PURCHASED	11/23/2012	6/27/2017
	PURCHASED	7/23/2009	1/30/2017
COMPANY	PURCHASED	11/23/2012	5/01/2017
SY COMPANY	PURCHASED	11/23/2012	3/31/2017
	PURCHASED	5/22/2014	5/01/2017
	PURCHASED	1/01/2017	6/30/2017
AIN	PURCHASED	1/01/2015	6/30/2017
	DESCRIPTION ALS INC  GS INC L VALUE TR INC L VALUE TR INC L VALUE TR INC LUE TR INC RD ENTERPRISE D ENTERPRISE COMPANY GY COMPANY INCORP DSS AIN	ALS INC PURCHASED	ACQUIRED   ACQUIRED   ACQUIRED

2016

### **FEDERAL STATEMENTS**

**BRUCE AND JANET SARGENT CHARITABLE FOUNDATION** 

PAGE 3 06-1553701

11/07/17

**CLIENT SARGENT** 

03·12PM

#### STATEMENT 7 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

THE BRUCE AND JANET SARGENT FOUNDATION

NAME:

BRUCE AND JANET SARGENT FOUNDATION BRUCE AND JANET SARGENT FOUNDATION

CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE: 1 DORCHESTER ROAD

TELEPHONE:

DARIEN, CT 06820 (212) 599-0410

E-MAIL ADDRESS: FORM AND CONTENT:

NO SPECIFIC FORM NO SPECIFIC DEADLINE

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS:

NONE

. BRUCE AND JANE SARGENT CHARITABLE FOUNDATION FORM 990-PF CONTRIBUTIONS PAID 7/1/16- 6/30/17

KENYON COLLEGE	1,000	EDUCATIONAL INSTITUTION
GAME CONSERVANCY USA	40,000	SOCIAL BENEFITS CHARITY
NEW YORK BOTANICAL GARDEN	1,500	SOCIAL BENEFITS CHARITY
DARIEN HISTORICAL SOCIETY	1,000	SOCIAL BENEFITS CHARITY
FORDHAM BUSINESS SCHOOL	1,000	EDUCATIONAL INSTITUTION
BRUNSWICK SCHOOL	1,000	EDUCATIONAL INSTITUTION
BOSTON COLLEGE (MCMULLEN MUSEUM)	1,000	EDUCATIONAL INSTITUTION
564 PARK AVENUE PRESERVATION FUND	2,000	SOCIAL BENEFITS CHARITY
MADISON AVE PRESBYTERIAN CHURCH	3,500	RELIGIOUS CHARITY
CAMP DUDLEY	500	SOCIAL BENEFITS CHARITY
WOUNDED WARRIORS	500	SOCIAL BENEFITS CHARITY
ANNUAL BISHOPS APPEAL CT	15,000	RELIGIOUS CHARITY
COLUMBIA BUSINESS SCHOOL	10,000	EDUCATIONAL INSTITUTION
STAMFORD SYMPHONY	1,500	SOCIAL BENEFITS CHARITY
ST. THOMAS MORE BUILDING FUND - DARIEN	20,000	SOCIAL BENEFITS CHARITY
KOLBE CATHEDRAL	20,000	RELIGIOUS CHARITY
VERMONT BISHOP'S APPEAL	1,000	RELIGIOUS CHARITY
INNER CITY FOUNDATION	1,500	SOCIAL BENEFITS CHARITY
AT HOME - DARIEN	2,000	SOCIAL BENEFITS CHARITY
	\$ 124,000	