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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

| | | - do to WWW.n3.gov/1 01/1050/1 10 | | | 74 1011 01 111 011 | | |
|--|-----------|---|--|---|--|--|--|
| | | dar year 2018 or tax year beginning | Dec 1,201 | 8, and | | | v 30 ,20 19 |
| Nam | e of foun | dation | | | A Employer | identification number | 7 |
| | | Kennedy Foundation | | | | 66903 | |
| Num | ber and | street (or P.O box number if mail is not delivered to street address) | Roor | n/suite | B Telephone | e number (see instruction | ons) |
| 98 | Litt | le Goose Canyon Rd | | | (203) | 769-1870 | |
| | | state or province, country, and ZIP or foreign postal code | | | | on application is pendi | ng. check here ▶ □ |
| Вi | g Hor | rn WY 82833 | | | | | 3. A |
| | | | of a former public | charity | D 1. Foreign | organizations, check h | ere ▶ 🗍 |
| | | ☐ Final return ☐ Amended r | | • | _ | - | |
| | | ☐ Address change ☐ Name char | nge | | | i organizations meeting here and attach compu | |
| н | Check | type of organization: X Section 501(c)(3) exempt p | <u> </u> | V 1 | E If private f | foundation status was t | erminated under |
| | | n 4947(a)(1) nonexempt charitable trust | | | section 50 | 07(b)(1)(A), check here | . ▶□ |
| | | arket value of all assets at J Accounting method | | | | | |
| ^ | | year (from Part II, col. (c), Other (specify) | | | F If the four under sec | idation is in a 60-month tion 507(b)(1)(B), check | here . > |
| | line 16 | | on cash basis.) | · | | | _ |
| | art i | Analysis of Revenue and Expenses (The total of | | Γ – | <u></u> | | (d) Disbursements |
| | | amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | | investment | (c) Adjusted net income | for charitable |
| | | the amounts in column (a) (see instructions).) | books | " | ncome | income | purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | | 22.22 | 100000000000000000000000000000000000000 | | |
| | 2 | Check ► ☑ if the foundation is not required to attach Sch. B | 7.00 | | | Annual Control of the | |
| | 3 | Interest on savings and temporary cash investments | 1,713. | - president statistical | 1,713. | AND AND AND ASSESSMENT OF THE PROPERTY. | |
| | 4 | Dividends and interest from securities | 191,014. | | 91,014. | | |
| | 5a | Gross rents | 101,014. | + | 91,014. | | |
| | b | Net rental income or (loss) | 70.00 | | | | |
| d) | 6a | Net gain or (loss) from sale of assets not on line 10 | NA CONTRACTOR PROCESSION OF THE PROCESSION | | | | |
| Revenue | b | Gross sales price for all assets on line 6a | | | Contraction of the Contraction o | 100 S 40 T 100 T | 114 (1945) P. T. T. Z. |
| ĕ | 7 | Capital gain net income (from Part IV, line 2) | | 1 2 2 2 3 3 L 2 2 3 1 2 | 22,178. | | |
| æ | 8 | Net short-term capital gain | 110 | | 22,170. | | |
| _ | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less: Cost of goods sold | | 100 | | | |
| | C | Gross profit or (loss) (attach schedule) | A COLUMN TO SERVICE MATERIAL STATES | 300 | | nervanaran erakan kan ber | |
| | 11 | Other income (attach schedule) | | 2502036569466 | ACTORES, DAIL SECRETAR | | |
| | 12 | Total. Add lines 1 through 11 | 192,727. | ; | 14,905. | | |
| _ | 13 | Compensation of officers, directors, trustees, etc. | 132,727. | | | | TONG THE SAME STORES STATE OF THE STATE OF THE SAME OF |
| es | 14 | Other employee salaries and wages | | 1 | | | |
| enses | 15 | Pension plans, employee benefits | | 1 | | | |
| ğ | 16a | Legal fees (attach schedule) . L-1.6a, Stmt | 129,920. | \vdash | | | 129,920. |
| ij | b | Accounting fees (attach schedule) L-1.6b. Stmt. | 35,002. | | | | 35,002. |
| <u>.</u> <u>≺</u> e | С | Other professional fees (attach schedule) L-16c Stmt | 50,002 | 1 | | | 50,002. |
| 'ati | 17 | Interest | , , , , , , | 1 | | | <u></u> |
| Stu | 18 | Taxes (attach schedule) (see instruction see. Stmt. | 2,716. | | | | |
| | 19 | Depreciation (attach schedule) and depletion | , , , , , | | | | |
| 连 | 20 | Occupancy | 10,639. | 1 | | | 10,639. |
| <u> </u> | 21 | Travel, conferences, and meetings IVED. | 1,162 | | | | 1,162. |
| L & ddV UJNNYOS Operating and Administrative Expo | 22 | Printing and publications | | T^{-} | | | |
| つる | 23 | Other expenses (attach school) 1 1 2 20 21 m | 996. | | 120. | | 708. |
| ≩ ٰ≤ | 24 | Total operating and administrative expenses. | | 1 | | | |
| 2 2 | | | 230,437 | | 120. | | 227,433. |
| ~ <u>જ</u> | 25 | Contributions, gifts, grants paid EN, UT | 241,947 | | | | 241,947. |
| ⁷ 0 | 26 | Total expenses and disbursements. Add lines 24 and 25 | 472,384 | | 120. | | 469,380. |
| 2 | 27 | Subtract line 26 from line 12: | | W. | | | |
| 7021 | a | Excess of revenue over expenses and disbursements | -279,657 | | | | |
| | b | Net investment income (if negative, enter -0-) | | | 314,785. | | |
| | C | Adjusted net income (if negative, enter -0-) | | | | The state of the s | |

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | E | nd o | fyear |
|------------------------|----------|--|-------------------------|---|------|------------------------|
| | • | should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Value | | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | | |
| | 2 | Savings and temporary cash investments | 673,430. | 115,20 | 6. | 115,206. |
| | 3 | Accounts receivable ▶ | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| | 4 | | | | | |
| | | Pledges receivable ► | | | | |
| | 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 ▶ | 35,000. | | 0. | 0. |
| sts | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges L-10a Stmt | | | | |
| Ä | 10a | Investments – U.S. and state government obligations (attach schedule) | 0. | 699,10 | | 699,417. |
| | b | Investments—corporate stock (attach schedule) L-10b Stmt | 2,184,525. | 2,084,53 | | 3,571,672. |
| | С | Investments—corporate bonds (attach schedule) L-10c Stmt | 640,189. | 436,50 | 4. | 462,738. |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| | 12 | Investments—mortgage loans | | | | |
| | 13 | Investments—other (attach schedule) . L-13. Stmt | 3,626,855. | 3,667,17 | 3. | 2,964,306. |
| | 14 | Land, buildings, and equipment: basis ▶ | | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| | 15 | Other assets (describe ►) | | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | _ | |
| | 17 | Instructions. Also, see page 1, item i) | 7,159,999. | 7,002,52 | 11. | 7,813,339. |
| | 18 | Grants payable | | | | |
| Liabilities | 19 | Deferred revenue | <u> </u> | | | |
| Ħ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| ab | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| = | 22 | | | | | |
| | 23 | Other liabilities (describe ►) Total liabilities (add lines 17 through 22) | | | | |
| | | Foundations that follow SFAS 117, check here > 🗵 | <u> </u> | | | |
| ances | | and complete lines 24 through 26, and lines 30 and 31. | | | | |
| Ĕ | 24 | Unrestricted | 7,159,999. | 7,002,52 | 21. | |
| ala | 25 | Temporarily restricted | | | | |
| 0 | 26 | Permanently restricted | | | - | |
| Net Assets or Fund Bal | | Foundations that do not follow SFAS 117, check here ▶ □ | | | | |
| II. | | and complete lines 27 through 31. | | | | |
| ō | 27 | Capital stock, trust principal, or current funds | | | | |
| Ę | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | | |
| SS | 29 30 | Retained earnings, accumulated income, endowment, or other funds | | | | |
| , t | | Total net assets or fund balances (see instructions) | 7,159,999. | 7,002,52 | 21. | |
| 2 | 3/1 | Total liabilities and net assets/fund balances (see | _ | | | |
| | | instructions) | 7,159,999. | 7,002,52 | 21. | |
| _ | ort III | Analysis of Changes in Net Assets or Fund Balances | | 1 | | |
| 1 | | al net assets or fund balances at beginning of year—Part II, colu- -of-year figure reported on prior year's return) | | | 4 | 7 150 000 |
| • | | er amount from Part I, line 27a | | } | 2 | 7,159,999. |
| | | er increases not included in line 2 (itemize) NET CAPITAL G | | - | 3 | -279,657. |
| | | lines 1, 2, and 3 | AIN (DEE FARI | ·· · · · · · · · · · · · · · · · · · · | 4 | 122,179. 7,002,521. |
| Ę | | reases not included in line 2 (itemize) ▶ | | | 5 | 1,002,321. |
| | | al net assets or fund balances at end of year (line 4 minus line 5)— | Part II, column (b), li | ine 30 | 6 | 7,002,521. |

| art l | V Capital Gains and | Losses for Tax on Investm | ent Inc | ome | | | | |
|------------|--|--|------------|-------------------------|--|---|---------------------------|--|
| | | d(s) of property sold (for example, real es se; or common stock, 200 shs MLC Co.) | tate, | | (b) How acquired P—Purchase D—Donation | | te acquired , day, yr) | (d) Date sold (mo., day, yr) |
| 1a 6 | 000 SHARES BANK OF | F AMERICA | | | P | 09/2 | 2/2017 | 12/20/2018 |
| b 1 | .666 SHARES CORTEVA | A | | | P | 12/0 | 3/2008 | 08/30/2019 |
| c 1 | .000 SHARES ELI LII | LLY | | | P | 07/1 | 7/2009 | 08/30/2019 |
| <u>d</u> 6 | 000 SHARES BANK O | AMERICA | | | P | 05/2 | 0/2008 | 08/30/2019 |
| e 2 | 200,000 CLP POWER I | HONG KONG | | | Ρ | 07/0 | 3/2014 | 11/07/2019 |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | g) Cost or o | other basis se of sale | | | in or (loss) (f) minus (g)) |
| а | 144,532. | | | | 152,266. | | | -7,73 |
| b | 49,400. | | | | 15,305. | | | 34,09 |
| С | 112,956. | | | · | 33,545. | <u> </u> | | 79,41 |
| d | 163,610. | | | | 143,519. | | | 20,09 |
| е | 200,000. | | | | 203,685. | | | -3,68 |
| | Complete only for assets sho | wing gain in column (h) and owned t | by the for | undation : | on 12/31/69. | | (I) Gains (Co | ol. (h) gain minus |
| | (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | (k) Excess over col. | | col. (k), but not less than -0-) or Losses (from col. (h)) | | |
| а | | | | | | | | -7,73 |
| b | | | | | | | | 34,09 |
| С | | | | | | | | 79,41 |
| đ | | | | | | | | 20,09 |
| e | | | | | | | | -3,68 |
| | V Qualification Und | er Section 4940(e) for Reduvate foundations subject to the set this part blank. | ced Ta | x on N | et investmen | | | |
| Yes | s," the foundation doesn't o | section 4942 tax on the distribut qualify under section 4940(e). Do punt in each column for each yea | not cor | nplete th | nis part. | | | ☐ Yes 🗵 |
| <u> </u> | (a) | | ar, see u | ne instru | | iaking a | iny entiries. | (d) |
| Cale | Base period years ndar year (or tax year beginning in | | | et value of | (c) noncharitable-use a | | | stribution ratio divided by col. (c)) |
| | 2017 | 334,8 | | | 7,870,4 | | | 0.0425 |
| | 2016 | 438,5 | | | 7,945,4 | | | 0.0551 |
| | 2015 | 403,4 | | | 7,673,8 | | | 0.0525 |
| | 2014 | 291,9 | | | 7,760,8 | | | 0.0376 |
| _ | 2013 | 450,5 | 69. | | 8,017,8 | 397. | | 0.0561 |
| | | | | | | ì | | |
| 2 | Total of line 1, column (d) | | | | | · - - | 2 | 0.2441 |
| 3 | | for the 5-year base period—div oundation has been in existence | | | | | 3 | 0.0488 |
| 1 | Enter the net value of non | charitable-use assets for 2018 fi | rom Par | t X, line | 5 | | 4 | 7,380,86 |
| 5 | Multiply line 4 by line 3 | | | | | | 5 | 360,37 |
| 6 | Enter 1% of net investme | nt income (1% of Part I, line 27b |) | | | | 6 | 3,14 |
| 7 | Add lines 5 and 6 | | | | | | 7 | 363,51 |
| 8 | Enter qualifying distribution | ons from Part XII, line 4 | | | | | 8 | 469,38 |
| 8 | | ons from Part XII, line 4 ater than line 7, check the box in | | | | | | |

3

| art V | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in | ıstru | ction | is) | |
|-------------|---|---------------|-----------|-----------------|---|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. | | 277 | | |
| | Date of ruling or determination letter. (attach copy of letter if necessary—see instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 3,14 | 18. | - | |
| | here ► 🗷 and enter 1% of Part I, line 27b | | | | |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | 0. | | |
| 3 | Add lines 1 and 2 | 3,14 | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | 0. | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | 3,14 | 18. | COLONIE COLONIE | |
| 6 | Credits/Payments: | | | | |
| a | 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0. | | U | | |
| b | Exempt foreign organizations—tax withheld at source | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) . 6c 0. | | | | |
| _d | Backup withholding erroneously withheld | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | - | 0. 73. | | |
| 8 9 | Enter any penalty for underpayment of estimated tax. Check here 🔀 if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 3,22 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 3,2 | 0. | | |
| 11 | Enter the amount of line 10 to be: Credited to 2019 estimated tax Refunded 11 | | ··· | | |
| | VII-A Statements Regarding Activities | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No | |
| | participate or intervene in any political campaign? | 1a | | × | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | 1b | | × | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | |
| C | Did the foundation file Form 1120-POL for this year? | 1c | 20.000000 | X | |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| _ | (1) On the foundation. ► \$(2) On foundation managers. ► \$ | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | |
| 2 | on foundation managers. ▶ \$ | 2 | | × | |
| 2 | If "Yes," attach a detailed description of the activities. | 233 | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | | |
| 4 | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 3 | | | |
| 4a b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4a 4b | | <u>×</u> | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | $\frac{}{x}$ | |
| • | If "Yes," attach the statement required by General Instruction T. | | | 77 M | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. | | | | |
| | By language in the governing instrument, or | | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | | |
| | conflict with the state law remain in the governing instrument? | 6 | _ x | | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | 7 | × | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ | | | | |
| | Wyoming of Delauture. If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | | |
| b | | | | | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | X | genterina. | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | 2 | | | |
| | 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," | | | | 2 |
| 40 | complete Part XIV | 9 | | <u>×</u> | O |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | ., | |
| | names and addresses | 10 | A DE | <u>×</u> | |

| <u>Part</u> | VII-A Statements Regarding Activities (continued) | | _ | |
|-------------|--|-----------------------|-----------------|------------|
| | · | 智機 | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | × |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | × |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | × | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► Ann McCart, c/o ESC1700 LLC Telephone no. ► (203) | | 1873 | |
| | Located at ▶ 1700 East Putnam Ave, Suite 202 Old Greenwich CT ZIP+4 ▶ 06484 | · | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here | | • | ▶ ∐ |
| 46 | and enter the amount of tax-exempt interest received or accrued during the year | | Yes | No |
| 16 | over a bank, securities, or other financial account in a foreign country? | 16 | 100 | × |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | 7 - Toronto 1 - 1 - 1 | | |
| <u></u> | the foreign country ▶ | | | |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | Terricona an | | |
| _ | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 222000 | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No | | | 3/2 |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? \square Yes \square No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | | | |
| | Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | 1 1/2 1/20/2004 | JAN TEKNI |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| С | were not corrected before the first day of the tax year beginning in 2018? | 1c | | × |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| 2 | At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and | | | |
| • | 6e, Part XIII) for tax year(s) beginning before 2018? | | | |
| | If "Yes," list the years ▶ 20 , 20 , 20 , 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) | 36,854,841 | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 2b | 1 | 10250 |
| • | ► 20 , 20 , 20 , 20 | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | |
| | at any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or | | | |
| | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of | | | |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | |
| | foundation had excess business holdings in 2018.) | 3b | , races | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | × |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 1003555 | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? | 4b | 1 | l x |

| Part | WILE Statements Regarding Activitie | s for W | hich Form | 4/20 F | viay be K | equire | d (contii | nuea) | | | |
|----------------|--|-----------------|---|-----------------|------------------------|--|--------------------------------------|-------------------|----------------------|-------------|--|
| 5a | During the year, did the foundation pay or incur | | | | | | ``` | | 123.55 | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt | - | | n (sacti | ion /19/15/e\ | 1/2 | Yes | X No | 200 | 1 | |
| | (2) Influence the outcome of any specific publi | | • | • | | • | □ 163 | <u> </u> | | | |
| | directly or indirectly, any voter registration d | | | | | | п., | (C) | | | |
| | | | | | | | Yes | ⊠ No | 152.33393 | | |
| | (3) Provide a grant to an individual for travel, st | | | | | | ☐ Yes | X No | | | |
| | (4) Provide a grant to an organization other tha | | | | | | | | | | |
| | section 4945(d)(4)(A)? See instructions | | | | | | ☐ Yes | ⊠ No | | | |
| | (5) Provide for any purpose other than religious | . charita | able, scientifi | c. litera | rv. or educ | cational | _ | _ | | | |
| | purposes, or for the prevention of cruelty to | | | | | | | X No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of t | | | | | | | | 13330370331 | | |
| - | in Regulations section 53.4945 or in a current ne | | | | | | | SCIDEU | A Chairman | | |
| | | | - | | | | | | 5b | /2025, '9/S | ************************************** |
| _ | Organizations relying on a current notice regard | - | | | | | | | | | |
| С | If the answer is "Yes" to question 5a(4), does | | | | | | | | 15.75 | | |
| | because it maintained expenditure responsibility | y for the | grant? | | | | ☐ Yes | ☐ No | | | |
| | If "Yes," attach the statement required by Regu | lations s | section 53.49 | 45-5(d) | | | | | | | |
| 6a | Did the foundation, during the year, receive any | funds, | directly or inc | directly, | to pay pre | emiums | | | | | |
| | on a personal benefit contract? | | | | | | ☐Yes | ⊠ No | | | |
| b | Did the foundation, during the year, pay premiu | ms. dire | ctly or indired | ctly, on | a nersonal | benefit | _ | _ | 6b | 200200000 | × |
| _ | If "Yes" to 6b, file Form 8870. | , | o, oa | July, 51. | ш ролоона. | | 001111001 | • | 33.80 B | Carried . | |
| 7a | At any time during the tax year, was the foundation | a narty i | to a probibitor | tav cha | altor transac | ation? | ☐ Yes | ₩. | | | |
| b | If "Yes," did the foundation receive any proceed | | | | | | | | - CENSON AND A | | |
| | | | | | | | | ny . | 7b | 555556 | 272.65 454 |
| 8 | Is the foundation subject to the section 4960 to | ex on pa | ayment(s) or i | more ti | nan \$1,000 | ,uuu in | _ | _ | | | |
| | remuneration or excess parachute payment(s) o | uring th | e year? | | | • • | Yes | × No | 13.00% | | ****** |
| Par | t VIII Information About Officers, Direct | ctors, 1 | rustees, F | oundat | tion Mana | agers, | Highly I | Paid E | mploy | ees, | |
| | and Contractors | | | | | | | | | | |
| <u> 1</u> | List all officers, directors, trustees, and foun | dation r | nanagers ar | d their | compens | ation. S | ee instri | uctions | . | | |
| | (a) Name and address | (b) Title | e, and average | | npensation | | Contribution | | (e) Expe | nse acc | count. |
| | (a) Name and address | | rs per week ed to position | en | ot paid, ter -0-) | and defe | yee benefit erred comp | pians ensation | | allowan | |
| Pet | er M. Kennedy III | Pres | ident | | | | | | _ | | |
| | ittle Goose Canyon Rd, P.O. Box 68 Big Horn WY 82833 | | 2.00 | | 0. | 1 | | 0. | | | 0 |
| | 1 L. Kennedy | | President | | <u> </u> | | | <u> </u> | | | <u>0.</u> |
| | | | 1.00 | | 0. | | | 0 | | | ^ |
| | Crandon Blvd, F1202 Key Biscayne FL 33149 | | | | υ. | i | | 0. | | | 0. |
| | n S. Kennedy | vice | President | | | | | | | | |
| 98 L1 | | | 1 00 | | | | | | | | _ |
| Ann | ttle Goose Canyon Rd, P.O. Box 632 Big Horn WY 82833 | _ | 1.00 | | 0. | | | 0. | | | 0. |
| | M. McCart | _ | President | | | | | 0. | | | 0. |
| | M, McCart Audubon Lane Shelton CT 06484 | Vice | President 1.00 | | 0. | | | 0. | | | 0. |
| | M, McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe | Vice | President 1.00 | se inclu | 0. | ne 1—: | see instr | 0. | s). If n | one, (| 0. |
| | M, McCart Audubon Lane Shelton CT 06484 | Vice | President 1.00 | se inclu | 0. | ne 1—: | see instr | 0. | s). If n | one, (| 0. |
| | M, McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe | Vice | President 1.00 er than thos | | 0. | ne 1—: | (d) Contrib | 0. ruction | - | | 0. enter |
| 45 2 | M, McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. | | (d) Contrib | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." | Vice es (oth | President 1.00 er than thos (b) Title, and a | average veek | 0. 0. uded on li | | (d) Contrib | 0. ruction | (e) Expe | | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| 45 2 | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| none | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Expe | nse acc | 0. enter |
| none | M. McCart Audubon Lane Shelton CT 06484 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0 | Vice es (oth | President 1.00 er than those (b) Title, and a hours per v | average veek | 0. 0. uded on li | | (d) Contrib employee plans and | 0. ruction | (e) Experience other | nse acc | 0. enter |

| Form | 990-PF (2018) | Page 7 |
|------|--|--------------------|
| Par | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em | iployees, |
| | and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI | E." |
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| non | e | |
| | | |
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| | | |
| | | |
| _ | Leady of the second discount of the second o | |
| | I number of others receiving over \$50,000 for professional services | <u> </u> |
| Lı | st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 | not applicable | |
| | | |
| 2 | | 0. |
| _ | | |
| | | |
| 3 | | |
| | | <u> </u> |
| 4 | | |
| | | j |
| | rt IX-B Summary of Program-Related Investments (see instructions) | |
| | escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | not applicable | |
| | | 0. |
| 2 | | |
| | | |
| | Il other program-related investments. See instructions | |
| 3 | | |
| | | |
| Tota | al. Add lines 1 through 3 | 0. |
| | | Farm 000 DE (2018) |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Foreities see instructions.) | ign fou | indations, |
|------|--|-------------|---------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 4,495,816. |
| b | Average of monthly cash balances | 1b | 91,675. |
| C | Fair market value of all other assets (see instructions) | 1c | 2,905,773. |
| d | Total (add lines 1a, b, and c) | 1d | 7,493,264. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 7,493,264. |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 112,399. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 7,380,865. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 369,043. |
| Part | | ounda | tions |
| 1 | Minimum investment return from Part X, line 6 | 1 | 369,043. |
| 2a | Tax on investment income for 2018 from Part VI, line 5 | 学 众 | |
| b | Income tax for 2018. (This does not include the tax from Part VI.) 2b | | |
| С | Add lines 2a and 2b | 2c | 3,148. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 365,895. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 365,895. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 365,895. |
| Part | XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | 1000 | |
| а | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 469,380. |
| b | Program-related investments—total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | · |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 469,380. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | |
| | Enter 1% of Part I, line 27b. See instructions | 5 | 3,148. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 466,232. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years. | ng whe | ther the foundation |

| Part | All Undistributed income (see instruction | 113) | | | |
|----------|--|---------------|----------------------------|-------------|--------------------|
| | ` | (a) Corpus | (b) Years prior to 2017 | (c) 2017 | (d) 2018 |
| 1 | Distributable amount for 2018 from Part XI, line 7 | | | | 365,895. |
| 2 | Undistributed income, if any, as of the end of 2018: | | | | 303,033. |
| a | Enter amount for 2017 only | | | 0. | |
| | | | | | |
| ь | Total for prior years: 20, 20, 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2018: | | | | |
| а | From 2013 | į | | | |
| b | From 2014 | | | | |
| C | From 2015 | | | | |
| d | From 2016 | | 1 | | |
| e | From 2017 | | | | |
| f | Total of lines 3a through e | 20,185. | | | |
| 4 | Qualifying distributions for 2018 from Part XII, line 4: ► \$ 469,380. | | | | |
| а | Applied to 2017, but not more than line 2a . | | | 0. | |
| | Applied to undistributed income of prior years (Election required—see instructions) | | 0. | | |
| С | Treated as distributions out of corpus (Election | i | | İ | |
| | required—see instructions) | 123,670. | | | |
| d | Applied to 2018 distributable amount | | | | 345,710. |
| е | Remaining amount distributed out of corpus | 0. | | | |
| 5 | Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a).) | 20,185. | | | 20,185. |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 123,670. | | | |
| b | Prior years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| c | Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b. Taxable amount—see instructions | | 0. | | |
| e | Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions | i | | 0. | |
| | Undistributed income for 2018, Subtract lines | | - | | |
| T | 4d and 5 from line 1. This amount must be distributed in 2019 | | | | 0. |
| 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 applied on line 5 or line 7 (see instructions). | 0. | | | |
| 9 | Excess distributions carryover to 2019. | <u></u> | | | |
| • | Subtract lines 7 and 8 from line 6a | 123,670. | | | |
| 10 | Analysis of line 9: | | | | |
| а | Excess from 2014 0 . | | | | |
| | Excess from 2015 0. | | | | |
| b | Excess from 2016 0. | | | | |
| ن | | | | | |
| đ | | | | | |
| <u>e</u> | Excess from 2018 123, 670. | | <u> </u> | | |

| Part | XIV Private Operating Founda | tions (see instru | ctions and Part | VII-A guestion 9 | <u>, </u> | Page 10 |
|------|--|---------------------|---------------------------------------|-----------------------|--|--------------------|
| | | | | | / | N/A |
| 14 | If the foundation has received a ruling foundation, and the ruling is effective for | | | | | |
| b | Check box to indicate whether the four | | | | ection | 3) or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | <u> </u> | Prior 3 years | 75420)(6 | / |
| | income from Part I or the minimum | (a) 2018 | (b) 2017 | (c) 2016 | (d) 2015 | (e) Total |
| | investment return from Part X for each year listed | | | <u> </u> | | |
| b | 85% of line 2a , | | | | | |
| С | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly | | 11 | | | |
| | for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly | , | | | | |
| | for active conduct of exempt activities. | | | | | |
| _ | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon: | | | | | |
| а | "Assets" alternative test—enter: | | | X | | |
| | (1) Value of all assets | | | <u> </u> | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | i | | | 1 | |
| b | "Endowment" alternative test-enter 2/3 | | | | | |
| | of minimum investment return shown in Part X, line 6 for each year listed | | | | 1 | |
| С | "Support" alternative test—enter: | | | - | | |
| | (1) Total support other than gross | | / | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on secunties loans (section | / | ľ | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public | | | <u> </u> | | |
| | and 5 or more exempt organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from | | | | | |
| | an exempt organization | | | | | · |
| | (4) Gross investment income | (Complete 4) | in mort and if | | - d &E 000 or | |
| Part | Supplementary Information any time during the year- | • | • | ine toundation r | iad \$5,000 or mo | re in assets at |
| 1 | | | 15.) | | | |
| , | Information Regarding Foundation List any managers of the foundation | | ited more than 2 | % of the total cont | ributions received l | by the foundation |
| | before the close of any tax year (but of | | | | | sy the loan action |
| | Peter M. Kennedy III, Paul | | | , , | | |
| b | List any managers of the foundation | who own 10% o | r more of the sto | ck of a corporatio | n (or an equally lar | ge portion of the |
| | ownership of a partnership or other e | ntity) of which the | foundation has a | 10% or greater int | erest. | |
| | none | | | | | |
| 2 | Information Regarding Contribution | | | | | |
| | Check here ► ☐ if the foundation | | | | | |
| | unsolicited requests for funds. If the to complete items 2a, b, c, and d. See ii | | giπs, grants, etc. | , to individuals or c | organizations under | other conditions, |
| | | | droop of the name | | tions about he as | delun a a a di |
| а | The name, address, and telephone no | umber or email ad | aress of the person | on to whom applica | ations snould be ac | aressea: |
| | See Supplementary Informat | ion Statemer | ı t | | | |
| | The form in which applications should | | | materials they sho | ould include: | |
| _ | The state of the s | | | | | |
| | | | | _ | | |
| С | Any submission deadlines: | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | |
| d | Any restrictions or limitations on a | wards, such as b | y geographical a | areas, charitable fi | elds, kinds of inst | itutions, or other |
| | factors: | | | | | |
| | | | | | | |

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Form **990-PF** (2018)

Part XV Supplementary Information (continued)

| . 3 Grants and Contributions Paid During t | he Year or Approve | ed for Fut | ture Payment | |
|--|--|----------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| Holy Name Catholic Church | | | | |
| 260 East Loucks Street | | | | |
| Sheridan WY 82801 | | 501(c)3 | unrestricted use | 5,000. |
| St Joseph Indian School | | | | |
| 1301 N Main St | | | | |
| Chamberlain SD 57325 | | 501 (c) 3 | unrestricted use | 1,000. |
| Elon University | | | | |
| 2600 Campus Box | | | | 5 000 |
| Elon NC 27244 | | 501 (c) 3 | unrestricted use | 5,000. |
| Elinor Martin Pregnancy Care | | | | |
| 86 Mayflower Ave | | 501 (-) 2 | l | 1 000 |
| New Rochelle NY 10801 | | 201(C)3 | unrestricted use | 1,000. |
| Society for the Propogation of the Faith | | | | |
| 70 West 36th St 8th floor New York NY 10018 | | 501/612 | unrestricted use | 2,000. |
| St. Anthony-Church on Arch St | | 1 201 (6) 3 | unrestricted use | 2,000. |
| 100 Arch St. | | | | |
| Boston MA 02110-1111 | | 501 (0) 3 | unrestricted use | 2,000. |
| School of the Holy Child | | 301 (0, 3 | diffeserreced use | 2,000. |
| 2225 Westchester Ave | | | | |
| Rye NY 10580 | | 501 (c) 3 | unrestricted use | 1,000. |
| Sisters of Life | | , , , , | | |
| 38 Montebello Rd | | | | |
| Suffern NY 10901 | | 501 (c) 3 | unrestricted use | 5,000. |
| Little Sisters of the Poor | | | | |
| 2999 Schurz Avenue | | | | |
| Bronx NY 10465 | | 501(c)3 | unrestricted use | 3,000. |
| See Statement | | | | |
| | | | | |
| | | | | 216,947. |
| | | | | |
| Total | | | | 241,947. |
| b Approved for future payment | | | | |
| | | | | |
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| Total | · · · · · · · | <u></u> | ▶ 3I | 000 DE |

| | rt XVI-A Analysis of Income-Producin | g Activities | | | | |
|----------|---|------------------------------------|---------------------|-----------------------|---------------------|---|
| nte | er gross amounts unless otherwise indicated. | Unrelated bu | isiness income | Excluded by secti | on 512, 513, or 514 | (e) |
| | Description and in a service of the | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions.) |
| 7 | Program service revenue: | <u> </u> | | | | <u> </u> |
| | ab | | | | | |
| | | | | | | |
| | | | | | | |
| | e | | | | | |
| | f | | | | | |
| | g Fees and contracts from government agend | cies | | | | |
| 2 | | | | | | |
| 3 | Interest on savings and temporary cash investme | ents | | 14 | 1,713. | |
| 4 | Dividends and interest from securities | | | 14 | 191,014. | |
| 5 | Net rental income or (loss) from real estate: | | | P. 400 400 4 | | |
| | a Debt-financed property | | | | | |
| | b Not debt-financed property | | | | | |
| 6 | Net rental income or (loss) from personal property | erty | | | | |
| 7 | Other investment income | , | | | | |
| 8 | Gain or (loss) from sales of assets other than inven | itory | | | | |
| 9 | | | | <u> </u> | | |
| 10 | . , , | | | | | <u> </u> |
| 11 | Other revenue: a | | | | | |
| | b | | | | | |
| | C | | | | | |
| | d | | | | | |
| | e | William to the state of the second | | 1 4 1 6 1 to c 2 2 | | |
| | Subtotal. Add columns (b), (d), and (e) | | | 建 产产产品。 | | 1 22 727 |
| | Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions to verify calcu | · · · · · · | | | 13 | 192,727. |
| <u> </u> | art XVI-B Relationship of Activities to t | | ont of Evomo | + Durnaga | | |
| | | | - | | I A pastributed i | manufactive to the |
| | me No. Explain below how each activity for vaccomplishment of the foundation's exem | opt purposes (other that | in by providing fur | ods for such pure | I-W COULDINGS I | inborránny to me |
| | | | | ido ioi odoli paip | ioses). (See instru | ctions.) |
| _ | 1 | | | | oses). (See instru | ctions.) |
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| | • | Organizatio | ns | | | | | | | | |
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| 1 a | in sec organ | ction 501(c) (ot izations? | rectly or indirectly of her than section orting foundation to | 501(c)(3) orgai | nizations) or | in section | n 527, rela | | olitical | | es No |
| | (1) Ca | ash | | | | | | | | 1a(1) | × |
| | | her assets . | | | | | | | | 1a(2) | X |
| b | | transactions: | | | | | | | | | |
| | • | | a noncharitable exe | _ | | | | | | 1b(1) | × |
| | | | s from a noncharita | | | | | | | 1b(2) | × |
| | | | equipment, or othe | | | | | | | 1b(3) | X |
| | | | rangements | | | | | | | 1b(4) | <u> </u> |
| | | - | antees | | | | | | | 1b(5) | X |
| _ | | | vices or membersh Juipment, mailing lis | • | - | | | | | 1b(6) | X |
| d | | • | of the above is "Ye | | | - | | | | | |
| u | | | her assets, or servi | | | | | | | | |
| | | | n or sharing arrang | | | | | | | | |
| (a) Lin | | b) Amount involved | | naritable exempt org | | | ption of transfer | | | | |
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| 2a | is the | foundation dire | ctly or indirectly a | ffiliated with, o | r related to. | one or mo | ore tax-exer | npt organi | zations | | |
| | | | 01(c) (other than se | | | | | | | ☐ Yes | ⊠ No |
| b | If "Ye | s," complete the | following schedule | ١. | | | | | | | _ :: |
| - | | (a) Name of organi | zation | (b) Typ | e of organization | | | (c) Descriptio | n of relation | ship | |
| | | | | | · | | | | | | |
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| | | | | | | | | | | | |
| | 11-2 | n name (blan of mind or a | dadaa Mad I Cara areas | thus you | | | -1-4- | to the been d | | | U=4 .4 * |
| Sign | | r penalties of perjury, in ct, and complete. Decla | declare that I have examination of preparer (other th | ed this return, includii ian taxpayer) <u>is</u> based | ng accompanying s I on all information | scnedules and of which prep | i statements, and arer has any knov | to the best of viedge. | | | |
| | 1 1 | | - / 1 | 1 | . | | · | • | | | this return own below? |
| Her | | ature of officer or trus | too | Date | Title | esident | <u> </u> | | See instruc | tions _ | Yes∐No |
| | | Print/Type preparer | | Preparer's signa | | | Date, | - i | | TIN | |
| Paid | | 1 100 | سل کی ک | 1774 | - 11' N- | | 1 | | k [] if ' mployed | ·• | |
| Prep | | Firm's name | ESC 1700 LLC | <u> </u> | 1 Cat | | 1.11016 | Firm's EIN | | 63150 | |
| Use | Only | Firm's name ► Firm's address ► | 1700 E Putna | | Suite 202 | | | Phone no | 21-34 | 02129 | · |
| BAA | | 1 1 1111 3 4001655 | Old Greenwic | | CT | 06870 | <u> </u> | i none no | Fo | rm 990 | - PF (2018) |

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Marie Kennedy Foundation

Continuation Statement Restrictions none Submission Information Form 990-PF: Return of Private Foundation Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. none Form Information letter c/o ESC 1700 LLC, 1700 East Putnam Ave, Suite 202 Name and Address Information Old Greenwich, CT 06870 amcc@1700llc.com 203-769-1873 Ann McCart

Form 990-PF: Return of Private Foundation

'Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

| Part XV, Line 3a: Grants and Contributions Paid During the Year Continuation | | | | |
|--|---|--------------------------------------|----------------------------------|---------|
| Recipient name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | | | L., | |
| Wabash College | | 501(c)3 | unrestricted use | 30,000. |
| P.O. Box 352 | | 1 | | |
| Crawfordsville, IN 47933-0352 | | | ļ | |
| Portsmouth Abbey School | | 501(c)3 | unrestricted use | 30,000. |
| 285 Corys Lane | | | 1 | • |
| Portsmouth, RI 02871 | | |] | |
| Opportunities for a Better Tomorrow | | 501(c)3 | unrestricted use | 1,000. |
| 783 4th Avenue | | , , , , | | _, |
| Brooklyn, NY 11232 | | | 1 | |
| Nazareth Housing | | 501(c)3 | unrestricted use | 2,500. |
| 519 E. 11th Street | | | | • |
| New York, NY 10009 | | | 1 | |
| Oratory Church of St. Boniface | | 501(c)3 | unrestricted use | 10,000. |
| 109 Willoughby St. | | | 1 | • |
| Brooklyn, NY 11201 | | |] | |
| Friends of Turkana, Inc. | | 501(c)3 | unrestricted use | 10,000. |
| 165 Court St, PMB#304 | | 302 (3, 3 | | 10,000. |
| Brooklyn, NY 11201 | | | 1 | |
| Memorial Sloan Kettering | | 501(c)3 | unrestricted use | 2,000. |
| 633 Third Avenue, 28th Floor | | 301(0)3 | unicaciiced use | 2,000. |
| New York, NY 10017-6706 | | | | |
| Heights and Hills | | 501(c)3 | unrestricted use | 1,000. |
| 81 Willoughby Street, Suite 302 | | 301(0/3 | unitescritcted use | 1,000. |
| Brooklyn, NY 11201 | | | | |
| Old Stone House | | 501(c)3 | unrestricted use | 750. |
| P.O. Box 150613 | | 301(0)3 | unitestricted use | 750. |
| Brooklyn, NY 11215 | | | | |
| St. Joseph High School | | 501(c)3 | unrestricted use | 20,000. |
| 80 Willoughby Street | | 331 (373 | | 20,000. |
| Brooklyn, NY 11201 | | | | |
| Society for the Propogation of the Faith | | 501(c)3 | unrestricted use | 1,000. |
| 70 West 36th St. 8th floor | | 301(0/3 | unitestificted use | 1,000. |
| New York, NY 10018 | | | | |
| Little Sisters of the Poor | | 501(c)3 | unrestricted use | 1,000. |
| 2999 Schurz Avenue | | | | _, |
| Bronx, NY 10465 | | 1 | | |
| Breukelein Institute | | 501(c)3 | unrestricted use | 1,000. |
| 560 11th Street | | 1 | | |
| Brooklyn, NY 11215 | | | | |
| St. Vincents Hospital | | 501(c)3 | unrestricted use | 1,000. |
| 275 North Street | | | | |
| Harrison, NY 10528 | | <u> </u> | | |
| Portsmouth Abbey School | | 501(c)3 | unrestricted use | 40,000. |
| 285 Corys Lane | | 1 | | |
| Portsmouth, RI 02871 | | 1 | | |
| | | 501(c)3 | unrestricted use | 10,000. |
| St. Michael the Archangel | | 1201(6)2 | laurestricted ase i | -0,000. |
| St. Michael the Archangel P.O. Box 158 | | 301(0)3 | diffestificted use | 20,000. |

Marie Kennedy Foundation 13-3066903

·Form 990-PF: Return of Private Foundation

'Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

| | , | | , | |
|---|---|--------------------------------------|----------------------------------|----------|
| Recipient name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| a Paid dunng the year | | | | |
| Renew & Rebuild | | 501(c)3 | unrestricted use | 20,000. |
| 1011 First Avenue, 14th floor | } | | | |
| New York, NY 10022-4112 | <u> </u> | | | |
| Diocese of Bridgeport | | 501(c)3 | unrestricted use | 1,000. |
| P.O. Box 336 | | [| į | |
| Kensington, CT 06037-0336 | | | | |
| Mission Committee | | 501(c)3 | unrestricted use | 2,000. |
| 1011 First Avenue | | i | 1 | |
| New York, NY 10022 | | <u> </u> | | |
| Portsmouth Abbey School | | 501(c)3 | unrestricted use | 26,768. |
| 285 Corys Lane | | | | |
| Portsmouth, RI 02871 | | ł | 1 | |
| Portsmouth Abbey School | | 501(c)3 | unrestricted use | 5,929. |
| 285 Corys Lane | | | | |
| Portsmouth, RI 02871 | | | | |
| | | | | 216,947. |

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

| Description | Revenue and Expense per Book | Net Investment Income | Adjusted Net Income | Disbursement for charitable purpose |
|------------------|------------------------------------|-----------------------------|---------------------|-------------------------------------|
| 2017 form 990 PF | 2,716. | | | |
| Total | 2,716. | | | |

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

| Description | Revenue and Expense per Book | Net Investment Income | Adjusted Net Income | Disbursement for charitable purpose |
|-------------|------------------------------------|-----------------------------|------------------------|-------------------------------------|
| fees & misc | 996. | 120. | | 708. |
| Total | 996. | 120. | | 708. |

Form 990-PF: Return of Private Foundation

Part X, Line 1e, Investment Return Group Reduction Claimed Amount

Explanation Statement

Minimum Investment Return Group Reduction Claimed Amount

MARKET VALUE OF CRUPE INTERNATIONAL A-1 REDEEMABLE PREFERRED SHARES WAS REDUCED BY 10% DUE TO THE ILLIQUID NATURE OF THE SHARES

Additional information from your 2018 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Taxes (1)

Line 18(a)

Itemization Statement

| Description | on | Amount |
|-----------------|-------|--------|
| 2017 form990 pf | | 2,716. |
| | Total | 2,716. |

Form 990-PF: Return of Private Foundation

Other Expenses (1)

Line 23(a)

Itemization Statement

| Description | Amount |
|-------------------|------------|
| CSC filing fee | 484. |
| Wy filing fee | 200. |
| Subscriptions | 170. |
| Non residence tax | 120. |
| other misc | 22. |
| 1 | Total 996. |

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Part X, Line 1e, Investment Return Group Reduction Claimed Amount

Explanation Statement

Minimum Investment Return Group Reduction Claimed Amount

MARKET VALUE OF CRUPE INTERNATIONAL A-1 REDEEMABLE PREFERRED SHARES WAS REDUCED BY 10% DUE TO THE ILLIQUID NATURE OF THE SHARES

Form 990-PF: Return of Private Foundation Part XIII, Treated As Distribution from Corpus

Explanation Statement

Treated As Distribution from Corpus

Pursuant to Reg. Sec 53.4942 (A) - 3 (d) (2), the Marie Kennedy Foundation hereby elects to apply \$123,670 to corpus.