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**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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Depa	rtment of the Treasury			social security numbers on				2010
	al Revenue Service	or tax year beginning	to www.ii	rs.gov/Form990PF for instru	, and e		ormation.	Open to Public Inspection
	ne of foundation	or tax year beginning		<u>.</u> .	, 4		A Employer identificatio	n number
		CAROL H. B	ARNES					
_	AMILY FOU						20-8718203	3
		oox number if mail is not delive	ered to street	address)		Room/suite	B Telephone number	
1	900 PERKI	NS ST.					860-583-70	070
City	or town, state or pr	ovince, country, and ZIP o	r foreign p	ostal code		·	C If exemption application is	pending, check here
	RISTOL, C							
G C	heck all that apply:	Initial return		Initial return of a fo	rmer public	charity	D 1. Foreign organization	s, check here
		Final return		Amended return			2 Foreign organizations m	eeting the 85% test
	<u> </u>	Address chan		Name change		- A-A	2. Foreign organizations m check here and attach or	omputation
H C	heck type of organiz	\		empt private foundation		04	E If private foundation st	
<u> </u>		) nonexempt charitable tr		Other taxable private founda		<u>.</u>	under section 507(b)(1	)(A), check here
		<del>-</del>		ng method: X Cash	Acc	rual	F If the foundation is in a	
•	rom Part II, col (c), l	ne 16)	Ot Landur	her (specify) nn (d) must be on cash basis	. 1		under section 507(b)(1	)(B), check here
				"			(-) Adv to d t	(d) Disbursements
<b>  </b>	(The total of aminecessarily equ	evenue and Expenses ounts in columns (b), (c), and (d al the amounts in column (a))	d) may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
_		gifts, grants, etc., receive	d .	482,326.			N/A	
	2 Check	if the foundation is not required to at	•				***************************************	
	3 Interest on saving	gs and temporary		1,887.		1,887.		STATEMENT 1
	Į.	interest from securities		102,831.	10	2,831.		STATEMENT 2
	5a Gross rents	. , , ,					-	
	<b>b</b> Net rental income	e or (loss)					***************************************	
e e		from sale of assets not on line	10	314,324.				
2	b Gross sales price assets on line 6a	,	324.		***********			
Revenue		ncome (from Part IV, line 2)			31	4,324.		
<b>u</b> .	8 Net short-term	capita RECEIVE	D			<del></del>	,	
	9 Income modif	cations				· · ·		<u> </u>
	10a and allowances  b Less Cost of go	SMAY-1-6-20	19 0					
			8-0-SC					<del>                                     </del>
	c Gross profit of 11 Other income	OGDEN, U						
	12 Total Add line		11	901,368.	41	9,042.		· ·
	1	officers, directors, trustees, e	ic.	0.		0.		0.
	· ·	e salaries and wages						
	15 Pension plans	-						
ses	16a Legal fees	STM	т 3	630.		630.		0.
Expenses	b Accounting fee	es STM	Т 4	2,400.		2,400.		0.
Ĕ	c Other professi	onal fees ຸຸ		<u></u>				
ĕ	17 Interest							
trat	18 Taxes	STM	Т 5	10,307.		0.		0.
inis	19 Depreciation a	nd depletion						
Administrative	20 Occupancy				<u>.                                    </u>			<del> </del>
Þ	1	ences, and meetings						
and,	22 Printing and p		m <i>C</i>	14,184.	1	2,528.		0.
Operating	23 Other expense		Τ. Ω	14,104.		.4,340.		
era	evnosees Ad	g and administrative d lines 13 through 23		27,521.	1	5,558.		0.
o	25 Contributions,	gifts, grants paid		454,000.				454,000.
		s and disbursements		134,000		<u> </u>		131,000.
	Add lines 24 a			481,521.	1	5,558.		454,000.
_	27 Subtract line 2					· · · · · · · · · · · · · · · · · · ·		
	I	e over expenses and disburse	ments	419,847.		•		
		It income (if negative, enter			40	3,484.		
		ncome (if negative, enter -0-)					N/A	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year		End of year			
	arı	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Çash - non-interest-bearing	9,332.	14,293.	14,293.			
	2	Savings and temporary cash investments	34,647.	32,495.	32,495.			
	3	Accounts receivable ▶						
		Less; allowance for doubtful accounts ▶						
	4	Pledges receivable ▶						
	-	Less allowance for doubtful accounts ▶	-	-				
	5	Grants receivable		<u></u>				
	_	Receivables due from officers, directors, trustees, and other						
	ľ	disqualified persons		}				
	,	Other notes and loans receivable						
	'	Less: allowance for doubtful accounts		* -				
		Inventories for sale or use						
ssets	l							
Ass	ı	Prepaid expenses and deferred charges						
-	ı	Investments - U.S. and state government obligations	4,147,909.	4,424,596.	8,604,080.			
	1	Investments - corporate stock STMT 8	4,147,909.	4,424,590.	0,004,000.			
	C	Investments - corporate bonds			<del></del>			
	11	Investments - land, buildings, and equipment basis		•				
		Less accumulated depreciation			<del></del>			
	12	Investments - mortgage loans						
	13	Investments - other						
	14	Land, buildings, and equipment: basis ▶		-				
		Less accumulated depreciation						
	15	Other assets (describe ►)						
	16	Total assets (to be completed by all filers - see the						
		instructions Also, see page 1, item I)	4,191,888.	4,471,384.	<u>8,650,868.</u>			
	17	Accounts payable and accrued expenses			ŀ			
	18	Grants payable						
s.	19	Deferred revenue						
Liabilıties	20	Loans from officers, directors, trustees, and other disqualified persons						
abi	21	Mortgages and other notes payable						
=	22	Other liabilities (describe )						
					,			
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow SFAS 117, check here						
		and complete lines 24 through 26, and lines 30 and 31.						
es	24	Unrestricted	4,191,888.	4,471,384.				
anc anc	25	Temporarily restricted						
3ai	l	Permanently restricted	<u></u>					
ğ	20	Foundations that do not follow SFAS 117, check here			<del></del>			
Ē		and complete lines 27 through 31.		,				
ō	0.7							
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds						
SS(	28	Paid-in or capital surplus, or land, bldg, and equipment fund						
ž	29	Retained earnings, accumulated income, endowment, or other funds	4 101 000	4 471 204				
ž	30	Total net assets or fund balances	4,191,888.	4,471,384.				
			4 101 000	4 471 204	•			
	31	Total liabilities and net assets/fund balances	4,191,888.	4,471,384.				
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances					
_								
		I net assets or fund balances at beginning of year - Part II, column (a), line 3	יטט		1 101 000			
		st agree with end-of-year figure reported on prior year's return)		1	4,191,888.			
		r amount from Part I, line 27a		2	419,847.			
		r increases not included in line 2 (itemize)		3	0.			
		lines 1, 2, and 3		# 4	4,611,735.			
		eases not included in line 2 (itemize)	SEE STA		140,351.			
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	4,471,384.			
					Form <b>990-PF</b> (2018)			

HARRY F. & CAROL H. BARNES Form 990-PF (2018) FAMILY FOUNDATION 20-8718203 Page 3 Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a).List and describe the kind(s) of property sold (for example, real estate, Purchase (mo., day, yr.) (mo., day, yr) 2-story brick warehouse; or common stock, 200 shs. MLC Co ) D - Donation 11/26/18 1a SALE OF 5.392 SHS OF BARNES GROUP INC STOCK D C đ е (f) Depreciation allowed (a) Cost or other basis (h) Gain or (loss) (e) Gross sales price ((e) plus (f) minus (q)) plus expense of sale (or allowable) 314,324 314,324 а þ C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any 314,324. b C d If gain, also enter in Part I, line 7 2 314,324. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income ) If section 4940(d)(2) applies, leave this part blank. 🗌 Yes 🕱 No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d) Distribution ratio (a) Base period years (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) Calendar year (or tax year beginning in) 9,438,494 291,000 .030831 2017 5,821,597 330,202. .056720 2016 5,746,386 289,276 .050341 2015 5,001,472 .053461 267,386. 2014 180,000 4,175,056 043113 2013 2 .234466 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .046893 the foundation has been in existence if less than 5 years 3 10,103,533. 4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 473,785. Multiply line 4 by line 3 5 4,035. Enter 1% of net investment income (1% of Part I, line 27b) 6 477<u>,820</u>. 7 Add lines 5 and 6

Form **990-PF** (2018)

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454,000.

8

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

8 Enter qualifying distributions from Part XII, line 4

HARRY F. & CAROL H. BARNES

Form 990-	PF (2018) FAMILY FOUNDATION	2	20-87	718203	ı	Page 4
Part V		940(b), 4940(e), or 49	48 - s	ee instru	ctio	1 <del>s)</del>
1a Exem	ipt 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-se	ee instructions)				
<b>b</b> Dom	estic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 ar	nd enter 1%	1		8,0	<u>70.</u>
of Pa	rt I, line 27b				,	•
c All ot	her domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I	l, line 12, col. (b)				
2 Taxı	inder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, ente	er -0-)	2			0.
3 Add I	ines 1 and 2		3		8,0	<u>70.</u>
4 Subt	itle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, ent	er -0-)	4			0.
5 Taxt	pased on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5		<u>8,0</u>	<u>70.</u>
6 Cred	its/Payments.					
a 2018	estimated tax payments and 2017 overpayment credited to 2018 6a	5,200.	l			
<b>b</b> Exem	npt foreign organizations - tax withheld at source	0.				
c Tax p	oald with application for extension of time to file (Form 8868)	0.				
d Back	up withholding erroneously withheld	0.				
7 Total	credits and payments. Add lines 6a through 6d		7		<u>5,2</u>	<u>00.</u>
	any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8			0.
	due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b> _	9		2,8	<u>70.</u>
10 Over	payment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, ▶ _	10			
	the amount of line 10 to be Credited to 2019 estimated tax	Refunded <b>▶</b>	11			
Part V	II-A Statements Regarding Activities				-	
1a Durir	ng the tax year, did the foundation attempt to influence any national, state, or local legislation or c	did it participate or intervene i	n		Yes	_
, ,	political campaign?			1a		X
<b>b</b> Did if	t spend more than \$100 during the year (either directly or indirectly) for political purposes? See t	the instructions for the definit	ion	1b		X
If the	answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat	terials published or				
distri	buted by the foundation in connection with the activities.					
c Didt	he foundation file Form 1120-POL for this year?			1c		X
<b>d</b> Enter	the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•				
(1)	On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$ _	<u> </u>				
e Enter	r the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	mposed on foundation				l
mana	agers. ▶ \$0 .					ĺ
2 Has	the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If "Ye	es," attach a detailed description of the activities.				!	,
<b>3</b> Has 1	the foundation made any changes, not previously reported to the IRS, in its governing instrumen	nt, articles of incorporation, or		.		-
bylav	ws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a Did t	he foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Ye	es," has it filed a tax return on Form 990-T for this year?		N/I	A 4b		
5 Was	there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u> _
If "Ye	es," attach the statement required by General Instruction T					ĺ
6 Are t	he requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					ĺ
<ul> <li>By</li> </ul>	language in the governing instrument, or					ĺ
<ul> <li>By</li> </ul>	state legislation that effectively amends the governing instrument so that no mandatory direction	ns that conflict with the state I	aw			ĺ
rema	in in the governing instrument?			6	X	L
7 Did t	he foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part	II, col (c), and Part XV		7	Х	L
						'
8a Enter	r the states to which the foundation reports or with which it is registered. See instructions. $lacktriangle$ $lacktriangle$					
<u>C1</u>	<u> </u>		_			j
	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	eneral (or designate)			_	-
of ea	ch state as required by General Instruction G? If "No," attach explanation			8b_	Х	
	e foundation claiming status as a private operating foundation within the meaning of section 494	2(j)(3) or 4942(j)(5) for calen	dar			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part			9		Χ.
-	iny persons become substantial contributors during the tax year? If "Yes," attach a schedule listing th			10		X
				Form <b>99</b> 0	)-PF	(2018)

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Pa	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 ► LISA A. KING Telephone no. ► 860-58		<u>070</u>	
	Located at ► C/O 1900 PERKINS ST., BRISTOL, CT ZIP+4 ► 06	010		
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 2018, 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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
De	foreign country ► art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
F			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	110
ıa	During the year, did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(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?			
	(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	ļ		,
	for the benefit or use of a disqualified person)?			;
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	ļ		
	if the foundation agreed to make a grant to or to employ the official for a period after			i
	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 $N/A$	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1		'
C	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		_	
	before the first day of the tax year beginning in 2018?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		:
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018?  Light the years No			ì
	If "Yes," list the years \( \sum_{\text{inst}} \), \( \text{inst} \), \( \text{inst} \) Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			1
u	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		
c	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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			1
	during the year?			4
b	olf "Yes," did it have excess business holdings in 2018 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 2018.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		- ~-	
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
	Fo	rm <b>99</b> 0	)-PF	(2018)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to	·			Ye	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s 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		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				,
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	/-	-:	_ i
section 53 4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	<del>            </del> ,
Organizations relying on a current notice regarding disaster assistance, check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					1
expenditure responsibility for the grant?	Ŋ	I/A ∟ Y∈	s L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	s X No	İ	•
a personal benefit contract?		Y6	S LAL NO		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?			6b	<u> X</u>
If "Yes" to 6b, file Form 8870	haltar transaction?		s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16	N/A	7b	+
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	70	+
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ excess parachute payment(s) during the year?	1,000,000 in remuneration o		s X No		
Part VIII Information About Officers, Directors, Trust	es Foundation Ma			l	
Paid Employees, and Contractors	co, i oundation me	inagoro, mgm,			
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	opense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	ailow	ances
SEE STATEMENT 9	,-1	0.	0	•	0.
	·		_		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NUNE."	(d) Contributions to	(a) F	pense
(a) Name and address of each employee paid more than \$50,000	` 'hours per week "	(c) Compensation	employee benefit plans and deferred	accour	nt, other
	devoted to position		compensation	allow	ances
NONE					
			•		
		-			
		<del> </del>			
<u> </u>					
		<del> </del>		<del> </del>	
Total number of other employees paid over \$50,000				_	
ו סנפו וועוווטפו טו טעוופו פווויףוטאַפּבּיא אָפוּיט טעפו אָפטייַטטט				, 000-DI	

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "No	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(4) ()	(2)
	<del></del> .	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	T***	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced	information such as the d, etc.	Expenses
1		
SEE STATEMENT 10		<u> </u>
2		
3		
3		
4		
D. A.W. D. C.		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
37.13	Tallu Z.	Amount
1 N/A		
	•	
2		· ·
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>•</b>	0.
		Form <b>990-PF</b> (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	10,108,788.
	Average of monthly cash balances	1 <b>b</b>	148,606.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1 d	10,257,394.
	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	10,257,394.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	153,861.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,103,533.
6	Minimum investment return. Enter 5% of line 5	6	505,177.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ▶ ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	505,177.
2a	Tax on investment income for 2018 from Part VI, line 5		···
b	Income tax for 2018. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	8,070.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	497,107.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	497,107.
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	497,107.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	454,000.
ь	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		
	Suitability test (prior IRS approval required)	3a	
	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	454,000.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	454,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies f	
	4040/o) raduction of tax in those ware		

Form 990-PF (2018)

FAMILY FOUNDATION

Part XIII Undistributed Income (see	nstructions)			
,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
4. But hat he are sout for 0040 for an Boat VI	Corpus	rears prior to 2017	2017	2010
1 Distributable amount for 2018 from Part XI, line 7				497,107.
2 Undistributed income, if any, as of the end of 2018	ì			
a Enter amount for 2017 only			166,473.	
b Total for prior years.				
		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
<b>b</b> From 2014				
c From 2015				
d From 2016				
e From 2017				<del>.</del>
f Total of lines 3a through e	0.			-
4 Qualifying distributions for 2018 from	,			
Part XII, line 4 ▶ \$ 454,000.	1	,	4 4 4 4 5 6	
a Applied to 2017, but not more than line 2a			166,473.	<del></del>
<b>b</b> Applied to undistributed income of prior	Ì	_		
years (Election required - see instructions)		0.		_ <del>_</del> .
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				287,527.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2018 (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.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017, Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				209,580.
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 2013	-			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	0.			
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				

FAMILY FOUNDATION

Part XV   Supplementary Information				
3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	· · · · · · · · · · · · · · · · · · ·	
a Paid during the year				
ANIMAL LEGAL DEFENSE FUND			GRANT TO CHARITABLE ORGANIZATION	
525 EAST COTATI AVENUE COTATI CA 94931			ORGANIZATION	4,000.
COIAII, CA 74731				
APPLEGATE VALLEY FIRE DISTRICT #9			GRANT TO CHARITABLE	
1095 UPPER APPLEGATE ROAD			ORGANIZATION	
JACKSONVILLE, OR 97530				8,500.
ASHLAND HIGH SCHOOL - FOOTBALL CLUB			GRANT TO CHARITABLE	
PO BOX 854			ORGANIZATION	
ASHLAND OR 97520				2,500.
BRISTOL ADULT RESOURCE CENTER, INC.			GRANT TO CHARITABLE	
621 JEROME AVE, PO BOX 726			ORGANIZATION	E 000
BRISTOL, CT 06011			-	5,000.
BRISTOL FAMILY RESOURCE CENTER			GRANT TO CHARITABLE	
500 CLARK AVENUE			ORGANIZATION	
BRISTOL CT 06010				5 000
	TINUATION SHEE	T(S)	<u> </u>	454 000
<b>b</b> Approved for future payment				
NONE	'			
v				
•				
37-2				
Tabl	<u> </u>	_	<b>▶</b> 3b	
Total			<b>▶</b> 30 (	0.

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
RISTOL HOSPITAL DEVELOPMENT				
COUNDATION			ORGANIZATION	
45 QUEEN STREET				50,0
RISTOL, CT 06010				
DUSHNELL			GRANT TO CHARITABLE	
.66 CAPITOL AVENUE			ORGANIZATION	
LARTFORD, CT 06106				10,0
CASA OF JACKSON COUNTY				
313 MARKET STREET	show any relationship to any foundation states of recipient states	10.0		
MEDFORD, OR 97504				10,00
CONNECTICUT SCIENCE CENTER			GRANT TO CHARITABLE	
250 COLUMBUS BOULEVARD			ORGANIZATION	
ARTFORD, CT 06103				20,0
POWER CHOICE WOMEN TENED FOR A TUTNO			CDANIE MO CUADITADIE	
COURAGEOUS WOMEN FEARLESS LIVING			1	
1769 DOLORES RIVER DRIVE WINDSOR, CO 80550			DRGANIZATION	. 10,0
VINDBOK, CO 00330				
ENCOMPASS				
1407 BOALCH AVE. NW			ORGANIZATION	<b>7</b> 0
NORTH BEND, WA 98045		.=,		7,0
ENVIRONMENTAL LEARNING CENTERS CT			GRANT TO CHARITABLE	
501 WOLCOTT ROAD			ORGANIZATION	
BRISTOL, CT 06010				25,0
EVERGREEN MOUNTAIN BIKE ALLIANCE				
438 NE 72ND STREET			ORGANIZATION	2.0
GEATTLE, WA 98115				
FALL CITY COMMUNITY FOOD PANTRY			GRANT TO CHARITABLE	
1326 337TH PLACE S.E.			ORGANIZATION	
FALL CITY, WA 98024	-			4,0
FAMILY NURTURING CENTER			l <sup>-</sup>	
212 NORTH OAKDALE			ORGANIZATION	15 0
MEDFORD, OR 97501				15,0 429,0

FAMILY FOUNDATION Part XV Supplementary Information

Show any relationship to Studies (home or business) show any relationship to studies of recipient status of of recip	3 Grants and Contributions Paid During the Ye	If recipient is an individual,			******************************
FCOP INTERNATIONAL, INC.  PO BOX 1449, 20011 CTV, RD. 13  PORT MORGAN, CO 80701  PIRST CONGREGATIONAL CHURCH 31 MAPLE ST.  BRESTOL, CT 06010  FERST CONGREGATIONAL CHURCH 31 MAPLE ST.  BRESTOL, CT 06010  FREED HUTCHINSON CANCER RESEARCH  CERTER 1100 FAIRVIEW AVE N., MAIL STOP J5 200  SEATTLE, WA 98109  1  PRIENDS OF THE ACFL 519 COMMERCIAL 432  NANACORTES WA 98221  BRANT TO CHARITABLE  DRGANIZATION  3  HERITAGE FLIGHT MUSEUM  STRANT TO CHARITABLE  DRGANIZATION  3  HERITAGE FLIGHT MUSEUM  STRANT TO CHARITABLE  DRGANIZATION  3  HUMANE SOCIETY OF SKAGIT VALLEY  BRANT TO CHARITABLE  DRGANIZATION  3  HUMANE SOCIETY OF SKAGIT VALLEY  BRANT TO CHARITABLE  DRGANIZATION  3  HUMANE SOCIETY OF SKAGIT VALLEY  BRANT TO CHARITABLE  DRGANIZATION  5  BRANT TO CHARITABLE  DRGANIZATION  6  BRANT TO CHARITABLE  DRGANIZATION  CHARITABLE  DRGANIZATION  CHARITABLE  DRGANIZATION  CHARITABLE  DRGANIZATION  ALBANY, OR 97321  2	- Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
FIRST CONGREGATIONAL CHURCH 31 MAPLE ST. 32 GRANT TO CHARITABLE ORGANIZATION 325 SEATTLE WA 98109 31 PRIENTS OF THE ACFL 319 COMMERCIAL #32 MACGREES WA 98221 32 GRANT TO CHARITABLE ORGANIZATION 33 HERITAGE FLIGHT MUSEUM 35 GRANT TO CHARITABLE ORGANIZATION 34 HERITAGE FLIGHT MUSEUM 35 GRANT TO CHARITABLE ORGANIZATION 35 GRANT TO CHARITABLE ORGANIZATION 36 GRANT TO CHARITABLE ORGANIZATION 37 GRANT TO CHARITABLE ORGANIZATION 38 GRANT TO CHARITABLE ORGANIZATION 39 GRANT TO CHARITABLE ORGANIZATION 40 GRANT TO CHARITABLE ORGANIZATION 41 GRANT TO CHARITABLE ORGANIZATION 41 GRANT TO CHARITABLE ORGANIZATION 42 GRANT TO CHARITABLE ORGANIZATION 43 GRANT TO CHARITABLE ORGANIZATION 44 GRANT TO CHARITABLE ORGANIZATION 55 GRANT TO CHARITABLE ORGANIZATION 56 GRANT TO CHARITABLE ORGANIZATION 57 GRANT TO CHARITABLE ORGANIZATION 58 GRANT TO CHARITABLE ORGANIZATION 59 GRANT TO CHARITABLE ORGANIZATION 50 GRANT TO CHARITABLE ORGANIZATION 51 GRANT TO CHARITABLE ORGANIZATION 52 GRANT TO CHARITABLE ORGANIZATION 52 GRANT TO CHARITABLE ORGANIZATION 53 GRANT TO CHARITABLE ORGANIZATION 54 GRANT TO CHARITABLE ORGANIZATION 55 GRANT TO CHARITABLE ORGANIZATION 56 GRANT TO CHARITABLE ORGANIZATION 57 GRANT TO CHARITABLE ORGANIZATION 58 GRANT TO CHARITABLE ORGANIZATION 58 GRANT TO CHARITABLE ORGANIZATION 58 GRAN	FCOP INTERNATIONAL, INC. PO BOX 1449,20011 CTY, RD. 13	or substantial contributor	гесіріент		
SI MAPLE ST.  SRISTCL CT 06010  25  SRISTCL CT 06010  26  SRISTCL CT 06010  27  SRANT TO CHARITABLE DRGANIZATION  SRATTLE WA 98109  10  FRIENDS OF THE ACFL SI9 COMMERCIAL #32  ANACORTES WA 98221  MACORTES WA 98221  SRANT TO CHARITABLE ORGANIZATION  3  HERITAGE FLIGHT MUSEUM SIPOSIA SOCIETY OF SKAGIT VALLEY SUBLINGTON WA 98233  3  HUMANE SOCIETY OF SKAGIT VALLEY SRANT TO CHARITABLE ORGANIZATION  3  SRANT TO CHARITABLE ORGANIZATION  6  SRANT TO CHARITABLE ORGANIZATION  5  SRATTLE, WA 98222  SRANT TO CHARITABLE ORGANIZATION  6  SRANT TO CHARITABLE ORGANIZATION  5  SRATTLE, WA 98122  SRANT TO CHARITABLE ORGANIZATION  5  SRATTLE, WA 98122  SRANT TO CHARITABLE ORGANIZATION  5  SRATTLE, WA 98122  SRANT TO CHARITABLE ORGANIZATION  5  SRANT TO CHARITABLE ORGANIZATION  5  SRANT TO CHARITABLE ORGANIZATION  1  LINN-BENTON COMMUNITY COLLEGE SRANT TO CHARITABLE ORGANIZATION  1  LINN-BENTON COMMUNITY COLLEGE STOP PACIFIC BLOW SW ALBANY, OR 97321  2	ORT MORGAN CO 80701	170 7		-	10,000
CENTER 1100 FARVIEW AVE N., MAIL STOP J5-200 SEATTLE WA 98109  1 FRIENDS OF THE ACFL 619 COMMERCIAL #32 ANACORTES WA 98221  HERITAGE FLIGHT MUSEUM 15053 CROSSWIND DR. BURLINGTON WA 98233  HUMANE SOCIETY OF SKAGIT VALLEY 18841 KELLEHER RD. BURLINGTON, WA 98233  6  JEWISH FAMILY SERVICE 1601 16TH AVE SEATTLE, WA 98122  KLAMATH COUNTY SCHOOL DISTRICT 10501 WASHBURN WAYS KLAMATH FALLS, OR 97603  LINN-BENTON COMMUNITY COLLEGE 6500 PACIFIC BLVD SW ALBANY, OR 97321  2  SRANT TO CHARITABLE DRGANIZATION  5  SRANT TO CHARITABLE DRGANIZATION  1  LINN-BENTON COMMUNITY COLLEGE 6500 PACIFIC BLVD SW ALBANY, OR 97321	FIRST CONGREGATIONAL CHURCH 31 MAPLE ST. BRISTOL, CT 06010	`			25,000
ANACORTES WA 98221  ANACORTES WA 98221  ANACORTES WA 98221  BERRITAGE FLIGHT MUSEUM  STANT TO CHARITABLE  ORGANIZATION  BURLINGTON WA 98233  BURLINGTON WA 98233  BURLINGTON, WA	CENTER 1100 FAIRVIEW AVE N., MAIL STOP J5-200				1,000
15053 CROSSWIND DR.  BURLINGTON WA 98233  HUMANE SOCIETY OF SKAGIT VALLEY  18841 KELLEHER RD.  BURLINGTON, WA 98233  6  JEWISH FAMILY SERVICE  1601 167H AVE  SEATTLE, WA 98122  SEATT TO CHARITABLE  ORGANIZATION  1  LINN-BENTON COMMUNITY COLLEGE  6500 PACIFIC BLVD SW  ALBANY, OR 97321  2	619 COMMERCIAL #32				3,000
18841 KELLEHER RD.  BURLINGTON, WA 98233  6  JEWISH FAMILY SERVICE  JEWISH FAMILY SERVICE  1601 16TH AVE  SEATTLE, WA 98122  5  KLAMATH COUNTY SCHOOL DISTRICT  10501 WASHBURN WAYS  KLAMATH FALLS, OR 97603  LINN-BENTON COMMUNITY COLLEGE  6500 PACIFIC BLVD SW  ALBANY, OR 97321  2	15053 CROSSWIND DR.				3,000
1601 16TH AVE SEATTLE, WA 98122  KLAMATH COUNTY SCHOOL DISTRICT 10501 WASHBURN WAYS KLAMATH FALLS, OR 97603  LINN-BENTON COMMUNITY COLLEGE 6500 PACIFIC BLVD SW ALBANY, OR 97321  CRANT TO CHARITABLE ORGANIZATION  2	18841 KELLEHER RD.	,			6,000
10501 WASHBURN WAYS  KLAMATH FALLS, OR 97603  LINN-BENTON COMMUNITY COLLEGE  6500 PACIFIC BLVD SW  ALBANY, OR 97321  CRANT TO CHARITABLE  ORGANIZATION  2	1601 16TH AVE	•			5,000
6500 PACIFIC BLVD SW  ALBANY, OR 97321  2	10501 WASHBURN WAYS			Ī · · · · · · · · · · · · · · · · · · ·	1,000
LOS ANGELES LORT CENTED	6500 PACIFIC BLVD SW				2,500
1625 N. SCHRADER BLVD ORGANIZATION				GRANT TO CHARITABLE ORGANIZATION	2,500

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager 'Name and address (home or business) recipient or substantial contributor GRANT TO CHARITABLE LOST RIVER HIGH SCHOOL BOOSTER CLUB 23330 HIGHWAY 50 ORGANIZATION 55,000. MERRILL OR 97633 MAIN ST. COMMUNITY FOUNDATION GRANT TO CHARITABLE ORGANIZATION MAIN ST., P.O. BOX 2702 BRISTOL, CT 06010 15,000. MAMA'S HANDS HOUSE OF HOPE GRANT TO CHARITABLE PO BOX 40464 ORGANIZATION 2,000. BELLEVUE WA 98015 MIDDLE TN BSA "STEM SCOUTS" GRANT TO CHARITABLE 3414 HILLSBORO PIKE ORGANIZATION 10,000. NASHVILLE TN 37215 MULTIPLE MYELOMA RESEARCH FOUNDATION GRANT TO CHARITABLE 383 MAIN AVENUE, 55TH FLR ORGANIZATION 2,500. NORWALK CT 06851 NATIONAL FALLEN FIREFIGHTERS FOUND GRANT TO CHARITABLE ORGANIZATION PO DRAWER 498 6,000. EMMITSBURG MD 21727 NATURE CONSERVANCY OF WASHINGTON GRANT TO CHARITABLE ORGANIZATION 410 NORTH 4TH STREET 4,000. MOUNT VERNON, WA 98273 GRANT TO CHARITABLE NUTMEG SYMPHONY PO BOX 2154 ORGANIZAITON 6,000. BRISTOL, CT 06010 PADILLA BAY FOUNDATION GRANT TO CHARITABLE ORGANIZATION PO BOX 1305 3,000. MOUNT VERNON, WA 98273 PETS UNITING PEOPLE SOCIETY GRANT TO CHARITABLE ORGANIZATION PO BOX 49 6.000. TREMONT CITY, OH 45372 Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
- Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
*Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient	-	
RENBROOK SCHOOL			GRANT TO CHARITABLE	
2865 ALBANY AVENUE			ORGANIZATION	
WEST HARTFORD, CT 06117				11,00
SALVATION ARMY			GRANT TO CHARITABLE	
19 STEARNS STREET, PO BOX 471 BRISTOL CT 06011			ORGANIZATION	5.00
<u> </u>				3,00
SEADOC SOCIETY			GRANT TO CHARITABLE	
942 DEER HARBOR ROAD			ORGANIZATION	
EASTSOUND WA 98245				4,00
SNOQUALMIE PASS FIREFIGHTERS ASSOC			GRANT TO CHARITABLE	
РО ВОХ 99			ORGANIZATION	
SNOQUALMIE PASS WA 98068				4,00
CNOOMAINTE VALLEY DRECEDVANTON			GRANT TO CHARITABLE	
SNOQUALMIE VALLEY PRESERVATION ALLIANCE			ORGANIZATION	
PO BOX 1148			00.2	
CARNATION WA 98014				35.00
SNOQUALMIE VALLEY SCHOOLS FOUND.			GRANT TO CHARITABLE	
PO BOX 724			ORGANIZATION	
FALL CITY, WA 98024				15,00
SOROPTIMIST INTERN OF KLAMATH FALLS			GRANT TO CHARITABLE	
P.O. BOX 134			ORGANIZATION	•
KLAMATH FALLS, OR 97601				7,50
SOUTHINGTON COMMUNITY CULTURAL ARTS			GRANT TO CHARITABLE	
INC.			ORGANIZATION	
93 MAIN STREET, PO BOX 50				
SOUTHINGTON, CT 06489				5,00
SPOT SAVING PETS ONE AT A TIME			GRANT TO CHARITABLE	
PO BOX 211			ORGANIZATION	
BURLINGTON, WA 98233				3,00
THE COMMUNITY SCHOOL			GRANT TO CHARITABLE	
337 WEST 30TH STREET			ORGANIZATION	10.00
BALTIMORE MD 21211 Total from continuation sheets				10.00

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager 'Name and address (home or business) recipient or substantial contributor UNIVERSITY OF HARTFORD GRANT TO CHARITABLE ORGANIZATION 200 BLOOMFIELD AVENUE 5,000. HARTFORD, CT 060117 GRANT TO CHARITABLE WASHINGTON DECA ORGANIZATION 200 WEST MERCER STREET, STE 207 SEATTLE, WA 98119 1,000. YOUR STORY FOUNDATION GRANT TO CHARITABLE 2022 M AVENUE ORGANIZATION 2,000. ANACORTES, WA 98221 Total from continuation sheets

Enter gross amounts unless otherwise indicated.	Unrelated	business 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		code	741100111		
a	_			<del></del>		
b	_	<del></del>			·-	
C				-+	<del></del>	
d	_				<del>-</del>	
e		<del>~~~</del>			<del></del>	
1	_					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash				4 005		
investments			14	1,887. 102,831.		
4 Dividends and interest from securities			14	102,831.	<del></del>	
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	314,324.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b	_					
C						
d						
e	_					
12 Subtotal Add columns (b), (d), and (e)			).	419,042.		
13 Total. Add line 12, columns (b), (d), and (e)				13	419,042	
(See worksheet in line 13 instructions to verify calculations.	)					

#### Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of
▼	the foundation's exempt purposes (other than by providing funds for such purposes).
3	THE FOUNDATION WAS ESTABLISHED FOR THE SOLE PURPOSE OF PROVIDING
	GRANTS TO DOMESTIC ORGANIZATIONS DESCRIBED IN SECTION 501(C)3 AND
	CONTRIBUTIONS WHICH ARE TAX DEDUCTIBLE UNDER SECTION 170(C)(2).
<u> </u>	THE FOUNDATION WAS ESTABLISHED FOR THE SOLE PURPOSE OF PROVIDING
	GRANTS TO DOMESTIC ORGANIZATIONS DESCRIBED IN SECTION 501(C)3 AND
	CONTRIBUTIONS WHICH ARE TAX DEDUCTIBLE UNDER SECTION 170(C)(2).
3	THE FOUNDATION WAS ESTABLISHED FOR THE SOLE PURPOSE OF PROVIDING
	GRANTS TO DOMESTIC ORGANIZATIONS DESCRIBED IN SECTION 501(C)3 AND
	CONTRIBUTIONS WHICH ARE TAX DEDUCTIBLE UNDER SECTION 170(C)(2).

Cause 000 DC /		F. & CAR		BARNES			20 0	710202	Do	an 19
Form 990-PF ( Part XVII	\	Y FOUNDAT		nd Transa	ctions ar	nd Relations	hips With Nonc	718203 haritable		ige 13
I alt Avii	Exempt Organ		Siers to a	ilu Iralisa	Ctions ai	id Neiations	mps with recirc	iaiitabie	•	
•	organization directly or indi	rectly engage in any				n described in sec	tion 501(c)		Yes	No
•	an section 501(c)(3) organ				anizations?					
	s from the reporting found	ation to a noncharita	ble exempt or	ganization of.						l
(1) Casl								1a(1)		X
(2) Othe								1a(2)		Х
	insactions	h.l						4.40		v
	es of assets to a noncharita	·						1b(1)		X
\- <i>\</i>	chases of assets from a no	,	organization					1b(2) 1b(3)		X
• •	tal of facilities, equipment, mbursement arrangements							1b(3)		X
	ns or loan guarantees							1b(5)		X
	formance of services or me	embershin or fundrai	sino solicitatio	nns				1b(6)		X
` '	of facilities, equipment, ma	•	•					1c		Х
-	swer to any of the above is	-			b) should alw	vavs show the fair	market value of the goo		sets.	
	es given by the reporting f		-	•	•	-				
	(d) the value of the goods,					•	•			
(a) Line no	(b) Amount involved	(c) Name of	f noncharitable	e exempt organi	zation	(d) Description	n of transfers, transactions,	and sharing ar	rangeme	nts
			N/A							
										<del></del>
	<del></del> .									
							<del></del>			
	-				<del>,,</del>					
								<del></del>		
					<del></del>	-				
	<del></del>					+				
						+				
0 - la tha fa		the offiliated with an	rolated to ano	or mara tay ay	ampt argani	entrope department				
	undation directly or indirectly or indirectly			or more tax-ex	empt organiz	anons described		Yes	¥	] No
	n 501(c) (other than section complete the following sch		327 r					163		טווו ב
<u>u</u> 11 163, 1	(a) Name of org			(b) Type of or	ganization		(c) Description of relat	ionship		
	N/A			(-) -)	<u></u>		<u> </u>	•		
							<del></del>			
							<del></del>			
	<del></del> -					<del></del> -				
	er penalties of perjury, I declare							May the IRS	discuss t	this
Sign and	belief, it is true, correct, and cor	mplete Declaration of pr	eparer (other that	n taxpayer) is base	ed on all inform	ation of which prepare	er has any knowledge	return with the	e prepar	er
Here	Thomas (	Q. Bun	- A	5/-	1/19	TRUST	EE	X Yes		] No
Sig	gnature of officer or trustee		-	Date		Title		<u></u>		
	Print/Type preparer's na	ame	Preparer's si	ignature		Date		rin		
						1.1.	self- employed			
Paid	JAY M SATT		lay	<u> </u>		3/1/7	<del></del>	200041		
Preparer	111111 0 11 at 110	M, SHAPIR	80 % CO	MPAŃY,	P.C.,	CPA'S	Firm's EIN ► 06	-10092	05	
Use Only							<del> </del>			
	Firm's address ► 29			•		72000				
	WE WE	ST HARTFO	ORD, CT	<u> 06127-</u>	<u> 2000                                  </u>		Phone no. 860	<u> 561-4</u>	<u>000</u>	

# Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **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

Employer Identification number

2018

HARRY F. & CAROL H. BARNES FAMILY FOUNDATION 20-8718203 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 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** K 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**

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 (entering "N/A" in column (b) instead of the contributor name and address), 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 If 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

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

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)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

religious, charitable, etc., contributions totaling \$5,000 or more during the year

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

HARRY F. & CAROL H. BARNES FAMILY FOUNDATION

20-8718203

## Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE HARRY FULLER BARNES CHARITABLE LEAD ANNUITY TRUST  C/O THOMAS O. BARNES  BRISTOL, CT 06010	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE HARRY FULLER BARNES CHARITABLE LEAD ANNUITY TRUST  C/O THOMAS O. BARNES  BRISTOL, CT 06010	- - \$\$65,288.	Person X Payroll
(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 Payroli Complete Part II for noncash contributions )

Name of organization

Employer identification number

HARRY F. & CAROL H. BARNES FAMILY FOUNDATION

20-8718203

rartii	Notices if Froperty (see instructions) ose duplicate copies of Farthin		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
1	6,502 SHS OF BARNES GROUP, INC. STOCK		
		\$\$17,038.	02/23/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	<del></del> -
(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 received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization **Employer identification number** HARRY F. & CAROL H. BARNES FAMILY FOUNDATION 20-8718203 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 info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (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 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

> Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND	TEMP	ORARY	CASH I	NVESTMENTS	STAT	EMENT	1
SOURCE		-	(A) REVEN ER BO	WE		(B) NVESTMENT NCOME	AD	(C) JUSTED INCOM	E
US TRUST			1	,887.		1,887.			
TOTAL TO PART I, LI	INE 3		1	,887.		1,887.			
FORM 990-PF	DIVIDENI	OS AND I	NTERE	ST FRO	OM SECU	RITIES	STAT	EMENT	2
SOURCE	GROSS AMOUNT	GA	ITAL INS DENDS		(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTI ET INCO	
US TRUST	102,831		0	. 1	102,831	. 102,83	1.		
TO PART I, LINE 4	102,831		0	. 1	02,831	. 102,83	1.		
FORM 990-PF		L	EGAL	FEES			STAT	EMENT	3
DESCRIPTION		(A) EXPENS PER BO		( F NET IN MENT I	WEST-	(C) ADJUSTEI NET INCOM		(D) HARITAI PURPOSI	
LEGAL FEES	-		630.		630.				0.
TO FM 990-PF, PG 1,	LN 16A =		630.		630.				0.
FORM 990-PF		ACCO	UNTIN	G FEES	5		STAT	EMENT	4
DESCRIPTION		(A) EXPENS PER BO		( E NET IN MENT I	WEST-	(C) ADJUSTEI NET INCOM		(D) HARITAI PURPOSI	
ACCOUNTING FEES	_	2,	400.		2,400.				0.
TO FORM 990-PF, PG	1, LN 16B	2,	400.		2,400.				0.
	==								

FORM 990-PF	TAX	ES	•	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FEDERAL TAX	10,307.	0.			0.
TO FORM 990-PF, PG 1, LN 18	10,307.	0.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK SERVICE CHARGES INSURANCE MISCELLANEOUS EXPENSE	11,541. 487. 2,156.	11,541. 487. 500.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	14,184.	12,528.			0.
FORM 990-PF OTHER DECREAS:	ES IN NET AS	SETS OR FUND I	BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
BOOK/TAX DIFFERENCE ON SALE	OF DONATED A	SSETS	-	140,35	51.
	TT T T T T T T T T T T T T T T T T T T		-	140,35	
TOTAL TO FORM 990-PF, PART I	II, LINE 5		=	140,5	51.
FORM 990-PF	CORPORAT	E STOCK	-	STATEMENT	8
			OK VALUE		8
FORM 990-PF	CORPORAT	ВОО	OK VALUE 4,424,596.	STATEMENT FAIR MARKET	8

	ST OF OFFICERS, D		STATE	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
NANCY DEY C/O 1900 PERKINS ST. BRISTOL, CT 06010	CHAIRPERSON 5.00	0.	0.	0.
THOMAS O BARNES C/O 1900 PERKINS ST. BRISTOL, CT 06010	PRESIDENT 5.00	0.	0.	0.
JARRE BARNES BETTS C/O 1900 PERKINS ST. BRISTOL, CT 06010	SECRETARY 5.00	0.	0	0.
MICHAEL WRAY C/O 1900 PERKINS ST. BRISTOL, CT 06010	TREASURER 5.00	0.	0.	0.
LISA A. KING C/O 1900 PERKINS ST. BRISTOL, CT 06010	ASST. SEC. 5.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.
FORM 990-PF SUMMARY OF DI	RECT CHARITABLE A	CTIVITIES	STATE	EMENT 10

### ACTIVITY ONE

THE FOUNDATION WAS ESTABLISHED FOR THE SOLE PURPOSE OF PROVIDING GRANTS TO DOMESTIC ORGANIZATIONS WHICH QUALIFY AS CHARITABLE ORGANIZATIONS DESCRIBED IN SECTION 501(C)(3) AND CONTRIBUTIONS WHICH ARE TAX DEDUCTIBLE UNDER SECTION 170(C)(2). IN 2018, THE FOUNDATION DISTRIBUTED A TOTAL OF \$454,000 TO 49 ORGANIZATIONS.

•		EXPENSES
TO FORM 990-PF, PART IX-A,	LINE 1	0.