

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.



	For	caler	ndar year 2016 or tax year beginning Novemb	per 1,	2016, and		October 31	, 20 17
_	Na	me of to	pundation			A Employe	r identification numb	er
7.3			and Bob Donnalley Charitable Foundation, Inc				061074091	
	Nu	mber an	d street (or P.O. box number if mail is not delivered to street address)		Room/suite	B Telephon	e number (see instruct	ions)
			Unit 20				203-532-0415	<u> </u>
\mathcal{V}^{q}	_ City	y or tow	n, state or province, country, and ZIP or foreign postal code			C If exempt	on application is pend	ling, check here ▶ 🔲
J	Gre	enwich	n CT 06831					
	G	Check	call that apply: Initial return Initial return	of a former p	ublic charity	D 1. Foreign	organizations, check	here ▶□
			☐ Final return ☐ Amended r	return		2 Formur	n organizations meeting	a the 95% test
			Address change Name char	nge	,	check	here and attach compl	utation • •
	H	Check	type of organization: Section 501(c)(3) exempt p	rivate founda	tion (E if private	foundation status was	
		Section	on 4947(a)(1) nonexempt charitable trust	able private f	foundation	section 5	07(b)(1)(A), check here	▶∐
	ī	Fair n	narket value of all assets at J Accounting method	: 🛛 Cash [Accrual	F If the four	idation is in a 60-mont	th termination
		end o	f year (from Part II, col. (c),	-			tion 507(b)(1)(B), chec	k here ▶ 🔲
		line 16	6) ► \$ \$1,409,651 (Part I, column (d) must be	on cash basis.)			
	Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue a		·		(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	expenses pe	ar (15) Nei	t investment	(c) Adjusted net income	for charitable purposes
			the amounts in column (a) (see instructions).)	books	i "	COME	iii come	(cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)	13	1,300			
		2	Check ► ☐ if the foundation is not required to attach Sch. B	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,			
		3	Interest on savings and temporary cash investments		1			
		4	Dividends and interest from securities	2	3.973	23,973		
		5a	Gross rents		.0,0,0	20,010		
		ь	Net rental income or (loss)					
	•	6a	Net gain or (loss) from sale of assets not on line 10	7	6,229			
	Ž	b	Gross sales price for all assets on line 6a 100,000		0,225			
	76	7	Capital gain net income (from Part IV, line 2)			70.000		
	Revenue	8	Net short-term capital gain			76,229		
		9			- 		· · · · · · · · · · · · · · · · · · ·	
		10a	Gross sales less returns and allowances					
		b	Less: Cost of goods sold					
		C	Gross profit or (loss) (attach schedule)				<u>-</u>	
7		11	Other income (attach schedule)		- 			
X	`	12	Total. Add lines 1 through 11		4 500	400 000		
0	\dashv	13	Compensation of officers, directors, trustees, etc.		1,502	100,202		
\bigcirc	Expenses	14	Other employee salaries and wages					
0	2	15	Pension plans, employee benefits			Rec in B	atching/ Auc I	0.0.2010
0	8	16a	Legal fees (attach schedule)			Corres	Ogaen Mulli	3 /1/10
Γ	ŭ	h	Accounting from (attack and add)					
Uj	9	C	Other professional fees (attach schedule)					
æ ~	ati	17	Interest					
%U% 87.	st	18	Taxes (attach schedule) (see instructions)		620			
∞. •	and Administrative	19	Depreciation (attach schedule) and depletion		630	630		
∞ ○	Ē	20	Occupancy			···		
	A	21	Travel, conferences, and meetings					
00.1 Sep	힏	22	Printing and publications					
	ā	23						
90		24	Other expenses (attach schedule)		620			
髪の	perating		Add lines 13 through 23		630	630		
Ž, vo	ğ	25						
≰ →	ō	26 26	Contributions, gifts, grants paid		8,245			
SCANNED 41500	\dashv	27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	81	8,875	630		
ઁજ		_						l i
က		8	Excess of revenue over expenses and disbursements	143	2,627			ļ
CV		b	Net investment income (if negative, enter -0-) .			99,572		 - -
ぜ			Adjusted net income (if negative, enter -0-) work Reduction Act Notice, see instructions.					orm 990-PF (2016)
-	- UI	4-aheij		C	at. No. 11289X		Fo)m) 350/

P	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		End o	f year
		Should be for disa-of-year amounts only. (Ode insulactions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	52,708	152,686	152,686
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	ļ į		
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	Ь	Investments - corporate stock (attach schedule)	249445	292,094	1,256,965
	С	Investments corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item l)	302,153	444,780	1,409,651
	17	Accounts payable and accrued expenses			
Ø	18	Grants payable			1
Ę	19	Deferred revenue		·	
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe >)			
	23	Total nabilities (add lines 17 through 22)	0	0	İ
ဟ		Foundations that follow SFAS 117, check here ▶ □			
8		and complete lines 24 through 26 and lines 30 and 31.			
<u>a</u>	24	Unrestricted	302,153	444,780	
Balances	25	Temporanly restricted			
	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here ▶ □			
rF		and complete lines 27 through 31.			
SO	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
188	29	Retained earnings, accumulated income, endowment, or other funds			
7	30	Total net assets or fund balances (see instructions)	302,153	444,780	1
ž	31	Total liabilities and net assets/fund balances (see	}		
		instructions)	302,153	444,780	
	rt III	Analysis of Changes in Net Assets or Fund Balances	(-) 1: 00 (
'	ond-	I net assets or fund balances at beginning of year—Part II, colur	nn (a), line 30 (must	agree with	
_		of-year figure reported on prior year's return)		<u> </u>	302,153
	Ente	r amount from Part I, line 27a		2	142,627
3	Otne	er increases not included in line 2 (itemize)	~~~~~~	3	0
_	Add	innes 1, 2, and 3		· · · · 4	444,780
5 R	Decr	eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F	Sad II. as boss of AN "	5	0
	TOTAL	The assets of lund balances at end of year (line 4 minus line 5)—F	art II, column (b), lin	e 30 6	440,780

		ne kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1288 shares Fidelity 500 Ind			D	Various	12/01/2016
b	Distributions on 500 Index F	und		D	Various	Various
C	 			ļi		
<u>d</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		or (loss) minus (g)
а	100,000			29,771	 	70,22
b	6,000			0		600
C						
d	· · · · · · · · · · · · · · · · · · ·		···			
θ	Complete only for spects sha	husing goin in column (h) and aumad hu	Al- 2	40/04/00	 	···
	(f) F M.V. as of 12/31/69	Owing gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Exce	ss of col. (i) I. (j), if any	col. (k), but not	(h) gain minus less than -0-) or om col. (h))
а					· - · · · · · · · · · · · · · · · · · · 	
b			···			
C						· · · · · · · · · · · · · · · · ·
d						
θ						
2	Capital gain net income o		so enter in Pa nter -0- in Pa		2	76,22
3	If gain, also enter in Part	n or (loss) as defined in sections 1. I, line 8, column (c) (see instruction of the c)	ons). If (loss), enter -0- in)		
_						
or o	ptional use by domestic pr	ler Section 4940(e) for Reductivate foundations subject to the se	ed Tax on h	let Investment		
or o sect	otional use by domestic prion 4940(d)(2) applies, leave to foundation liable for the	vate foundations subject to the se e this part blank. section 4942 tax on the distributal	ed Tax on one ction 4940(a)	Net Investment tax on net invest fany year in the b	Income ment income.)	☐ Yes 🔀 N
or o sect	otional use by domestic prion 4940(d)(2) applies, leavine foundation liable for the s," the foundation does not	vate foundations subject to the se e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do	ed Tax on one ction 4940(a) ble amount or not complete	tax on net invest f any year in the b this part.	income ment income.) pase period?	☐ Yes 😡 No
or o sect /as t "Yes	ptional use by domestic prion 4940(d)(2) applies, leavene foundation liable for the s," the foundation does not Enter the appropriate among the period years.	vate foundations subject to the se e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b)	ed Tax on Nation 4940(a) ble amount of not complete see the instri	tax on net invest f any year in the bothis part. uctions before ma	income ment income.) pase period? aking any entries.	(d)
or o sect /as t "Yes	otional use by domestic prion 4940(d)(2) applies, leaver the foundation liable for the s," the foundation does not Enter the appropriate ame (a) Base period years and year year (or tax year beginning in	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions	ction 4940(a) ble amount or not complete see the instr	f any year in the bothis part. uctions before many fronchantable-use as	income ment income.) pase period? aking any entries. (col. (b) d	(d) button ratio vided by col. (c))
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or o sect as t "Yes	otional use by domestic price of the state of the foundation liable for the state of the state o	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions 92,4 113,4	ction 4940(a) ble amount or not complete see the instruction Net value of 105 105 1779	f any year in the bothis part. (c) If noncharitable-use as 1,12 1,18 1,18 1,07	income ment income.) pase period? aking any entries. pasets (col. (b) d 9,807 7,586	.0952 .0888
or o sect /as t "Yes	potronal use by domestic protein displayed prices and the foundation liable for the series," the foundation does not a series and the foundation of the	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions 92,4 113,7 106,7 94,1	ction 4940(a) ble amount or not complete see the instruction Net value of 105 105 1150	tax on net investment tax on net invest f any year in the bothis part. uctions before ma (c) f noncharitable-use as 1,12 1,18 1,18 1,07 98	income ment income.) pase period? aking any entries. Sets (col. (b) d 9,807 7,586 4,236 2,001 3,753	(d) Ibution ratio vided by col. (c)) .0818 .0952
or o sect /as t "Yes 1 Cale	ptional use by domestic prion 4940(d)(2) applies, leavene foundation liable for the s," the foundation does not Enter the appropriate among (a) Base period years and year local year (or tax year beginning in 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ratio	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions 92,4 113,4 73,4	ction 4940(a) ble amount or not complete see the instruction Net value or 105 105 179 1511 150	f any year in the bothis part. (c) If noncharitable-use as 1,12 1,18 1,07 98 Line 2 by 5, or by	income ment income.) pase period? aking any entries. Sets (col. (b) d 9,807 7,586 4,236 2,001 3,753	(d) sbutton ratio vided by col. (c)) .0818 .0952 .0902 .0888 .0747
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Section of	potional use by domestic protein 4940(d)(2) applies, leaven the foundation liable for the serious the foundation does not the foundation does not the enter the appropriate amoundar year (or tax year beginning in 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ration number of years the found full the foundation of the foundat	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions 92,4 113, 106,7 94,5 for the 5-year base period—divided dation has been in existence if less charitable-use assets for 2016 from	ction 4940(a) ble amount or not complete see the instruction Net value of 105 105 105 105 105 105 105 105 105 105	tax on net investment tax on net invest f any year in the bothis part. uctions before ma (c) If noncharitable-use as 1,12 1,18 1,18 1,07 98	income ment income.) pase period? aking any entries. Sets (col. (b) d 9,807 7,586 4,236 2,001 3,753 2 the 3 4	(d) subution ratio vided by col. (c)) .0818 .0952 .0902 .0888 .0747 .434 .086 1,246,33
yas ti "Yes 1 Cale	ptional use by domestic prison 4940(d)(2) applies, leavene foundation liable for the s," the foundation does not Enter the appropriate ame (a) Base period years indar year (or tax year beginning in 2015 2014 2013 2012 2011 Total of line 1, column (d) Average distribution ration number of years the foundation of the period years in the foundation of the period years in the foundation of years the foundation of years the foundation of the period years in the foundation of years the years the foundation of years the y	e this part blank. section 4942 tax on the distributal qualify under section 4940(e). Do bunt in each column for each year; (b) Adjusted qualifying distributions 92,4 113, 106,7 94,6 73,6 for the 5-year base period—divided dation has been in existence if less charitable-use assets for 2016 from	ction 4940(a) ble amount or not complete see the instruction 1955 105 105 111 150 1 the total on the than 5 years In Part X, line	tax on net investment tax on net invest f any year in the bothis part. uctions before ma (c) In noncharitable-use as 1,12 1,18 1,18 1,07 98	income ment income.) pase period? aking any entries. sets (col. (b) d 9,807 7,586 4,236 2,001 3,753 2 the 3 4 5	(d) subution ratio reded by col. (c)) .0818 .0952 .0902 .0888

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геде	7

Part '		ee inst	ruction	1S)
1a'	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1,991	
3	Add lines 1 and 2		1,991	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1,991	<u> </u>
6	Credits/Payments:			1
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 600			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		600.	<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0	<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		1,391	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			<u> </u>
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities	14.1	IV-0	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	18	Yes	✓
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (sinstructions for the definition)?	ee 1L		/
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	als		
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	10	:	/
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1	
	(1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$	0	1	1
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	d		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	~
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	of 3	-	1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	⊢ −		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	41		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		1
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	1	1	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the	nat		l
	conflict with the state law remain in the governing instrument?	6	/	
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 X	W 7	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	Connecticut		[
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene			<u> </u>
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	81		<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			_
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Ye	- 1		1 .
	complete Part XIV	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	1		1
	names and addresses	. 10		

Part	VII-A Statements Regarding Activities (continued)			
•			Yes	No
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		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
46	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
14	Website address None. 990PF available through Guidestar.org	35320		
17	71D. 4 b	0683		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	0003		▶ □
	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	-	Yes	No
_	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		į	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			-
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	9 L	ļ	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
Ü	► 20 , 20 , 20 , 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			}
	at any time during the year?			
ь	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		}	Į
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		ļ	
_	foundation had excess business holdings in 2016.)	3b	<u> </u>	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	1
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	}	-
		10	ı	. 🗸

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Part	VII-B 'Statements Regarding Activities	for V	hich Form	4720 I	May Be R	equire	d (conti	nued)			
5a	During the year did the foundation pay or incur a	•									
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								,		Ì
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration drive?							•			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								.		1
	(4) Provide a grant to an organization other than										
	section 4945(d)(4)(A)? (see instructions)						☐ Yes	₩ No			
	(5) Provide for any purpose other than religious,										
	purposes, or for the prevention of cruelty to o						☐Yes	₩ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in			
	Regulations section 53.4945 or in a current notice					-			5b		
	Organizations relying on a current notice regarding	_									
С	If the answer is "Yes" to question 5a(4), does to			-			_	_			
	because it maintained expenditure responsibility		-			• •	Yes	☐ No	1 1	ı	
0-	If "Yes," attach the statement required by Regula					•					
6a	Did the foundation, during the year, receive any		-	-		emiums	_	,			İ
L	on a personal benefit contract?						∐ Yes	_ Mo	I		<u> </u>
b	Did the foundation, during the year, pay premium	ıs, dire	ctly or indire	ctly, on	a personal	penefit	contract	7.	6b		✓_
7.	If "Yes" to 6b, file Form 8870.					O		□	1 1		1
	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes	_			
	VIII Information About Officers, Direct								7b		
i di	and Contractors	iors, i	rustees, r	Juliua	LIOII MAIN	agers,	inginy r	alu L	iiipioy	,,,	
1	List all officers, directors, trustees, foundation	mana	gers and th	eir com	nensation	lsee in	estruction	ns).			
			e, and average		npensation		Contribution		(a) Evan	nsæ acco	
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit erred compe			dio wance	
Rober	G Donnalley Jr				····						
	Ln Unit 20 Greenwich CT 06831	Pres &	Dir 1 Hour		0			0			0
Jennif	er Donnalley										
40 Ett	Ln Unit 20 Greenwich CT 06831	Dir 1/4	Hr		0			0			0
Andre	w Donnalley c/o R Donnalley										
40 Ett	Ln Unit 20 Greenwich CT 06831	Dir 1/4	hr		0			0			0
Stever	B Lapiun										_
23 Bar	nes Rd Stamford CT 06902	Secty 8	Dir 1/2 hr		0			0			0
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se inclu	ided on li	ne 1—:	see instr	uction	s). If no	one, er	nter
		··· · ·	Oh) Title				(d) Contribu				_
(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v	veek 🐪	(c) Compe	nsation	employee plans and o			nse acco illowance	
			devoted to pe	osition			compens		0	uio 4101101	~
NONE					·						
					·						
	***************************************							-			
T-4-1	And and a second a		<u> </u>				L				
l Otal	number of other employees paid over \$50,000 .	• •	<u></u>	<u> </u>		<u> </u>	<u> </u>	<u>. </u>		0	
									Form 99	D-PF (2016

Form	990-	PΕ	(201	161

Page 7

Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	Part	VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	dation Managers, Highly Paid En	ploy ees ,
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 beneficianss served, conferences convened, research papers produced, etc. 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions. 3 All other program-related investments. See instructions.	3	Five highest-paid independent contractors for professional services ((see instructions). If none, enter "NON	E."
Total number of others receiving over \$50,000 for professional services Port 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 converted, research papers produced, etc. 1 NA 2 3 4 Port IX-B Summary of Program-Related Investments (see instructions) Describes the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 NIA 2 All other program-related investments. See instructions. 3 All other program-related investments. See instructions.		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	NONE			
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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2				
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List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2				
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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2				ļ
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences converted, research papers produced, etc. 1 N/A 2	•			
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 beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	Total :	number of others recogning over \$60,000 for professional continue		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	Totali	number of others receiving over \$50,000 for professional services .	<u> </u>	<u></u>
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. All other program-related investments. See instructions. All other program-related investments. See instructions.	Part	IX-A Summary of Direct Charitable Activities		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. All other program-related investments. See instructions. All other program-related investments. See instructions.	Link	the foundation? for planned durant charactele estimates during the terror land of	A shelish and information and the same base of	<u> </u>
2	orga	the foundation's four largest direct chantable activities during the tax year. Include relevan hizations and other beneficianes served, conferences convened, research papers produced.	nt statistical information such as the number of , etc.	Expenses
2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions. 3 Takel Add lines 1 there is 0.				
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.	• -:	va		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.				
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.	2 -			
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Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.	3			
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount Amount All other program-related investments. See instructions.	4			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount Amount All other program-related investments. See instructions.	4-			İ
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount Amount All other program-related investments. See instructions.				
All other program-related investments. See instructions. 3				
All other program-related investments. See instructions. 3 Total Add lines 1 through 9	Desc	inbe the two largest program-related investments made by the foundation during the tax year	ar on lines 1 and 2.	Amount
All other program-related investments. See instructions. 3	1 !	VA		
All other program-related investments. See instructions. 3				
All other program-related investments. See instructions. 3				
3	2			
3				
3	All of	her novem-related investments. See instructions		<u> </u>
Total Add lines 1 through 0		погриоднатичнацам штесятана. Это шеностопе.		
Total. Add lines 1 through 3	٠			
Total, Add lines 1 through 3				
	Total.	Add lines 1 through 3	 	

Part		ign found	lations,
-1	see instructions.) 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	10	4 205 277
b	Average of monthly cash balances	1a 1b	1,265,377
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	4 205 277
9	Reduction claimed for blockage or other factors reported on lines 1a and	10 -	1,265,377
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,265,377
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	-	1,205,377
•	instructions)	4	40.004
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,981
6	Minimum investment return. Enter 5% of line 5	6	1,246,396
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for		62,320
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)	oundano	113
1	Minimum investment return from Part X, line 6	1	62,320
2a	Tax on investment income for 2016 from Part VI, line 5		02,320
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b	1 1	
c	Add lines 2a and 2b	2c	1,991
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	60,239
4	Recoveries of amounts treated as qualifying distributions	4	00,239
5	Add lines 3 and 4	5	60,239
6	Deduction from distributable amount (see instructions)	6	00,239
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	-	
_	line 1	7	60,239
		1 4	60,235
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	88,245
b	Program-related investments—total from Part IX-B	1b	0,240
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	- -	
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	88,245
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	50,270
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	88,245
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	·····	

Part	Undistributed income (see instruction	ons)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
_	line 7		<u> </u>		60,239
2	Undistributed income, if any, as of the end of 2016:				ļ
a	Enter amount for 2015 only				
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011 24,819				
b	From 2012 40,911				l
C	From 2013				
d	From 2014				
0	From 2015				
f	Total of lines 3a through e	207,870			
4	Qualifying distributions for 2016 from Part XII,				
	line 4: ▶ \$ 88,245				
а	Applied to 2015, but not more than line 2a .				1
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				1
C	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2016 distributable amount				60,239
8	Remaining amount distributed out of corpus	28,006			00,200
5	Excess distributions carryover applied to 2016	20,000			
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)			!	
6	Enter the net total of each column as			•	
	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	235,876			
b	Prior years' undistributed income. Subtract	255,670			
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b. Taxable				
_	amount—see instructions				
_	Undistributed income for 2015. Subtract line				
•	4a from line 2a. Taxable amount—see	į.			
	instructions				
f		· · · · · · · · ·			
•	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be	İ			
	distributed in 2017	1			
7	l l				
•	Amounts treated as distributions out of corpus	j			
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be	}			
	required—see instructions)	,			
8	Excess distributions carryover from 2011 not				
0	applied on line 5 or line 7 (see instructions).				
9		24,819			
3	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
40		211,057			
10	Analysis of line 9:	l			
a	Excess from 2012 40,911	İ			
	Excess from 2013	1			
C	Excess from 2014				
d	Excess from 2015	1			
е	Excess from 2016 28,006	1			

Page	10
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Part	XIV Private Operating Founda	tions (see instru	ictions and Part	VII-A, question 9	0)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating	Í	
	foundation, and the ruling is effective fo	r 2016, enter the da	ate of the ruling .			,
b	Check box to indicate whether the four	ndation is a private	operating foundar	tion described in se	ction 4942(j)(3) or 7 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	each year listed			<u> </u>		7
b	85% of line 2a					
	Qualifying distributions from Part XII,				,	
	line 4 for each year listed			,	, ,	
d	Amounts included in line 2c not used directly	· · · · · · · · · · · · · · · · · · ·				
	for active conduct of exempt activities	•		1		
8	Qualifying distributions made directly				/	
	for active conduct of exempt activities.			1		
	Subtract line 2d from line 2c			,	/	
3	Complete 3a, b, or c for the			/		
	alternative test relied upon:					
а	"Assets" alternative test enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under			/		
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3			/		
	of minimum investment return shown in Part X, line 6 for each year listed		/	1		
С	"Support" alternative test—enter:		/			·····
_	(1) Total support other than gross					
	investment income (interest.					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt		/			
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization				ı	
	(4) Gross investment income		 			
Part	XV Supplementary Information	n (Complete th	is part only if t	he foundation h	ad \$5,000 or mo	re in assets at
	any time during the year-					
1	Information Regarding Foundation	Managers:				
a	List any managers of the foundation v	vho have contribu	ted more than 2%	6 of the total contr	ibutions received l	by the foundation
	before the close of any tax year (but o	nly if they have co	entributed more th	an \$5,000). (See se	ection 507(d)(2).)	
	G Donnalley Jr					
þ	List any managers of the foundation					ge portion of the
	ownership of a partnership or other er	itity) of which the	foundation has a	10% or greater inte	erest.	
NONE					 	
2	Information Regarding Contribution					
	Check here ► ☑ if the foundation	only makes contr	ibutions to prese	lected charitable of	organizations and	does not accept
	unsolicited requests for funds. If the foother conditions, complete items 2a, t	oundation makes	giπs, grants, etc.	(see instructions) t	o individuals or or	ganizations under
а	The name, address, and telephone nu	mper or e-mail ad	aress of the perso	on to whom applica	ations should be a	ddressed :
h	The form in which confications chart	ho submitted and	l information and	matariala Abarraka	uld include:	
U	The form in which applications should	DE SUDMINITECI AND	intermation and I	materiais they shol	uia include:	
c	Any submission deadlines:					
•	, i., dadinioolon deguines.					
d	Any restrictions or limitations on aw	ards, such as by	/ geographical ar	eas, charitable fie	elds, kinds of inet	itutions or other
	factors:	,	. Garagraphic	,		

Par	Supplementary Information (conti Grants and Contributions Paid During t	inued)	ad for End	ture Downant	
		If recipient is an individual		ture Payment	1
	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		
а	Paid during the year				İ
See a	ttached schedule - all operating grants	,		65 Receipents	88,245
	an operating grand			Control Point	
					1
		;			
	Total			D 20	00.045
b	Total	· · · · · · · · · · · · · · · · · · ·	• • •	▶ 3a 	88,245
					i o
	i		İ		
	j				
	Total	· · · · · · · · · · · · · · · · · · ·		D 2h	

inte	gros	ss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	- (e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1		gram service revenue:					
	a _		ļ				
	b -						
	d -						
	<u> </u>						
	-						ļ
	- :	Tops and postracts from any amount against					
2	_	Fees and contracts from government agencies hbership dues and assessments	·				
2		nbership dues and assessments est on savings and temporary cash investments					
4		dends and interest from securities				00.000	
-		rental income or (loss) from real estate:			14	23,973	
•		Debt-financed property					
		Not debt-financed property					
R		rental income or (loss) from personal property			-		
7		er investment income			 		
-		or (loss) from sales of assets other than inventory			18	76,229	
		income or (loss) from special events			10	19,229	
		ss profit or (loss) from sales of inventory					
		er revenue: a		· · · · · · · · · · · · · · · · · · ·			
• •	b					··········	
	- C						
	d -						****
	SE	total. Add columns (b), (d), and (e)				400.000	
12	Subi	Clai. Aug Columns ibr. iol. alio lei			•	100 202	1
12 13	Tota	II. Add line 12, columns (b), (d), and (e)		<u></u>	<u> </u>	100,202 13	
13	Tota	II. Add line 12, columns (b), (d), and (e)					
13 See	Tota work	II. Add columns (b), (d), and (e)	 s.)				
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV	II. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
3 ee ar Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
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13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20
13 See Par Line	Tota work t XV No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	100,20

Form 99		· · ·								ge 13
Part	XVI		n Regarding Tra ganizations	nsfers To and Tra	nsactions and	Relationship	s With Noncha	ritab		
1	in s			engage in any of the section 501(c)(3) org					Yes	No
а	_		porting foundation t	o a noncharitable ex	empt organizatio	n of:		ļ		į l
_		Cash	-					1a(1)		1
	(2)	Other assets .						1a(2)		V
b	Oth	er transactions:								
			a noncharitable ex	. •	<i></i>			1b(1)	<u> </u>	\
				able exempt organiz				1b(2)	<u> </u>	×
				er assets				1b(3)		Y
		Loans or ioan gua						1b(4)		1
								1b(5) 1b(6)		Y
c				sts, other assets, or				1c	 	1
ď				s," complete the following					fair m	arket
	valu	ie of the goods, of	ther assets, or serv	ices given by the rep	orting foundation	n. If the foundat	ion received less	than	fair m	narket
	valu	e in any transaction	on or sharing arrang	gement, show in colu	mn (d) the value	of the goods, of	ther assets, or se	rvices	rece	ved.
(a) Line	e no.	(b) Amount involved	(c) Name of nonc	hantable exempt organizat	ion (d) Des	cription of transfers,	transactions, and sha	ring arr	ang <i>e</i> m	ents
										
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									<u> </u>	
										
2a				filiated with, or relat			•	7 ٧		
b			following schedule					_ res		140
		(a) Name of organi		(b) Type of or	ganization	(c)	Description of relation	nship		
							· · · · · · · · · · · · · · · · · · ·			
			<u> </u>							
	16.	dan annaltan i	4-4-0-11	<u> </u>		<u> </u>				
Sign	con	uer penames of perjury, I rect, and complete. Decla	oeciare that I have examin aration of preparer (other th	ed this return, including acco an taxpayer) is based on all i	mpanying schedules ar nformation of which pre	no statements, and to parer has any knowle	the best of my knowled dge.	ige and	Delief, i	is true
		Keu 1 No	16	10/1/			May the li			
Here		nature of officer or trus		Date Date	7 President		(see instru			
De!-	٠.,	Print/Type preparer		Preparer's signature		Date		MIT		
Paid	oro-						Check if self-employed			
Prepared Use						T _{Fi}	rm's EIN ▶			
	~···)	Firm's address ▶					hone no.			

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

The Cory and Bob Donnalley Charitable Foundation, Inc

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

06-1074091

Organization type (check one):						
Filers o	f:	Section:				
Form 99	90 or 990-EZ	501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	90-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(7 ons.	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
Ø	For an organization or more (in money or contributor's total co	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 r property) from any one contributor. Complete Parts I and II. See instructions for determining a ontributions.				
Special	Rules					
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	contributor, during the contributions totaled during the year for al General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the sto this organization because it received nonexclusively religious, charitable, etc., contributions ore during the year				

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from Part I (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Name of organization

The Cory and Bob Donnalley Charitable Foundation, Inc

Employer identification number 06-1074091

Part II	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	2,000 shares of Reynolds American Stock (RAI)	\$ 131,300	6/23/17			
(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			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date receiv ed			
		\$				
(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			
		\$				

Name of organization Employer identification number Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Robert G Donnalley Jr Person **Payroll** 40 ETTL Lane Unit 20 Noncash Ø (Complete Part II for Greenwich CT 06831 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) **(a)** (c) (d) Νo. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Type of contribution Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Total contributions Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

TAX ID: 06-10749091

YEAR ENDED: OCT 31, 2017

THE CORY & BOB DONNALLEY CHARITABLE FOUNDATION INC

PART 1 LINE 1 CONTRIBUTIONS

Contribution of 2,000 shares of Reynolds American Stock

\$131,300

Received from R. G Donnalley Jr

40 Etti LN Unit 20 Greenwich CT 06831

PART II LINE 10 SECURITIES:

	10/31/16	10/31/17	10/31/17
	BOOK VALUE	BOOK VALUE	MKT VAL
12146.69 SHARES SPARTAN INDEX		182315	1,094,782
13434.86 SHARES SPARTAN INDEX	232,315		
1012 BERKLEY INSURANCE GROUP	7052	7052	69,403
1052 BRITISH AMERICAN TOBACCO		72420	67,749
200 SHARES EXXON	8353	8353	16,670
308 SHARES INDEP HOLD CO*	1725		8.262
	249,445	<u>271,865</u>	1,256,866
	***************************************	<u> </u>	

RECIPIENT-PUBLIC CHARITIES

PURPOSE: GENERAL OPERATING ACTIVITES

RECIPIENT-PUBLIC CHARITIES	PURPOSE: GENERAL OPERATING AC	MALLES	AMOUNT
RECEIPENT	ADDRESS		AMOUNT
1123_11 _111	ADDICEGO		
GREENWICH ARTS COUNCIL	299 Greenwich Ave	GREENWICH CT 06830	\$325
GREENWICH CAMPERSHIP FUND	Town Hall 101 Field Point Rd	GREENWICH,CT 06830	400
GREENWICH CHAPLAINCY SERVICES	70 PARSONAGE ROAD	GREENWICH, CT 06830	150
GREENWICH LIBRARY	101 West Putnam Ave	GREENWICH CT 06830	250
GREENWICH MEALS ON WHEELS	89 MAPLE AVENUE	GREENWICH CT 06830	100
GREENWICH Neighbors to Neighbors	248 EAST PUTNAM AVE	GRENWICH CT 06830	250
CALL A RIDE	37 LAFAYETTE PLACE	GREENWICH, CT 06830	100
FAMILY CENTERS	P.O. BOX 7550	GREENWICH, CT 06836	2,500
FAMILY RE ENTRY	9 MOTT AVE	NORWALK, CT 06850	250
GLENVILLE VOLUNTEER FIRE DEPARTMENT	266 GLENVILLE RD	GLENVILLE,CT 06831	100
KIDS-IN-CRISIS	105 PROSPECT STREET	GREENWICH, CT 06830	250
LIBERATION PROGRAMS	P O BOX 8030	STAMFORD, CT 06905	100
MEALS-ON-WHEELS	89 MAPLE AVENUE	Greenwich Ct -06830	100
PATHWAYS	175 Milbank Avenue	GREENWICH CT 06830	500
STAMFORD HOSPITAL FOUNDATION	707 SUMMER STREET	STAMFORD CT 06901	2,500
TRANSPORTATION ASSOCIATION OF GREENWICH	231 EAST PUTNAM AVENUE	GREENWICH, CT 06830	2 50
THE JOYCE THEATER	175 8TH AVENUE	NEW YORK, NY 10011	1,000
IVY BLADWIN DANCE COMPANY	191 Willoughby ST Apt 16D	NEW YORK< NY 11201	250
ACLU OF CONNECTICUT FOUNDATION	32 GRAND STREET	HARTFORD, CT 06106	10,000
CCFA	386 PARK AVE SOUTH	NEW YORK, NY 10016-8804	500
CHARITY WATCH	3450 n.Lake Shore Drive,Suite 2802	CHICAGO, ILL	50
FAIRNESS WEST VIRGINIA	405 Capital Street, Suite 405	CHARLESTON,W VA 25301	1,000
GIBBON CONSERVATION CENTER	PO Box 800249	SANTA CLARITA< CA 91380	100
INSTITUTE ON TAXATION AND ECONOMIC POLICY	1616P ST. N.W , SUITE 200	WASHINGTON, DC 20036	250
JENNY MUSEUM	48 Summer Street	Plymouth MA 02360	1 50
MEDICAL STUDENTS FOR CHOICE	2041 BANCROFT SUITE 201	BERKLEY, CA 94704	75 0
NARAL	56 ARBOR ST SUITE 412	HARTFORD CT06106	250
NATIONAL COALITION TO ABOLISH THE DEATH PENALTY		Washuington DC 20036	100
NATIONAL NETWORK OF ABORTION FUNDS	42 SEAVERNS AVENUE	BOSTON, MA 02130	75 0
VOLUNTEER REFERAL CENTER	161 Madison Ave	New York ,NY 10016	200
AVON THEATRE	8 SOUND SHORE DRIVE, SUITE #140		500
CURTAIN CALL	1349 Newfield Ave	Stamford CT 06905	100
LONG WHARF THEATRE	222 SARGENT DRIVE	NEW HAVEN, CT 06511	500
PENGUIN PLAYERS LTD	P.O.BOX 91	STONEY POINT, N.Y. 10980-00	5,000
ABINGDON THEATRE COMPANY	312W 36th St, 6th Floor	NEW YORK< NY 10018	100
ALL FOR ONE	1650 Broadway Suite 1210	NEW YORK< NY 10019	100
ART NEW YORK ATLANTIC THEATRE	575 EIGHTTH AVE SUITE 17 SOUTH	NEW YORK, NY10018	8, 7 50
CHERRY LANE THEATRE	336 WEST 20TH STREET	NEW YORK, NY 10011	1,210
ENSEMBLE STUDIO THEATRE	38 Commerce Street	NEW YORK,NY 10003	250 1,000
KEEN COMPANY	549 WEST 52ND STREET 520 8TH AVE, SUITE 328	NEW YORK, NY 10019 MNEW YORK, NY 10018	1,000
LAMA EXPERIMENTAL THEATRE CLUB	74A EAST 4TH STREET	NEW YORK, NY 10013	250
MANHATTAN THEATRE CLUB	453 WEST 16TH STREET	NEW YORK, N.Y. 10011	1,730
THE MINT THEATRE	311 West 43rd Street, 5th Floor	NEW YORK, N.Y. 10036	2,000
THE NEW 42ND	229 W 42ND STREET 10th Floor	NEW YORK, N.Y 10036	1,050
THE NEW GEORGES	109 West 27th Street Suite 9A	NEW YORK< NY 10001	100
THE NEW GROUP INC	410 West 42nd St	NEW YORK, NY 10036	1,000
THE PHOENIX THEATRE ENSEMBLE	303 PARK AVE SOUTH # 1065	NEW YORK, NY 10010	1,000
THE PLAY COMPANY	19W 44TH STREET	NEW YORK, NY 10036	2,500
PLAYWRIGHTS HORIZONS	416 WEST 42ND STREET	NEW YORK NY 10036	940
PLAYWRIGHTS REALM	520 Eighth Avenue Suite 320	NEW YORK< NY 10018	1 50
PRIMARY STAGES	584 9TH AVENUE	NEW YORK, NY 10036	2,500
ROUNDABOUT THEATRE CO	231 W 39TH STREET SUITE 1200	NEW YORK, NY 10018	10,000
SECOND STAGE	PO BOX 1807 ANSONIA STATION	NEW YORK, NY 10023	1,350
ST.ANN'S WAREHOUSE	45 MAIN ST, SUITE 375	BROOKLYN, NY 11201	1,400
SHAW FESTIVAL	PO BOX 628	LEWISTON, NEW YORK 14092	1 50
SIGNATURE THEATRE CO	424 WEST 42ND Street, 2nd Floor	NEW YORK, NY 10036	15,000
SOHO REP	401 Broadway Suite 300, NY NY 10013	New York NY	250
TACT	900 Broadway, Suite 905	NEW YORK,NY 10003	1,000
TCG	355 LEXINGTON AVE	NEW YORK NY 10017	100
VINEYARD THEATRE	309 EAST 26TH STREET	NEW YORK, N.Y. 10010	1,1140
BARRINGTON STAGE CO	PO BOX 946	BARRINGTON. MA 01230	500
THE CHESTER THEATRE COMPANY	PO Box 722	Chester, MA 01011-0722	150
AMERICAN FRIENDS OF THE NATIONAL POTRAIT GALLERY	C/O DONNALLEY 40 ETTL LN UNIT 20	GREENWICH,CT 06831	1,000
AMERICAN ASSOCIATES OF THE ROYAL NATIONAL THEAT	425 MARKET STREET	SAN FRANSICO,CA 94925	1,000
		,	\$88,245
	Total Contributions (65))		-

Total Contributions (65))