Return of Private Foundation

DLN: 93491277001049 OMB No 1545-0052

2018

Form 990-PF
Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20)18 , a	nd er	nding 12-31-	2018	
		indation AN FOUNDATION			A Employer Id	entification numbe	er
	L COM	NICTO NEW TOOL			22-2668435		
		street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
21	JU LEEL	DER HILL ROAD NO 300A			(203) 804-9244		
		, state or province, country, and ZIP or foreign postal code T 06517			C If exemption	application is pendir	na check here
ПАП	DEN, C	00317			C II exemption	application is perion	▶ L
G Ch	eck al	I that apply \square Initial return \square Initial return of a	former public charity		D 1. Foreign or	ganizations, check h	ere 🕨 🔲
		Final return Amended return				ganizations meeting k here and attach co	
		Address change Name change				ındatıon status was	· -
_		pe of organization Section 501(c)(3) exempt private				n 507(b)(1)(A), che	
			e private foundation		-		
		rom Part II col (c)	✓ Cash ☐ Accru	ıal		ition is in a 60-mont n 507(b)(1)(B), che	
line	16)	►\$ 6,551,959	be on cash basis)				
-			, 	1			lan a .
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)		(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions))	books		income	ıncome	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	Dividends and interest from securities	103,387	·	103,387		
	5a	Gross rents					
	b	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10	331,533	}			
Revenue	b	Gross sales price for all assets on line 6a					
Re.	7	Capital gain net income (from Part IV, line 2)			331,533		
	8	Net short-term capital gain			· · · · · · · · · · · · · · · · · · ·		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	434,920		434,920		
	13	Compensation of officers, directors, trustees, etc	()	0		(
	14	Other employee salaries and wages					
es S	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
Š	Ь	Accounting fees (attach schedule)	3,200		0		(
e.	С	Other professional fees (attach schedule)	33,922		26,422		7,500
Administrative Expenses	17	Interest					
<u> </u>	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion					
AG	20	Occupancy					
פֿ	21	Travel, conferences, and meetings					
ਰ	22 23	Other expenses (attach schedule)	2,686		819		1,867
Operating and	24	Total operating and administrative expenses.	2,000				1,00
era	24	Add lines 13 through 23	39,808	,	27,241		9,367
o	25	Contributions, gifts, grants paid	327,000	1	2,,271		327,000
	26	Total expenses and disbursements. Add lines 24 and	,,,,,,,				,,,,,,
		25	366,808	3	27,241		336,367
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	68,112				
	b	Net investment income (if negative, enter -0-)	55,112		407,679		
	С	Adjusted net income (If negative, enter -0-)			.,		
For	Daner	work Reduction Act Notice, see instructions.	1		Cat No. 11388	, Ea	rm 000-DE (2019

3,903,805

437

3,903,368

3,903,805

3,903,805

3,967,104

437

3,966,667

3,967,104

3,967,104

2 3

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6

3,903,805 68,112

3,971,917

3,967,104

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4,813

76,108 5,208,203 800,550

6,551,959

		Less allowance for doubtful accounts ▶		ı		
	4	Pledges receivable ▶				_
		Less allowance for doubtful accounts ▶		l		
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)		l		
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)	76,137	% J	75,403	
	ь	Investments—corporate stock (attach schedule)	2,622,271	% J	2,625,375	
	С	Investments—corporate bonds (attach schedule)	698,412	% J	799,228	
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶		l		
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				_

Less accumulated depreciation (attach schedule) ▶

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

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds

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

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Other assets (describe > _

Grants payable

Deferred revenue .

Other liabilities (describe -

Unrestricted . . .

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

instructions Also, see page 1, item I)

15

16

17

18

19

20

21

22

23

24

25

26

28

29

31 Part III

Liabilities

or Fund Balances

Assets 27

Net 30

2

3

4

5

	e the kınd(s) of property sold (e g , irehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1aSee Additional Data Tabl	e					
b						
с						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis pense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tabl	e					
b						
c						
d						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	I)	
(i) F M V as of 12/31/69	(j) Adjusted basis	Excess	(k) s of col (ı)	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))	
a See Additional Data Tabl	as of 12/31/69	over co	ıl (j), ıf any	Losses (III	on cor (n))	
b	e					
d 						
•	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi		0- · · · · }	3	331,533	
Part V Qualification l	Jnder Section 4940(e) for Re	educed Tax on Net	t Investment I	ncome		
	rivate foundations subject to the se					
If section 4940(d)(2) applies, le	•		et investment inte			
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do			d? ∐ Y≀	es 🗹 No	
	nount in each column for each year,	see instructions before	e making any entri			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ble-use assets	(d) Distribution rati (col (b) divided by c		
2017	286,100		6,799,660		0 042076	
2016	288,919		5,899,352		0 048975	
2015	308,657		5,628,682		0 054836	
2014	271,286		5,533,807		0 049023	
2013	218,700		5,078,328	T	0 043065	
2 Total of line 1, column (′				0 237975	
number of years the four	ofor the 5-year base period—divide idation has been in existence if less ncharitable-use assets for 2018 fron	than 5 years	5 0, or by the 3		0 047595 6,920,139	
5 Multiply line 4 by line 3	ncharitable-use assets for 2018 from	•	5		329,364	
	ent income (1% of Part I, line 27b)		6		4,077	
			7		333,441	
	ons from Part XII, line 4 , eater than line 7, check the box in Pa			l ng a 1% tax rate Se	336,367 e the Part VI	

01111	330 TT (20.										- 1	age t
Par	t VII-B			Activities for Which	Form 4720 May Be	Required (c	ontınue	ed)				
5a	During the	year did the foundation p	oay o	r incur any amount to							Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry											
	(2) Influen	ce the outcome of any sp	ecifi	public election (see sect	ion 4955), or to carry	-	163		140			
	on, dire	ectly or indirectly, any vo	ter re	gistration drive?			Yes		No			
	(3) Provide	a grant to an individual	for t	avel, study, or other sımı	lar purposes?	Ī	Yes		No			
	(4) Provide	a grant to an organizati	on ot	her than a charitable, etc	, organization described		_ res	•	NO			
	ın secti	on 4945(d)(4)(A)? See ir	nstru	tions		г	7 v	✓	NI -			
	(5) Provide	for any purpose other t	han r	eligious, charitable, scient	tific, literary, or	L	_ Yes	•	No			
				ention of cruelty to childre		г	٦	. 🗷				
b				iny of the transactions fai		ceptions descri	_ Yes bed in	Y	No			
-				nt notice regarding disast		·		_		5b		
	=			regarding disaster assista								
_	•	, ,		does the foundation claim								
·		·		sponsibility for the grant?	•	-	_					
		· · · · · · · · · · · · · · · · · · ·		·		٠. ١	_ Yes	Ш	No			
_		•		y Regulations section 53 4								
6 a				ive any funds, directly or	indirectly, to pay premiu	ims on						
		benefit contract?				•	Yes	✓	No			
b	Did the fou	ndation, during the year,	pay	premiums, directly or indi	irectly, on a personal be	nefit contract?				6b		No
	If "Yes" to	6b, file Form 8870										
7a	At any time	during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trar	nsaction?	Yes	~	No			
b	If yes, did	the foundation receive ar	y pro	ceeds or have any net inc	come attributable to the	transaction?.	_ :::.	_		7 b		
8	Is the foun	dation subject to the sect	tion 4	960 tax on payment(s) of	f more than \$1,000,000	ın remuneratıo	n or					
	excess para	achute payment during th	ne ye	ar [?]			Yes		No			
		Information About (Offic	ers, Directors, Trust	ees Foundation Ma	nagers Hig				vees		
Par	3 20 7 4 1 1 1	and Contractors	,,,,	ers, Directors, Trast	ccs, i candation in	inagers, mg	iny i ai	u	p.o	,,		
1	List all offi	cers, directors, trustee		undation managers an					T			
	(a) Nar	ne and address	١ '	b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contril employee ben					se acc	
	. ,			devoted to position	' -0-´)	deferred cor			0	ther al	lowand	ces
WILLI	AM E CURRAN			REASURER	0			C				C
	NORTH A1A 50		0 00									
	BEACH, CT 3	2963										
	GOLDFIELD		SECR 0 00	ETARY	0			C	기			C
	HURCH ST 107 HAVEN, CT 06		0 00									
	ARET C ANDRI		DRES	IDENT	0				+-			
	ALNUT STREE		0 00	IDEM	٥				Ί			
	SPRINGS, FL											
JEAN (C SOSNAUD		DIRE	CTOR	0							(
538 1:	1TH AVENUE		0 00									
	RANCISCO, CA											
2	Compensa	tion of five highest-pa	id en	ployees (other than th	ose included on line 1	.—see instruct	tions). I	if no	ne, e	nter "	NONE.	."
/- \ h				(b) Title, and average		(d) Contributions to			(-)	-		
(a)		ddress of each employee than \$50,000	paid	hours per week	(c) Compensation	employee plans and					se acco	
	11101	C than \$50,000		devoted to position		comper		1		iici uii	o mane	
NONE						·						
						+						
						+						
								_				
Tota	l number of	other employees paid ov	er \$5	0,000			▶					(
									For	m 99 (D-PF	2018

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	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	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include relevorganizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	_
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	• 0
		Form 990-PF (2018)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

2

3a 3h

4

5

336.367

4,077

332.290

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Page 9

341,930

325,559

16,371

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0-PF	(2	018	3)
YTT	7		In

1 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.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 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).

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

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

6 Enter the net total of each column as

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

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. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

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

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

10.808

10,808

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VALL				

orm 990-PF (2018)							
Part XIII	Undistributed Income (see instruc	tions)					

b Total for prior years

a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017.



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Part XVI-A Analysis of Income-Producing Activities	
Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514	(e) Related or exempt
(a) (b) (c) (d) 1 Program service revenue Business code Amount Exclusion code Amount	function income (See instructions)
a	
b	
c	
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 14 103,387	
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	
Inventory	
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory	
11 Other revenue a	
b	
d	
e	
12 Subtotal Add columns (b), (d), and (e). 0 434,920 13 Total. Add line 12, columns (b), (d), and (e).	434,920
13 Total. Add line 12, columns (b), (d), and (e)	434,920
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
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) (See instructions)	

n 990-PF (20	18)		Pa			
art XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharita Exempt Organizations					
	nization directly or indirectly engage in any of the following with any other organization described in section 501 an section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes			

Form 99	90-PF (<u> </u>							Pa	ge 1 :
	XVII	Exempt Organi	zations				elationships With Nonchari	table		
		ganization directly or in than section 501(c)(3)					nization described in section 501 izations?		Yes	No
a Tra	nsfers	from the reporting foun	dation to a n	oncharitable exe	empt organizatio	n of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
		sactions						1		
		of assets to a nonchar	•	-				1b(1)		No
		ases of assets from a r						1b(2)		No
		al of facilities, equipmer bursement arrangemen	•					1b(3) 1b(4)		No No
		s or loan guarantees.						1b(5)		No
		mance of services or m						1b(6)		No
				-				1c		No
of t ın a	he goo iny trar	ds, other assets, or ser nsaction or sharing arra	vices given b ngement, sh	y the reporting to ow in column (d	foundation If the i) the value of th	e foundation r e goods, othe	ould always show the fair market eceived less than fair market valuer assets, or services received	ie		
(a) Line	• No	(b) Amount involved	(c) Name of	noncharitable exer	mpt organization	(d) Descrip	otion of transfers, transactions, and sha	ring arra	ngemen	ts
	_									
des	crıbed	ndation directly or indire in section 501(c) (other omplete the following si (a) Name of organization	r than section chedule	n 501(c)(3)) or ı	•			✓ No onship		
<u> </u>	of m		, it is true, c				npanying schedules and statemer (other than taxpayer) is based on			
Sign Here	-	****			2019-09-27	retu			scuss th	
	' '	Signature of officer or t	rustee		Date	, Title	e (see i	nstr)? [√ Yes	□ _{No}
D-:4	•	Print/Type preparer's		Preparer's Sigr	nature	Date	Check if self- employed ▶ □	P00167	7755	
Paid Prep Use			EY MOORE G	LAZER SCHAEFE	ER PROTO LLP		Firm's E	IN ► 06	-06749)31
Use Only		Firm's address ► 16	LUNAR DRI	VE , CT 065259941	L		Phone r	no (203) 397-	7700

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation SERVICE CORP INTERNATIONAL Р 2014-11-26 2018-01-12 **BLUE BUFFALO PET PRODUCTS** Ρ 2015-11-18 2018-04-25 MONSANTO CO Р 2010-02-26 2018-06-07 AMERICAN TOWER Р 2013-06-19 2018-01-12 BLUE BUFFALO PET PRODUCTS Р 2017-03-22 2018-02-27 Р **ALLERGAN** 2016-09-21 2018-03-09 Р **DUNKIN BRANDS** 2014-06-19 2018-04-27 MONSANTO CO Р 2012-06-01 2018-06-08 AMAZON Ρ 2014-10-20 2018-07-13 **IQVIA HOLDINGS** Р 2016-05-03 2018-07-25 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 107,990 117,568 -9,578 120,000 51,140 68,860 32,000 18,258 13,742 63,758 34,995 28,763 80,073 46,517 33,556 93 148 -55 100,435 73,443 26,992 71,936 42,266 29,670 54,068 9,135 44,933 43,439 23,130 20,309 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -9,578 68,860 13,742 28,763 33,556 -55 26,992 29,670 44,933 20,309

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (d) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation PAYPAL 2015-08-21 2018-08-28 Ρ 1 VISA Р 2010-05-18 2018-09-25 ALLERGAN Р 2016-07-01 2018-11-05 APTIV PLC Р 2016-07-01 2018-12-31 CARPENTER TECHNOLOGY Ρ 2016-07-01 2018-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (q) 45,333 17,462 27,871 149,570 17,184 132,386 71.859 104,210 -32,351 85,106 112,341 -27,235 95.704 69.374 -26,330 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 27,871 132,386 -32,351 -27,235

-26,330

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			
AMISTAD ACADEMY (ACHIEVEMENT FIRST) 495 BLAKE STREET NEW HAVEN CT 06525		EDUCATIONAL ACTIVITIES	25,000

NEW HAVEN, CT 06525			
AMITY AND WOODBRIDGE NISTORICAL SOCIETY 1907 LITCHFIELD TRPK WOODBRIDGE, CT 06525		PRESERVATION OF ANTIQUITY	500

1907 LITCHFIELD TRPK WOODBRIDGE, CT 06525			
ARTS COUNCIL OF GREATER NEW HAVEN 70 AUDUBON ST		CULTURAL ACTIVITIES	2,000

WOODBRIDGE, CT 06525			
ARTS COUNCIL OF GREATER NEW HAVEN 70 AUDUBON ST NEW HAVEN, CT 06510		CULTURAL ACTIVITIES	2,00

THE COUNCIL OF CIVE, THE TOTAL TO		00210101212122	_,
HAVEN			
70 AUDUBON ST			
NEW HAVEN, CT 06510			

Total	 	▶ 3a	327,000
70 AUDUBON ST NEW HAVEN, CT 06510			
HAVEN			

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

recipient

1,000

,000

327,000

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

any foundation manager

Name and address (home or business)

NEW HAVEN, CT 06510

Total .

, ,	or substantial contributor		
a Paid during the year			
CAPITAL FOR CHANGE 171 ORANGE STREET		AFFORDABLE HOUSING	5,000

C			
1240 CHAPEL STREET NEW HAVEN, CT 06511			
CENTRAL CT COASTAL YMCA		YOUTH PROGRAMS	
,			1

1240 CHAPEL STREET NEW HAVEN, CT 06511				
CLIFFORD W BEERS GUIDANCE CLINIC 93 EDWARDS ST			ASSIST CHILDREN AND FAMILIES WITH MENTAL HEALTH	!
NEW HAVEN OF OCE11	1	l	I TOCHEC	

NEW HAVEN, CT 06511			
CLIFFORD W BEERS GUIDANCE CLINIC 93 EDWARDS ST NEW HAVEN, CT 06511		ASSIST CHILDREN AND FAMILIES WITH MENTAL HEALTH ISSUES	5,0

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

		1	
a Paid during the year			
COLUMBUS HOUSE 586 ELLA GRASSO BLVD NEW HAVEN, CT 06519		HOMELESS SHELTER	5,000

NEW HAVEN, CT 06519			
COMMUNITY FOUNDATION FOR GREATER NEW HAVEN 70 AUDUBON ST NEW HAVEN, CT 06510		COMMUNITY FOUNDATION	10,000

GREATER NEW HAVEN 70 AUDUBON ST NEW HAVEN, CT 06510	COMMUNITY FOUNDATION	10,000
COMMUNITY FUND FOR WOMEN & GIRLS 70 AUDUBON ST	ECONMIC & SOCIAL ADVANCEMENT FOR WOMEN AND GIRLS	2,000

NEW HAVEN, CT 06510			
COMMUNITY FUND FOR WOMEN & GIRLS 70 AUDUBON ST NEW HAVEN, CT 06510		ECONMIC & SOCIAL ADVANCEMENT FOR WOMEN AND GIRLS	2,000

COMMUNITY FUND FOR WOMEN & GIRLS 70 AUDUBON ST NEW HAVEN, CT 06510			ECONMIC & SOCIAL ADVANCEMENT FOR WOMEN AND GIRLS	2,000
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Total .

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 Paid during the year			
CONNECTICUT CYCLING ADVANCEMENT PROGRAM 353 MAIN STREET		PROMOTION OF YOUTH CYCLING	5,000

MIDDLETOWN, CT 06457			
CONNECTICUT FARMLAND TRUST 77 BUCKLAND STREET HARTFORD, CT 06106		EDUCATION AND CONSERVATION	1,000

CONNECTICUT FARMLAND TRUST 77 BUCKLAND STREET HARTFORD, CT 06106		EDUCATION AND CONSERVATION	1,000
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY		PROVIDE FOOD FOR NEEDY INDIVIDUALS	5,000

HARTFORD, CT 06106			
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 06492		PROVIDE FOOD FOR NEEDY INDIVIDUALS	5,000

CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 06492	PROVIDE FOOD FOR NEEDY INDIVIDUALS	5,000
WALLINGFORD, CT 06492		

Total .

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

	or substantial continuator		
a Paid during the year			
CYCLE HAVENPO BOX 209004		ATHLETIC ACTIVITIES FOR	

NEW HAVEN, CT 06520		YOUTH	
DOWNTOWN EVENING SOUP KITCHEN		PROVIDE FOOD FOR NEEDY	

DOWNTOWN EVENING SOUP KITCHEN		PROVIDE FOOD FOR NEEDY	
311 TEMPLE STREET		INDIVIDUALS	
NEW HAVEN CT 06511			

311 TEMPLE STREET INI	NDIVIDUALS	

NEW HAVEN, CT 06511			
DWIGHT HALL AT YALEPO BOX 209008		PUBLIC SERVICE AND SOCIAL	5,000

20,000

1,000

DWIGHT HALL AT YALEPO BOX 209008 NEW HAVEN, CT 06520			PUBLIC SERVICE AND SOCIAL JUSTICE	5,00
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NEW HAVEN, CT 06520		JUSTICE	
DWIGHT HALL AT TALLED BOX 203000		FOREIC SERVICE AND SOCIAL	

Recipient If recipient is an individual, show any relationship to Status of Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual, show any relationship to Status of Recipient Is an individual Is an i

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
EDGERTON PARK RESTORATION FUND PO BOX 6163 HAMDEN, CT 06517			RESTORATION OF PUBLIC PARK	1,000
EDITH JACKSON CHILDCARE 405 CANNER STREET NEW HAVEN, CT 06511			CHILD CARE FOR SPECIAL NEEDS PERSONS	1,000
ELM SHAKESPEARE COMPANY PO BOX 206029 NEW HAVEN, CT 06520			CULTUAL ACTIVITIES FOR THE PUBLIC	46,000

Total .

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

any foundation manager

Name and address (home or business)

Total .

Traine and address (nome or business)	or substantial contributor		
a Paid during the year			
FAIR HAVEN COMMUNITY HEALTH CENTER 374 GRAND AVE NEW HAVEN, CT 06513		ASSIST IN PROVIDING HEALTH CARE TO NEEDY INDIVIDUALS	2,000
FELLOWSHIP PLACE441 ELM STREET		ASSIST PEOPLE WITH MENTAL	2,000

recipient

NEW HAVEN, CT 06513			
FELLOWSHIP PLACE441 ELM STREET NEW HAVEN, CT 06511		ASSIST PEOPLE WITH MENTAL HEALTH ISSUES	2,
FIRST CHURCH- WOODBRIDGE		RELIGIOUS ACTIVITIES	5,

		1	
FELLOWSHIP PLACE441 ELM STREET NEW HAVEN, CT 06511		ASSIST PEOPLE WITH MENTAL HEALTH ISSUES	2,0
FIRST CHURCH- WOODBRIDGE		RELIGIOUS ACTIVITIES	5,0

NEW HAVEN, CT 06511	HEALTH ISSUES	
FIRST CHURCH- WOODBRIDGE 5 MEETINGHOUSE LN WOODBRIDGE CT 06525	RELIGIOUS ACTIVITIES	5,000

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)

	Name and address (nome or business)	or substantial contributor		
	a Paid during the year			
1	EDIENDS CENTED FOR CUIL DREN		EDUCATIONAL OPPORTUNITIES	F 00

FRIENDS CENTER FOR CHILDREN 225 E GRAND AVENUE NEW HAVEN, CT 06513		EDUCATIONAL OPPORTUNITIES	5,000
EDIENDS OF THE CROVE STREET		HISTORICAL PRESERVATION	500

NEW HAVEN, CT 06513			
FRIENDS OF THE GROVE STREET CEMETARY		HISTORICAL PRESERVATION	500
PO BOX 9238			
NEW HAVEN, CT 06533			

PRIENDS OF THE GROVE STREET CEMETARY PO BOX 9238 NEW HAVEN, CT 06533	HISTORICAL PRESERVATION	500
GATEWAY COMMUNITY COLLEGE FDN (SCHOLARSHIPS)	SCHOLARSHIP AID FOR NEEDY INDIVIDUALS	50,000

NEW HAVEN, CT 06533			
GATEWAY COMMUNITY COLLEGE FDN (SCHOLARSHIPS) 20 CHURCH STREET NEW HAVEN CT. 06510		SCHOLARSHIP AID FOR NEEDY INDIVIDUALS	50,000

▶ 3a

327,000

GATEWAY COMMUNITY COLLEGE FDN		SCHOLARSHIP AID FOR NEEDY	50,00
(SCHOLARSHIPS)		INDIVIDUALS	
20 CHURCH STREET			
NEW HAVEN, CT 06510			

Total .

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 Paid during the year

a Falu during the year			
GIRL SCOUTS OF CT DEVELOPMENT DEPARTMENT HARTFORD, CT 06106		EDUCATION	500
GREATER NORWICH FOUNDATION		COMMUNITY FOUNDATION	10.000

GREATER NORWICH FOUNDATION 52 SOUTH BROAD STREET NORWICH, NY 13815		COMMUNITY FOUNDATION	10,000
HABITAT FOR HUMANITY- ANNUAL FUND GRT NEW HAVEN 37 UNION ST		PROVIDE HOUSING FOR NEEDY INDIVIDUALS	2,000

NORWICH, NY 13815			
HABITAT FOR HUMANITY- ANN FUND GRT NEW HAVEN 37 UNION ST NEW HAVEN, CT 06511	NUAL	PROVIDE HOUSING FOR NEEDY INDIVIDUALS	2,000

Total .

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

recipient

327,000

any foundation manager

or substantial contributor

Name and address (home or business)

NEW HAVEN, CT 06510

Total .

a Paid during the year			
HOME HAVEN291 WHITNEY AVE NEW HAVEN, CT 06511		PROVIDE ASSISTANCE TO ELDERLY	1,000
HUCKLEBERRY YOUTH PROGRAM 3310 GEARY BLVD SAN FRANCISCO, CA 94118		HEALTH AND EDUCATION FOR YOUTH	10,000
INTERNATIONAL FESTIVAL OF ARTS &		CULTURAL ACTIVITIES	5,000

HUCKLEBERRY YOUTH PROGRAM 3310 GEARY BLVD SAN FRANCISCO, CA 94118		HEALTH AND EDUCATION FOR YOUTH	10,
INTERNATIONAL FESTIVAL OF ARTS & IDEAS 195 CHURCH ST 12TH FLR		CULTURAL ACTIVITIES	5,

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

Total .

a Paid during the year			
L E A P31 JEFFERSON ST NEW HAVEN, CT 06511		EDUCATIONAL GRANT	5,000

11211 11111 2111 31 33311			
LAND CONSERVATION ASS'T NETWORK 74 LUNT ROAD SUITE 300-302 FALMOUTH, ME 04105		LAND CONSERVATION	2,000

FALMOUTH, ME 04105			
LEUKEMIA & LYMPHONA SOCIETY 1311 MAMARONECK AV 103		MEDICAL RESEARCH	500

	1		
LEUKEMIA & LYMPHONA SOCIETY 1311 MAMARONECK AV 103 WHITE PLAINS, NY 06513		MEDICAL RESEARCH	500

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

a Paid during the year			
LONG WHARF THEATRE 222 SARGENT DRIVE NEW HAVEN, CT 06511		CULTURAL ACTIVITIES	5,000
MAINE COAST HERITAGE TRUST		CONSERVATION	1,000

recipient

327,000

			1
MAINE COAST HERITAGE TRUST ONE BOWDIN MILL ISLAND 201 TOPSHAM, ME 04086		CONSERVATION	
NEW HAVEN, CT 06511			

any foundation manager

or substantial contributor

Name and address (home or business)

306 YORK STREET NEW HAVEN, CT 06511

Total .

NEW HAVEN, CT 06511			
MAINE COAST HERITAGE TRUST ONE BOWDIN MILL ISLAND 201 TOPSHAM, ME 04086		CONSERVATION	1,000
MORY'S ANNUAL FUND		CULTURAL ACTIVITIES	1,000

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 business)

Total .

	or substantial contributor		
a Paid during the year			
MUSIC HAVENPO BOX 207332 NEW HAVEN, CT 06520		MUSIC EDUCATION	2,000
NATIONAL MULTIPLE SCLEROSIS 659 TOWER AVE 1ST FLOOR HARTFORD, CT 06112		MEDICAL RESEARCH	500

recipient

NATIONAL MULTIPLE SCLEROSIS 659 TOWER AVE 1ST FLOOR HARTFORD, CT 06112		MEDICAL RESEARCH	500
NEW HAVEN PRESERVATION TRUST 349 STATE ST NEW HAVEN CT 06507		ARCHITECTURAL HERITAGE THROUGH EDUCATION,	2,000

659 TOWER AVE 1ST FLOOR HARTFORD, CT 06112			
NEW HAVEN PRESERVATION TRUST 349 STATE ST NEW HAVEN, CT 06507		ARCHITECTURAL HERITAGE THROUGH EDUCATION, ADVOCACY AND COLLABORATION	2,000

349 STATE ST THROUGH EDUCATION,				
	NEW HAVEN PRESERVATION TRUST 349 STATE ST NEW HAVEN, CT 06507		THROUGH EDUCATION, ADVOCACY AND	2,000

Recipient If recipient is an individual, show any relationship to status of status of

recipient

ENVIRONMENTAL EDUCATION

7,500

327,000

any foundation manager

or substantial contributor

Name and address (home or business)

NEW HAVEN ECOLOGY PROJECT

358 SPRINGSIDE AVE NEW HAVEN, CT 06515

Total .

a Paid during the year			
NEW HAVEN SYMPHONY ORCHESTRA PO BOX 9718 NEW HAVEN, CT 06538		CULTURAL ACTIVITIES	5,000
NEW HAVEN ANIMAL SHELTER 81 FOURNIER STREET NEW HAVEN, CT 06511		ANIMAL CARE	500

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

a Paid during the year			
NEW HAVEN INDEPENENT (ONLINE JOURNALISM PROJECT) PO BOX 3288		PUBLIC EDUCATION BY ON LINE NEWS SERVICE	5,000

NEW HAVEN, CT 06515		
NEW HAVEN LAND TRUST (SCHOONER PROJECT) 315 PECK ST D10	TEACHING CHILDREN TO SAIL	5,000
NEW HAVEN CT 06513		1

PROJECT) 315 PECK ST D10 NEW HAVEN, CT 06513		5,555
NEW HAVEN SCHOLARSHIP FUND PO BOX 8936	SCHOLARSHIP AID FOR NEEDY INDIVITUALS	5,000

315 PECK ST D10 NEW HAVEN, CT 06513			
NEW HAVEN SCHOLARSHIP FUND PO BOX 8936		SCHOLARSHIP AID FOR NEEDY INDIVITUALS	5,00

NEW HAVEN, CT 06513			
NEW HAVEN SCHOLARSHIP FUND PO BOX 8936		SCHOLARSHIP AID FOR NEEDY INDIVITUALS	5,00
IEW HAVEN OF OCESS			

NEW HAVEN SCHOLARSHIP FUND		SCHOLARSHIP AID FOR NEEDY	5,0
PO BOX 8936		INDIVITUALS	·
NEW HAVEN, CT 06532			

NEW HAVEN, CT 06532	INDIVITUALS	
Total	 ▶ 3a	327,000

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)

a Paid during the year			
ONE BIG DOG FUND135 BRADLEY ROAD		ANIMAL SHELTER	1,000

OODBRIDGE, CT 06525			
RCHESTRA NEW ENGLAND D BOX 0123 YALE STATION		CULTURAL ACTIVITES	

or substantial contributor

ORCHESTRA NEW ENGLAND PO BOX 0123 YALE STATION NEW HAVEN. CT 06520		CULTURAL ACTIVITES	

PATHWAYS TO COLLEGEPOROX 9293		FDUCATIONAL	5.000
PO BOX 0123 YALE STATION NEW HAVEN, CT 06520			

2,500

NEW HAVEN, CT 06520			
PATHWAYS TO COLLEGEPOBOX 9293		EDUCATIONAL	5,000

PATHWAYS TO COLLEGEPOBOX 9293 NEW HAVEN, CT 06533		EDUCATIONAL	5,00

NEW HAVEN, CT 06533			
ATHWAYS TO COLLEGEPOBOX 9293		EDUCATIONAL	

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 Paid during the year

Total .

PELICAN ISLAND PRESERVATION PO BOX 781903		CONSERVATION	500
SEBASTIAN, FL 32978			

,			
RONALD MCDONALD HOUSE 860 HOWARD AVE NEW HAVEN, CT 06519		ASSIST FAMILIES WITH CHILDREN IN CANCER CARE FACILITY	

860 HOWARD AVE NEW HAVEN, CT 06519		CHILDREN IN CANCER CARE FACILITY	
SMILOW AT YALE NEW HAVEN HOSPITAL PO BOX 1849		CANCER CLINICAL RESEARCH	5,00

5,000

SMILOW AT YALE NEW HAVEN HOSPITAL		CANCER CLINICAL RESEARCH	5,000
PO BOX 1849 NEW HAVEN, CT 06508			
··-·· , ···· , ·· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , ··· , · , ·			

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 Paid during the year

Total .

THE NATURE CONSERVANCY - MAINE 14 MAIN STREET 401 BRUNSWICK, ME 04011		CONSERVATION	1,000
UNITED CHURCH ON THE GREEN		RELIGIOUS ACTIVITIES	10.000

UNITED CHURCH ON THE GREEN 323 TEMPLE STREET NEW HAVEN, CT 06511		RELIGIOUS ACTIVITIES	10,000
UNITED WAY OF GREATER NEW HAVEN (FOR AMISTAD) 370 JAMES ST 403		EDUCATIONAL ACTIVITIES	10,000

NEW HAVEN, CT 06511			
UNITED WAY OF GREATER NEW HAVEN (FOR AMISTAD) 370 JAMES ST 403 NEW HAVEN, CT 06513		EDUCATIONAL ACTIVITIES	10,00

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			
URBAN RESOURCES INITIATIVE 205 PROSPECT ST		CONSERVATION	2,000
NEW HAVEN, CT 06511			

NEW HAVEN, CT 06511			
WELLSPRINGPO BOX 370 BETHLEHEM, CT 06751		MENTAL HEALTH	1,000
WILLIAM BUCKLEY PROGRAM AT YALE		CULTURAL ACTIVITIES	2,500

BETHLEHEM, CT 06751		PIENTAL FILALITI	1,000
WILLIAM BUCKLEY PROGRAM AT YALE PO BOX 204539 NEW HAVEN, CT 06520		CULTURAL ACTIVITIES	2,500

Total .

327,000

▶ 3a

Recipient If recipient is an individual, show any relationship to status of contribution status of contribution status of contribution

recipient

any foundation manager

Name and address (home or business)

Name and address (nome or business)	or substantial contributor		
a Paid during the year			
YALE CHINA ASSOCIATIONED BOX 6023		CULTURAL ACTIVITIES AND	1 000

efile GRAPHIC print - DO NOT P	ROCESS As Filed D	ata -	D	LN: 93491277001049	
TY 2018 Accounting Fees Schedule					
_					
	Name: THE CUR EIN: 22-2668	RAN FOUNDATION 435			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES	3,200	0		0	

eme draffic print - Do NOT PROCESS	ASTITIEU Data -	DEN. 93491277001049
TY 2018 Investments Corporate	te Bonds Schedule	
Name:	THE CURRAN FOUNDATION	

DI N. 93491277001049

800,550

799,228

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CORPORATE BONDS

EIN: 22-2668435 Investments Corporate Bonds Schedule Name of Bond End of Year Book Value Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491277001049				
TY 2018 Investments Corporate Stock Schedule							
•							
Name:	THE CURRAN FOU	INDATION					
EIN:	22-2668435						

Investments Corporation Stock Schedule					
Name of Stock		End of Year Book Value	End of Year Fair Market Value		
CORPORATE STOCK		2,625,375	5,208,203		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491277001049			
TY 2018 Investments Government Obligations Schedule						
Name:	THE CURRAN I	FOUNDATION				
EIN:	22-2668435					
US Government Securities - End of Year Book Value:		75,403				
US Government Securities - End of Year Fair Market Value:		76,108				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

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TY 2018 Other Decreases Schedule					
Name:	THE CURRAN FOUNDATION	I			
EIN:	22-2668435				
De	escription	Amount			
FEDERAL INCOME /TAXES PAID		4,813			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491277001049			
TY 2018 Other Expenses Schedule					
Name: THE CURRAN FOUNDATION					
EIN: 22-2668435					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FOREIGN TAXES PAID	819	819	· · · · · · · · · · · · · · · · · · ·	0	
TELEPHONE	1,806	0	· · · · · · · · · · · · · · · · · · ·	1,806	
SUPPLY	61	0	· 	61	

efile GRAPHIC print - DO NOT PRO	CESS As Filed	Data -		DLI	N: 93491277001049
TY 2018 Other Professional Fees Schedule					
Name: THE CURRAN FOUNDATION EIN: 22-2668435					
Category	Amount	:	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES		26,422	26,422		0

7,500

7,500

ADMINISTRATIVE ASSISTANT