

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

Name of foundation THE SANDS FAMILY FOUNDATION INC C/O WILDSTAR PARTNERS LLC		A Employer identification number 54-6052978	
Number and street (or P.O. box number if mail is not delivered to street address) 207 HIGH POINT DRIVE BLDG 100		Room/suite	B Telephone number (see instructions) (585) 678-7449
City or town, state or province, country, and ZIP or foreign postal code VICTOR, NY 14564		C If exemption application is pending, check here ☐	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ 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) ▶ \$ 232,238,274		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method: ☒ Cash ☐ Accrual ☐ 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)	25,563,225			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	3,441,998	3,441,998		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	111,683			
	b Gross sales price for all assets on line 6a 11,650,562				
	7 Capital gain net income (from Part IV, line 2) . . .		111,683		
	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)				
	12 Total. Add lines 1 through 11	29,116,906	3,553,681		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	3,873	3,873		0
	b Accounting fees (attach schedule)	12,000	12,000		0
	c Other professional fees (attach schedule)	294,785	234,922		59,863
	17 Interest	121	121		0
	18 Taxes (attach schedule) (see instructions)	216,278	120		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	2,314	2,314		0
	24 Total operating and administrative expenses. Add lines 13 through 23	529,371	253,350		59,863
	25 Contributions, gifts, grants paid	7,599,605			7,599,605
	26 Total expenses and disbursements. Add lines 24 and 25	8,128,976	253,350		7,659,468
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	20,987,930			
	b Net investment income (if negative, enter -0-)		3,300,331		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		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
Assets	1 Cash—non-interest-bearing	10,387,484	2,164,165	2,164,165
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	0	2,807,483	2,807,483
	b Investments—corporate stock (attach schedule)	117,630,824	164,644,937	164,644,937
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	45,736,291	53,621,689	53,621,689
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	9,000,000	9,000,000	9,000,000	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	182,754,599	232,238,274	232,238,274	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	182,754,599	232,238,274	
	29 Total net assets or fund balances (see instructions)	182,754,599	232,238,274	
30 Total liabilities and net assets/fund balances (see instructions) .	182,754,599	232,238,274		

Part III Analysis of Changes in Net Assets or Fund Balances

1 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)	1	182,754,599
2 Enter amount from Part I, line 27a	2	20,987,930
3 Other increases not included in line 2 (itemize) ▶ _____	3	28,495,745
4 Add lines 1, 2, and 3	4	232,238,274
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	232,238,274

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.)
1 a PUBLICLY TRADED SECURITIES			
b CAPITAL GAINS DIVIDENDS	P		
c			
d			
e			

(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)
a 11,625,336		11,538,879	86,457
b 25,226			25,226
c			
d			
e			

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	
a			86,457
b			25,226
c			
d			
e			

2 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 }	2	111,683
3 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	3	

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	6,647,211	186,914,240	0.035563
2017	4,792,807	167,214,295	0.028663
2016	2,269,427	138,425,429	0.016395
2015	8,881,500	34,681,189	0.256090
2014	2,526,260	19,518,950	0.129426

2 Total of line 1, column (d)	2	0.466137
3 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	3	0.093227
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	195,226,004
5 Multiply line 4 by line 3	5	18,200,335
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	33,003
7 Add lines 5 and 6	7	18,233,338
8 Enter qualifying distributions from Part XII, line 4	8	7,659,468

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)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	66,007
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. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	66,007
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	66,007
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	58,674
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	30,000
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	88,674
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	22,667
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 22,667 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a 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 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
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0		
2 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
3 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
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 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
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	
7 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	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NY		
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	
9 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
10 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)

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>THOMAS M FARACE</u> Telephone no. ▶ <u>(585) 678-7344</u>			

Located at ▶ 207 HIGH POINT DRIVE BUILDING 100 VICTOR NYZIP+4 ▶ 14564

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	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?	16	Yes	No
	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.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions ☐	1b	
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 before the first day of the tax year beginning in 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	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? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
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.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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?	4b	No

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

		Yes	No
5a	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ 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?	☐ Yes ☒ No	
b	If any answer is "Yes" to 5a(1)–(5), did any 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.	5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐	
c	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? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	
8	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?	☐ Yes ☒ No	

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(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
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(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
NONE				

Total number of other employees paid over \$50,000. ▶ 0

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
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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	195,213,184
b	Average of monthly cash balances.	1b	2,985,805
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	198,198,989
e	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	198,198,989
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	2,972,985
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	195,226,004
6	Minimum investment return. Enter 5% of line 5.	6	9,761,300

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.)

1	Minimum investment return from Part X, line 6.	1	9,761,300
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	66,007
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	66,007
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	9,695,293
4	Recoveries of amounts treated as qualifying distributions.	4	125,000
5	Add lines 3 and 4.	5	9,820,293
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	9,820,293

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	7,659,468
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:		
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	7,659,468
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	7,659,468

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
1 Distributable amount for 2019 from Part XI, line 7				9,820,293
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.	2,787,477			
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	2,787,477			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 7,659,468				
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).	0			
d Applied to 2019 distributable amount.				7,659,468
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	2,160,825			2,160,825
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	626,652			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	626,652			
10 Analysis of line 9:				
a Excess from 2015.	626,652			
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

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 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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:					
a "Assets" alternative test—enter:					
(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) 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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

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).) See Additional Data Table	
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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	7,599,605
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.

[illegible]

Part XVII

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

--	--	--

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

--	--	--

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

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.

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

Paid Preparer Use Only	LORY H KELLEY		2020-11-15		
	Firm's name ► BERNARD ROBINSON & COMPANY LLP				Firm's EIN ► 56-0571159
	Firm's address ► PO BOX 19608 GREENSBORO, NC 274199608				Phone no. (336) 294-4494

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT SANDS 110 EAST ATLANTIC AVENUE SUITE 200 DELRAY BEACH, NY 33444	PRESIDENT 0.00	0	0	0
RICHARD SANDS 110 EAST ATLANTIC AVENUE SUITE 200 DELRAY BEACH, NY 33444				
THOMAS FARACE 207 HIGH POINT DRIVE BUILDING 100 VICTOR, NY 14564	VICE PRESIDENT 0.00	0	0	0
GINNY CLARK 110 EAST ATLANTIC AVENUE SUITE 200 DELRAY BEACH, FL 33444				
JENNIFER GARSIN 207 HIGH POINT DRIVE BUILDING 100 VICTOR, NY 14564	TREASURER 0.00	0	0	0
MEGHAN SCHUBMEHL 207 HIGH POINT DRIVE BUILDING 100 VICTOR, NY 14564				

Form 990PF Part XV Line 1a - 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).

ROBERT SANDS
RICHARD SANDS

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)				
a <i>Paid during the year</i>				
BOCA RATON REGIONAL HOSPITAL FOUNDATION 745 MEADOWS ROAD BOCA RATON, FL 33486	NONE	PC	UNRESTRICTED PROGRAM USE	132,500
BRISTOL VALLEY THEATER 151 S MAIN ST NAPLES, NY 14512	NONE	PC	UNRESTRICTED PROGRAM USE	10,000
CANANDAIGUA CITY SCHOOL DISTRICT 143 N PEARL ST CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	100,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
CANANDAIGUA LAKEMUSIC FESTIVAL PO BOX 717 CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	2,500
CANCER WELLNESS CONNECTIONS 7 BRICKSTON DRIVE PITTSFORD, NY 14534	NONE	PC	UNRESTRICTED PROGRAM USE	5,000
DEEP ARTS41 FRENCH ROAD ROCHESTER, NY 14618	NONE	PC	UNRESTRICTED PROGRAM USE	60,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
E3 ROCHESTER 255 EAST AVENUE SUITE 310 ROCHESTER, NY 14604	NONE	PC	UNRESTRICTED PROGRAM USE	10,000
EDIBLE SCHOOLYARD NEW YORK 20 JAY ST M 9 BROOKLYN, NY 12201	NONE	PC	UNRESTRICTED PROGRAM USE	116,675
EDUCATION SUCCESS FOUNDATION 4 LAKE VIEW PARK ROCHESTER, NY 14613	NONE	PC	UNRESTRICTED PROGRAM USE	437,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
FLORIDA ATLANTIC UNIVERSITY 777 GLADES ROAD FA-94 BOCA RATON, FL 33431	NONE	PC	FOR SUPPORT OF THE TENNIS COURT RENNOVATIONS FUND	20,000
FOODLINK 1999 MOUNT READ BOULEVARD ROCHESTER, NY 14615	NONE	PC	FOR SUPPORT OF CURBSIDE MARKET PROGRAM	95,997
FRACTURED ATLAS INC 228 PARK AVE SOUTH 56651 NEW YORK, NY 10003	NONE	PC	FOR SUPPORT OF THE "WILD SHE DANCES AND "THIRD RAIL" PROJECTS	168,370
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
FRIENDS OF ROCHESTER CITY SKATEPARK PO BOX 10070 ROCHESTER, NY 14610	NONE	PC	UNRESTRICTED PROGRAM USE	60,000
FORT HILL PERFORMING ARTS CENTER 20 FORT HILL AVENUE CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	125,000
FRIENDS OF CMAC 3355 MARVIN SANDS DRIVE CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	11,000
Total ▶ 3a				7,599,605

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)				
a Paid during the year				
GREATER CANANDAIGUA FAMILY YMCA 32 MAIN ST CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	200,000
HOPE TOWN UNITED INC 110 E ATLANTIC AVE SUITE 200 DELRAY BEACH, FL 33444	NONE	PC	UNRESTRICTED PROGRAM USE	500,000
HUNGER FREE COLORADO 1355 S COLORADO BLVD STE 201 DENVER, CO 80222	NONE	PC	UNRESTRICTED PROGRAM USE	75,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
INTERVOL 100 KINGS HIGHWAY SOUTH SUITE 1200 ROCHESTER, NY 14617	NONE	PC	UNRESTRICTED PROGRAM USE	75,000
JEWISH FEDERATION OF GREATER ROCHESTER 255 EAST AVE ROCHESTER, NY 14604	NONE	PC	UNRESTRICTED PROGRAM USE	340,000
JEWISH SENIOR LIFE FOUNDATION 2021 WINTON ROAD SOUTH ROCHESTER, NY 14618	NONE	PC	UNRESTRICTED PROGRAM USE	50,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
JR ACHIEVEMENT OF CENTRAL UPSTATE NY 1 S WASHINGTON STREET STE 110 ROCHESTER, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	5,000
LOST BIRD PROJECT 2218 BROADWAY 133 NEW YORK, NY 10024	NONE	PC	FOR SUPPORT OF THE SMARTFIN INITIATIVE	450,000
MERCY FLIGHT CENTRAL 2420 BRICKYARD ROAD CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	150,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
MONROE COMMUNITY COLLEGE 1057 E HENRIETTA RD ROCHESTER, NY 14623	NONE	PC	UNRESTRICTED PROGRAM USE	25,000
NAZARETH COLLEGE4245 EAST AVE ROCHESTER, NY 14618	NONE	PC	UNRESTRICTED PROGRAM USE	20,000
NEW YORK KITCHEN 800 SOUTH MAIN STREET CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	15,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
NYU LANGONE HEALTH 550 FIRST AVENUE NEW YORK, NY 10016	NONE	PC	UNRESTRICTED PROGRAM USE	115,000
PACE UNIVERSITYONE PACE PLAZA NEW YORK, NY 10038	NONE	PC	UNRESTRICTED PROGRAM USE	130,000
ROC SOLID FOUNDATION 5164 WEST MILITARY HWY STE 100 CHESAPEAKE, VA 23321	NONE	PC	UNRESTRICTED PROGRAM USE	5,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
ROCHESTER AREA COMMUNITY FOUNDATION 500 EAST AVENUE ROCHESTER, NY 14607	NONE	PC	UNRESTRICTED PROGRAM USE	1,273,338
ROCHESTER CITY BALLET 1326 UNIVERSITY AVENUE ROCHESTER, NY 14607	NONE	PC	UNRESTRICTED PROGRAM USE	70,000
ROCHESTER INDUSTRIES EDUCATIONAL FUND 150 STATE STREET ROCHESTER, NY 14614	NONE	PC	UNRESTRICTED PROGRAM USE	400,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
ROCHESTER REGIONAL HEALTH FOUNDATION 100 KINGS HIGHWAY SOUTH SUITE 2300 ROCHESTER, NY 14617	NONE	PC	UNRESTRICTED PROGRAM USE	225,000
RONALD MCDONALD HOUSE CHARITIES OF ROCHESTER NY 333 WESTMORELAND DRIVE ROCHESTER, NY 14620	NONE	PC	UNRESTRICTED PROGRAM USE	5,000
CANANDAIGUA ROTARY CLUB PO BOX 671 CANANDAIGUA, NY 14424	NONE	PC	UNRESTRICTED PROGRAM USE	3,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
SAFE HARBOR FINGER LAKES PO BOX 929 GENEVA, NY 14456	NONE	PC	UNRESTRICTED PROGRAM USE	1,000
SANDOWAY DISCOVERY CENTER 142 S OCEAN BLVD DELRAY BEACH, FL 33483	NONE	PC	UNRESTRICTED PROGRAM USE	1,000
SKIDMORE COLLEGE 815 NORTH BROADWAY SARATOGA SPRINGS, NY 12866	NONE	PC	FOR SUPPORT OF CAREER CENTER, CENTER FOR INTEGRATED SCIENCES, AND ANNUAL FUND	110,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
STEPHEN GAYNOR SCHOOL 148 WEST 90TH STREET NEW YORK, NY 10024	NONE	PC	UNRESTRICTED PROGRAM USE	15,000
SUNSET PARK HEALTH COUNCIL 150 55TH STREET BROOKLYN, NY 11220	NONE	PC	UNRESTRICTED PROGRAM USE	25,000
THE GROWHAUS 3840 YORK STREET STE 245 DENVER, CO 80205	NONE	PC	UNRESTRICTED PROGRAM USE	102,125
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
THE HARLEY SCHOOL FUND 1981 CLOVER STREET ROCHESTER, NY 14618	NONE	PC	FOR SUPPORT OF WINSLOW NATURAL PLAYGROUND AND ENDOWMENT FUND TO SUPPORT FACULTY COMPENSATION	1,107,500
THE HOLE IN THE WALL GANG FUND 555 LONG WHARF DRIVE NEW HAVEN, CT 06511	NONE	PC	UNRESTRICTED PROGRAM USE	25,000
UNIVERSITY OF ROCHESTER 300 EAST RIVER ROAD ROCHESTER, NY 14627	NONE	PC	UNRESTRICTED PROGRAM USE	725,000
Total ▶ 3a				7,599,605

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)				
a <i>Paid during the year</i>				
WOUNDED VETERANS RELIEF FUND 300 PROSPERITY FARMS RD UNIT F NORTH PALM BEACH, FL 33408	NONE	PC	UNRESTRICTED PROGRAM USE	1,500
SUSTAINABLE AGRICULTRUE & FOOD SYSTEMS FUNDERS 135 EAST DE LA GUERRA 306 SANTA BARBARA, CA 93101	NONE	PC	UNRESTRICTED PROGRAM USE	1,100
Total ▶ 3a				7,599,605

TY 2019 Accounting Fees Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	12,000	12,000		0

TY 2019 Investments Corporate Stock Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CONSTELLATION BRANDS INC. STOCK	164,644,937	164,644,937

TY 2019 Investments Government Obligations Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

**US Government Securities - End
of Year Book Value:**

2,807,483

**US Government Securities - End
of Year Fair Market Value:**

2,807,483

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2019 Investments - Other Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GOLDMAN SACHS EQUITIES	FMV	53,621,689	53,621,689

TY 2019 Legal Fees Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	3,873	3,873		0

TY 2019 Other Assets Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
LOAN TO CADDC	6,000,000	6,000,000	6,000,000
LOAN TO EDUCATION SUCCESS FOUNDATION	3,000,000	3,000,000	3,000,000

TY 2019 Other Expenses Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	210	210		0
OTHER INVESTMENT EXPENSES	23	23		0
DUES AND SUBSCRIPTIONS	90	90		0
OTHER GENERAL AND ADMIN	1,991	1,991		0

TY 2019 Other Increases Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Description	Amount
UNREALIZED GAIN	28,370,745
RECOVERY OF AMOUNT TREATED AS QUALIFYING DISTRIBUTION	125,000

TY 2019 Other Professional Fees Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MGMT FEES	234,922	234,922		0
THE DEBOSKEY GROUP	59,863	0		59,863

TY 2019 Taxes Schedule

Name: THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

EIN: 54-6052978

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FORM 990-PF TAX	213,631	0		0
FOREIGN TAXES	1,122	120		0
STATE ANNUAL FILING FEE	1,525	0		0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491321019060	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.			OMB No. 1545-0047 2019
Name of the organization THE SANDS FAMILY FOUNDATION INC C/O WILDSTAR PARTNERS LLC				Employer identification number 54-6052978	

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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 33¹/₃% 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 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
THE SANDS FAMILY FOUNDATION INC
C/O WILDSTAR PARTNERS LLC

Employer identification number
54-6052978

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	RICHARD SANDS 110 EAST ATLANTIC AVENUE SUITE 200 DELRAY BEACH, FL 33444	\$ 25,563,225	☐ Person ☐ Payroll ☒ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization THE SANDS FAMILY FOUNDATION INC C/O WILDSTAR PARTNERS LLC	Employer identification number 54-6052978
--	--

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
1	136,250 SHS CONSTELLATION BRANDS INC.	\$ 25,563,225	2020-12-24
(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
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

54-6052978

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.

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