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OMB No. 1545-0052

2019

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , aı	nd ending 12-31-	2019		
		undation NDRA DEFEO FAMILY FOUNDATION		A Employer id	entification numbe	r	
	IL & JA	ANDINA DELEGITAMENT CONDATION	26-6141110	26-6141110			
		d street (or P.O. box number if mail is not delivered to street address) ELL ROAD	Room/suite	B Telephone nu	mber (see instructio	ns)	
City	or town	n, state or province, country, and ZIP or foreign postal code		(203) 247-2795	5		
		FL 34242		C If exemption	application is pendin	g, check here	
G Cł	neck al	ll that apply: \Box Initial return \Box Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	ere	
		\square Final return \square Amended return			ganizations meeting		
		Address change Name change		·	k here and attach co	· -	
H C	neck ty	pe of organization: Section 501(c)(3) exempt private			undation status was t n 507(b)(1)(A), chec		
			e private foundation				
		from Part II col (c)	☑ Cash ☐ Accru		ation is in a 60-mont n 507(b)(1)(B), ched		
		►\$ 4,823,805	be on cash basis.)				
- Da	et T	Analysis of Revenue and Expenses (The total	<u>, </u>	<u> </u>		(4) Dielement	
Fæ	rt I	of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable	
		equal the amounts in column (a) (see instructions).)	books	income	income	purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach					
	2	schedule) Check ▶ ☑ if the foundation is not required to attach					
	-	Sch. B					
	3	Interest on savings and temporary cash investments	2,105				
	4	Dividends and interest from securities	130,303	130,303			
	5a b	Gross rents					
æ	6a	Net gain or (loss) from sale of assets not on line 10	180,016				
Ĭ	b	Gross sales price for all assets on line 6a					
Revenue	_	5,951,545					
~	7	Capital gain net income (from Part IV, line 2)		180,016			
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	312,424	312,424			
	13	Compensation of officers, directors, trustees, etc.	0	0		0	
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
Expenses	b	Accounting fees (attach schedule)	06-1 44.040	44.040		0	
ve	c c	Other professional fees (attach schedule)	44,846	44,846		0	
rati	17 18	Interest	2,794	0		0	
ist	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	2,75				
<u>=</u>	20	Occupancy					
and Administrative	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
bu	23	Other expenses (attach schedule)					
Operating	24	Total operating and administrative expenses.					
<u>pe</u>		Add lines 13 through 23	47,640	44,846		0	
٠	25	Contributions, gifts, grants paid	260,750			260,750	
	26	Total expenses and disbursements. Add lines 24 and 25	308,390	44,846		260,750	
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	4,034				
	b	Net investment income (if negative, enter -0-)	7,034	267,578			
	С	Adjusted net income (if negative, enter -0-)		==:,,,,,			
For	Paper	work Reduction Act Notice, see instructions.		Cat. No. 11289)	(Foi	m 990-PF (2019)	

Beginning of year

End of year

Form 990-PF (2019)

1	L	Cash—non-interest-bearing			
2	2	Savings and temporary cash investments	8,660	20,452	20,452
3	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
4	1	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
5	5	Grants receivable			
6	5	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
7	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
s ي	3	Inventories for sale or use			
Assets	•	Prepaid expenses and deferred charges			
¥ 10	0a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4,347,422	4,344,781	4,803,353
	C	Investments—corporate bonds (attach schedule)			
1:	1	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
12	2	Investments—mortgage loans			
1:	3	Investments—other (attach schedule)			
14	4	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
1!	5	Other assets (describe ▶)			
10	6	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	4,356,082	4,365,233	4,823,805
17	7	Accounts payable and accrued expenses			
18	8	Grants payable			
<u>S</u> 19	9	Deferred revenue			
19 19 20 21 22 22 23 24 25 25 25 25 25 25 25	0	Loans from officers, directors, trustees, and other disqualified persons			
[2:	1	Mortgages and other notes payable (attach schedule)			
- 2:	2	Other liabilities (describe)			
23	3	Total liabilities(add lines 17 through 22)	0	0	
5		Foundations that follow FASB ASC 958, check here ▶			
alances N		and complete lines 24, 25, 29 and 30.			
힐	4	Net assets without donor restrictions			
<u>بد</u> <u>۵</u>	5	Net assets with donor restrictions			
Fund B		Foundations that do not follow FASB ASC 958, check here ▶ ☑			
		and complete lines 26 through 30.			
Ö 20	6	Capital stock, trust principal, or current funds	0	o	
ets 2		Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
		Retained earnings, accumulated income, endowment, or other funds	4,356,082	4,365,233	
S 2	8				
		Total net assets or fund balances (see instructions)	4,356,082	4,365,233	
Š 28	9	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) .	4,356,082 4,356,082	4,365,233 4,365,233	

4,356,082

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a JP MORGAN #11862 - SA	LE OF SECURITIES		Р		2019-12-31
b JP MORGAN #11862 - SA	LE OF SECURITIES		Р		2019-12-31
c JP MORGAN #11862 - SA	LE OF SECURITIES		Р		2019-12-31
d CAPITAL GAINS DIVIDEN	DS		Р		
e					
(-)	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
·	(or allowable)	plus exp	ense of sale	(e) plus (f) minus (g)
a 4,22:	·		4,180,633		41,208
·	7,566		1,294,475		43,091
	7,861		296,421		11,440
d 84	1,277				84,277
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	Excess	(k) of col. (i)	col. (k), but not	h) gain minus less than -0-) or
	as of 12/31/69	over col	l. (j), if any	Losses (fr	om col.(h))
a					41,208
b					43,091
c					11,440
d					84,277
е					
• -	ain or (loss) as defined in sections to I, line 8, column (c) (see instructi)- }	3	180,016
Part V Qualification U	nder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
For optional use by domestic pr	ivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	e.)	
f section 4940(d)(2) applies, le		hl	. i #la - la - a - a - a - a - a - a - a - a	· 🗆 Y	es 🗸 No
	e section 4942 tax on the distributa t qualify under section 4940(e). Do		•		es 🛂 No
	ount 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 noncharitab	le-use assets	(d) Distribution rati (col. (b) divided by c	· -
2018	206,250		4,586,294	•	0.044971
2017	229,005		4,452,050		0.051438
2016	275,317		3,929,377		0.070066
2015	150,652		4,050,531		0.037193
2014	193,727		4,119,715		0.047024
2 Total of line 1, column (d)		2		0.250692
number of years the foun	for the 5-year base period—divide dation has been in existence if less acharitable-use assets for 2019 fron	than 5 years	.0, or by the 3		0.050138 4,486,242
5 Multiply line 4 by line 3			5		224,931
	nt income (1% of Part I, line 27b)				2,676
7 Add lines 5 and 6			7		227,607
8 Enter qualifying distribution If line 8 is equal to or gre	ons from Part XII, line 4 , ater than line 7, check the box in Pa		8	g a 1% tax rate. Se	260,750
instructions.					orm 990-PF (2019)

	990-F1 (2019)		- 4-20.14	-			P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes 【	⊘ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🔲 Yes	✓ No			
	(3) Provide a grant to an individual (for travel, study, or other sim	ilar purposes?	☐ Yes S	☑ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v •	⊘ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · · · Yes	✓ No			
	educational purposes, or for the		* * * * * * * * * * * * * * * * * * * *	— —	,			
b	If any answer is "Yes" to $5a(1)-(5)$,	•		centions described in	⊻ No			
_	Regulations section 53.4945 or in a c	•				5b		
	Organizations relying on a current no			_	_,			
_	If the answer is "Yes" to question 5a			[_			
C	•	• • •	•		_			
	tax because it maintained expenditu	, ,		''	⊔ No			
	If "Yes," attach the statement requir	· -						
ia	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?			· 🗌 Yes	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be		[6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction?	✓ No			
b	If "Yes", did the foundation receive a	iny proceeds or have any net	income attributable to the	ne transaction?	<u>- </u>	7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or	Γ			
	excess parachute payment during th				.			
					✓ No L			
Pai	and Contractors	fficers, Directors, Trust	lees, roundation Ma	magers, migniy Paid	Employ	ees,		
_								
1	List all officers, directors, trustee				1			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a			se acc	
	(-,	devoted to position	-0-)	deferred compensation		her al	lowand	es
ee A	Additional Data Table							
								,,
2	Compensation of five highest-pai	d employees (other than ti	nose included on line :		none, en	ter "	NONE.	
- \ I	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(a) F	vnanc	se acco	unt
u ,	more than \$50,000	nours per week	(c) Compensation	plans and deferred			owance	
	. ,	devoted to position		compensation				
ONE								
ota	I number of other employees paid ove	r \$50,000	<u></u> .					
					Forr	n 99 0	D-PF (2019

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ces (see instructions). If none, ent	er "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		-
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers produced.		nber of Expenses
1 CONTRIBUTIONS MADE TO VARIOUS NON-PROFIT ORGANIZATIONS	uced, etc.	260,750
2		2007/100
3		
4		
"		
Part IX-B Summary of Program-Related Investments (see	instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		. • 0
		Form 990-PF (2019)

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

2,676

221,636

221.636

221.636

260,750

260,750

2.676

258.074

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Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

136,676

84,960

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Page 9

P	art XIII	Undistributed Income (see instru	uctions)
1	Distributab	le amount for 2019 from Part XI. line 7	

c From 2016. **d** From 2017. . e From 2018. . . .

		(a) Corpus
1	Distributable amount for 2019 from Part XI, line 7	
2	Undistributed income, if any, as of the end of 2019:	
а	Enter amount for 2018 only	
b	Total for prior years: 20 , 20 , 20	
3	Excess distributions carryover, if any, to 2019:	
а	From 2014	
b	From 2015	

f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . .

10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. . c Excess from 2017. . . . d Excess from 2018. . . e Excess from 2019. .

indicated below:

0

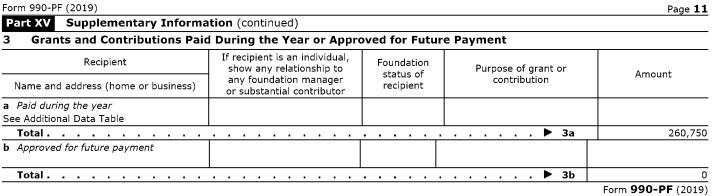
(b)

Years prior to 2018

(c)

2018

124,074



nter gross amounts unless otherwise indicated.	. Unrelated b	ousiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a b					
c					
d e					
f					
g Fees and contracts from government agenMembership dues and assessments					
Interest on savings and temporary cash investments			14	2,105	
Dividends and interest from securities Net rental income or (loss) from real estate:			14	130,303	
a Debt-financed property					
 b Not debt-financed property. b Net rental income or (loss) from personal pr Other investment income. 	roperty				
Gain or (loss) from sales of assets other tha inventory	in		18	180,016	
Net income or (loss) from special events:					
O Gross profit or (loss) from sales of inventory Other revenue: a	у				
b					
c					
d					
de					
e		0		312,424	
e	e)		13	312,424 3	
2 Subtotal. Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verant XVI-B Relationship of Activities Line No. Explain below how each activity for the accomplishment of the foundations.	es)	hment of Exempleted in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	312,424
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to vercart XVI-B Relationship of Activities Explain below how each of the foundation of the accomplishment of the foundation.	es)	hment of Exempleted in column (e) of	pt Purposes Fart XVI-A contribu	ted importantly to	312,424
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No

=o1	rm 990-PF (201	9)		Pag	(
	TO THE STATE OF TH	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able		
1		zation directly or indirectly engage in any of the following with any other organization described in section 501 section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	
а		the reporting foundation to a noncharitable exempt organization of:	1a(1)		
	(2)		4 (2)	$\neg \neg$	١

Paid Preparer **Use Only**

Firm's name ▶ CAVANAUGH & CO LLP 2381 FRUITVILLE ROAD Firm's address ▶

SARASOTA, FL 34237

Phone no. (941) 366-2983

Firm's EIN ▶59-1954606

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position employee benefit plans -0-)

			and deferred compensation	
NEIL DEFEO	DIRECTOR	0	0	(
4067 SHELL ROAD	1.00			

4067 SHELL ROAD SARASOTA, FL 34242	1.00	v	Ů	
SANDRA DEFEO	DIRECTOR	0	0	

SANDRA DEFEO	DIRECTOR	0	0	0
4067 SHELL ROAD SARASOTA, FL 34242	2.00			
ELIZABETH DEFEO	DIRECTOR	0	0	0

LAUDEN DEEEO DUCHENE	DIRECTOR			_
4067 SHELL ROAD SARASOTA, FL 34242	3.00			
ELIZABETH DEFEO	DIRECTOR	0	0	0
SARASOTA, FL 34242				

4067 SHELL ROAD SARASOTA, FL 34242	3.00			
LAUREN DEFEO DUCHENE	DIRECTOR	0	0	0
23 CRAW AVENUE	3.00			

SAKASOTA,TE STETE				
LAUREN DEFEO DUCHENE	DIRECTOR	0	0	0
23 CRAW AVENUE NORWALK, CT 06853	3.00			

23 CRAW AVENUE NORWALK, CT 06853	3.00			
JULIA DEFEO SWAN	DIRECTOR	0	0	0

JULIA DEFEO SWAN	DIRECTOR	0	0	
1 TIMBER LANE DARIEN, CT 06820	3.00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ASOLO REPERTORY THEATRE 5555 NORTH TAMIAMI TRAIL SARASOTA, FL 34243	NONE	PUBLIC CHARITY	ARTS	5,000
CIRCUS ARTS CONSERVATORY 2075 BAHIA VISTA STREET SARASOTA, FL 34239	NONE	PUBLIC CHARITY	ARTS	500

CIRCUS ARTS CONSERVATORY 2075 BAHIA VISTA STREET SARASOTA, FL 34239	NONE	PUBLIC CHARITY	ARTS	500
CONSERVATION FOUNDATION OF GULF COAST 400 PALMETTO AVENUE OSPREY, FL 34229	NONE	PUBLIC CHARITY	CONSERVATION	4,000
Total			▶ 3a	260,750

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

or substantial contributor

a Paid during the year				
DARIEN NATURE CENTER 120 BROOKSIDE ROAD DARIEN, CT 06820	NONE	PUBLIC CHARITY	COMMUNITY SUPPORT	750

DOCTORS WITHOUT BORDERS USA PO BOX 5030 HAGERSTOWN, MD 21741	NONE	PUBLIC CHARITY	MEDICAL	2,500
MANHATTAN COLLEGE	NONE	PUBLIC	EDUCATION	100,000

HAGERSTOWN, MD 21741				
MANHATTAN COLLEGE 4513 MANHATTAN COLLEGE PARKWAY RIVERDALE, NY 10471	NONE	PUBLIC CHARITY	EDUCATION	100,000

MANHATTAN COLLEGE 4513 MANHATTAN COLLEGE PARKWAY RIVERDALE, NY 10471	NONE	PUBLIC CHARITY	EDUCATION	100,000
Total			▶ 3a	260,750

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

a Paid during the year				
MARIE SELBY BOTANICAL GARDENS	NONE	PUBLIC	ARTS	2,500

SARASOTA, FL 34236		CHARITI		
MOTE MARINE LABORATORY AND AQUARIUM 1600 KEN THOMPSON PARKWAY	NONE	PUBLIC CHARITY	RESEARCH	5,000

AQUARIUM 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236	NONE	CHARITY	RESEARCH	3,000
NORWALK LAND TRUSTRO BOY 34	NONE	DUBLIC	ENVIRONMENT	1 750

SARASOTA, FL 34236				
NORWALK LAND TRUSTPO BOX 34 NORWALK, CT 06853	NONE	PUBLIC CHARITY	ENVIRONMENT	1,750

▶ 3a

260,750

			1
NORWALK LAND TRUSTPO BOX 34 NONE NORWALK, CT 06853	PUBLIC CHARITY	ENVIRONMENT	1,75

Total .

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

a raid during the year				
PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401	NONE	PUBLIC CHARITY	MEDICAL	75,000
RINGLING MUSEUM	NONE	PUBLIC	ARTS	5,000

RINGLING MUSEUM 2010 LEVY AVENUE STUITE 300 PO BOX 3062739 TALLAHASSEE, FL 32306	NONE	PUBLIC CHARITY	ARTS	5,000
ROWAYTON ARTS CENTER	NONE	PUBLIC	ARTS	750

3062739 TALLAHASSEE, FL 32306				
ROWAYTON ARTS CENTER 145 ROWAYTON AVENUE ROWAYTON, CT 06853	NONE	PUBLIC CHARITY	ARTS	750

Total .

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

or substantial contributor

	or substantial contributor			
a Paid during the year				
ROWAYTON CIVIC ASSOCIATION PO BOX 302	NONE	PUBLIC CHARITY	COMMUNITY SUPPORT	1,000

ROWAYTON, CT 06853				
SARASOTA BALLET 5555 NORTH TAMIAMI TRAIL SARASOTA, FL 34243	NONE	PUBLIC CHARITY	ARTS	6,000
CADACOTA ODERA	NONE	DUDLIC	ADTC	6 000

5555 NORTH TAMIAMI TRAIL SARASOTA, FL 34243		CHARITY		,
SARASOTA OPERA 61 NORTH PINEAPPLE AVENUE SARASOTA, FL 34236	NONE	PUBLIC CHARITY	ARTS	6,000

Total			▶ 3a	260.750
SARASOTA OPERA 61 NORTH PINEAPPLE AVENUE SARASOTA, FL 34236	NONE	PUBLIC CHARITY	ARTS	6,000
SARASOTA, FL 34243				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Daid during the year

a Faid during the year				
SARASOTA ORCHESTRA 709 NORTH TAMIAMI TRAIL SARASOTA, FL 34236	NONE	PUBLIC CHARITY	ARTS	6,000

SARASOTA, FL 34236				
SELAH FREEDOMPO BOX 21415 SARASOTA, FL 34276	NONE	PUBLIC CHARITY	COMMUNITY NEEDS	1,000
SHAVESDEADE ON THE SOLIND	NONE	DUBLIC	ADTS	1 000

SARASOTA, FL 34276		CHARITY		
SHAKESPEARE ON THE SOUND PO BOX 15 NORWALK, CT 06853	NONE	PUBLIC CHARITY	ARTS	1,000

SHAKESPEARE ON THE SOUND PO BOX 15 NORWALK, CT 06853	NONE	PUBLIC CHARITY	ARTS	1,000
Total			▶ 3a	260,750

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

	SPECIAL OPERATIONS FUND 901 NORTH STUART STREET SUITE 200 ARLINGTON, VA 22203	NONE	PUBLIC CHARITY	COMMUNITY NEEDS	15,000
ı	ST JUDE'S RESEARCH HOSPITAL	NONE	PUBLIC	MEDICAL	1,000

ST JUDE'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE	PUBLIC CHARITY	MEDICAL	1,000
STAMFORD HOSIPTAL FOUNDATION 1351 WASHINGTON BOULEVARD SUITE 202 STAMFORD, CT 06902	NONE	PUBLIC CHARITY	COMMUNITY SUPPORT	2,000

Total			▶ 3a	260,750
STAMFORD HOSIPTAL FOUNDATION 1351 WASHINGTON BOULEVARD SUITE 202 STAMFORD, CT 06902	NONE	PUBLIC CHARITY	COMMUNITY SUPPORT	2,000
,				

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

,				
THE LEUKEMIA AND LYMPHOMA SOCIETY 5540 FALMOUTH STREET SUITE 101 RICHMOND, VA 23230	NONE	PUBLIC CHARITY	MEDICAL	6,500
TODD MARTIN DEVELOPMENT FUND	NONE	PUBLIC	SOCIAL SERVICES	1,500

RICHMOND, VA 23230				
TODD MARTIN DEVELOPMENT FUND PO BOX 39 EAST LANSING, MI 48826	NONE	PUBLIC CHARITY	SOCIAL SERVICES	1,500
WESTPORT COUNTRY PLAYHOUSE 25 POWERS COURT	NONE	PUBLIC CHARITY	ARTS	5,000

PO BOX 39 EAST LANSING, MI 48826		CHARITY		
WESTPORT COUNTRY PLAYHOUSE 25 POWERS COURT WESTPORT, CT 06880	NONE	PUBLIC CHARITY	ARTS	5,000
-			-	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
BEST BUDDIES 200 SOUTH HOOVER BOULEVARD SUITE 191 TAMPA EL 33609	I	PUBLIC CHARITY	SOCIAL SERVICES	500

INTERNATIONAL TENNIS HALL OF FAME 194 BELLEVUE AVENUE NEWPORT, RI 02840	NONE	PUBLIC CHARITY	ARTS	5,000
TAMPA, FL 33609				

INTERNATIONAL TENNIS HALL OF FAME 194 BELLEVUE AVENUE NEWPORT, RI 02840	NONE	PUBLIC CHARITY	ARTS	5,000
ROWAYTON LIBRARY 33 HIGHLAND AVENUE	NONE	PUBLIC CHARITY	SOCIAL SERVICES	500

NEWPORT, RI 02840		CHARITY		
ROWAYTON LIBRARY 33 HIGHLAND AVENUE NORWALK, CT 06853	NONE	PUBLIC CHARITY	SOCIAL SERVICES	500
Total			▶ 3a	260,750

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315018530					
TY 2019 Investments Corporate Stock Schedule							

Name: NEIL & SANDRA DEFEO FAMILY FOUNDATION

End of Year Fair

Market Value

1,550,105

2,529,635

723,613

CORPORATE STOCK

ALTERNATIVE INVESTMENTS

MUTUAL FUNDS

Name of Stock	End of Voor Book	
Investments Corporation Stock Schedule		
E14. 20 0141110		

EIN:	26-6141110
oration Stock Schedule	

Value

1,305,126

2,356,688

Name of Stock	,	End of Year Book	_
Investments Corporation Stock Schedule			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491315018530	
TY 2019 Other Increases Schedule				
Name:	NEIL & SANDF	RA DEFEO FAMILY FOUNDATIO	N .	
EIN:	26-6141110			
D ₁	escription		Amount	
NON-DIVIDEND DISTRIBUTIONS			2,992	
NON-CASH STOCK TRANSACTIONS			2,125	

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	i: 93491315018530		
TY 2019 Other Professional Fees Schedule						
Name: NEIL & SANDRA DEFEO FAMILY FOUNDATION						
EIN: 26-6141110						
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable
				Purposes

44,846

INVESTMENT FEES

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491315018530	
TY 2019 Taxes Schedule						
	Name:	NEIL & SAND	DRA DEFEO FAMIL	Y FOUNDATION		
	EIN:	26-6141110				
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TAXES		2,794	0		0	