

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation SEEDLINGS FOUNDATION		A Employer identification number 04-3600502	
Number and street (or P.O. box number if mail is not delivered to street address) 984 MAIN STREET		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code BRANFORD, CT 06405		B Telephone number (see instructions) (203) 481-5740	
G Check all that apply: <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here .....	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 226,230,756		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .....	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	120,499,849			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments	24,263	24,263		
	4 Dividends and interest from securities . . .	1,376,400	1,376,400		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	13,771,186			
	b Gross sales price for all assets on line 6a _____ 22,452,245				
	7 Capital gain net income (from Part IV, line 2) . . .		13,771,186		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	7	7		
	12 Total. Add lines 1 through 11 . . . . .	135,671,705	15,171,856		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages . . . . .	183,750	0		183,750
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	56,000	39,200		0
	c Other professional fees (attach schedule) . . . . .	267,704	267,704		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . .	439,718	4,614		10,904
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .	79,987	0		0
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	623,197	889		547,346
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	1,650,356	312,407		742,000
	25 Contributions, gifts, grants paid . . . . .	18,566,054			18,566,054
	26 Total expenses and disbursements. Add lines 24 and 25	20,216,410	312,407		19,308,054
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	115,455,295			
	b Net investment income (if negative, enter -0-)		14,859,449		
c Adjusted net income (if negative, enter -0-)					

<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	3,292,681	44,539,309	44,539,309
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	46,033,885	116,590,942	181,691,447
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	165,074	0	0
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ 4,160 Less: accumulated depreciation (attach schedule) ▶ 4,160			
<b>15</b> Other assets (describe ▶ _____)				
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	49,491,640	161,130,251	226,230,756	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	93,835	0	
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	93,835	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds	49,397,805	161,130,251	
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	49,397,805	161,130,251	
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	49,491,640	161,130,251		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	49,397,805
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	115,455,295
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	164,853,100
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	3,722,849
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	161,130,251

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	13,771,186
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	23,982,970	90,899,510	0.263840
2017	28,450,757	89,942,932	0.316320
2016	28,874,246	81,404,774	0.354700
2015	31,267,640	92,317,481	0.338697
2014	31,879,196	77,484,926	0.411424

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	1.684981
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.336996
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	<b>4</b>	90,336,612
<b>5</b> Multiply line 4 by line 3	<b>5</b>	30,443,077
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	148,594
<b>7</b> Add lines 5 and 6	<b>7</b>	30,591,671
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	19,308,054

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>	297,189
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2.	<b>3</b>	297,189
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>	297,189
<b>6</b>	Credits/Payments:		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	415,032
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d.	<b>7</b>	415,032
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>	117,843
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> 117,843 <b>Refunded</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <b>\$</b> 0 <b>(2)</b> On foundation managers. <b>\$</b> 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <b>\$</b> 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> 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?	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>IL, CT</b>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	Yes	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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 . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>HTTP://SEEDLINGSCT.ORG</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>KAREN PRITZKER</u> Telephone no. ► <u>(203) 481-5740</u>			

Located at ► 984 MAIN STREET BRANFORD CTZIP+4 ► 06405

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	► <b>15</b>		
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 . . . . .	<b>1b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2019 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 2019.) . . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	<b>4b</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			
	<i>If "Yes" to 6b, file Form 8870.</i>			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KAREN PRITZKER 235 THIMBLE ISLANDS ROAD BRANFORD, CT 06405	PRESIDENT & DIRECTOR 10.00	0	0	0
JACK ABLIN 2335 S OCEAN BOULEVARD A2 PALM BEACH, FL 33480	TREASURER & DIRECTOR 10.00	0	0	0
LINDA PRITZKER 2120 SOUTH RESERVE STREET PMB126 MISSOULA, MT 59801	SECRETARY & DIRECTOR 0.00	0	0	0
AUDREY RATNER 5150 THREE VILLAGE DRIVE LYNDHURST, OH 44124	DIRECTOR 0.00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LYNN K WAYMER 1398 WOODLAND FOREST LANE STONE MOUNTAIN, GA 20083	COMMUNITY RELATIONS 40.00	180,217	0	0
<b>Total number of other employees paid over \$50,000.</b> . . . . .				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**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
SALLY AND BENNET SHAYWITZ MD LLC 11 CHESTNUT LANE WOODBIDGE, CT 06525	CONSULTANT	200,636
KEITH L MAGEE PO BOX 51978 BOSTON, MA 02205	CONSULTANT	177,273
<b>Total</b> 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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b> SEEDLINGS TEACHER COLLABORATIVE A ONE WEEK WORKSHOP OFFERED IN THE SUMMER WHOSE GOAL IS TO (A) PROMOTE COLLABORATION AMONG PUBLIC AND PRIVATE SCHOOL TEACHERS, (B) CAPTURE THE CREATIVITY OF PROJECT-BASED LEARNING, AND (C) MAKE AVAILABLE A BROAD AND EXCITING ARRAY OF RESOURCES IN NEW HAVEN, CT. THE GOAL IS TO PROVIDE THE THEORETICAL FRAMEWORK AND THE PRACTICAL KNOW-HOW TO DESIGN AND IMPLEMENT CURRICULAR UNITS USING PROJECT-BASED LEARNING. EACH YEAR BETWEEN 25 - 30 PRE-SCHOOL TO GRADE 5 TEACHERS ATTEND THE WORKSHOP.	139,108
<b>2</b> DYSLEXIA PROGRAM IS TO EDUCATE PEOPLE ABOUT DYSLEXIA. THE GOAL IS TO MAKE THEM AWARE OF THE SIGNS OF A DYSLEXIC PERSON AND THAT THERE IS HELP AVAILABLE.	398,623
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	86,068,506
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	5,643,790
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	91,712,296
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	91,712,296
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	1,375,684
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	90,336,612
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	4,516,831

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	4,516,831
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	297,189
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	297,189
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	4,219,642
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	4,219,642
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	4,219,642

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	19,308,054
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	19,308,054
<b>5</b>	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. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	19,308,054

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				4,219,642
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .			0	
<b>b</b> Total for prior years: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .	28,084,254			
<b>b</b> From 2015. . . . .	27,105,236			
<b>c</b> From 2016. . . . .	24,841,170			
<b>d</b> From 2017. . . . .	24,240,887			
<b>e</b> From 2018. . . . .	20,121,064			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	124,392,611			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 19,308,054				
<b>a</b> Applied to 2018, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2019 distributable amount. . . . .				4,219,642
<b>e</b> Remaining amount distributed out of corpus	15,088,412			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	139,481,023			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	28,084,254			
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .	111,396,769			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .	27,105,236			
<b>b</b> Excess from 2016. . . . .	24,841,170			
<b>c</b> Excess from 2017. . . . .	24,240,887			
<b>d</b> Excess from 2018. . . . .	20,121,064			
<b>e</b> Excess from 2019. . . . .	15,088,412			

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2019	(b) 2018	(c) 2017	(d) 2016	

<b>b</b> 85% of line 2a . . . . .					
-----------------------------------	--	--	--	--	--

c Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
--	--	--	--	--	--

<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities				
----------	---	--	--	--	--

<b>e</b> 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:					

[illegible]

(1) Value of all assets . . . . .					
-----------------------------------	--	--	--	--	--

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
---	--	--	--	--	--

<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
---	--	--	--	--	--

c "Support" alternative test—enter:					
-------------------------------------	--	--	--	--	--

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
---	--	--	--	--	--

(2) Support from general public 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					
-----------------------------	--	--	--	--	--

## Part XV

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

KAREN PRITZKER

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	18,566,054
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	24,263	
<b>4</b> Dividends and interest from securities. . . . .			14	1,376,400	
<b>5</b> Net rental income or (loss) from real estate:					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			15	7	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	13,771,186	
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		15,171,856	0
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations.)			<b>13</b>		15,171,856

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

[illegible]

## Part XVII

- |  |  |     |    |
|--|--|-----|----|
|  |  | Yes | No |
|--|--|-----|----|

--	--	--

- |       |  |    |
|-------|--|----|
| 1a(1) |  | No |
| 1a(2) |  | No |

--	--	--

- |              |  |           |
|--------------|--|-----------|
| <b>1b(1)</b> |  | <b>No</b> |
| <b>1b(2)</b> |  | <b>No</b> |
| <b>1b(3)</b> |  | <b>No</b> |
| <b>1b(4)</b> |  | <b>No</b> |
| <b>1b(5)</b> |  | <b>No</b> |
| <b>1b(6)</b> |  | <b>No</b> |

1c		No
----	--	----

value  
ue

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<p><b>Sign Here</b></p> <p>*****</p> <hr/> <p>Signature of officer or trustee</p>	<p>2020-07-06</p> <hr/> <p>Date</p>	<p>*****</p> <hr/> <p>Title</p>
---	-------------------------------------	---------------------------------

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	ARMAND E ROSSI				
	Firm's name ► MARCUM LLP				Firm's EIN ► 11-1986323
	Firm's address ► 555 LONG WHARF DRIVE NEW HAVEN, CT 06511				Phone no. (203) 781-9600

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
PARTNERSHIP - SECTION 1231	P		
MERRILL LYNCH #04037			
MERRILL LYNCH #04037			
MERRILL LYNCH #04037			
MERRILL LYNCH #02167			
MERRILL LYNCH #02167			
MERRILL LYNCH #02161			
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
278			278
1,191,616		1,188,010	3,606
17,178,261		2,750,429	14,427,832
8,284		6,900	1,384
2,931,997		3,599,025	-667,028
832,182		829,511	2,671
306,094		307,184	-1,090
3,533			3,533

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			278
			3,606
			14,427,832
			1,384
			-667,028
			2,671
			-1,090
			3,533

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN FRIENDS OF MAGEN DAVID ADAMS 20 W 36TH STREET NEW YORK, NY 10018	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	40,000
AMERICAN MUSEUM OF NATURAL HISTORY 79TH ST 2ND FL CENTRAL PARK WEST NEW YORK, NY 10024	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	2,100,000
AMISTAD ACADEMY INC 403 JAMES STREET NEW HAVEN, CT 06513	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	275,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANTI DEFAMATION LEAGUE 1952 WHITNEY AVENUE HAMDEN, CT 06517	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	50,000
BRANFORD FOOD PANTRY INC 30 HARRISON AVENUE BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	6,000
CALVIN HILL DAY CARE CENTER 150 HIGHLAND STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	25,000
<b>Total . . . . . ▶ 3a</b>				18,566,054



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CARIDAD CENTER 8645 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33472	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	10,000
CENTRAL CT COAST YMCA 28 SCHOOL STREET BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	15,000
CLIFFORD BEERS CLINIC INC 93 EDWARDS STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	507,500
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY ACTION AGENCY OF NEW HAVEN 419 WHALLEY AVENUE NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	50,000
COMMUNITY DINING ROOM 30 HARRISON AVENUE BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	10,000
CONNECTICUT CENTER FOR ARTS & TECHNOLOGY INC 3190 WHITNEY AVENUE BUILDING 7 HAMDEN, CT 06518	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	400,000
<b>Total . . . . .</b> ► <b>3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONNECTICUT HOSPICE INC 100 DOUBLE BEACH ROAD BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	30,000
CONNECTICUT NEWS PROJECT INC 1049 ASYLUM AVENUE 2ND FLOOR HARTFORD, CT 06105	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	130,000
CONNECTICUT PLAYERS FOUNDATION (LONG WHARF THEATRE) 222 SARGENT DRIVE NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	315,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONNECTICUT PUBLIC BROADCASTING INC 1049 ASYLUM AVENUE HARTFORD, CT 06105	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	25,000
CONNECTICUT VOICES FOR CHILDREN 33 WHITNEY AVENUE NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	125,000
CT COUNCIL FOR PHILANTHROPY 75 CHARTER OAK AVENUE SUITE 1-205 HARTFORD, CT 06106	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CUNY GRADUATE CENTER FOUNDATION 365 FIFTH AVENUE SUITE 8204 NEW YORK, NY 10016	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
DISTRICT INNOVATION & VENTURE CENTER 470 JAMES STREET NEW HAVEN, CT 06513	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	250,000
FELLOWSHIP AT AUSCHWITZ FOR THE STUDY OF PROFESSIONAL ETHICS INC 1501 BROADWAY 12 FLOOR NEW YORK, NY 10036	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	50,000
<b>Total</b> . . . . . ► <b>3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOCUSING PHILANTHROPY INC (PEER HEALTH EXCHANGE) 1637 16TH STREET SANTA MONICA, CA 90404	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	100,000
FOOTE SCHOOL ASSOCIATION 50 LOOMIS PLACE NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	302,996
FOUNDATION FOR THE ARTS & TRAUMA INC 19 EDWARDS STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	325,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF YALE NEW HAVEN CHILDREN'S HOSPITAL PO BOX 1849 NEW HAVEN, CT 06508	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	10,000
GRAMEEN AMERICA INC 150 WEST 30TH STREET NEW YORK, NY 10001	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	2,250,000
GRAMEEN PRIMA CARE INC 150 WEST 30TH STREET 8TH FLOOR NEW YORK, NY 10001	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	250,000
<b>Total . . . . .</b>			<b>▶ 3a</b>	18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HAMDEN HALL COUNTRY DAY SCHOOL 1108 WHITNEY AVENUE HAMDEN, CT 06517	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	83,490
HARTFORD STAGE COMPANY 50 CHURCH STREET HARTFORD, CT 06103	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	62,630
HOPKINS SCHOOL 986 FOREST ROAD NEW HAVEN, CT 06515	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	75,000
<b>Total . . . . . ▶ 3a</b>				18,566,054



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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ILLINOIS INSTITUTE OF TECHNOLOGY 10 W 35TH STREET SUITE 1700 CHICAGO, IL 60616	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	110,000
INTERNATIONAL FESTIVAL OF ARTS & IDEAS 195 CHURCH STREET 12TH FLOOR NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	115,000
IRIS 235 NICOLI STREET 2ND FLOOR NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	1,500
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JAZZ AT LINCOLN CENTER 33 WEST 60TH STREET NEW YORK, NY 10023	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	50,000
JEWISH FEDERATION OF GREATER NEW HAVEN 360 AMITY ROAD WOODBIDGE, CT 06525	N/A	PUBLIC	HUMANITARIAN.EDUCATIONAL/COMMUNITY	455,000
LEAP-LEADERSHIPEDUCATION & ATHLETICS IN PARTNERSHIP 31 JEFFERSON STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EUCATIONAL/COMMUNITY	300,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MICHAEL J FOX FOUNDATION FOR PARKINSON'S RESEARCH 90 BROAD STREET 10TH FLOOR NEW YORK, NY 10004	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	625,000
MY HERO PROJECT INC 1278 GLENNEYRE 286 LAGUNA BEACH, CA 92561	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	648,918
NATIONAL DIAPER BANK NETWORK 129 CHURCH STREET SUITE 611 NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	45,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATIONAL FOUNDATION TEACHING ENTREPRENEURSHIP (NFTE) 152 WEST 57 STREET 52ND FLOOR NEW YORK, NY 10019	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	250,000
NEIGHBORHOOD HOUSING SERVICES OF NEW HAVEN 333 SHERMAN AVENUE NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	85,000
NEW HAVEN PRESERVATION TRUST 922 STATE STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	7,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW HAVEN READS 45 BRISTOL STREET NEW HAVEN, CT 06511	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	75,000
ONLINE JOURNALISM PROJECT INC 493 CENTRAL AVENUE NEW HAVEN, CT 06515	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	150,000
PATRONS OF NEW HAVEN FREE PUBLIC LIBRARY 133 ELM STREET NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PEN AMERICAN CENTER 588 BROADWAY SUITE 303 NEW YORK, NY 10012	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	30,000
PRIMARY STAGES 307 WEST 38TH STREET SUITE 1510 NEW YORK, NY 10018	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
PRITZKER MILITARY LIBRARY 610 NORTH FAIRBANKS COURT 2ND FLOOR CHICAGO, IL 60611	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	25,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RATNER SCHOOL 27575 SHAKER BOULEVARD PEPPER PIKE, OH 44124	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	150,000
READ TO GROW INC 53 SCHOOL GROUND ROAD UNIT 3 BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	327,500
ROCK AND ROLL HALL OF FAME AND MUSEUM 1100 ROCK AND ROLL BOULEVARD CLEVELAND, OH 44114	N/A	PUBLIC	HUMANITARIAN,EDUCATIONAL/COMMUNITY	35,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RONALD MCDONALD HOUSE 26345 NETWORK PLACE CHICAGO, IL 606731263	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	100,000
SARAH FOUNDATION 246 GOOSE LANE SUITE 104 GUILFORD, CT 06437	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
SEA TURTLE CONSERVANCY 4424 NW 13TH ST SUITE B-11 GAINESVILLE, FL 32609	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	25,000
<b>Total . . . . .</b> ► <b>3a</b>				18,566,054



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SERVICE YEAR ALLIANCE 1400 EYE STREET NW SUITE 900 WASHINGTON, DC 20005	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	200,000
SING FOR HOPE 575 EIGHTH AVENUE SUITE 1812 NEW YORK, NY 10018	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	10,000
SPACE-SHIP INC984 MAIN STREET BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	55,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STONY CREEK MUSEUM 84 THIMBLE ISLAND ROAD BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	20,000
SYMPHONY SPACE INC 2537 BROADWAY AT 95TH STREET NEW YORK, NY 10025	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	25,000
TEACH FOR ALL INC 315 WEST 36TH STREET 5TH FLOOR NEW YORK, NY 10018	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	800,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TEACH FOR AMERICA (NEW YORK) 315 WEST 36TH STREET 7TH FLOOR NEW YORK, NY 10018	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	1,300,000
TEMPLE BETH TIKVAH PO BOX 1269 196 DURHAM RD MADISON, CT 06443	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	400,000
THE CLEVELAND ORCHESTRA 11001 EUCLID AVENUE CLEVELAND, OH 44106	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	150,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE FORTUNE SOCIETY 2976 NORTHERN BLVD LONG ISLAND, NY 11101	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	15,000
THE SHERMAN B NULAND FOUNDATION PO BOX 6356 HAMDEN, CT 06517	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	1,500,000
THE SMALL THINGS INC 23 MONTOWESE TRAIL WALLINGFORD, CT 06492	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	80,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TIDES FOUNDATIONPO BOX 29903 SAN FRANCISCO, CA 94129	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	250,000
TRUTH IN ADVERTISING 984 MAIN STREET BRANFORD, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	1,000,000
UNITED STATES EQUESTRIAN TEAM FOUNDATION 1040 POTTERSVILLE ROAD FAR HILLS, NJ 07931	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	100,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITED WAY OF GREATER NEW HAVEN 71 ORANGE STREET NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	200,000
UNIVERSITY OF MINNESOTA FOUNDATION 200 SE OAK STREET 500 MINNEAPOLIS, MN 55455	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	175,000
URU THE RIGHT TO BE INC 70 AUDUBON ST 2ND FLC/O ARTS COUNCIL OF GREATER NEW HAVEN NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	20,000
<b>Total</b> . . . . . ► <b>3a</b>				18,566,054

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Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WILLISTON HAMPTON SCHOOL 19 PAYSON AVENUE EASTHAMPTON, MA 01027	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	50,000
WILLOUGHBY WALLACE MEMORIAL LIBRARY 146 THIMBLE ISLANDS ROAD STONY CREEK, CT 06405	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	13,520
WOMEN & FAMILY LIFE CENTER 96 FAIR STREET GUILFORD, CT 06437	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	5,000
<b>Total . . . . . ▶ 3a</b>				18,566,054

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YALE REPERATORY THEATRE PO BOX 208244 NEW HAVEN, CT 06520	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	10,000
YALE UNIVERSITY SCHOOL OF ARCHITECTURE 157 CHURCH STREET NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	80,000
YALE UNIVERSITY SCHOOL OF MEDICINE -CTR EMOTIONAL INTELLIGENCE 157 CHURCH STREET NEW HAVEN, CT 06510	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	400,000
<b>Total . . . . . ▶ 3a</b>				18,566,054



**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YIVO INSTITUTE FOR JEWISH RESEARCH 15 WEST 16TH STREET NEW YORK, NY 10011	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	100,000
YOGI BERRA MUSEUM & LEARNING CENTER 8 QUARRY ROAD LITTLE FALLS, NJ 07424	N/A	PUBLIC	HUMANITARIAN/EDUCATIONAL/COMMUNITY	100,000
<b>Total . . . . .</b> ▶ <b>3a</b>				18,566,054

**TY 2019 Accounting Fees Schedule****Name:** SEEDLINGS FOUNDATION**EIN:** 04-3600502

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	56,000	39,200		0

TY 2019 Investments Corporate Stock Schedule

Name: SEEDLINGS FOUNDATION  
 EIN: 04-3600502

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
500 ACADIA PHARMA INC	17,700	21,390
100 ADAPTIVE BIOTCHNLGS CORP	2,000	2,992
500 AFYA LTD CL A	9,500	13,560
200 ALGONQUIN PWR AND	2,700	2,830
500 AVANTOR INC	7,000	9,075
300 AXONICS MODULATION	5,200	8,313
200 BAKER HUGHES INC REG SHS	4,300	5,126
100 BILL COM HLDGS INC	2,200	3,805
500 BIONTECH SE	7,500	16,940
100 BELLRING BRANDS INC	1,400	2,129
100 BRP GROUP INC	1,400	1,605
500 CLARIVATE	8,000	8,400
100 CARDYLTICS INC	3,400	6,286
500 CHANGE HEALTHCARE INC	6,500	8,195
100 CHEWY INC SH	2,200	2,900
100 CROWDSTRIKE HLDGS INC	3,400	4,987
300 DIGITAL RLTY TR INC	33,900	35,922
100 DYNATRACE INC REG SHS	2,475	2,530
1007.617 ELLINGTON FINL INC	18,326	18,470
200 ELANCO ANIMAL HEALTH INC	4,800	5,890
100 ESSENTIAL PPTYS RLTY TR	1,750	2,481
100 ELASTIC N V	3,600	6,430
100 89BIO INC	1,600	2,629
100 EVERBRIDGE INC	5,525	7,808
600 EVO PMTS INC CL A	16,900	15,846
100 FNDTN BLDG MATLS INC	1,700	1,935
100 FASTLY INC REG SHS CL A	1,600	2,007
200 GUARDANT HEALTH INC	3,800	15,628
500 GENMAB A/S SHS	8,875	11,165
240 GROCERY OUTLET HLDG CORP	6,455	7,788

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
100 GOSSAMER BIO INC	1,600	1,563
100 GALERA THERAPEUTICS INC	1,200	1,316
100 GSX TECHEDU INC SHS	1,400	2,186
270 HASBRO INC	25,650	28,515
413.9569 HCP INC	12,009	14,269
100 HEADHUNTER GROUP ADS ADR	1,350	2,145
100 I3 VERTICALS INC REG SHS	2,275	2,825
100 IMMUNOMEDICS INC COM	1,750	2,116
2057.3614 INVESCO MORTGAGE CAPITAL	32,620	34,255
200 LEVI STRAUSS AND CO NEW	3,400	3,858
200 MEDALLIA INC	4,200	6,222
100 MGM GROWTH PPTYS LLC	3,125	3,097
1213.1247 MEDICAL PPTYS TR INC	21,242	25,609
200 NEXTCURE INC REG SHS	5,175	11,266
1000 NEW YORK MORTGE TRUST	6,140	6,230
100 ONECONNECT FINL TECH CO LTD	1,000	1,003
508.0297 OMEGA HEALTHCARE INVS	20,495	21,515
509.0163 OWL ROCK CAPITAL CORP	7,815	9,106
1000 HEALTHPEAK PPTYS INC	35,000	34,470
100 PERFORMANCE FOOD GROUP	4,425	5,148
100 PROGYNY INC	1,300	2,745
100 PING IDENTITY HOLDING CORP	1,500	2,430
500 PENNYMAC MTG INVT TR	10,875	11,145
200 PRINCIPIA BIOPHARMA INC.	4,500	10,956
100 PROSIGHT GLOBAL INC COM	1,400	1,613
100 PURPLE INNOVATION INC	700	871
100 THE REALREAL INC	2,000	1,885
100 RYMAN HOSPITALITY PPTYS	8,560	8,666
100 CONSTRUCTION PARTNERS	1,425	1,687
100 REVOLVE GROUP INC REG	1,800	1,836

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
200 SAFEHOLD INC.	6,200	8,060
600 SILK ROAD MEDICAL INC.	13,950	24,228
100 SUNPOWER CORP	700	780
100 SVMK INC	1,200	1,787
200 SHOCKWAVE MEDICAL INC.	5,325	8,784
1000 TENCENT MUSIC	13,000	11,740
300 RESTORBIO INC COM	2,085	447
200 TRADEMARK MKTS INC CL A	5,400	9,270
100 10X GENOMICS INC REG	3,900	7,625
307.8085 VICI PPTYS INC	6,627	7,865
100 VERRA MOBILITY CORP	1,250	1,399
100 ADVANCED DRAIN SYS INC	2,975	3,884
100 AQUA AMERICA INC	3,462	4,694
300 YETI HLDGS INC	8,600	10,434
100 Y-MABS THERAPEUTICS INC	2,800	3,125
100 ZOOM VIDEO	3,600	6,804
36567 APPLE INC.	384,553	10,737,900
485 ADOBE SYSTEMS	123,300	159,958
1100 GALLAGHER ARTHUR J & CO	86,240	104,753
5597 ADVANCED MICRO D	155,234	256,678
125 AMAZON.COM INC.	207,381	230,980
480 ALIBABA GROUP HOLDING LT	80,618	101,808
600 BAXTER INTERNATIONAL	52,815	50,172
200 BECTON DICKINSON	50,444	54,394
887 BRISTOL-MYERS SQUIBB CO	49,583	56,937
887 BRISTO-MYERS SQUIBB PARENT	1,889	2,670
2707 BOSTON SCIENTIFIC CORP	97,613	122,411
400 BURLINGTON STORES INC	78,362	91,212
4411 BLACKSTONE GROUP INC COM	157,589	246,751
700 CADENCE DESIGN SYSTEMS INC	48,219	48,552

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
600 CAPITAL ONE FINANCIAL CORP	51,661	61,746
986 SALESFORCE COM INC	146,255	160,363
1600 D R HORTON INC.	68,127	84,400
1000 DICKS SPORTING GOODS INC	40,121	49,490
1500 EBAY INC.	51,387	54,165
480 FACEBOOK INC-A	80,634	98,520
100 ALPHABET INC CL A	112,332	133,939
2000 GLAXOSMITHKLINE PLC ADR	81,960	93,980
600 GUIDEWIRE SOFTWARE INC	63,285	65,862
971 HONEYWELL INTL	159,010	171,867
599 HUBBELL INC SHS	76,102	88,544
395 IAC INTERACTIVECORP	78,100	98,398
5000 INFOSYS TECH LTD	45,185	51,600
2500 KIMCO REALTY CORP	53,198	51,775
2203 ELI LILLY & CO.	239,021	289,540
6000 MEDICAL PPTYS TR INC	99,337	126,660
2500 MARVEL TECHNOLOGY GROUP	49,091	66,400
760 SERVICENOW INC	146,063	214,563
2255 PROGRESSIVE CRP OHIO	157,451	163,239
700 PROLOGIS INC	50,070	62,398
311 ROPER TECHNOLOGIES INC	96,317	110,166
500 RAYTHEON COMPANY	102,655	109,870
1000 SANOFI ADR	42,865	50,200
700 SYSCO CORP	51,527	59,878
3900 AT&T INC.	117,488	152,412
300 THERMO FISHER SCIENTIFIC INC	75,551	97,461
2000 TEXTRON INC	91,980	89,200
800 UNILEVER NV NY REG SHS	48,252	45,968
295 UNITEDHEALTH GROUP INC	79,618	86,724
1187 UNITED TECHNOLOGIES CORP.	159,885	177,765

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1104 VISA INC	158,273	207,442
5000 VEREIT INC	49,785	46,200
526 VMWARE INC	77,951	79,842
2901 VERIZON COMMUNICATIONS	158,050	178,121
1500 CACTUS INC CL A	39,707	51,480
700 WALMART INC.	79,157	83,188
500 XILINX INC	63,736	48,885
1000 EXXON MOBIL CORPORATION	75,409	69,780
400 YUM BRANDS INC	46,832	40,292
1000 ZENDESK INC.	77,314	76,630
450 ZOOM VIDEO	41,714	30,618
426 FAIRPOINT COMMUNICATIONS INC. - DELISTED	3,150	0
510248 APPLE INC.	96,049,908	149,834,325
200000 ADELPHIA COMMUNICATIONS	79,824	0
29067 PROTECTIVE INSURANCE CORP.	741,209	457,805
155861 BALDWIN & LYONS INC CL B	3,790,540	2,507,803
0.9997 FIRST REP BK SAN FRANCISCO	100	117
17100 NORTEL NETWORKS	495,181	17
10000 STARBUCKS CORP.	125,654	879,200
6737 PACER GLOBAL CASH	208,372	211,811
6471 ISHARES TR CORE MSCI EAF	401,910	422,168
4020 ISHARES INC CORE MSCI	200,809	216,115
1980 ISHARES NORTH AMERICAN	401,442	479,457
16522 ISHARES CORE S&P 500 ETF	4,650,523	5,340,571
11738 ISHARES DOW JONES US	1,591,662	1,873,878
3206 INVESCO QQQ TR SER 1	592,437	681,628
41228 INVESCO S AND P 500	1,599,214	1,815,269

**TY 2019 Other Decreases Schedule**

**Name:** SEEDLINGS FOUNDATION

**EIN:** 04-3600502

Description	Amount
BOOK TO TAX DIFFERENCE IN BASIS OF DONATED STOCKS SOLD	3,722,849



**TY 2019 Other Expenses Schedule****Name:** SEEDLINGS FOUNDATION**EIN:** 04-3600502**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TEACHERS COLLABORATIVE	139,108	0		139,108
OFFICE EXPENSE	587	0		0
CONSULTANT FEES FOR DYSLEXIA PROGRAM	377,909	0		377,909
DYSLEXIA PROGRAM EXPENSES	20,714	0		20,714
CONSULTANT FEES	37,672	0		0
FEES - CT CORP.	378	0		0
INVESTMENT INTEREST EXPENSE - SCHEDULE K-1	82	82		0
SCHEDULE K-1'S LOSSES	39	39		0
SCHEDULE K-1'S EXPENSES	74	74		0
PAYROLL FEES	8,529	0		8,529

**Other Expenses Schedule**

<b>Description</b>	<b>Revenue and Expenses per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
MEMBERSHIP DUES	10,708	0		0
ANNUAL FEES - ML	450	450		0
SELLING AND MARKETING	9,977	0		0
INSURANCE	312	0		0
MEALS/ENTERTAINMENT	6,990	0		0
BUSINESS EXPENSES	8,223	0		0
BANK FEES	244	244		0
FRINGE BENEFITS	1,086	0		1,086
FEES - ILLINOIS	115	0		0

# **TY 2019 Other Income Schedule**

**Name:** SEEDLINGS FOUNDATION

**EIN:** 04-3600502

## **Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ROYALTY - PASS THROUGH ENTITY	7	7	7

**TY 2019 Other Liabilities Schedule****Name:** SEEDLINGS FOUNDATION**EIN:** 04-3600502

Description	Beginning of Year - Book Value	End of Year - Book Value
DEPOSITS IN TRANSIT	93,835	0

**TY 2019 Other Professional Fees Schedule****Name:** SEEDLINGS FOUNDATION**EIN:** 04-3600502

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	267,704	267,704		0

**TY 2019 Taxes Schedule****Name:** SEEDLINGS FOUNDATION**EIN:** 04-3600502

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES PAID	424,200	0		0
FOREIGN TAXES PAID	4,614	4,614		0
PAYROLL TAXES	10,904	0		10,904

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b> ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information.	OMB No. 1545-0047  <b>2019</b>
	Name of the organization SEEDLINGS FOUNDATION	<b>Employer identification number</b> 04-3600502

Organization type (check one):

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
SEEDLINGS FOUNDATION

Employer identification number  
04-3600502

**Part I**

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KAREN PRITZKER 235 THIMBLE ISLAND ROAD STONY CREEK, CT 06405	\$ 43,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	KAREN PRITZKER 235 THIMBLE ISLAND ROAD STONY CREEK, CT 06405	\$ 76,625,449	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
3	KAREN PRITZKER 235 THIMBLE ISLAND ROAD STONY CREEK, CT 06405	\$ 874,400	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)



Name of organization SEEDLINGS FOUNDATION	Employer identification number 04-3600502
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(c) FMV (or estimate) (See instructions)	(d) Date received
2	262,248 SHARES APPLE STOCK	\$ 76,625,449	2019-12-30
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	10000 SHARES OF STARBUCKS STOCK	\$ 874,400	2019-12-30
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization SEEDLINGS FOUNDATION	Employer identification number 04-3600502
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Part III

**Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of **exclusively** religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
	-		