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.

		1, 2016	, and ending	NOV 30, 201	Open to Public Inspection
	of foundation		, and ending	A Employer identificati	
				A Chiproyer lucillineati	on adminer
	E SELANDER FOUNDATION			20-202499	8
	er and street (or PO box number if mail is not delivered to street		Room/suite	B Telephone number	
	EAST PUTNAM AVE, SUITE				
	r town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
	EENWICH, CT 06830				
G Che	ck all that apply Initial return		rmer public charity	D 1. Foreign organizatio	ns, check here
	Final return	Amended return		2. Foreign organizations	meeting the 959/ test
- Cho	Address change ick type of organization: X Section 501(c)(3) ex	Name change		Foreign organizations is check here and attach	computation Computation
_			····	E If private foundation s	
	market value of all assets at end of year J Accounti	Other taxable private foundaring method X Cash		under section 507(b)(•••
		ther (specify)	Accrual	F If the foundation is in	a 60-month termination
▶\$	20,326,134. (Part I, colu	mn (d) must be on cash t	pasis.)	under section 507(b)(1)(B), check here
Part	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	Income	Income	for chantable purposes (cash basis only)
-	Contributions, gifts, grants, etc., received	46,800.		N/A	(sees) basis siny)
/, 3	Check If the foundation is not required to attach Sch. B	,			
$\int_{\mathcal{L}}$ 3	Interest on savings and temporary cash investments				
4 14	Dividends and interest from securities	420,483.	420,483.		STATEMENT 1
\ '	5a Gross rents δD				
` <i>.</i>	b) Net rental income or (loss)	2 221 264			
e le	b Gross sales price for all 8,769,198.	2,321,964.	·····		
Revenue	b assets on line 6a 7 Capital gain net income (from Part IV, line 2)		2,321,964.		<u> </u>
~ ° €			2,321,904.		<u> </u>
		-			
10	Gross sales less returns and allowances				
	D Less Cost of goods sold				
İ	c Gross profit or (loss)				
11	Other income				
12		2,789,247.	2,742,447.		
13	The particular of the particul	0.	0.		0.
114	and magor		· · · · · · · · · · · · · · · · · · ·		
S 15	Pension plans, employee benefits a Legat-fees———————————————————————————————————		<u></u>		ļ
Sua	b Accounting the ECEIVEDTMT 2	7,500.	0.		
χ̈́	c Other professional fees	7,300.	<u> </u>		0.
9 17					
E 18	MAR 2 7 2018 TIMES 3	30,246.	10,246.		0.
. <u>t</u> 19	Depreciation and depletion				<u> </u>
· <u>Ē</u> 20	Occupancy OGDEN, UT				
ĕ 21					
E 22	• •				
Operating and Administrative Expenses	•	21,440.	20,000.		0.
1 24	, , , , , , , , , , , , , , , , , , , ,	FO 106	20.046		
රි ₂₅	expenses. Add lines 13 through 23	59,186.	30,246.		0.
	Contributions, gifts, grants paid Total expenses and disbursements	761,000.	<u>-</u>		761,000.
-	Add lines 24 and 25	820,186.	30,246.		761 000
27		220,100.	30,240.		761,000.
	a Excess of revenue over expenses and disbursements	1,969,061.			
	b Net investment income (if negative, enter -0-)		2,712,201.	••••••••••••••••••••••••••••••••••••••	
	c Adjusted net income (if negative, enter -0-)			N/A	
000504	11-23-16 LHA For Panerwork Reduction Act Notice				5 000 DE (0046)

"		and complete lines 24 through 26 and lines 30 and 31.		
ĕ	24	Unrestricted		
Balances	25	Temporarily restricted		
	26	Permanently restricted		
Fund		Foundations that do not follow SFAS 117, check here		
or F		and complete lines 27 through 31.		
	27	Capital stock, trust principal, or current funds	0.	0 .
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0 .
	29	Retained earnings, accumulated income, endowment, or other funds	14,602,104.	16,571,165
Net	30	Total net assets or fund balances	14,602,104.	16,571,165

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		····
	(must agree with end-of-year figure reported on prior year's return)	1	14,602,104
2	Enter amount from Part I, line 27a	2	1,969,061
3	Other increases not included in line 2 (itemize)	3	0
4	Add lines 1, 2, and 3	4	16,571,165
5	Decreases not included in line 2 (itemize)	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	16,571,165

Form **990-PF** (2016)

Total liabilities (add lines 17 through 22)
Foundations that follow SFAS 117, check here

31 Total liabilities and net assets/fund balances

14,602,104.

0

0.

16,571,165.

See the Part VI instructions

•		4			•		•		
Form 990-PF (2016) THE SELANDER FOUNDATION		/			<u> 2024</u>			Page 4	
Part VI Excise Tax Based on Investment Income (Section 494	10(a), 4	940(b), 4940(e)	, or 4	948 -	see i	nstru	ctior	ıs)	
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 ne	eces <u>sary</u> -s	ee instructions)							
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ 🗶 a	nd enter 1%	,	1		2	7,1	22.	
of Part I, line 27b									
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4	% of Part I	I, line 12, col (b) \int							
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only (Others ent	er -0-)		2	_			<u>0.</u>	
3 Add lines 1 and 2				3		2	7,1		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others ent	ter -0-)		4				0.	
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5		2	7,1	22.	
6 Credits/Payments									
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	38,5	14.				,	,	
b Exempt foreign organizations - tax withheld at source	6b			-					
c Tax paid with application for extension of time to file (Form 8868)	6c					•	1	,	
d Backup withholding erroneously withheld	6d								
7 Total credits and payments Add lines 6a through 6d				7		3	8,5	<u>14.</u>	
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is att	tached			8					
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				g					
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10		1	1,3	92.	
11 Enter the amount of line 10 to be. Credited to 2017 estimated tax	1:	1,392 - Refund	ed ►	11				0.	
Part VII-A Statements Regarding Activities									
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	ıslatıon or	did it participate or in	tervene	ın			Yes	No	
any political campaign?						1a		X	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses (see	instructions for the de	finition)2		1b		X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and copi	es of any matenals	oublisi	hed or					
distributed by the foundation in connection with the activities.									
c Did the foundation file Form 1120-POL for this year?						1 c		X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	ne year								
(1) On the foundation \blacktriangleright \$ (2) On foundation manage	rs 🕨 💲 _		0.						
e Enter the reimbursement (if any) paid by the foundation during the year for political expension	diture tax i	mposed on foundation	n				;		
managers ► \$O.									
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?					2		X	
If "Yes," attach a detailed description of the activities.									
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	ı ınstrume:	nt, articles of incorpo	ation, d	or				1	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges					3		X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ear?					4a		X	
b If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	r?					5		X	
If "Yes," attach the statement required by General Instruction T									
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either							ŧ	
 By language in the governing instrument, or 									
 By state legislation that effectively amends the governing instrument so that no mandato 	ory direction	ons that conflict with t	he state	e law				f	
remain in the governing instrument?						6		X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete F	Part II, col. (c), and I	Part XV	/		7	X		
8a Enter the states to which the foundation reports or with which it is registered (see instruct	ions) ► _								
CT									
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney 0	Beneral (or designate)				ŀ		ŧ	
of each state as required by General Instruction G? If "No," attach explanation						8b	X	ļ	
9 Is the foundation claiming status as a private operating foundation within the meaning of s			for cale	endar				‡ <u>_</u> _	7
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"					_	9		<u> </u>	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a scheen	dule listing t	heir names and addresse	<u>s</u> S	TMT		10	X	L	
					Fo	rm 99 0)-PF	(2016)	,

Pé	art 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► ROBERT W. SELANDER Telephone no ►			
	Located at ► 15 EAST PUTNAM AVE, SUITE 244, GREENWICH, CT ZIP+4 ►06	830		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	
	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,		Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country	<u> </u>		
Pa	art 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.	<u></u>	Yes	No
1 a	During the year did the foundation (either directly or indirectly)	ļ		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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? Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? 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			
ŀ	termination of government service, if terminating within 90 days) Yes X No	1		
L	olf 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)? N/A	.	1	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	ļ <u>.</u>	
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		1	
	before the first day of the tax year beginning in 2016?	1.	1	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
_	defined in section 4942(j)(3) or 4942(j)(5))			
а	i 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 \triangleright			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	İ		
	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) N/A	2b	1	
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	o 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) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	-	1	•
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u> </u>	<u>X</u> _
		~~		100401

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During, the year did the foundation pay or incur any amount to			Į.	
. (1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y6	es X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Y6	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?		Y6	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fall to qualify und	ler the exceptions described i	n Regulations	Į.	1 1
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check hi	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	Γ/A Υε	es 🔙 No 🕝	'
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d).		į	1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			1 1
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?	Y _E	es 🗶 No 👢	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
List all officers, directors, trustees, foundation managers and their of the second seco	compensation.			
, , , , , , , , , , , , , , , , , , , ,	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other
	to position	enter -0-)	compensation	allowances
				1
SEE STATEMENT 9		0.	0.	0.
	<u>.</u>			
		1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	· .	<u>. </u>
(a) Name and address of each amplayed hard they \$50,000	(b) Title, and average	4-1 0	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other
NONE				
		_		
	** · · · · · · · · · · · · · · · · · ·			
Total number of other employees paid over \$50,000			>	0

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes		
а	Average monthly fair market value of securities	1a	18,114,576.
b	Average of monthly cash balances	1b	18,114,576. 62,036.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	18,176,612.
е	Reduction claimed for blockage or other factors reported on lines 1a and		· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	18,176,612.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	272,649.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	17,903,963.
6	Minimum investment return. Enter 5% of line 5	6	895,198
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	d certair	1
1	Minimum investment return from Part X, line 6	1	895,198.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	27,122.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	27,122. 868,076.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	868,076.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	868,076.
P	art XII 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	761,000.
b	Program-related investments - total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	761,000
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	5	27,122. 733,878.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section
	4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				868,076.
				0007070.
2 Undistributed income, if any, as of the end of 2016			642,258.	
a Enter amount for 2015 only b Total for prior years			0427230.	
ij rotarioi prior years		0.		
3 Excess distributions carryover, if any, to 2016		0.		
1 '			,	
a From 2011	;	1 To the are		1.6
b From 2012		1 11 3 3 3		
c From 2013		" '		<i>'</i> ;
d From 2014			ĺ	
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from	-			
Part XII, line 4 ► \$ 761,000.			640.050	
a Applied to 2015, but not more than line 2a	<u></u>		642,258.	
b Applied to undistributed income of prior	:			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				118,742.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 €	0.	<u>.</u> :		
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'			<u></u>	
undistributed 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.		<u> </u>
e Undistributed income for 2015 Subtract line		***************************************		
4a from line 2a Taxable amount - see instr		-	0.	
1 Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				749,334.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			-
8 Excess distributions carryover from 2011				<u> </u>
not applied on line 5 or line 7	0.			1
			<u> </u>	
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0.			1
		<u> </u>	<u> </u>	
10 Analysis of line 9				1
a Excess from 2012				}
b Excess from 2013		1		‡
c Excess from 2014				1
d Excess from 2015				1
e Excess from 2016	<u> </u>		<u> </u>	5 000 DE (0016)

3 Grants and Contributions Paid During the Yo		Payment		
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	1 cospone		
u Tad damig me year				
AMERICARES		PUBLIC CHARITY	HEALTH PURPOSES	
88 HAMILTON AVE				
STAMFORD, CT 06906				30,000.
BOYS AND GIRLS CLUB OF GREENWICH		DUDI TO CUADIMY	SOCIAL PURPOSES	
4 HORSENECK LANE		POBLIC CHARITI	SOCIAL PURPOSES	
GREENWICH, CT 06830				5,000.
BUILDING ONE COMMUNITY		PUBLIC CHARITY	SOCIAL PURPOSES	
75 SELLECK STREET				
STAMFORD, CT 06902			***	500.
				İ
CHILDREN'S HOSPITAL OF LOS ANGELES		DIDLIC CUADITY	HEALTH PURPOSES	
4650 SUNSET BLVD. #29		FORDIC CHARITI	NEADIR FORFOSES	
LOS ANGELES, CA 90027				75,000.
CHILDRENS LITERACY INITIATIVE		PUBLIC CHARITY	SOCIAL PURPOSES	
2314 MARKET STREET				75.000
PHILADELPHIA, PA 19103 Total SEE CON	TINUATION SHE	し でで/より	▶ 3a	75,000. 761,000.
b Approved for future payment	111101711011 011 011111	7 1 0 1		701,000.
a reproved for fatale payment				
NONE				
· · · · · · · · · · · · · · · · · · ·		-		
Total			► 3b	0.

ivities	A	Producing	of Income-	nalvsis	Ana	Part XVI-A
	•	i i oddonig		1017313	7116	I TOTAL TOTAL PARTY

inter gross amounts unless otherwise indicated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Aniodit	code	Amount	- Idilotion moonic
a	_				
b	_				
C	_ \				
d	_				
e	_				
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		<u> </u>	14	420,483.	•
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	2,321,964.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C	1 1				
d					
6					
12 Subtotal Add columns (b), (d), and (e)			0.	2,742,447.	0
13 Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	2,742,447
(See worksheet in line 13 instructions to verify calculations)				

7	the foundation's exempt purposes (other than by providing funds for such purposes)							
								

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relations	hips With Nonch	naritable	
1 Did the ord			of the followin	g with any other organization	an decombed in cost	unn 501/a\ af	Vc	s No
				y with any other organization. 7, relating to political organ		011 30 1(0) 01	116	3 110
	from the reporting found				iizatioii5 '			
(1) Cash	non the reporting round	ation to a nonchanta	nie exempt ord	Janization of			12(1)	† x
(2) Other	accate						1a(1)	$\frac{x}{x}$
b Other trans							1a(2)	
		ble evernt ergenize	tion				16/1	X
	of assets to a noncharita	• •					1b(1)	X
	ases of assets from a no		rganization				1b(2)	$\frac{X}{X}$
	l of facilities, equipment,						1b(3)	$\frac{\lambda}{X}$
	oursement arrangements						1b(4)	$\frac{X}{X}$
	s or loan guarantees rmance of services or me	omborobio or fundras	aina aallaltatia				1b(5)	$\frac{X}{X}$
	facilities, equipment, ma						1b(6)	$\frac{X}{X}$
•		•		dule Column (b) should al	wave chair the foir n	nortest value of the good	1c	
				ed less than fair market valu				
) the value of the goods,			eu 1655 than ian market valt	de in any transaction	or snaring arrangemen	t, silow iii	
·	(b) Amount involved	,		exempt organization	(d) Description	of transfers, transactions, a	and shanno arrang	ements
(2) 2	(b) / module miles	(6)	N/A	oxompt organization	(a) bescription	or dansiers, dansactions, a	no snamy arang	
								
						·····		
		-						
-		 						
			,					
				· · · · · · · · · · · · · · · · · · ·				
								
			· -					
2a Is the four	ndation directly or indirec	tly affiliated with or	related to one	or more tax-exempt organ	izations described			
	501(c) of the Code (othe	•	•	• •	izaciono accomboa		Yes	X No
	emplete the following sch	· ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
<u>B</u> 11 100, 00	(a) Name of org			(b) Type of organization		(c) Description of relation	nship	
	N/A	<u>,</u>		(-, -, -,		(-)	<u>.</u>	
								
	•					_		
	 							
Under	penalties of penury, Leeclare	that I have examined th	ıs retum, ıncludır	ng accompanying schedules and	i statements, and to the	best of my knowledge		
Sign and be	elief, it is true, correct and co	mplete Declaration of pi	reparer (other tha	n taxpayer) is based on all inform	mation of which prepare	r nas any knowledge	May the IRS disci return with the pr	eparer
Here		Delande		1 3/23/18	CHAIR		shown below (see	No No
Sign	nature of officer or trustee	9		Date	Title	~~~~ [
	Print/Type preparer's n		Preparer's s			Check If PTI	IN	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0	, A	Date 3/22/10	self- employed		
Paid	JOHN M. DA	NISH	John	M Danish	1 12 /18		0017347	12
Preparer	Firm's name ► CLA		IANCIAL	ADVISORS LI	C	Firm's EIN ► 46-		
Use Only							,,	
•	Firm's address ▶ 52	0 WHITE F	PLAINS	ROAD, 3RD FI	JOOR	+		
		ARRYTOWN,				Phone no 914-	846-010	00
							Form 990-F	
							•	. ,

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient FAMILY CENTERS PUBLIC CHARITY SOCIAL PURPOSES 590 BOSTON POST ROAD 75,000. DARIEN, CT 06820 FRIENDS OF THE MASHPEE LIBRARY PUBLIC CHARITY SOCIAL PURPOSES P.O. BOX 900 MASHPEE, MA 02649 1,000. PUBLIC CHARITY SOCIAL PURPOSES FRIENDS OF NATHANIEL WITHERELL, INC 70 PARSONAGE ROAD GREENWICH, CT 06830 1,000. HELEN WOODWARD ANIMAL CENTER PUBLIC CHARITY SOCIAL PURPOSES P.O. BOX 64 75,000. RANCHO SANTA FE, CA 92067 HORIZONS FOR HOMELESS CHILDREN, INC PUBLIC CHARITY SOCIAL PURPOSES 1705 COLUMBUS AVENUE ROXBURY, MA 02119 75,000. THE JOURNEY WITHIN PUBLIC CHARITY SOCIAL PURPOSES 25 CARR STREET POMPTON LAKES, NJ 07442 10,000. KIDS IN CRISIS PUBLIC CHARITY SOCIAL PURPOSES 1 SALEM STREET COS COB, CT 06807 50,000. KING RIDGE FOUNDATION PUBLIC CHARITY SOCIAL PURPOSES P.O. BOX 5873 SANTA ROSA , CA 95402 25,000. PUBLIC CHARITY EDUCATIONAL PURPOSES KWAH DAO YOUTH CENTER 610 W. 158TH STREET NEW YORK, NY 10032 5,000. MEALS ON WHEELS AMERICA PUBLIC CHARITY SOCIAL PURPOSES 1550 CRYSTAL DRIVE, SUITE 1004 ARLINGTON, VA 22202 1,000. Total from continuation sheets 575,500.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient MEMORIAL SLOAN KETTERING CANCER PUBLIC CHARITY HEALTH PURPOSES CENTER 163 W 125TH ST NEW YORK, NY 10027 100,000. NAPA VALLEY COMMUNITY FOUNDATION PUBLIC CHARITY SOCIAL PURPOSES 3299 CLAREMONT WAY, SUITE 2 NAPA, CA 94558 25,000. NEIGHBOR TO NEIGHBOR PUBLIC CHARITY SOCIAL PURPOSES 248 EAST PUTNAM AVENUE GREENWICH, CT 06830 15,000. PUBLIC CHARITY SOCIAL PURPOSES PATIENT AIRLIFT SERVICES 120 ADAMS BOULEVARD FARMINGDALE NY 11735 2,500. PUBLIC CHARITY HEALTH PURPOSES PLANNED PARENTHOOD 26 BLEEKCER ST 15,000. NEW YORK, NY 10012 PROMISES 2 KIDS PUBLIC CHARITY SOCIAL PURPOSES 9400 RUFFIN COURT, SUITE A 25,000. SAN DIEGO, CA 92123 RANCHO SANTA FE FOUNDATION PUBLIC CHARITY SOCIAL PURPOSES 162 S RANCHO SANTA FE ROAD ENCINITAS, CA 92024 50,000. REDWOOD CREDIT UNION COMMUNITY FUND PUBLIC CHARITY SOCIAL PURPOSES P.O. BOX 6104 25,000. SANTA ROSA , CA 95406 Total from continuation sheets

Schedule B (Form 990, 990-EZ,

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, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2016

Name of the organization Employer identification number 20-2024998 THE SELANDER FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not 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 private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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)

Name of organization

Employer identification number

THE SELANDER FOUNDATION

20-2024998

Part I	Contributors (See instructions) Use duplicate copies of Part I if addit	ional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT W. SELANDER 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	\$1,561,740.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)

Employer identification number

THE SELANDER FOUNDATION

20-2024998

Part II	Noncash Property (See Instructions). Use duplicate copies of Part I	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	12,000 SHS MASTERCARD INCORPORATED STOCK	_	
			08/14/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
453 10-18		Sahadula B /Farr 6	90, 990-EZ, or 990-PF) (

FORM 990-PF · DI	VIDENDS	AND INTER	EST FROM SECUE	RITIES ST	PATEMENT 1	
	ROSS MOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
TD AMERITRADE TD AMERITRADE	91,501.	71,17	5. 420,326. 0. 157.			
TO PART I, LINE 4	91,658.	71,17	5. 420,483.	420,483.		
FORM 990-PF		ACCOUNTI	NG FEES	S	PATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES		7,500.	0.		0.	
TO FORM 990-PF, PG 1, I	л 16В —	7,500.	0.		0.	
FORM 990-PF		TAX	ES	STATEMENT 3		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAXES FOREIGN TAXES		20,000. 10,246.			0.	
TO FORM 990-PF, PG 1, I	JN 18	30,246.	10,246.		0.	
FORM 990-PF		OTHER E	XPENSES	Si	гатемент 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT ADVISORY FER	ES	20,000.			0.	

FORM 990-PF · COI	RPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
SEE STATEMENT 10 15,000 SHS MASTERCARD INC		2,767,452. 58,500.	3,032,577. 2,257,050.
TOTAL TO FORM 990-PF, PART II, LIN	E 10B	2,825,952.	5,289,627.
FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE STATEMENT 11 PIMCO BRAVO FUND III TRIAN PARTNERS	COST COST COST	13,098,811. 97,055. 500,000.	14,362,749 104,892 519,519
TOTAL TO FORM 990-PF, PART II, LIN	E 13	13,695,866.	14,987,160.
FORM 990-PF DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 7
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
WEBSITE DEVELOPMENT COSTS	7,200.	6,000.	1,200
TOTAL TO FM 990-PF, PART II, LN 14	7,200.	6,000.	1,200.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	8
NAME OF CONTRIBUTOR	ADDRESS		
ROBERT W. SELANDER	15 EAST PUTNAM AVE, S GREENWICH, CT 06830	SUITE 244	

	OF OFFICERS, DEFOUNDATION MANAGE	STATEMENT 9		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ROBERT W. SELANDER 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	CHAIRMAN/AS REÇ	Q'D 0.	0.	0.
NANCY CROSS SELANDER 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	PRESIDENT/AS RE	EQ'D	0.	0.
CROSBY SELANDER 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	TRUSTEE/AS REQ	'D	0.	0.
RUSSELL SELANDER 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	TRUSTEE/AS REQ	'D	0.	0.
TRACEY KAY LUNDGREN 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	TRUSTEE/AS REQ	'D	0.	0.
JESSICA ANNE MATTEONI 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	TRUSTEE/AS REQ	'D	0.	0.
DANIEL MATTEONI 15 EAST PUTNAM AVE, SUITE 244 GREENWICH, CT 06830	TRUSTEE/AS REQ	'D	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

<u>' * • • • </u>						• •	
FORM 990-PF	INVESTMENTS - C	ORPORA	TE STOCK				STATEMENT 1
		1	Beginning of Year		Bnd	l of Yea	ar
* Shares	Description	(a)	Book Value	(b)	Book Value		Fair Market
	Description		- Jook value				
18,229.175	Ishares TR Msc1 EAFE Pd	\$	1,184,676	\$	1,152,496	\$	1,278,047
-	Ishares MSCI EAFE Minimum V	\$	385,009	\$	-	\$	-
-	Ishares MSCI ETF USA Min Low	\$	1,040,811	\$		\$	
11,419.000	Ishares Russell 2000 ETF	\$	-	\$	1,614,956	\$	1,754,529
			2,610,496		2,767,452		3,032,577
FORM 990-PF	OTHER INV	estmen	TS				STATEMENT 11
		1	Beginning of Year	End of Year		ar	
							Pair Market
# Shares	Description	(a) 	Book Value	<u>—</u> —	Book Value		(c) Value
	MUTUAL FUNDS						
14,946.617	DFA Intl Small Com	\$	-	\$	273,169		324,192
151,356.135	DFA US Large Co.	\$	2,055,054	\$	2,541,400		3,127.018
-	DFA US Small Cap	\$	1,781,458	\$			-
39,588.037	Doubleline Shiller Enhanced Cape I	\$	-	\$	584,692		645,285 711,759
66,957.588	Doubleline Total Return Loomis Sayles Bond Fund	\$ \$	914,337 445,820	\$ \$	735,433		/11,/55
_	Metropolitan West Total	š	347,622	\$	_		_
59,346.861	Rivernorth Doubline	š	521,756	Š	646,522		620,175
40,316.532	TCW Emerging Markets	Š	330,411	\$	348,660		343,094
66,192.046	Vanguard Emerging Mkt	Š	2,196,888	\$	2,210,870		2,453,077
13,909.228	Virtus Foreign Opp Fund	\$	384,075	\$	· · · · <u>-</u>		-
88,546.216	Blackrock Strategic Income	\$	953,763	\$	898,228		879,264
69,476.362	Natix1s Ls Stry SHS Loomis	\$	686,622	\$	706,724		691,985
4,440.105	SPDR DJ Wilshire Reit ETF	\$	322,543	\$	305,799		418,880
-	Aberdeen Emerging Markets I	\$	280,873	\$	-		-
20,697.842	Doubleline Low Duration Eme	\$	198,142	\$	204,329		204,495
-	Virtus Emerging Markets Opp	\$	403,289	\$	<u>-</u>		
28,915.121	Guggenheim Total Return Bo	\$	-	\$	769,332		784,467
16,866.621	JP Morgan Value Advantage F	\$	-	\$	556,972		610,740
47,982.342	Goldman Sachs GQG Partners Intl Opp I	\$	-	\$	500,000		617,533
64,549.751	Pimco Fds Income Instl	\$	-	\$	802,381		802,353
22,221.156 44,462.752	Fuller & Thaler Behycore EQ Sel	\$	-	\$	500,000		552,196 576,23
	GQG Partners Emerging Market	\$		Š	514,300		

11,822,653

13,098,811

TOTAL MUTUAL FUNDS:

14,362,749