(3) Received in SEP 2 2 2020

Return of Private Foundation

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.

Inter	nal Revenue Service	► Go to www.	irs.gov/Form990PF for inst	tructions and	the latest inf	ormation.	Open to Public Inspection
For	calendar year 2019	or tax year beginning		, and e	nding		, , , , , , , , , , , , , , , , , , , ,
Na	me of foundation					A Employer identification	number
′ T	HE PATRIC	IA M. AND ROBERT	H. MARTINSE	N		1	
_	OUNDATION		27-6961238				
Nur	nber and street (or P O	box number if mail is not delivered to street	address)	·	Room/suite	B Telephone number	
7	61 RIDGEE	RIRY ROAD				203-743-94	3.4
		ovince, country, and ZIP or foreign p	nostal code		<u> </u>		
	IDGEFIELD		oosiai code			C If exemption application is po	ending, check here
	Check all that apply:	Initial return	Initial return of a fe	armar aublic e		B 4 C	
u (лісск ан шагарріу.			ormer public t	illarity	D 1. Foreign organizations	, cneck nere
		Final return	Amended return			Foreign organizations me- check here and attach co-	eting the 85% test,
	2hl-+	Address change	Name change			1	
	Check type of organiz	· · · · · ·			04	E If private foundation stat	
<u> </u>			Other taxable private found		<u> </u>	under section 507(b)(1)	, ,-
		l assets at end of year J Account	=	L Accr	uai	F If the foundation is in a 6	
•	rom Part II, col. (c), I	ine 16)	ther (specify)			under section 507(b)(1)	(B), check here
_	-\$	280 , 229 . (Part I, colur	iin (u), must be on cash bas	SIS.)			
E S	(The total of am	Revenue and Expenses ounts in columns (b), (c), and (d) may not al the amounts in column (a))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net - income	(0) Disbursements for charitable purposes (cash basis only)
_	1 Contributions.	gifts, grants, etc., received	58,848.	NAME OF STREET	THE PURPLE	MAYN/A TAR	
	l	if the foundation is not required to attach Sch. B					STORE THE RESERVE AND ADDRESS OF THE PARTY O
		gs and temporary	196.	WATE WISHING	196.	SECURIOR SEC	
		s Interest from securities	3,634.		3,634.		STATEMENT
	5a Gross rents	interest nom securities	3,031.		3,034.		
	b Net rental incomi	o or floors)		DESCRIPTION.	1. N. 12. A. (1. D.)		
	1 _	· · · ————————————————————————————————	104,97/.	新女郎中心(10g) 3 mm			
e	Gross sales price	from sale of assets not on line 10 for all 151,804.			HEAR TO THE REAL		
Revenue	D assets on line 6a	ncome (from Part IV, line 2)			$\frac{1}{4},977.$	STATES OF THE THE	
Be	7 Capital gain net i			T O	4,7//.		96.042170 E S
	8 Net short-term	· · · //		THE COURSE STATES		<u> </u>	THE PARTY OF THE P
	9 Income modifi		HISTORY OF THE PROPERTY OF	THE PARTY OF THE		CONTRACTOR STORY	
	10a and allowances			THE STREET			
	D Less Cost of go	<u> </u>					
	c Gross profit or	(1055)		Section States			
	11 Other income	4 About all 44	167,655.	10	0 007	-	Market Andrews
	 	es 1 through 11	<u> </u>	10	8,807.		
	1	f officers, directors, trustees, etc	0.	<u> </u>	0.		0.
		e salaries and wages					
Ś		, employee benefits					
nses	16a Legal fees						
ğ	b Accounting fee		2 500				
ũ	c Other professi	onal fees STMT 2	3,500.		0.		. 0.
ţį	17 Interest						. <u></u>
itra	18 Taxes					,	PROPERTY AND ASSESSMENT OF THE PARTY OF THE
Administrative Expe	19 Depreciation a	nd depletion					
퉏	20 Occupancy						
Ă		ences, and meetings					
and	2.9 Printing and p						
Operating	23 Other expense						
rati	24 Total operation	ig and administrative			_		
e e	expenses. Ad	d lines 13 through 23	3,500.		0.		0.
J	25 Contributions,	• . • .	193,900.		生活世紀	27 张马标清整,她跟	193,900.
	26 Total expense	es and disbursements.					···
`	Add lines 24 a	nd 25	197,400.		0.		<u> 193,900.</u>
	27 Subtract line 2	6 from line 12.				1、 ともで 原間	
	a Excess of revenu	e over expenses and disbursements	-29,745.	型型的	A.S. R.		医性性性性性
	b Net investmer	nt income (if negative, enter -0-)			8,807.	1. 子至 [77] [3]	
	C Adjusted not i	DCBMe (if negative enter -0-)	THE HAD THE WAS TO SHE AND THE THE THE STATE OF	arms all.		N/A	The Control of the Co

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

27-69611



Form 990-PF (2019)

FOUNDATION

27-6961238

Page 2

Partill Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Ralance Sheets Attached schedules and amounts in the description	Beginning of year	End o	year		
ĮĮ g	ant!	column should be for end-of-year amounts only	(a) Book-Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	52,704.	5,501.	5,501.		
	2	Savings and temporary cash investments		 			
	3	Accounts receivable >					
		Less: allowance for doubtful accounts		EL-SHOOL - AND COLUMN TO THE PARTY OF THE PA			
	4	Pledges receivable >					
		Less; allowance for doubtful accounts	STATE OF STA	TO MAKE THE RESTREET OF THE PROPERTY OF THE PARTY OF THE	Control of the Contro		
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other		····	_		
		disqualified persons					
	7	Other notes and loans receivable					
	`	Less: allowance for doubtful accounts	All the All Shares of the Sandard In	PARTY AND STATE OF THE			
S	l a	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges					
As		Investments - U.S. and state government obligations					
	1	Investments - corporate stock STMT 3	68,295.	85,753.	274,728.		
	l	Investments - corporate bonds	00,2331	037733.	274,7201		
	١	· .			TO THE STATE OF TH		
	! ''	Investments - land, buildings, and equipment basis	CONTRACTOR OF THE STATE OF THE	HATTER THE PERSON OF THE PERSO			
	12	Less accumulated depreciation Investments - mortgage loans					
	13	Investments - other			,		
		Land, buildings, and equipment, basis	PROPERTY OF A CONTROL OF THE PARTY OF THE PA				
	'*		SANTA MARKATANA				
	15	Less accumulated depreciation					
		Other assets (describe)					
	16	Total assets (to be completed by all filers - see the	120,999.	91,254.	280,229.		
_	17	Instructions. Also, see page 1, item 1)	120,333.	91,234.	200,229.		
	t .	Accounts payable and accrued expenses	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	18	Grants payable					
ies	19	Deferred revenue			Service Control of the Control of th		
Liabilities		Loans from officers, directors, trustees, and other disqualified persons		· · · · · · · · · · · · · · · · ·			
Ë	21	. ,	· · · · · · · · · · · · · · · · · · ·		THE STATE OF THE PARTY OF		
_	22	Other liabilities (describe >)					
	,,	Total Mah Malas (add lines 17 Abrough 99)	0.	0.			
	23	Total liabilities (add lines 17 through 22)	0.	0.	ADMINISTRAÇÃO DE CONTRACTOR DE		
		Foundations that follow FASB ASC 958, check here					
alances		and complete lines 24, 25, 29, and 30.					
a	24	Net assets without donor restrictions			THE PROPERTY AND ADDRESS OF		
	25						
Net Assets or Fund E		Foundations that do not follow FASB ASC 958, check here					
Ţ		and complete lines 26 through 30.	o.	٥			
S	26	Capital stock, trust principal, or current funds	0.	0.			
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
As	28	Retained earnings, accumulated income, endowment, or other funds	120,999.	91,254. 91,254.	THE PROPERTY OF THE PROPERTY O		
ř	29	Total net assets or fund balances	120,999.	31,234.			
_	١,,	T-4-1 Habilitation and make a sea through belongs	120,999.	91,254.			
_	30	Total liabilities and net assets/fund balances	-	31,234.	AND PERSONAL PROPERTY OF THE PARTY OF THE PA		
R	ant	Analysis of Changes in Net Assets or Fund E	Balances		` <u>.</u> *4		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	29				
		st agree with end-of-year figure reported on prior year's return)		1	120,999.		
	•	r amount from Part I, line 27a	2	-29,745.			
		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	91,254.		
		eases not included in line 2 (itemize)		5	0.		
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	91,254.		
_					Form 990-PF (2019)		

Part IV Capital Gains	and Lo	osses for Tax on In	vestmen	t Income					-		
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)					` P				acquired day, yr.)	(d) Date sold (mo., day, yr.)	
1a 3,437 DFA US LARGE CO PORT						D	01/1	5/09	05/23/19		
b 2,253 DFA US L							D	01/1	5/09	08/27/19	
c 770 DFA US SMA							D	01/1	5/09	05/23/19	
d CAPITAL GAINS	DIVI	DENDS									
_ e					<u>l</u> ,						
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					iain or (loss s (f) minus		
a 75,000.		<u>-</u> .		22,97						52,023.	
ь 50,000.				15,06						34,936.	
c 25,000.				8,78	6.					16,214.	
d 1,804.										1,804.	
<u>e</u>		1 (1.)1	b . 6. t. t. t.	10/04/00							
Complete only for assets shown							()) Gains (C	Col. (h) gain not less tha	minus	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1)			CO		(from col. (
a					\dashv					52,023.	
<u> </u>										34,936.	
C										16,214.	
d										1,804.	
е					1						
	•	(If pain, also enter	ın Part I. line	7	7					i	
2 Capital gain net income or (net ca	ipital loss	$ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $	in Part I, line	7	}[2				104,977.	
3 Net short-term capital gain or (los	ss) as def	•									
If gain, also enter in Part I, line 8,			- (-)		1						
If (loss), enter -0- in Part I, line 8		<u> </u>			Л	3			N/A		
Rart V Qualification U							nent Ind	ome			
(For optional use by domestic private	e foundati	ons subject to the section 4	940(a) tax on	ı net investment in	come	e.)					
If section 4940(d)(2) applies, leave the	his part b	lank									
	•										
Was the foundation liable for the sec				•	odo					Yes X No	
If "Yes," the foundation doesn't qualif 1 Enter the appropriate amount in			<u> </u>		nt					<u>.</u>	
	each colu		Structions be	lure making any er		<u> </u>				76\	
Base period years		(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchar	ıtahle-	use assets		(d) Distribution ratio		
Calendar year (or tax year beginnii 2018	ng m)		0,946.	1101 141140 01 1101			0,195		(col. (b) divided by col. (c)) -763189		
2017			0,625.				$\frac{0,193}{9,267}$				
2016			9,675.				$\frac{3,207}{7,222}$		·		
2015			$\frac{3,0,3}{4,463}$.				9,565				
2014			2,100.				$\frac{5,503}{0,572}$				
					_		0,0,2	+-	·	• 331370	
2 Total of line 1, column (d)								2		3.154483	
3 Average distribution ratio for the	5-year ba	se period - divide the total o	n line 2 by 5.6	0, or by the numbe	er of v	ears					
the foundation has been in exister		· ·	•	, .,	,			3		.630897	
		·									
4 Enter the net value of noncharitab	le-use as	sets for 2019 from Part X, I	ine 5					4		278,541.	
5 Multiply line 4 by line 3					5		175,731.				
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		<u> 1,088.</u>	
7 Add lines 5 and 6								7		176,819.	
O. Enter qualifying distributions for	- Dart VII	line 4								102 000	
8 Enter qualifying distributions from								8	· · · · · ·	193,900.	
If line 8 is equal to or greater than See the Part VI instructions.	i line 7, ch	neck the box in Part VI, line	10, and comp	ilete that part using	g a 1%	6 tax r	ate.				

THE PATRICIA M. AND ROBERT H. MARTINSEN

Form 990-PF (2019) FOUNDATION			961238 Page 4
Rant VI) Excise Tax Based on Investment Income (Section 494	10(a), 4940(b), 4940(e), or 4	948 - :	see instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here and	enter "N/A" on line 1.	ار التحديد	#\$P\$中本"山东"周
Date of ruling or determination letter: (attach copy of letter if ne	cessary-see instructions)	1	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	1	1,088.
of Part I, line 27b		[]	地流域。在19
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of		2	0.
3 Add lines 1 and 2	,	3	1,088.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only,	others, enter -0-)	4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	1,088.
6 Credits/Payments;		193 31 31	THE SET OF
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 1,452.		HEALTHA
b Exempt foreign organizations - tax withheld at source	6b 0.	医副草	25、理解並禁罰
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	增强护	
	6d 0.	1.34	
d Backup withholding erroneously withheld	80	in Ki	1,452.
7 Total credits and payments. Add lines 6a through 6d	- de cal	7	
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is att	аспео	8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	.	9	264
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	264 124	10	364.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	364. Refunded ►	11	0.
Part VIII Statements Regarding Activities			in agree to a
1a During the tax year, did the foundation attempt to influence any national, state, or local legi	slation or did it participate or intervene	ın	非溢 Yes No
any political campaign?			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses? See the instructions for the defin	ition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materials published or		医测量性
distributed by the foundation in connection with the activities.			\$14\\ \$1\\ \$1\
c Did the foundation file Form 1120-POL for this year?			1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	e year:		
(1) On the foundation. > \$ 0 • (2) On foundation manager	s. ► \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	diture tax imposed on foundation		海山地高
managers. ► \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?		2 X
If "Yes," attach a detailed description of the activities.			100 Car 100 Ca
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation, o	or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/2	A 4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	?		5 X
If "Yes," attach the statement required by General Instruction T			3 10 10 10 10 10
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 6	either:		
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandato	ry directions that conflict with the state	. law	
remain in the governing instrument?	Ty directions that commet was the state	1411	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	nlate Part II col (c) and Part V/		7 X
bio the foundation have at least \$5,000 in assets at any time out ing the year. If it is, com	picter art ii, coi. (c), and r art XV		TENTE WEST WEST
8a Enter the states to which the foundation reports or with which it is registered. See instruction	one N		
CT	olis.		
	M C (-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Automey General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation			8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of si		ndar	
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," cor		mve	4 9 X
10. Did any persons become substantial contributors during the tay year? If You a stack a school	ula listing their names and addresses	ጥΜጥ 4	4 [10] X

Form **990-PF** (2019)

	1990-PF (2019) FOUNDATION 27-69	<u>61238</u>		Page 5
Рa	art VII-A Statements Regarding Activities (continued)			
		풀잭,	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			l
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A	- 42 - 6	424	
14	The books are in care of ► ROBERT H. MARTINSEN Telephone no. ► 203-			
4-	Located at ► 761 RIDGEBURY ROAD, RIDGEFIELD, CT ZIP+4 ►	068//		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	31	· / 3 ►	ـــا
10	and enter the amount of tax-exempt interest received or accrued during the year As any time during coloridar year 2010, did the foundation being an interest to accomplish a constitution being an interest to accomplish and the foundation being an interest to accomplish a constitution being a constitution bei	N	/A	I NI -
10	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	40	Yes	No X
	securities, or other financial account in a foreign country? See the instructions for expectage and filling requirements for ExpCEN Form 114. If "Yes " actor the name of the	16 ਰਾਜ ਵਾਰ		A.
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		5.0	S H
IPα	foreign country ► int VII-BI Statements Regarding Activities for Which Form 4720 May Be Required	Err	6-26 J	MARKET.
11.0	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1,5-3	Yes	No
10	During the year, did the foundation (either directly or indirectly):	H 740	162	INO.
144	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	्यः त	1	36
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			19,11
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	4444 6		F.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	THE RESERVE AND		ber j
	(5) Transfer any income or assets to a disqualified person (or make any of either available	37.	6	1
	for the benefit or use of a disqualified person)?		11.5	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		21,00	1,5
	if the foundation agreed to make a grant to or to employ the official for a period after		4	
	termination of government service, if terminating within 90 days.)	12.23		(15.4)
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	35.4	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		(A)	事場
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1	43.	4
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		更识	HE I
	defined in section 4942(j)(3) or 4942(j)(5)):			3.2
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		51	10.2
	6d and 6e) for tax year(s) beginning before 2019?		30.	3.9
	If "Yes," list the years	市等	Saleta Saleta	
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	B	1.10	g O
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	7.3.4		
_	statement - see instructions.) 'N/A	2b	9 Ac., (m)	23375-71
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		字	統的
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Jd	during the year? Yes X No		期	
h	if "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	2		
Ü	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		纮	18
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	議議	鹏	
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b	LANCES!	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		JJAKE 1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	ACCULATED.	X

4b X Form **990-PF** (2019)

27-6961238

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Rart VII-B! Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:			Į.	上 Yes No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?						
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes?						
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? See instructions		Yo	es 🗶 No 🏻	医到底 基底		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t					
the prevention of cruelty to children or animals?			es 🗶 No	電影觀		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described	in Regulations	1	二 产品 张的		
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h						
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				"一个"		
expenditure responsibility for the grant?	V.	I/A L Y	es L No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			[5			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	pay premiums on			4-12-1-45		
a personal benefit contract?		Y6	es 🗶 No 🕍			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ <u>.</u>	6b X		
If "Yes" to 6b, file Form 8870.			[2]	門的學院		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6				
b If "Yes," did the foundation receive any proceeds or have any net income attribu		_	N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration o		es 🛣 No 🔢			
excess parachute payment(s) during the year? [Part VIII Information About Officers, Directors, Trusto	es Foundation Ma			Hart Brief Breise		
Paid Employees, and Contractors	ces, i ouridation wit	magers, mgm	,			
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.					
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other		
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances		
ROBERT H. MARTINSEN	TRUSTEE - AS	REQUIRED				
761 RIDGEBURY ROAD						
RIDGEFIELD, CT 06877	0.00	0.	0.	0.		
	TRUSTEE - AS	REQUIRED				
761 RIDGEBURY ROAD						
RIDGEFIELD, CT 06877	0.00	0.	0.	0.		
				1		
				 		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	enter "NONF."		L		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	account, other allowances		
NONE	develop to position		compensation	4.1011411000		
	-	,,				
		'				
Total number of other employees paid over \$50,000			>	0		
			Form	990-PF (2019)		

THE PATRICIA M. AND ROBERT H. MARS Form 990-PF (2019) FOUNDATION	27-6	961238Page 7
Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	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: X:A: Summary of Direct Charitable Activities		***************************************
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the ed, etc.	Expenses
1 N/A		
		. 0.
2		
3	/	
3		
4		
Part IX:B: Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
		0.
2		
All other program-related investments See instructions.		

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Total. Add lines 1 through 3

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ĮĘ	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	铁井	
а	Average monthly fair market value of securities	1a	204,332.
b	Average of monthly cash balances	1b	78,451.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	282,783.
	Reduction claimed for blockage or other factors reported on lines 1a and		· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	282,783.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,242.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	278,541.
6	Minimum investment return. Enter 5% of line 5	6	13,927.
!P;	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations, check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	13,927.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 2 1,088.	3.3	· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,088.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,088. 12,839.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	12,839.
6	Deduction from distributable amount (see instructions)	6	. 0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	12,839.
P	art XII) Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	- 1	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	193,900.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	E.	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	193,900.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,088. 192,812.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	192,812.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2019)

PartXIIII Undistributed Income (see instructions)

Character of distributed income (s	see mandenona/	•		•
	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				12,839.
2 Undistributed income, if any, as of the end of 2019			awarenee assertative entering the east	
a Enter amount for 2018 only			0.	
b Total for prior years.				
, ,		0.		
3 Excess distributions carryover, if any, to 2019.				
a From 2014 87,868.				
b From 2015 248,959.				
c From 2016 226,334.				
dFrom 2017 224,630.				
eFrom 2018 180,064.		建筑地域的		
f Total of lines 3a through e	967,855.			1900年1900年1900年1900年1900年1900年1900年1900
4 Qualifying distributions for 2019 from				
Part XII, line 4. ► \$ 193,900.		建工作的基本		
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions) d Applied to 2019 distributable amount	0.		P.2. Landers and Company of the Property of th	12 920
e Remaining amount distributed out of corpus	181,061.			12,839.
5 Excess distributions carryover applied to 2019	101,001.		HOLE BY A SECURITY OF THE PARTY OF	
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,148,916.			
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0		
assessed	SECURIOR CALL SHEET SHEET	0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions e Undistributed income for 2018. Subtract line		· ·		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract		ALLEN MINERION CONTRACTOR		
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of	AND THE MANAGEMENT AND AND PROPERTY OF THE PARTY OF THE P			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	87,868.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	1,061,048.			
10 Analysis of line 9:				
a Excess from 2015 248,959.				
b Excess from 2016 226, 334.				
c Excess from 2017 224,630.			維那為當學是	
dExcess from 2018 180,064.			APP 在 ET LE 	
e Excess from 2019 181,061.	HAMBERT HANGE AND THE REAL PROPERTY OF THE PERSON OF THE P	明いまれ、「まれいます」、「まれい」	ままないはかったまた。 とはは、 はは、 は、 は、 は、 は、 は、 は、 は、 は、	Form 990-PF (2019)

FORM 990-PF (2019) FOUNDAT					961238 Pa	ge 10
Rart XIV Private Operating F				N/A		
1 a If the foundation has received a ruling of	•	-				
foundation, and the ruling is effective for		,	. ▶ └	T		}_
b Check box to indicate whether the found	`	ing foundation described		4942(j)(3) or	4942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	(5) 2010	Prior 3 years	(4) 0046	1 1	
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2015	(e) Total	
investment return from Part X for						
each year listed				 	4	
b 85% of line 2a						
c Qualifying distributions from Part XII,						
line 4, for each year listed			<u> </u>			
d Amounts included in line 2c not		1				
used directly for active conduct of				1		
exempt activities						
e Qualifying distributions made directly			1 X			
for active conduct of exempt activities.						
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon:			\(\rangle\)	V		
a "Assets" alternative test - enter:			1			
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			•			
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			1	
(1) Total support other than gross						
investment income (interest,						
dividends, rents, payments on securities loans (section			1			
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				<u> </u>		eg
an exempt organization						1
(4) Gross investment income			T			
Raft XV Supplementary Info	rmation (Comple	ete this part only	if the foundatio	n had \$5,000 or i	more in assets	
at any time during t	he year-see inst	ructions.)				
1 Information Regarding Foundatio	n Managers:					
a List any managers of the foundation who			tributions received by th	e foundation before the o	close of any tax	
year (but only if they have contributed m	nore than \$5,000). (See	section 507(d)(2).)		_		
SEE STATEMENT 5						
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	tion of the ownership of a	partnership or	
NONE						
2 Information Regarding Contributi	on, Grant, Gift, Loar	. Scholarship. etc F	Programs:			
Check here X if the foundation o the foundation makes gifts, grants, etc.,	nly makes contributions	to preselected charitable	e organizations and does		equests for funds. If	
a The name, address, and telephone numb	-					
2 The hame, address, and telephone hame	501 01 0111411 4401055 01 1	ano porobir to mnom app		5500.		
b The form in which applications should b	e submitted and informa	ation and materials they	should include;			
c Any submission deadlines,						
d Any restrictions or limitations on awards	s, such as by geographic	cal areas, charitable fields	s. kinds of institutions or	other factors		
,	., = 0, goograpiiid	2. 2.2., 0	., or momanons, or	J		
923601 12-17-19			·		Form 990-PF (2	019)

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Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ALZHEIMER'S DISEASE RESEARCH NONE PUBLIC MEDICAL PURPOSES 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871 200. AMERICAN INSTITUTE FOR CANCER NONE PUBLIC MEDICAL PURPOSES RESEARCH 1759 R STREET NW WASHINGTON, DC 20009 200. AMERICAN IMIGRATION CONTROL NONE PUBLIC SOCIAL PURPOSES FOUNDATION INC PO BOX 525 MONTEREY, VA 24465 50. ASPCA ADOPTION CENTER NONE PUBLIC SOCIAL PURPOSES 424 E 92ND STREET NEW YORK, NY 10128 50. COLGATE UNIVERSITY NONE PUBLIC EDUCATIONAL PURPOSES 13 OAK DR HAMILTON, NY 13346 10,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 193,900. b Approved for future payment NONE Total **▶** 3b ٥. Form 990-PF (2019)

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient NONE PUBLIC FAITH & FREEDOM COALITION SOCIAL PURPOSES P.O. BOX 957736 DULUTH, GA 30095 100. FOUNDERS HALL NONE PUBLIC SOCIAL PURPOSES 193 DANBURY RD RIDGEFIELD, CT 06877 100. JUDICIAL WATCH NONE PUBLIC SOCIAL PURPOSES 425 THIRD STREET, SW, SUITE 800 WASHINGTON, DC 20024 200. NONE PUBLIC NEW YORK UNIVERSITY EDUCATIONAL PURPOSES 726 BROADWAY, 2ND FLOOR NEW YORK, NY 10003 150,000. NYU LANGONE MEDICAL CENTER NONE PUBLIC MEDICAL PURPOSES 550 FIRST AVENUE NEW YORK, NY 10016 30,000. PARALYZED VETERANS OF AMERICA NONE PUBLIC MEDICAL PURPOSES 7 MILL BROOK ROAD WILTON, NH 03086 100. PHI GAMMA DELTA EDUCATIONAL NONE PUBLIC SOCIAL PURPOSES FOUNDATION PO BOX 4599 LEXINGTON, KY 40544 200. SOCIAL PURPOSES RIDGEFIELD PROFESSIONAL FIREFIGHTERS NONE PUBLIC 6 CATOONAH STREET RIDGEFIELD, CT 06877 50. RIDGEFIELD VISITING NURSE ASSOCIATION NONE PUBLIC MEDICAL PURPOSES 90 EAST RIDGE 1,000. RIDGEFIELD, CT 06877 PUBLIC SYNDROME FOUNDATION NONE MEDICAL PURPOSES 10701 PARKRIDGE BLVD, SUITE 170 RESTON, VA 20191 200. Total from continuation sheets 183,400.

Part XV Supplementary Information			27 03	01238
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
TAX FOUNDATION	NONE	PUBLIC	SOCIAL PURPOSES	
1325 G ST NW				
WASHINGTON, DC 20005	_			50.
THE HERITAGE FOUNDATION	NONE	PUBLIC	SOCIAL PURPOSES	
214 MASSACHUSETTS AVE NE				
WASHINGTON, DC 20002				100.
THE HOLIDAY TRUST FUND	NONE	PUBLIC	SOCIAL PURPOSES	
400 MAIN STREET				
RIDGEFIELD, CT 06877				100.
STATE POLICY NETWORK	NONE	PUBLIC	SOCIAL PURPOSES	
1655 FORT MYER DR				
ARLINGTON, VA 22209				100.
RIDGEFIELD VOLUNTEER FIRE DEPT.	NONE	PUBLIC	SOCIAL PURPOSES	
6 CATOONAH STREET		}		
RIDGEFIELD, CT 06877				50.
RIDGEBURY CONGREGATIONAL CHURCH	NONE	PUBLIC	SOCIAL PURPOSES	
605 RIDGEBURY RD				
RIDGEFIELD, CT 06877		 		1,000.
NATIONAL LAW ENFORCEMENT OFFICERS	NONE	PUBLIC	SOCIAL PURPOSES	
MEMORIAL FUND 450 F ST NW				
WASHINGTON, DC 20001				50.
·				
·				
				`
		•		
Total from continuation sheets			<u> </u>	
Total Holli Communition Silvers				<u> </u>

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
• • • • • • • • • • • • • • • • • • • •	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business	Amount	sion code	Amount	function income		
17017	Code		-				
b							
c					<u></u>		
d				<u></u>			
e		-					
f				· · · · · · · · · · · · · · · · · · ·	-		
g Fees and contracts from government agencies		-					
2 Membership dues and assessments	——						
·	-			·			
3 Interest on savings and temporary cash			۱ , ,	100	l		
investments			14				
4 Dividends and interest from securities			14				
5 Net rental income or (loss) from real estate:	AT HIS	ा अवार एक अवस्तार	20 mg	[[4] [[4] [[4] [[4] [[4] [[4] [[4] [[4]	Spatistical and State of animal land		
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property			ĺ				
7 Other investment income			<u> </u>		<u> </u>		
				· · · · · · · · · · · · · · · · · · ·			
8 Gain or (loss) from sales of assets other			، ا				
than inventory			14	1,804.	103,173.		
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a NONE							
b							
							
4							
<u> </u>		·					
e	E THE STREET		1 Tary	5 634	100 100		
12 Subtotal. Add columns (b), (d), and (e)	ा महाइन् इ	υ.	J.		103,173.		
13 Total. Add line 12, columns (b), (d), and (e)				13_	108,807.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI B: Relationship of Activities to	o the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incor	me is reported	in column (e) of Part XVI-A	contrit	outed importantly to the accord	nplishment of		
the foundation's exempt purposes (other than I	by providing fu	nds for such purposes).					
N/A					' ·		
				·			
				- to-			
			.				
					_		
					· · · · · · · · · · · · · · · · · · ·		
*							
	·						
				<u>_</u>			
		· · · · · · · · · · · · · · · · · · ·					
							
923621 12-17-19					Form 990-PF (2019)		

Form 990-PF		ATRICIA M. AND	RUBERT H. MAR		7-6961238	Page 1
Part XV	· /	egarding Transfers to	and Transactions and	d Relationships With N		
(other a Transfe (1) Ca (2) Ot b Other t (1) Sa (2) Pt (3) Re (4) Re (5) Lo	organization directly or indirectly or indirectly or indirectly or set in than section 501(c)(3) organizes from the reporting foundation of the assets ransactions. The set is a noncharital irchases of assets from a not intal of facilities, equipment, imbursement arrangements ans or loan guarantees	rectly engage in any of the follow inzations) or in section 527, relat ation to a noncharitable exempt of the exempt of the exempt organization in an arritable exempt organization or other assets	ing to political organizations? organization of	described in section 501(c)	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5)	Yes No
		mbership or fundraising solicita iling lists, other assets, or paid e			1b(6)	X
	• •	oundation. If the foundation rece other assets, or services receive (c) Name of noncharital	d.	in any transaction or sharing arra	<u> </u>	angements
		N/A				
						-
						<i>:</i>
				·		
	.					
				· · · · · · · · · · · · · · · · · · ·		
					,	
				, , , , , , , , , , , , , , , , , , , ,		
ın secti b If "Yes,	on 501(c) (other than sectio " complete the following sch			tions described	Yes	X No
	(a) Name of oro	ianization	(h) Type of organization	(c) Description	of relationship	

- 1	b If "Yes," complete the following schedule.		
	(a) Name of organization	(b) Type of organization	(c) Description of relationship
	N/A		
	1 . A 7/2 (A		

			'/ <u> </u>	-L	-1	L		11				
Sign Here	Under penalties of d and belief, it is true, Signature of off	11/	declate and con trustee	lole ——	\ 4	•	karpit ration	"	his return, f preparer (di	her tha	p accompanying schedules and statements, and to the best of my knowledge taxpayer) is based on all information of which preparer has any knowledge Title	May the IHS discuss this return with the preparer shown below? See instr

	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
				self- employed	
Paid	SANDRA A. FABERY	Landra A Shbery CPA	1/4/20		P00575756
Prepare	Firm's name CLARFELD FIN	ANCIAL ADVISORS LL	C	Firm's EIN ▶ 4	6-3179237
Use On	lу				
	Firm's address ► 520 WHITE F	PLAINS ROAD, 3RD FL	OOR		· · · · · · · · · · · · · · · · · · ·
	ΨΑΡΡΥΤΟΜΝ	NY 10591-5112		Phone no 91	4-846-0100

Form **990-PF** (2019)

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

THE PATRICIA M. AND ROBERT H. MARTINSEN FOUNDATION 27-6961238 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-F7) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 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 1/3% 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

THE PATRICIA M. AND ROBERT H. MARTINSEN

FOUNDATION

27-6961238

Employer identification number

Partil	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT H. MARTINSEN 761 RIDGEBURY ROAD RIDGEFIELD, CT 06877	\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT H. MARTINSEN 761 RIDGEBURY ROAD RIDGEFIELD, CT 06877	\$30,042.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part'll for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)

Name of organization

THE PATRICIA M. AND ROBERT H. MARTINSEN FOUNDATION

Employer identification number

27-6961238

Partill	Noncash Property (see instructions) Use duplicate copies of Part	II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	4,310 SHS DFA LARGE CO		
		\$ 99,992.	07/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	4,495 SHS DFA LARGE CO		
		s100,059.	08/27/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			-
		<u> </u>	
(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
		<u>-</u> .	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
923453 11-06-	.10		90. 990-EZ. or 990-PF) (2019)

Name of organization

THE PATRICIA M. AND ROBERT H. MARTINSEN

FOUNDATION

Employer identification number

27-6961238

Part III	Exclusively religious, charitable, etc., contributing from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional sections.	through (e) and the following line entry li haritable, etc., contributions of \$1,000 or less	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations for the year (Enter this info once) \$\simes \$
(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, an	d 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
•	Transferee's name, address, an	(e) Transfer of gift	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	aift

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

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	4
NAME OF CONTRIBUTOR	ADDRESS		
ROBERT H. MARTINSEN	761 RIDGEBURY ROAD RIDGEFIELD, CT 06877		
PATRICIA M. MARTINSEN	761 RIDGEBURY ROAD RIDGEFIELD, CT 06877		

PART XV - LINE 1A STATEMENT 5 FORM 990-PF LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

ROBERT H. MARTINSEN PATRICIA M. MARTINSEN

FORM 990-PF	DIVIDENDS	S AND INTE	REST	FROM S	SECUR	ITIES		STATEM	ENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		REVEN	(A) REVENUE PER BOOKS		(B) INVEST INCOM			
DIVIDEND INCOME	5,438.	1,8	04.	3,634.		3,63		•		
TO PART I, LINE 4	5,438	1,804.		3,634.		3,634		•		
FORM 990-PF	Oʻʻ	THER PROFI	SSIO	NAL FEE	ES			STЛТЕМІ	ENT	2
DESCRIPTION	·	(A) EXPENSES PER BOOKS		(B) T INVES		ADJI	C) USTED INCOME	CHAP	(D) RITAI RPOSI	
PROFESSIONAL FEES		3,500			0.	·····				0.
TO FORM 990-PF, PG 1	l, LN 16C	3,500	<u> </u>		0.		-			0.
FORM 990-PF		CORPORA	TE S	TOCK				STATEME	ENT	3
DESCRIPTION					B00	K VAL		FAIR MA VALU		r
799.9280 SHS DFA US SMALL CAP PORT 9,955.8550 SHS DFA US LARGE CO PORT						14,9			28,02	
TOTAL TO FORM 990-PF, PART II, LINE 10B						85,753. 274,728.				28.