efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491319061099

2018

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Amended return ☐ Address change ☐ Name change ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation ☐ Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶\$ 3,820,715 ☐ Other (specify) (Part I, column (d) must be on cash basis) ☐ Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily ☐ Section for a former public charity ☐ D 1. Foreign organizations, check here ☐ 2 Foreign organizations meeting the 850 test, check here and attach computation. 2 Foreign organizations meeting the 850 test, check here and attach computation. 3 Figure 10			ndar year 2018, or tax year beginning 01-01-2	018 , a	nd ei	nding 12-31-	2018		
Telephone number (see instructions) Telephone number (see instruct						A Employer Id	entification numbe	r	
140 Mails STREET						23-7046798			
City or trows, attest or provinces, causery, and ZIP or foreign postal code City of City or City (City City City City City City City City				Room/suite		B Telephone nu	mber (see instructioi	ns)	
CONCOCO, MA. 0.1742 G. Check all that apply Initial return Amended return Address change Name change G. Check Upe of organization Section 501(c)(3) eventy invalidation Section 4947(a)(1) neneemat charitable trius Other taxable product foundation G. Section 4947(a)(1) neneemat charitable trius Other taxable product foundation Fair market value of all assets at end Accounting method Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. War (from Pair I.) (a) Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. War (from Pair I.) (a) Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Analysis of Revenue and Expenses (from foundation equal to a strong fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair (from Pair I.) (a) Other fair (from Pair I.) (a) G. Check P Other fair ((978) 371-2267			
Final return						C If exemption application is pending, check here			
Contributions of price in services Name change Check type of organization Section 599(20)(2) as empt private foundation	G Ch	eck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check he	ere . \square	
Contributions, gifts, grants, etc., received, clatch schedule) 121,766			☐ Final return ☐ Amended return	1					
Check type of organization Miserion SUI(c)(s) evemtp invale foundation Check type of organization Miserion SUI(c)(s) evemtp invale foundation Check type of organization Check typ			Address change Name change			, i		· -	
Fair market value of all assets at end of view from Part II, coil (c), ince 16) S 3,820,715 S	I Ch	eck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private	foundation					
of year (from Part II, col (c), incher (specify)		ection	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxab	le private foundation					
of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) (see instructions) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check	of y	/ear (f	rom Part II, col (c), ▶\$ 3.820.715 ☐ Other (specify)		ıal				
1 Contributions, gifs, grants, etc., received (attach schedule)	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and		•		(d) Disbursements	
2 Check				expenses per	(b)		, ,	for charitable purposes (cash basis only)	
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 5 Gross rents		1		2,211,285	5				
Sch B		2	,						
1		_	Sch B						
Sa Gross rents Net rental income or (loss) Section Net gain or (loss) Section Sect		_	- · · · ·	20.115		20.112			
Description		_		30,113	2	30,113			
121,768	ē								
8 Net short-term capital gain		6a	, ,	121,768	3				
8 Net short-term capital gain	rem	b							
8 Net short-term capital gain	Rev	7		2		121.768			
9 Income modifications		_							
b Less Cost of goods sold		9							
C Gross profit or (loss) (attach schedule) C C C C C C C C C		10a	Gross sales less returns and allowances						
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 2,363,166 151,881 13 Compensation of officers, directors, trustees, etc 0 0 0 0 14 151,881 15 15 16 16 16 16 16 1		b							
12 Total. Add lines 1 through 11 2,363,166 151,881									
13 Compensation of officers, directors, trustees, etc 0 0 0 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest			,						
14			<u> </u>						
15			, , , ,)	0		0	
16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Net investment income (if negative, enter -0-) 20 Line (attach schedule) 21 15,881 22,739 24 946 25 946 26 946 27 946 28 946 29 946 29 946 29 946 29 946 29 946 29 946 29 946 29 946 29 946 29 946 20 946 21 15,881 21 27,339 29 946 29 946 29 946 29 946 20 946 21 15,881 21 27,339 21 27,339 22 946 23 946 24 946 25 27 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29	۰.								
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	ses								
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	pen	_	,	12,739	,	12,739		0	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	EX							0	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	live		,		+	•			
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	trai			946	5	946		0	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	SILI	19	, , , , , , , , , , , , , , , , , , , ,						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	=	20	Occupancy						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	d A	21	Travel, conferences, and meetings						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	a	22							
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	6ui	23		303	3	303		0	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	erat -	24	•						
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29,869 29,869 22,212,137	표 	25			-	29,869		121 160	
25 151,029 29,869 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 122,012	_		,	121,160	<u>'</u>			121,160	
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)		26	•	151,029	9	29,869		121,160	
disbursements b Net investment income (if negative, enter -0-) 2,212,137 122,012		27							
b Net investment income (if negative, enter -0-)		а		2,212,137	,				
c Adjusted net income (if negative, enter -0-)		b				122,012			
		С	Adjusted net income (if negative, enter -0-)			· ·			

	3	Accounts receivable -		l		
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
sel	9 10a	Prepaid expenses and deferred charges				
¥	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)	1,029,680	% J	3,504,818	3,798,546
	_ ا	Investments—corporate bonds (attach schedule)		1		

18

19

20

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

4

Liabilities

or Fund Balances

Net Assets

Grants payable

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) ▶

Deferred revenue .

Other liabilities (describe ▶_

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that 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 ▶

Capital stock, trust principal, or current funds

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

Retained earnings, accumulated income, endowment, or other funds

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

Total net assets or fund balances (see instructions) . . .

		investments corporate stock (attach schedule)	1,025,000	3,501,610	3,7,50,510
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)	189,395	9	9
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	1,322,904	3,526,987	3,820,715
П	17	Accounts payable and accrued expenses			
- 1					1

898,597

424,307

1,322,904

1,322,904

898,597

2,628,390

3,526,987

3,526,987

1

2

3

4

5

6

1,322,904

2,212,137

3,535,041

3,526,987 Form **990-PF** (2018)

Page **3**

Capital Gains	and Losses for Tax on Inves	tment Income			
	be the kind(s) of property sold (e g , varehouse, or common stock, 200 sh	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a SALES OF PUBLICLY TR	ADED SECURITIES			2018-06-30	2018-12-31
b SALES OF PUBLICLY TR	ADED SECURITIES			2017-06-30	2018-12-31
С					
d					
<u>е</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)	
a {	357,026	864,079	(0) pius (1	-7,053	
	337,896		209,075		128,821
C	,57,656		205/075		120,021
d					
e					
Complete only for asse	ts showing gain in column (h) and ov			(6.1.6	1)
(i) FMV as of 12/31/6	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col (ı) l (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					-7,053
b					128,821
С					
d					
е					
If gain, also enter in F	ne or (net capital loss) I gain or (loss) as defined in sections Part I, line 8, column (c) (see instruct	. , , ,	Part İ, line 7	2	121,768
In Part I, line 8 Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	· · · · · }	3 come	
For optional use by domestic	private foundations subject to the se	ction 4940(a) tax on ne	et investment incom	e)	
f section 4940(d)(2) applies,	leave this part blank				
f "Yes," the foundation does	the section 4942 tax on the distributa not qualify under section 4940(e) Do	not complete this part			es 🔽 No
	ımount ın each column for each year, T	see instructions before	e making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by c	ol (c))
2017	100,887		1,546,286		0 065245
2016	75,487		1,310,024		0 057623
2015	124,437		1,376,713		0 090387
2014	234,815		1,372,303		0 171110
2013	234,317		1,094,395		0 214106
2 Total of line 1, column	(d)		2		0 598471
number of years the fo	no for the 5-year base period—divide undation has been in existence if less ioncharitable-use assets for 2018 fror	than 5 years	3		0 119694
		•			1,988,748
5 Multiply line 4 by line 3			5		238,041
	nent income (1% of Part I, line 27b)		6		1,220
			7		239,261
	itions from Part XII, line 4 ,				121,160
If line 8 is equal to or g instructions	reater than line 7, check the box in P	art VI, line 1b, and con	nplete that part usin	g a 1% tax rate Se	e the Part VI

Dat	t VII-B St	atomonte Bogard	ina	Activities for Which	Form 4720 May Bo	Boquired /co	ntinuo	(d)			·	5
		_			FORM 4720 May be	Required (CC	munue	:u)			V	NI -
5a				r incur any amount to	-turn (turn 404F(-)\)	_	_	_			Yes	No
				ttempt to influence legisla		L	Yes	✓	No			
				public election (see sect	• • • • • • • • • • • • • • • • • • • •	_	,	_				
		• • •		gistration drive?			Yes	\leq	No			
		-		avel, study, or other simi	• •	L	Yes	✓	No			
		-		her than a charitable, etc	· -	·	_					
				tions			Yes	✓	No			
	• •			eligious, charitable, scien	• • • • • • • • • • • • • • • • • • • •	_	_	_				
h				ention of cruelty to childr i ny of the transactions fa		L	Yes	✓	No			
D				int notice regarding disas		•	eu III			5b		
	_			regarding disaster assist				. —		30		
_	-			does the foundation claim			. •					
٠		•		sponsibility for the grant?	•	_	7	_				
		•		y Regulations section 53		· · L	Yes	Ш	No			
6a		•		ive any funds, directly or								
0a					manectly, to pay premit	IIIIS 011	,					
a personal benefit contract?						No	6b		No			
	If "Yes" to 6b,		Pay	premiums, affectly of ma	frectly, off a personal be	nent contract.		•		OB		110
7a	•		the.	foundation a party to a p	rohibited tay shelter train	esaction?	7	_				
	•			ceeds or have any net in			Yes	✓	No	7b		
В				960 tax on payment(s) o			 or			7.5		
_				ar ⁹			_					
							Yes					
Pai	3 3 7 4	ormation About C I Contractors	TTIC	ers, Directors, Trust	ees, Foundation Ma	inagers, Higr	iy Pai	a Er	npio	yees,		
1	List all officer	s, directors, trustee		undation managers an					1			
	(a) Name a	and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contrib employee bene					se acc	
				devoted to position	-0-)	deferred com			<u> </u>	tner ai	lowand	es
IVA	AIBEL		DIRE 0 08	CTOR	0			C				C
	ONWAY ROAD SON, NH 03849		0 08									
	EL AIBEL		DIRE	CTOR	0			C	1			
	ARK AVENUE		0 08		•							,
	MA PARK, MD 209	12										
ONA	THAN AIBEL		DIRE	CTOR	0			C				C
	AIN STREET ORD, MA 01742		0 08									
	TE OF HOWARD J A	IRFI	MANA	AGER	0			C	-			
	CAVES RD	NIDLL	0 00	NOLIN	U			·	Ί			
NIW	GS MILLS, MD 21											
2	Compensation	n of five highest-pai	d en	ployees (other than th	ose included on line 1	l—see instructi	ons).]	f no	ne, e	nter "	NONE.	."
				(b) Title, and average		(d) Contrib			, ,	_		
(a)		ess of each employee han \$50,000	paid	hours per week	(c) Compensation	employee plans and					se acco	
				devoted to position		compens						
ЮИ	=											
ota	I number of othe	er employees paid ove	er \$5	0,000		.	•					(
		1 / 1		·	<u> </u>				Eor	m 001)_DF (2018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued)	oundation Managers, Highly Pai	d Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "	NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include releva organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
11		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P 0
		Form 990-PF (2018)

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

121.160

121.160

Form **990-PF** (2018)

Page 9

96,997

96.997

Form 990-PF (2018)

0

1	_	_	•	_	١,	_	_	•
ľ		ζ	ī		ī		Г	
l		х		ц				

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

b Total for prior years

From 2013.

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

d From 2016.

e From 2017.

f Total of lines 3a through e.

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

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9 a Excess from 2014. .

b Excess from 2015. .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

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

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

indicated below:

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).

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 185.733

171,666 62 087 10.689

30,021

(a)

Corpus

(b)

Years prior to 2017

(c)

2017

460.196

24.163

484,359

185.733

298,626

171.666 62,087

10.689

30.021

24.163

0



nter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp	
L Progra	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)	
	and contracts from government agencies						
	ership dues and assessments						
	st on savings and temporary cash ments						
Divide	nds and interest from securities			14	30,113		
	ntal income or (loss) from real estate						
	-financed property						
	debt-financed property notering near the contract of the contract						
	investment income						
	or (loss) from sales of assets other than						
ınvent	• /			18	121,768		
Net in	come or (loss) from special events				,		
	profit or (loss) from sales of inventory						
Other	revenue a						
		1					
	t- 644				151 001		
			0	13	151,881		
Subto Total	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu	lations)			151,881		
Subto Total (See v	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu 1-B Relationship of Activities to th	lations) ie Accomplisi	nment of Exem	pt Purposes	B		
Subto Total (See v	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	151,881	
Subto Total (See v ort XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu 1-B Relationship of Activities to th Explain below how each activity for which	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v art XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v art XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Int XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v ort XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Int XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v rt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v rt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Irt XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v Int XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		
Subto Total (See v art XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplisi Income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to		

(/
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
	1 3

Part	XVII	Information Re Exempt Organi		ransters To a	and Transaction	ons and Rela	tionships With Noncha	itable		
			directly enga				ation described in section 50 tions?		Yes	No
a Tra	nsfers	from the reporting foun	dation to a n	oncharitable exe	empt organization	n of				
(1)	Cash	1						1a(1)		No
(2)	Othe	er assets						1a(2)		No
		nsactions								
		s of assets to a nonchar	•	-				1b(1)		No
		hases of assets from a r						1b(2)	_	No
(3) Rental of facilities, equipment, or other assets										No
		nbursement arrangemen ns or loan guarantees.						1b(4)	_	No No
		rmance of services or m						1b(5)		No
٠, ,			•	_				1c		No
	-			•			d always show the fair marke			
							eived less than fair market va issets, or services received	lue		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exer	mpt organization	(d) Description	n of transfers, transactions, and s	narıng arra	ingemen	ts
	_									
					-					
		indation directly or indire	•		•		·			
		in section 501(c) (other		n 501(c)(3)) or ı	n section 527? .		∐Yes	✓ No		
b If "	Yes," d	complete the following so (a) Name of organization		1 4	-) T	[(a) December of rela			
		(a) Name or organization	on	(1) Type of organizat	ion	(c) Description of rela	tionsnip		
	_									
	of n		, it is true, co				anying schedules and stateme her than taxpayer) is based o			
Sign		****	-		2019-11-14	****		the IRS d	iscuss th	าเร
Here					2019-11-14	\		the prepa	rer show	vn
	 	Signature of officer or t	rustee		Date		beld (see	w Instr)?	✓ Yes	□ _{No}
		Print/Type preparer's name		Preparer's Sigr	nature	Date	Check if self-			
							employed ▶ □	P0043	6718	
Paid		DANNELL LYNE					employed F			
Prep	are	<u> </u>								
Use		I IIII S Hallie F 117 (IX	KS PANETH I	_LP			Firm's	EIN ►11	-35188	342
	;	'	MANHATTAN'	VILLE ROAD						
		PU							1) 524-9	9000

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

a Faid during the year			
AMERICAN HEART ASSOCIATION PO BOX 78851 PHOENIX, AZ 85062	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	25
•			

PHOENIX, AZ 85062			
THE ACTOR' FUND OF AMERICA 729 SEVENTH AVENUE 10TH FL NEW YORK, NY 10002	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

NEW YORK, NY 10002		EXEMPT PURPOSE	
VINEYARD THEATRE108 E 15TH STREET NEW YORK, NY 10003	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	2,500

121,160

VINEYARD THEATRE108 E 15TH STREET NEW YORK, NY 10003	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	2,500

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

Total .

a Paid during the year			
US FUND FOR UNICEFPO BOX 96964 WASHINGTON, DC 20090	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

100

AMERICAN RED CROSS	PC	TO FURTHER THE DONEES'	
PO BOX 5003 DEPT 150489		EXEMPT PURPOSE	
HARTFORD, CT 06032			

PO BOX 5003 DEPT 150489 HARTFORD, CT 06032		EXEMPT PURPOSE	
ASPCA424 E 92ND ST	PC	TO FURTHER THE DONEES'	100

HARTFORD, CT 06032			
ASPCA424 E 92ND ST NEW YORK, NY 10128	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

ASPCA424 E 92ND ST NEW YORK, NY 10128	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	10

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			
POLY PREP COUNTRY DAY SCHOOL	PC	TO FURTHER THE DONEES'	2,500

BROOKLYN, NY 11228		EXEMPTON OSE	
NATIONAL MS SOCIETYPO BOX 1748	PC	TO FURTHER THE DONEES'	

or substantial contributor

NATIONAL MS SOCIETYPO BOX 1748 HARTFORD, CT 06144	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	
OCEAN CONCEDIANCIAN CARO DOV OCOO	56	TO FURTUED THE DOMESS!	

HARTFORD, CT 06144		EXEMPT PURPOSE	
OCEAN CONSERVANCYPO BOX 96003	PC	TO FURTHER THE DONEES'	50

250

HARTFORD, CT 06144		EXEMPT PURPOSE	
OCEAN CONSERVANCYPO BOX 96003	PC	TO FURTHER THE DONEES'	
WASHINGTON, DC 20090		EXEMPT PURPOSE	

OCEAN CONSERVANCYPO BOX 96003	PC	TO FURTHER THE DONEES'	
WASHINGTON, DC 20090		EXEMPT PURPOSE	

WASHINGTON, DC 20090	. •	EXEMPT PURPOSE	
Total	 	▶ 3a	121,160

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

Name and address (home or husiness)

FAIFIELD, CT 06825

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CONNECTICUT FOOD BANK PO BOX 8686 NEW HAVEN, CT 06531		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
A BETTER CHOICE FOR WESTPORT PO BOX 2153 WESTPORT, CT 06880		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
SACRED HEART UNIVERSITY 5151 PARK AVE		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	2,500

recipient

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

a Paid during the year			
MUSIC FOR YOUTH INCPO BOX 403 WESTPORT, CT 06881	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	5,000

WESTFORT, CT 00001		EXEMPT FORFOSE	
NSPC391 EAST WASHINGTON AVENUE BRIDGEPORT, CT 06610	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	

Total .

BRIDGEPORT, CT 06610	PC	EXEMPT PURPOSE	250
WLTW21PO BOX 2100	PC	TO FURTHER THE DONEES'	100

•			
WLIW21PO BOX 2100	PC	TO FURTHER THE DONEES'	100
NEW YORK, NY 10116		EXEMPT PURPOSE	

WLIW21PO BOX 2100	PC	TO FURTHER THE DONEES'	10
NEW YORK, NY 10116		EXEMPT PURPOSE	

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

Name and address (home or business)

49 RICHMONDVILLE AVE SUITE 112

WESTPORT, CT 06880

Total .

Lancana adaress (neme or pasmess)	or substantial contributor			
a Paid during the year				
JEWISH SENIOR SERVICES FDN 4200 PARK AVENUE BRIDGEPORT, CT 06604		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
CTLCV EDUCATION FUND 553 FARMINGTON AVE 1ST FLOOR HARTFORD, CT 06105		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
HOMES WITH HOPE		PC	TO FURTHER THE DONEES'	500

recipient

EXEMPT PURPOSE

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)

a Paid during the year			
WESTPORT COUNTRY PLAYHOUSE 10 POWERS CT	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	5,000

WESTPORT, CT 06880		
THE ROTARY FOUNDATIONPO BOX 743 WESTPORT, CT 06880	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE

or substantial contributor

THE ROTARY FOUNDATIONPO BOX 743 WESTPORT, CT 06880	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	

WESTPORT, CT 06880		EXEMPT PURPOSE	
WMNRPO BOX 920 MONROE, CT. 06468	PC	TO FURTHER THE DONEES'	500

NMNRPO BOX 920 MONROE, CT 06468	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500

1,000

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

a Paid during the year			
WESTPORT ARTS CENTER 51 RIVERSIDE AVE WESTPORT, CT 06880	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	20,000
AMERICANS FOR THE ARTS FUND	PC	TO FURTHER THE DONEES'	100

AMERICANS FOR THE ARTS FUND 1000 VERMONT AVE NW 6TH FLOOR WASHINGTON, DC 20005	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
ASPETUCK LAND TRUST INCPO BOX 444	PC	TO FURTHER THE DONEES'	10,000

WASHINGTON, DC 20005			
ASPETUCK LAND TRUST INCPO BOX 444 WESTORT, CT 06881	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	10,000

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, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

·	or substantial contributor		
a Paid during the year			
CONNECTICUT HUMANE SOCIETY 701 RUSSELL ROAD		TO FURTHER THE DONEES' EXEMPT PURPOSE	225

recipient

NEWINTON, CT 06111		EXEMPT ON OSE	
JORDAN PORTCO FDN 225 ASYLUM STREET HARTFORD, CT 06103		TO FURTHER THE DONEES' EXEMPT PURPOSE	10,000

JORDAN PORTCO FDN 225 ASYLUM STREET HARTFORD, CT 06103	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	10,000
HOSPITAL FOR SPECIAL SURGERY FUND PO BOX 30610 NEW YORK, NY 10087	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

225 ASYLUM STREET HARTFORD, CT 06103		EXEMPT PURPOSE	
HOSPITAL FOR SPECIAL SURGERY FUND PO BOX 30610 NEW YORK, NY 10087	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
Total	 	▶ 3a	121,160

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

Recipient

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

Purpose of grant or contribution

recipient

121,160

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
WESTPORT WESTON FAMILY YMCA 14 ALLEN RAYMOND LN WESTPORT, CT 06880	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
GOOD SPEED OPERA HOUSE FDN PO BOX A EAST HADDAM, CT 06423	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
WNET NY PUBLIC MEDIA 825 EIGHTH AVENUE NEW YORK, NY 10019	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	3,000

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

recipient

Purpose of grant or contribution

UNITARIAN CHURCH IN WESTPORT

Total .

10 LYONS PLAINS ROAD WESTPORT, CT 06680		EXEMPT PURPOSE	10,000
RELIGIOUS INSTITUTE	PC	TO FURTHER THE DONEES'	150

PC

TO FURTHER THE DONEES'

10 000

RELIGIOUS INSTITUTE 21 CHARLES STREET STE 140 WESTPORT, CT 06880		TO FURTHER THE DONEES' EXEMPT PURPOSE	150
KEREM SHALOMPO BOX 1646		TO FURTHER THE DONEES'	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) or substantial contributor a Paid during the year

LAWVERS COMMITTEE FOR CIVIL DICHTS

Total .

1401 NEW YORK AVENUE SUITE 400 WASHINGTON, DC 20005	PC	EXEMPT PURPOSE	200
LWVMA CITIZEN EDUCATION FUND 90 CANAL ST SUITE 414	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	200

DC

TO CURTUED THE DONIECO!

200

LWVMA CITIZEN EDUCATION FUND 90 CANAL ST SUITE 414 BOSTON, MA 02114	PC	EXEMPT PURPOSE	200
COMMUNITY THERAPEUTIC DAY SCHOOL 187 SPRING STREET	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

BOSTON, MA 02114			
COMMUNITY THERAPEUTIC DAY SCHOOL 187 SPRING STREET LEXINGTON, MA 02421	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

COMMUNITY THERAPEUTIC DAY	PC	TO FURTHER THE DONEES'	100
SCHOOL		EXEMPT PURPOSE	
187 SPRING STREET			
LEXINGTON, MA 02421			

Recipient Foundation Purpose of grant or If recipient is an individual, 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 WOUNDED WARRIOR PROJECT PC TO FURTHER THE DONEES' 250 PO BOX 758516 EXEMPT PURPOSE TOPEKA, KS 66675

PLANNED PARENTHOOD FEDERATION OF AMERICA PO BXO 97166 WASHINGTON, DC 20077	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
THE HUMAN SOCIETY OF THE US	PC	TO FURTHER THE DONEES'	200

Total	 	▶ 3a	121,160
THE HUMAN SOCIETY OF THE US PO BOX 96930 WASHINGTON, DC 20077	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	200
WASHINGTON, DC 20077			

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 .

ALZHEIMER'S DISEASE RESEARCH FUND 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
MARCH OF DIMECRO BOY 47004	l 50	TO SUBTUED THE DOMESCI	1

CE IIII COO I			
MARCH OF DIMESPO BOX 17394 NEW HAVEN, CT 06502		TO FURTHER THE DONEES' EXEMPT PURPOSE	50
SPECIAL OLYMPICS CTPO BOX 4000	PC	TO FURTHER THE DONEES'	188

NEW HAVEN, CT 00502		EXEMPT PURPOSE	
SPECIAL OLYMPICS CTPO BOX 4000 HAMDEN, CT 06514	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	188

SPECIAL OLYMPICS CTPO BOX 4000	PC	TO FURTHER THE DONEES'	18
HAMDEN, CT 06514		EXEMPT PURPOSE	

Recipient Foundation Purpose of grant or If recipient is an individual, 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 MEMORIAL SLOAN KETTERING CANCER PC TO FURTHER THE DONEES' 250

CENTER PO BOX 5028 HAGERSTOWN, MD 21741		EXEMPT PURPOSE	
INTERFAITH ALLIANCE FDN PO BOX 98143	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

PO BOX 98143 WASHINGTON, DC 20090		EXEMPT PURPOSE	230
ALLIANCE OF RESIDENT THEATRES NY 520 EIGHTH AVENUE STE319 NEW YORK, NY 10016	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	2,500

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			
NATIONAL PARK FOUNDATION PO BOX 17394 BALTIMORE, MD 21298	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

MULTIPLE SCIEROSIS FDN 6520 N ANDREWS AVENUE FORT LAUDE, FL 33309	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
·			

FORT LAUDE, FL 33309			
WESTON EDUCATIONPO BOX 1093 WESTON, CT 06883	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500

Total .

121,160

▶ 3a

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 .

a raid daring the year			
THE CONNECTICUT AUDUBON SOCIETY 314 UNQUOWA RD FAIRFIELD, CT 06834	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

BRENNAN CENTER FOR JUSTICE PO BOX 536 ELNA, NH 03750	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
HADVADD MACAZINEDO DOV 414046	DC	TO ELIPTHED THE DONEES!	350

ELNA, NH 03750		EXEMITTORIOSE	
HARVARD MAGAZINEPO BOX 414946 BOSTON, MA 02241	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

*			
HARVARD MAGAZINEPO BOX 414946 BOSTON, MA 02241		TO FURTHER THE DONEES' EXEMPT PURPOSE	25

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			
NPCAPO BOX 97202 WASHINGTON, DC 20001	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

100

121,160

,			ட
CC5 EVERSLEY AVENUE PRWALK, CT 06851	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	
TI DECAMATION LEAGUE	5	TO FURTHER THE DONEES!	Γ

or substantial contributor

Total .

NORWALK, CT 06851		EXEMPT PURPOSE	
ANTI-DEFAMATION LEAGUE 1952 WHITNEY AVENUE	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	10

ANTI-DEFAMATION LEAGUE 1952 WHITNEY AVENUE HAMDEN, CT 06517	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

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

any foundation manager

or substantial contributor

Name and address (home or business)

CINCINNATI, OH 42250

Total .

a Paid during the year			
SIERRA CLUB FDN 2101 WEBSTER ST STE 1300 OAKLAND, CA 09461	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	1,000
QUICK CENTER FOR THE ARTS 1073 N BENSON ROAD	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	1,000

recipient

50

'			
QUICK CENTER FOR THE ARTS 1073 N BENSON ROAD FAIRFIELD, CT 06824	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	1.
DISABLED AMERICAN VETERANS PO BOX 14301	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	

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

121,160

any foundation manager

or substantial contributor

Name and address (home or business)

MERRIFIELD, VA 22116

Total .

	or substantial contributor			
a Paid during the year				
NATIONAL WILDLIFE FEDERATION PO BOX 1583 MERRIFIELD, VA 22116		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
AMERICAN BAR FOUNDATION 39842 TREASURY CENTER CHICAGO, IL 60694		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	1,538
ALZHEIMER'S DISEASE FUND PO BOX 1897		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

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

a Paid during the year			
PERSON TO PERSON1864 POST RD	PC	TO FURTHER THE DONEES'	1,200

DARIEN, CT 06820		EXEMPT PURPOSE	
APPALACHIAN MOUNTAIN CLUB5 JOY ST	PC	TO FURTHER THE DONEES'	1!
BOSTON, MA 02108		EXEMPT PURPOSE	

APPALACHIAN MOUNTAIN CLUB5 JOY ST BOSTON, MA 02108	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	150
		l .	

BOSTON, MA 02108		EXEMPT PURPOSE	
THE ALS ASSOCIATIONPO BOX 37022	PC	TO FURTHER THE DONEES'	100

THE ALS ASSOCIATIONPO BOX 37022	PC	TO FURTHER THE DONEES'	100
BOON, IA 50037		EXEMPT PURPOSE	

121,160

THE ALS ASSOCIATIONPO BOX 3/022	PC	TO FURTHER THE DUNEES	10
BOON, IA 50037		EXEMPT PURPOSE	

Total .

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
NYU SILVER SCHOOL OF SOCIAL WORK 25 WEST 4TH STREET SUITE 336 NEW YORK, NY 10012		TO FURTHER THE DONEES' EXEMPT PURPOSE	12,000
CULTURAL ALLIANCE OF FAIRFIELD	PC	TO FURTHER THE DONEES'	2,000

CULTURAL ALLIANCE OF FAIRFIELD COUNTY 70 SANFORD STREET FAIRFIELD, CT 06824	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	2,00
		1	

	COUNTY 70 SANFORD STREET FAIRFIELD, CT 06824		EXEMPT PURPOSE	,
l	EARTURI ACE10 MOODCIDE LANE	DC.	TO FURTHER THE DOMESC!	

70 SANFORD STREET FAIRFIELD, CT 06824			
EARTHPLACE10 WOODSIDE LANE	PC	TO FURTHER THE DONEES'	1,000
WECTBODT OF ACOUS		LEVEMBE DUDDOCE	1

FAIRFIELD, CT 06824			
EARTHPLACE10 WOODSIDE LANE WESTPORT, CT 06881	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	1,000

	WESTPORT, CT 06881 EXEMPT PURPOSE				PC		1
--	-----------------------------------	--	--	--	----	--	---

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 CONNETICUT FUND FOR THE PC TO FURTHER THE DONEES' 250

ENVIRONMENT 1032 CHAPEL STREET NEW HAVEN, CT 06510		EXEMPT PURPOSE	
OPEN DOOR SHELTER 4 MERRITT STREET	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

OPEN DOOR SHELTER 4 MERRITT STREET NORWALK, CT 06854	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
DOCTORS WITHOUT BORDERS USA PO BOX 5022 HAGERSTOWN, MD 21741	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

Total		> 3a	121,160
DOCTORS WITHOUT BORDERS USA PO BOX 5022 HAGERSTOWN, MD 21741	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
NORWALK, CT 06854			

PO BOX 5022 HAGERSTOWN, MD 21741	PC	EXEMPT PURPOSE	2!
	•		

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			
VISITING NURSE & HOSPICE OF FAIRFIELD COUNTY P O BOX 489 WILTON, CT 06897		TO FURTHER THE DONEES' EXEMPT PURPOSE	250
UNITARIAN UNIVERSALIST	PC	TO FURTHER THE DONEES'	500

UNITARIAN UNIVERSALIST ASSOCIATION PO BOX 55019 BOSTON, MA 02205	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
NORWALK HOSPITAL FOUNDATION	PC	TO FURTHER THE DONEES'	250

PO BOX 55019 BOSTON, MA 02205			
NORWALK HOSPITAL FOUNDATION 24 HOSPITAL AVE	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
DANDUDY CT OCCIO			

▶ 3a

121,160

BUSTUN, MA 02205			
NORWALK HOSPITAL FOUNDATION 24 HOSPITAL AVE DANBURY, CT 06810	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

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

AMERICAN LAW INSTITUTE

4025 CHESTNUT STREET PHILADELPHIA, PA 19104		EXEMPT PURPOSE	
FRIENDS OF THE UUA 25 BEACON STREET BOSTON, MA 02108		TO FURTHER THE DONEES' EXEMPT PURPOSE	500

PC.

TO FURTHER THE DONEES'

250

25 BEACON STREET BOSTON, MA 02108	PC	EXEMPT PURPOSE	500
FEDERATION FOR JEWISH PHILANTHROPY 4200 PARK AVE STE 300 BRIDGEPORT, CT 06604	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	200

Total	 	▶ 3a	121,160
FEDERATION FOR JEWISH PHILANTHROPY 4200 PARK AVE STE 300		TO FURTHER THE DONEES' EXEMPT PURPOSE	200
			<u> </u>

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

WESTON EMERGENCY MEDICAL SERVICE PO BOX 1163 WESTON, CT 06883	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500

WESTON, CT 06883			
KIWANIS CLUB OF WESTON PO BOX 1033 WESTON, CT 06883	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
NATURE CONCERVANCY CT	PC	TO FURTHER THE DONEES'	250

WESTON, CT 06883		EXEMPT PURPOSE	
NATURE CONCERVANCY CT 55 CHURCH STREET NEW HAVEN, CT 06510		TO FURTHER THE DONEES' EXEMPT PURPOSE	250
		·	

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			
LONG WHARF THEATRE 222 SARGENT DRIVE	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
NEW HAVEN CT 06511			

W HAVEN, CT 06511		EXEMIT TOM OSE	
DC40 WEST 20TH STREET W YORK, NY 10021		TO FURTHER THE DONEES' EXEMPT PURPOSE	

NRDC40 WEST 20TH STREET NEW YORK, NY 10021		TO FURTHER THE DONEES' EXEMPT PURPOSE	1,250
ABA FUNDPO BOX 109070	PC	TO FURTHER THE DONEES'	250

NEW TORK, NT 10021		EXEMPT PURPOSE	
ABA FUNDPO BOX 109070 CHICAGO, IL 60610	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250

ABA FUNDPO BOX 109070 CHICAGO, IL 60610	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	25

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

Paid during the year

Total .

ı	a Tala daring the year			
	TCG520 8TH AVENUE FL 24 NEW YORK, NY 10138	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
1				

· ·			
WESTON WARM UP FUNDPO BOX 1254 WESTON, CT 06883		TO FURTHER THE DONEES' EXEMPT PURPOSE	250

WESTON, CT 06883		EXEMPT PURPOSE	
CITY BAR FUND42 WEST 44TH STREET	PC	TO FURTHER THE DONEES'	100

CITY BAR FUND42 WEST 44TH STREET	PC	TO FURTHER THE DONEES'	10
NEW YORK, NY 10036		EXEMPT PURPOSE	

Recipient If recipient is an individual, show any relationship to status of
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FRIENDS OF BALLET ETUDES 509 WESTPORT AVE NORWALK, CT 06851		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100
BROADWAY CARESEQUITY FIGHTS AIDS PO BOX 4733 TOMS RIVER, NJ 06754		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	250
AMERICAN RIVERS 1101 14TH STREET NW SUITE 1400 WASHINGTON, DC 20005		PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	100

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

a Paid during the year			
BOSTON MODERN ORCHESTRA PROJECT 376 WASHINGTON STREET MALDEN, MA 02148	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500
COMMUNITY THERAPEUTIC DAY	PC	TO FURTHER THE DONEES'	5,000

recipient

121,160

COMMUNITY THERAPEUTIC DAY	PC	TO FURTHER THE DONEES'	
SCHOOL		EXEMPT PURPOSE	
187 SPRING STREET			
LEXINGTON, MA 02421			

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

187 SPRING STREET LEXINGTON, MA 02421			
DANIEL AIRELDOOD CAVES BOAD	DC.	TO ELIBTHED THE DONIEES!	12

187 SPRING STREET LEXINGTON, MA 02421			
DANIEL AIREL 2202 CAVES ROAD	DC.	TO FURTHER THE DONEES'	

LEXINGTON, MA 02421			
DANIEL AIBEL2202 CAVES ROAD	PC	TO FURTHER THE DONEES'	434

DANIEL AIBEL2202 CAVES ROAD	PC	TO FURTHER THE DONEES'	434
OWINGS MILLS MD 21117		EXEMPT PURPOSE	

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Name and address (home or business)

a Paid during the year

3 /			
THE LEVITT PAVILION FOR THE PERFORMING ARTS 40 JESUP RD WESTPORT, CT 06880	PC	TO FURTHER THE DONEES' EXEMPT PURPOSE	500

WESTFORT, CT 00000			
SILVER HILL HOSPITAL 206 VALLEY ROAD NEW CANAAN, CT 06640		TO FURTHER THE DONEES' EXEMPT PURPOSE	500

efile GRAPHIC print - DO NOT F	PROCESS	As Filed D	ata -		DLN: 93491319061099	
TY 2018 Accounting Fees Schedule						
	Name:	HOWARD	0 & KATHERINE AI	BEL FOUNDATION	J	
		23-7046		221 00112711201	•	
	LIII.	23 70 10	, , , , , , , , , , , , , , , , , , , 	· i	<u> </u>	
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING		12,739	12,73	9	0	

erne GRAPHIC Print - DO NOT PROCESS	AS FIIEU Data -	DLN: 93491319061099
TY 2018 Investments Corpora	te Stock Schedule	
•		
Name:	HOWARD & KATHERINE AIBEL F	OUNDATION
EIN:	23-7046798	

DIN. 02/01210061000

ofile CRADUIC print - DO NOT PROCESS | As Filed Data -

Investments Corporation Stock Schedule					
Name of Stock	End of Year Book Value	End of Year Fair Market Value			
NEUBERGER BERMAN	3,504,818	3,798,546			

Name: HOWARD & KATHERINE AIBEL FOUNDATION

Beginning of Year -

Book Value

189,395

efile GRAPHIC print - DO NOT PROCESS

STOCK TRADES PENDING SETTLEMENT

Description

	EIN: 23-7046798	
Other Assets Schedule		

End of Year - Book

Value

End of Year - Fair

DLN: 93491319061099

Market Value

0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319061099				
TY 2018 Other Decreases Schedule							
Name:	HOWARD & KA	ATHERINE AIBEL FOUNDATIO	N				
EIN:	23-7046798						
Do	escription		Amount				
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·				

UNREALIZED GAIN (LOSS)

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491319061099			
TY 2018 Other Expenses Schedule							
	: HOWARD & KA : 23-7046798	THERINE AIBEL F	OUNDATION				
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	45	45		0

QB /MISC FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data		DL	N: 93491319061099			
TY 2018 Other Professional Fees Schedule							
Name: HOWARD & KATHERINE AIBEL FOUNDATION							
EIN: 23-7046798							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable			

15,881

15,881

ADVISORY FEES - BROKER

Purposes

efile GRAPHIC print - DO NOT PF	ROCESS As Filed Data	1 -	DLN: 934913190610					
TY 2018 Taxes Schedule								
Name: HOWARD & KATHERINE AIBEL FOUNDATION EIN: 23-7046798								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
FOREIGN TAXES	315	315		0				
EXCISE TAXES	631	631		0				

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -			DLN: 93491319061099		
Schedule B	Schedule of Contributors			OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Form 990, 990-EZ, or 990-PF <u>v/Form990</u> for the latest inform	nation	2018		
Name of the organization			Employer id	dentification number		
Organization type (chec	one)		23-7046798			
	,					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 political organization					
Form 990-PF	☑ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	on filing Form 990, 990-EZ, or 990-Pf roperty) from any one contributor Co					
Special Rules						
under sections 50 received from any	n described in section 501(c)(3) filing $\theta(a)(1)$ and 170(b)(1)(A)(vi), that chec one contributor, during the year, total 1h, or (ii) Form 990-EZ, line 1 Compl	ked Schedule A (Form 990 c contributions of the greater (or 990-EZ), Part II, line 13,	, 16a, or 16b, and that		
during the year, to	n described in section 501(c)(7), (8), of tal contributions of more than \$1,000 of the prevention of cruelty to children or a	exclusively for religious, chai	ritable, scientific, literary, c			
during the year, co If this box is check purpose Don't coi	n described in section 501(c)(7), (8), on the described in section 501(c)(7), (8), on the described in the d	haritable, etc., purposes, but that were received during the neral Rule applies to this org	no such contributions total eyear for an <i>exclusively</i> reganization because it recei	aled more than \$1,000 eligious, charitable, etc , eved <i>nonexclusively</i>		
990-EZ, or 990-PF), but it	that isn't covered by the General Rule must answer "No" on Part IV, line 2, m 990PF, Part I, line 2, to certify that	of its Form 990, or check the	box on line H of its			
For Paperwork Reduction Ac for Form 990, 990-EZ, or 990-		Cat No 30613X	Schedule B (Form 990	D, 990-EZ, or 990-PF) (2018)		

Name of organization HOWARD & KATHERINE AIBEL FOUNDATION		Employer identification 23-7046798	Employer identification number 23-7046798		
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	ESTATE OF HOWARD J AIBEL		Person		
1	2302 CAVES RD	\$ 2,211,212	Payroll		
	OWINGS MILLS, MD 21117		(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person		
•			Payroll		
		\$	Noncash		
			(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person		
-			Payroll		
		\$	Noncash		
			(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person		
•			Payroll		
		\$	Noncash		
			(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person		
•			Payroll		
			Noncash		
			(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person		
•			Payroll		
		\$	Noncash		
			(Complete Part II for noncash contributions)		
		Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2018)		

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