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OMB No 1545-0052

2018

Return of Private Foundation

▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	18 , ar	nd ending 12-31-	2018	
		indation ERT FOUNDATION INC		A Employer id	entification numbe	r
	IE SEELI	ENT FOUNDATION INC		06-1601116		
	ber and 1 WEST	I street (or P O box number if mail is not delivered to street address) ROAD	Room/suite	B Telephone nu	mber (see instruction	ns)
				(203) 972-7478	3	
		n, state or province, country, and ZIP or foreign postal code NN, CT 068403011	•	C If exemption	application is pendin	g, check here
G Cl	neck al	I that apply Initial return Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	ere \Box
		Final return Amended return	,		ganizations meeting	▶ ⊔
		Address change Name change		test, chec	k here and attach co	mputation 🕨 📙
H C	neck ty	pe of organization Section 501(c)(3) exempt private i	oundation		undation status was t n 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust		ander seeds	11 307 (3)(1)(1), 61100	Horo
			☑ Cash ☐ Accru	al F If the founda	ation is in a 60-mont	
		rom Part II, col (c), ▶\$ 800,501	be on cash basıs)	under sectio	n 507(b)(1)(B), chec	k here
Da	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements
Fe	101	of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach				(**************************************
		schedule)				
	2	Check ► ✓ If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	4,391	4,391		
Revenue	4	Dividends and interest from securities	15,543	15,543		
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	30,196			
	b	Gross sales price for all assets on line 6a 245,780				
	7	Capital gain net income (from Part IV, line 2)		30,196		
	8	Net short-term capital gain				
	9 10a					
	b	Gross sales less returns and allowances Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	50,130	50,130		
	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
Ş	15	Pension plans, employee benefits				
nse	16a	Legal fees (attach schedule)	300	300		0
<u>9</u>	ь	Accounting fees (attach schedule)	6,450	6,450		0
and Administrative Expenses	C	Other professional fees (attach schedule)	12,213	12,213		0
Ĭ	17	Interest				
stra	18	Taxes (attach schedule) (see instructions)	119	119		0
ੂ	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
βÞ	21	Travel, conferences, and meetings				
a	22	Printing and publications				
Бu	23	Other expenses (attach schedule)				
Operating	24	Total operating and administrative expenses.				
<u>8</u>		Add lines 13 through 23	19,082			0
0	25	Contributions, gifts, grants paid	59,100			59,100
	26	Total expenses and disbursements. Add lines 24 and 25	78,182	19,082		59,100
	27	Subtract line 26 from line 12		==,,55=		,
	a	Excess of revenue over expenses and	20.052			
	Ь	disbursements Net investment income (if negative, enter -0-)	-28,052	31,048		
	c	Adjusted net income (if negative, enter -0-)		31,048		
For		work Reduction Act Notice, see instructions.		Cat No 11289>	I For	m 990-PF (2018)

408,011

164,617

680,234

680,234

680,234

680,234

389,995

154,558

661,526

661,526

661,526

661,526

2

3

4

5

6

680,234

-28,052

661,526

661,526 Form **990-PF** (2018)

9,344

530,365

153,163

800,501

Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Grants payable

Assets 9 10a b

C 11

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

30

31

Part III

2

3

Liabilities

Balances

Fund 26

ō

Assets 27

Net

	e the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	Date acquired (mo , day, yr)	Date sold (mo , day, yr)
1 a NEUBERGER BERMAN 80-	46		Р		
b NEUBERGER BERMAN 80-	46		Р		
c CAPITAL GAINS DIVIDEN	DS		Р		
d					
e					
(5)	(f)		(g)	(1	h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
<u> </u>	(or allowable)	plus expe	ense of sale) minus (g)
	7,756		38,754		-10,998
b 21	7,855		176,830		41,025
С	169				169
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(၊) (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a			(3777	,	-10,998
b					41,025
c					169
d					
	or (net capital loss) Jain or (loss) as defined in sections at I, line 8, column (c) (see instructions)	ons) If (loss), enter -0	Part I, line 7	3	30,196
	Inder Section 4940(e) for Re				
	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	e)	
f section 4940(d)(2) applies, le	·	hla amanumb a6 amu uaam			es 🔽 No
	e section 4942 tax on the distributa t qualify under section 4940(e) Do		in the base period?		35 4 NO
1 Enter the appropriate am	ount in each column for each year,	see instructions before	making any entries	<u>; </u>	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by co	
2017	117,935		891,278		0 132321
2016	83,219		892,534		0 093239
2015	93,411		915,184		0 102068
2014	70,961		957,065		0 074144
2013	63,900		945,186		0 067606
2 Total of line 1, column (c	i)		2		0 469378
3 Average distribution ratio	for the 5-year base period—divide	the total on line 2 by 5	0, or by the		
number of years the foun	dation has been in existence if less	than 5 years	3		0 093876
	ncharitable-use assets for 2018 fron	•	4		837,581
5 Multiply line 4 by line 3			5		78,629
	ent income (1% of Part I, line 27b)		6		310
7 Add lines 5 and 6			7		78,939
	ons from Part XII, line 4 ,				59,100
If line 8 is equal to or gre instructions	ater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	g a 1% tax rate Se	e the Part VI

Page **6**

Fa	Statements Regard	iiiig	ACTIVITIES TOT WITHCH	Form 4720 May Be	Required	Continue	:u)			
5a	During the year did the foundation p	oay o	r incur any amount to						Yes	No
	(1) Carry on propaganda, or otherw	vise a	ttempt to influence legisl	ation (section 4945(e))?		☐ Ves	✓ N			
	(2) Influence the outcome of any sp	pecific	c public election (see sect	tion 4955), or to carry				"		
	on, directly or indirectly, any vo	ter re	egistration drive?			☐ Yes	✓ N	٨		
	(3) Provide a grant to an individual	for tr	avel, study, or other sım	ılar purposes?		Yes	☑ N			
	(4) Provide a grant to an organizati in section 4945(d)(4)(A)? See in		•	, -	i 					
	(5) Provide for any purpose other the					☐ Yes	Y N	°		
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?		□ ,,	✓ N			
Ь	If any answer is "Yes" to $5a(1)-(5)$,	dıd a	ny of the transactions fa	il to qualify under the ex	ceptions des	☐ Yes cribed in	Y N	°		
	Regulations section 53 4945 or in a		=					5b		
	Organizations relying on a current n					▶				
c	If the answer is "Yes" to question 5a						Ш			
_	tax because it maintained expenditu			•						
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)		∐ Yes	∟ N	°		
6a	Did the foundation, during the year,				ums on					
_	a personal benefit contract?					Yes	✓ N			l <u>.</u> .
Ь	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract	:2	•	6b		No
_	If "Yes" to 6b, file Form 8870									
7a	At any time during the tax year, wa					☐ Yes	✓ N	o		
	If yes, did the foundation receive ar		•					7b		
8	Is the foundation subject to the sect					tion or				
	excess parachute payment during th	ne ye	ar ⁹			Yes	✓ N	<u>。 </u>		<u> </u>
Pa	rt VIII Information About Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, H	ighly Pai	d Emp	oloyees	,	
1	List all officers, directors, trustee	es, fo	oundation managers an	nd their compensation	. See instru	tions				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee be	tributions t enefit plans compensati	and '	(e) Expe	nse acc	
See	Additional Data Table			- /						
		1								
		1								
		1								
	Compensation of five highest-pa	id en	nplovees (other than th	nose included on line	L—see instri	uctions). I	If none	, enter `	NONE	."
						tributions t		·		
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation		ee benefit		e) Exper		
	more than \$50,000		devoted to position	(0)		nd deferred sensation	[‡]	other a	lowanc	es
NON					Comp	ensacion .				
11011	-									
					+		+			
					_		+			
					1					
Tota	I number of other employees paid ov	er \$5	0,000			<u>. ▶</u>				0
								Form 99	0-PF	(2018)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ-		^{c of} Expenses
1		
2		
3		
3		
-		
4		
Part IX-B Summary of Program-Related Investments (see I	nstructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1		
2		
•		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
Iotal. Add lines 1 through 3		Form 990-PF (2018)
		101111 330-FF (2010)

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

41.258

41.258

41.258

59,100

59.100

59.100

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4

5

6

1a

1b

2

3a 3h

4

5

3

4 5

6

1

2

3

4

5

Part XII

2018

Page 9

41,258

41,258

Form **990-PF** (2018)

0

Form 990-PF (20	018)	
Part XIII	Undistributed Income	(see instructions)

b From 2014. . . . c From 2015. . .

d From 2016.

e From 2017.

Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. **b** Total for prior years

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9 a Excess from 2014. .

b Excess from 2015. .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c 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 e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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) 8 Excess distributions carryover from 2013 not

indicated below:

Excess distributions carryover, if any, to 2018 a From 2013.

19.116 24,086 47 870 39,494 74,001

f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part

a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

required—see instructions).

XII, line 4 🕨 \$

24.086 47,870

39,494

74.001

17.842

204.567

17.842

222,409

19.116

203,293

0

(a)

Corpus

(b)

Years prior to 2017

(c)

2017



Enter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies ership dues and assessments					
	st on savings and temporary cash					
	nds and interest from securities			14	4,391 15,543	
	ntal income or (loss) from real estate			/		
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.					
8 Gain o	r (loss) from sales of assets other than					
invent	•			18	30,196	
	come or (loss) from special events					
	profit or (loss) from sales of inventory revenue a					
d						
	tal Add columns (b), (d), and (e).		0		50,130	(
	Add line 12, columns (b), (d), and (e)				30,130	50,130
(See w	orksheet in line 13 instructions to verify calcu	ılatıons)				•
Line No.	I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the accomplishment of the foundation.	income is report	ed in column (e) of	f Part XVI-A contribu		
· · · · · · · · · · · · · · · · · · ·	instructions)			_		
1	NOT APPLICABLE					
-				-		

	,		
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Pa	rt XVII	Exempt Organi	-	ansiers to e	and mansaction	iis aliu Kelatio	nampa with Nonen	aritable		
			directly engag				on described in section 5	01	Yes	No
а Т	ransfers f	from the reporting foun	dation to a no	ncharitable exe	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	assets						1a(2)		No
b 0	ther tran	sactions								
(1) Sales	of assets to a nonchar	table exempt	organization.				1b(1)		No
(2) Purch	ases of assets from a r	oncharitable e	exempt organiz	zation			. 1b(2)		No
(3) Renta	al of facilities, equipmen	nt, or other as:	sets				. 1b(3)		No
(4) Reiml	bursement arrangemen	ts					1b(4)		No
(5) Loans	s or loan guarantees.						1b(5)		No
•	-	mance of services or m	·	-				1b(6)		No
	-	facilities, equipment, n		-				1c		No
0	f the goo	ds, other assets, or ser	vices given by	the reporting	foundation If the f	foundation receive	ways show the fair marled less than fair market ets, or services received			
(a) L	ine No	(b) Amount involved	(c) Name of n	oncharitable exe	mpt organization	(d) Description of	transfers, transactions, and	sharing arra	ingemen	ts
2 a I	s the four	ndation directly or indire	ectly affiliated	with, or relate	d to, one or more t	tax-exempt organ	ızatıons			
d	escribed	ın section 501(c) (othei	than section	501(c)(3)) or i	ın section 527? .		🗆 Yes	✓ No		
b I	f "Yes," co	omplete the following s	chedule							
		(a) Name of organization	on	(t	b) Type of organizatio	n	(c) Description of r	elationship		
	of m		, it is true, cor				ing schedules and state than taxpayer) is based			
Sig Hei	n ,	*****	meage		2019-05-01	*****	re	ay the IRS d		
	│	Signature of officer or t	rustee		Date	Title	b	oth the prepared elow see instr)?	_	
	•	Print/Type preparer's	name	Preparer's Sıgr	nature	Date	Check if self-	N P0193	2705	
Pai		YUE LENG					employed ▶ Ш			
	parer Only		SMAN & GASS	MAN CPA PC			Firm	n's EIN ▶11	-31479	15
J 35	Ciliy		EAST 40TH ST	REET 5TH FLO	OR					
			W YORK, NY				Pho	ne no (212	2) 221-7	7067
		i .					1			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation ROBERT L SEELERT PRESIDENT. TREASURER 51 WEST ROAD 0.00 NEW CANAAN, CT 068403011 SARAH P SEELERT SECRETARY 0 00 51 WEST ROAD NEW CANAAN CT 068403011 0 00 116 BELDEN HILL ROAD WILTON, CT 06897

11211 6/11/1/11/61 000105011				
JOHN E SEELERT	DIRECTOR	0	0	0
444 OENOKE RIDGE ROAD NEW CANAAN, CT 06840	0 00			
PERRY D SEELERT	DIRECTOR	0	0	0

DIRECTOR 0 00

STEPHEN M SEELERT

58 HARRISON AVENUE NEW CANAAN, CT 06840 Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

SARAH P SEELERT

than \$5,000).

ROBERT L SEELERT

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
FRIENDS OF AMBLER FARM PO BOX 7442 WILTON CT 06897		EXEMPT	CHARITABLE CONTRIBUTION	500

recipient

WILTON, CT 06897			
FRIENDS OF HARVARD GOLF 124 AUBURN STREET CAMBRIDGE, MA 02138	EXEMPT	CHARITABLE CONTRIBUTION	1

124 AUBURN STREET CAMBRIDGE, MA 02138	EXEMPI	CHARITABLE CONTRIBUTION	1,000
FRIENDS OF NORWALK RIVER NORWALK RIVER VALLEY TRAIL	EXEMPT	CHARITABLE CONTRIBUTION	1,000

124 AUBURN STREET CAMBRIDGE, MA 02138	EXEMIT	CHARTABLE CONTRIBUTION	1,000
FRIENDS OF NORWALK RIVER NORWALK RIVER VALLEY TRAIL NORWALK, CT 06850	EXEMPT	CHARITABLE CONTRIBUTION	1,000

CAMBRIDGE, MA 02138			
FRIENDS OF NORWALK RIVER NORWALK RIVER VALLEY TRAIL NORWALK, CT 06850	EXEMPT	CHARITABLE CONTRIBUTION	1,000
Total	 	▶ 3a	59,100

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year			
GETABOUTPO BOX 224	EXEMPT	CHARITABLE CONTRIBUTION	1,000

NEW CANAAN, CT 06840			
MEALS ON WHEELSPO BOX 231 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	

MEALS ON WHEELSPO BOX 231 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	500
NEW CANAAN BEAUTIFICATION LEAGUE	EXEMPT	CHARITABLE CONTRIBUTION	500

NEW CANAAN, CT 06840			
NEW CANAAN BEAUTIFICATION LEAGUE PO BOX 4 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	500

NEW CANAAN BEAUTIFICATION LEAGUE PO BOX 4 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	500
Total	 	> 3a	59,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
NEW CANAAN CHARITABLE FOUNDATION		EXEMPT	CHARITABLE CONTRIBUTION	500

111 CHERRY STREET NEW CANAAN, CT 06840			
NEW CANAAN COMMUNITY FOUNDATION 111 CHERRY STREET NEW CANAAN. CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	2,500

NEW CANAAN COMMUNITY FOUNDATION 111 CHERRY STREET NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	2,500
NEW CANAAN HIGH SCHOOL SCHOLARSHIP 11 FARM RD NEW CANAAN. CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	500

Total	 	▶ 3a	59,100
NEW CANAAN HIGH SCHOOL SCHOLARSHIP 11 FARM RD NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	500
111 CHERRY STREET NEW CANAAN, CT 06840			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

5 1 1 11

a Paid during the year			
NEW CANAAN HISTORICAL SOCIETY 13 OENOKE RIDGE NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,000
NEW CANAAN LAND TRUSTOO BOY 425	EVEMBT	CHARITARI E CONTRIBUTION	1 000

NEW CANAAN, CT 00040			
NEW CANAAN LAND TRUSTPO BOX 425 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,0
NEW CANAAN LIBRARY 151 MAIN STREET	EXEMPT	CHARITABLE CONTRIBUTION	1,0

NEW CANAAN LAND TROSTPO BOX 423	EXEMPT	CHARITABLE CONTRIBUTION	1,000
NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,000

NEW CANAAN LIBRARY 151 MAIN STREET NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,000
Total	 	▶ 3a	59,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
NORMAN WILLIAMS PUBLIC LIBRARY 10 THE GREEN WOODSTOCK, VT 05091		EXEMPT	CHARITABLE CONTRIBUTION	1,000

WOODSTOCK, VT 05091			
OCEAN COMMUNITY YMCA 95 HIGH STREET WESTERLY, RI 02891	EXEMPT	CHARITABLE CONTRIBUTION	500

OCEAN COMMUNITY YMCA 95 HIGH STREET WESTERLY, RI 02891	EXEMPT	CHARITABLE CONTRIBUTION	500
PENTANGLE31 THE GREEN	EXEMPT	CHARITABLE CONTRIBUTION	500

WESTERLY, RI 02891			
PENTANGLE31 THE GREEN WOODSTOCK, VT 05091	EXEMPT	CHARITABLE CONTRIBUTION	500

PENTANGLE31 THE GREEN WOODSTOCK, VT 05091	EXEMPT	CHARITABLE CONTRIBUTION	500
Total	 	▶ 3a	59,100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

59,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
STAMFORD HOSPITAL FOUNDATION 1351 WASHINGTON BLVD STAMFORD, CT 06902	EXEMPT	CHARITABLE CONTRIBUTION	10,000
STAYING PUT IN NEW CAANAN 58 PINE STREET NEW CANAAN CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,000

STAYING PUT IN NEW CAANAN 58 PINE STREET NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	1,0
UCONN FOUNDATION	EXEMPT	CHARITABLE CONTRIBUTION	5,0

58 PINE STREET NEW CANAAN, CT 06840			
UCONN FOUNDATION 2390 ALUMI DRIVE UNIT 3206	EXEMPT	CHARITABLE CONTRIBUTION	5,0

NEW CANAAN, CT 00040			
UCONN FOUNDATION 2390 ALUMI DRIVE UNIT 3206	EXEMPT	CHARITABLE CONTRIBUTION	5,000

2390 ALUMI DRIVE UNIT 3206 STORS. CT 06269	UCONN FOUNDATION		EXEMPT	CHARITABLE CONTRIBUTION	5,000
	2390 ALUMI DRIVE UNIT 3206 STORS, CT 06269				·

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Daid during the year

a Paid during the year			
WAVENY LIFECARE NETWORK 3 FARM ROAD NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	5,000

NEW CANAAN, CT 06840			
WAVENY PARK CONSERVANCY PO BOX 944 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	6,800
WEEKAPAUG FOUNDATION FOR	EXEMPT	CHARITABLE CONTRIBUTION	1,000

PO BOX 944 NEW CANAAN, CT 06840	EXEMPT	CHARITABLE CONTRIBUTION	6,800
WEEKAPAUG FOUNDATION FOR CONSERVATION 366 POST ROAD WESTERLY, RI 02891	EXEMPT	CHARITABLE CONTRIBUTION	1,000
·			

WEEKAPAUG FOUNDATION FOR CONSERVATION 366 POST ROAD WESTERLY, RI 02891	EXEMPT	CHARITABLE CONTRIBUTION	1,000
Total	 	> 3a	59,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

Name and address (home or husiness)

Total.

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
WILTON HISTORICAL SOCIETY 224 DANBURY ROAD WILTON, CT 06897		EXEMPT	CHARITABLE CONTRIBUTION	500
WILTON LIBRARY		EVEMBT	CHARITARI E CONTRIBUTION	1 000

recipient

WILTON, CT 06897			
WILTON LIBRARY 137 OLD RIDGEFIELD ROAD WILTON, CT 06897	EXEMPT	CHARITABLE CONTRIBUTION	1,000
WOODSTOCK AGING COUNCIL	EVEMBT	CHADITABLE CONTRIBUTION	500

WILTON LIBRARY 137 OLD RIDGEFIELD ROAD WILTON, CT 06897	EXEMPT	CHARITABLE CONTRIBUTION	1,000
WOODSTOCK AGING COUNCIL THE THOMPSON SENIOR CENTER WOODSTOCK VT. 05091	EXEMPT	CHARITABLE CONTRIBUTION	500

WILTON, CT 06897			
WOODSTOCK AGING COUNCIL THE THOMPSON SENIOR CENTER WOODSTOCK, VT 05091	EXEMPT	CHARITABLE CONTRIBUTION	500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
NORWALK HOSPITAL FOUNDATION 30 STEVENS ST NORWALK, CT 06850		CHARITABLE CONTRIBUTION	10,000
SLIMMED THEATRE OF NEW CANAAN		CHADITABLE CONTRIBUTION	1 000

recipient

•			
SUMMER THEATRE OF NEW CANAAN 70 PINE ST NEW CANAAN, CT 06840		CHARITABLE CONTRIBUTION	1,000
HARVARD MEDICAL SCHOOL 25 SHATTUCK ST		CHARITABLE CONTRIBUTION	500

SUMMER THEATRE OF NEW CANAAN 70 PINE ST NEW CANAAN, CT 06840		CHARITABLE CONTRIBUTION	1,
HARVARD MEDICAL SCHOOL 25 SHATTUCK ST BOSTON, MA 02115		CHARITABLE CONTRIBUTION	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Daid during the year

a Paid during the year			
BUTTERFIELD LIBRARY 10 MORRIS AVENUE COLD SPRING, NY 10516		CHARITABLE CONTRIBUTION	300
NEW CANAAN BASEBALL11 FARM RD		CHARITABLE CONTRIBUTION	500

W CANAAN BASEBALL11 FARM RD W CANAAN, CT 06840		CHARITABLE CONTRIBUTION	
W CANAAN VOLUNTEER AMBULANCE 2 SOUTH AVE		CHARITABLE CONTRIBUTION	

NEW CANAAN, CT 06840		CHARTABLE CONTRIBUTION	300
NEW CANAAN VOLUNTEER AMBULANCE 182 SOUTH AVE NEW CANAAN, CT 06840		CHARITABLE CONTRIBUTION	1,000

NEW CANAAN VOLUNTEER AMBULANCE 182 SOUTH AVE NEW CANAAN, CT 06840		CHARITABLE CONTRIBUTION	1,000
Total	 	▶ 3a	59,100

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor		
a Paid during the year			
PROJECT BROADWAY322 W 52ND ST		CHARITABLE CONTRIBUTION	1,000

EW YORK, NY 10101			
ACK'S PLACE73 CENTRAL STREET		CHARITABLE CONTRIBUTION	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

ZACK'S PLACE73 CENTRAL STREET		CHARITABLE CONTRIBUTION	1,00
WOODSTOCK, VT 05091			

ZACK'S PLACE73 CENTRAL STREET		CHARITABLE CONTRIBUTION	1,000
WOODSTOCK, VT 05091			

efile GRAPHIC print - DO NOT P	file GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491130012059						
TY 2018 Accounting Fees Schedule							
Name: THE SEELERT FOUNDATION INC EIN: 06-1601116							
Category	Amo	unt Ne	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

6,450

GASSMAN & GASSMAN

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491130012059				
TY 2018 Investments Corpora	te Bonds Sche	dule				
Name:	THE SEELERT FOL	UNDATION INC				
EIN:	06-1601116					
Investments Corporate Bonds Schedule						

Name of Bond

CORP. BONDS

End of Year Book

Value

154,558

End of Year Fair

Market Value

effie GRAPHIC print - DO NOT PROCES	S AS Filed Data -		DLN: 93491130012059
TY 2018 Investments Corpor	ata Stack Schadi	ulo	
17 2016 Investments Corpor	ate Stock Sched	nic	
Name	: THE SEELERT FOUN	NDATION INC	
EIN	: 06-1601116		

Investments Corporation Stock Schedule

CORPORATE STOCKS

Name of Stock

DIN. 004044000400E0

End of Year Fair

Market Value

530,365

End of Year Book Value

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491130012059
TY 2018 Legal Fees Sched	ule			
_				
	me: THE SEELER	T FOUNDATION IN	NC	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RUCCI LAW	300	300		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491130012059				
TY 2018 Other Increases Schedule						
Name:	THE SEELERT FOUNDATION INC					
EIN:	06-1601116					
De	escription	Amount				
UNREALIZED GAIN		9,344				

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491130012059		
TY 2018 Other Professional Fees Schedule						
Name: THE SEELERT FOUNDATION INC						
EIN: 06-1601116						
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	12,213	12,213		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491130012059		
TY 2018 Taxes Schedule						
Name: THE SEELERT FOUNDATION INC						
EIN: 06-1601116						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	119	119		0		