# 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.

			venue Service Go to www.	irs.gov/Form990PF for instr	uctions and the latest info		Open to Public Inspection	
	For c	alen	dar year 2019 or tax year beginning AUG	22, 2019	, and ending	DEC 31, 2019		
			foundation	·		A Employer identification	number	
- [	IVUII		-			)		
1	M	השו	ROPOULOS FAMILY FOUNDAT	TON		84-2835335		
٧.					Room/suite		<del></del>	
			nd street (or P O box number if mail is not delivered to street	address)	1100m/saite	B Telephone number		
			GREENWICH AVE			914-426-36	00	
			own, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is pe	ending, check here	
	G	RE!	ENWICH, CT 06830			1		
	G C	heck	all that apply: X Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here	
			Final return	Amended return				
			Address change	Name change		Foreign organizations me check here and attach cor	mputation	
	H C	heck	type of organization: X Section 501(c)(3) e	xempt private foundation		E If private foundation state	tus was terminated	
		-	ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation ()	under section 507(b)(1)	_	
•	l Fa			ing method: X Cash	Accrual	F If the foundation is in a		
			·   —	Other (specify)		under section 507(b)(1)	_	
	<b>\</b>		5,084,157. (Part I, colu		ils.)		(5), 0.100.1.1010	
1	Pa		Analysis of Revenue and Expenses			(a) Adjusted not	(d) Disbursements	
ا	Га		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
			, , , , , , , , , , , , , , , , , , , ,	5,033,215.		N/A	(cash basis only)	
4	,	1	Contributions, gifts, grants, etc., received	5,033,213.		N/A		
<b>\</b> //	\	2	Check Interest on savings and temporary					
J/V	Ŋ	3	cash investments			<del></del>	ļ	
-/\	$  \cdot  $	4	Dividends and interest from securities				<u> </u>	
,	0	5a	Gross rents				<u> </u>	
		þ	Net rental income or (loss)					
	4	6a	Net gain or (loss) from sale of assets not on line 10					
	nge	b	Gross sales price for all assets on line 6a					
	evenu	7	Capital gain net income (from Part IV, line 2)		0.			
•	ď	8	Net short-term capital gain					
		9	Income modifications					
		10a	Gross sales less returns and allowances			<u></u>		
			Less Cost of goods sold					
		C	Gross profit or (loss)					
		11	Other income			RECEIVED		
		12	Total Add lines 1 through 11	5,033,215.	0,			
		13	Compensation of officers, directors, trustees, etc	0.	0,5	UN 2 97/021	lő 0.	
		14	Other employee salaries and wages		a		<u> </u>	
		15	Pension plans, employee benefits			0000	 	
21	S	16a	Legal fees STMT 1	23,547.	0	OGUZN, UT	23,547.	
2021	Š	b	Accounting fees					
<u>ත</u>	XDE	c	Other professional fees					
-	E	17	Interest					
	Ĭ;	18	Taxes					
MAY	stra	10	Depreciation and depletion					
$\overline{}$	Ë	20	Legal fees STMT 1  Accounting fees Other professional fees Interest Taxes Depreciation and depletion Occupancy Travel, conferences, and meetings					
岀	Ę	21	Travel, conferences, and meetings	-		-		
Z	P	00	Printing and publications			† · · · · · · · · · · · · · · · · · · ·		
SCANNED	a	22	Other expenses				<del></del>	
$\ddot{\circ}$	ing	23						
S	rat	22 23 24	Total operating and administrative	23,547.	0.		23,547.	
	ö		expenses. Add lines 13 through 23	23,347.		<del> </del>	0.	
	_		Contributions, gifts, grants paid	<u> </u>			<del>                                     </del>	
		26	Total expenses and disbursements.	22 547	0.		23,547.	
			Add lines 24 and 25	23,547.	<u> </u>		43,347.	
			Subtract line 26 from line 12:	E 000 660		}	1	
			Excess of revenue over expenses and disbursements	5,009,668.		<del> </del>		
			Net investment income (if negative, enter -0-)		0.			
		C	Adjusted net income (if negative, enter -0-)	1	I	N/A	ı l	

LHA For Paperwork Reduction Act Notice, see instructions.

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	EI	nd of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	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			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 3	0.	1,930,334	5,084,157.
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		<del></del> _	
	14	Land, buildings, and equipment: basis		<del></del>	
		Less accumulated depreciation			
	1	Other assets (describe			
	16	Total assets (to be completed by all filers - see the		4 000 00	
_	_	instructions. Also, see page 1, item I)	0.	1,930,334	5,084,157.
	17	Accounts payable and accrued expenses			
	18	Grants payable		<u>,</u>	
S	19	Deferred revenue			
Liabilitie	20	Loans from officers, directors, trustees, and other disqualified persons		<u></u> -	
iab.	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		Taket tiektitaten (odd legon 17 Abrough 20)	0.	(	).
_	23	Total liabilities (add lines 17 through 22)		<u></u>	
		Foundations that follow FASB ASC 958, check here			
Ses		and complete lines 24, 25, 29, and 30.			
and	24	Net assets without donor restrictions			
Fund Balanc	25	Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here		<u> </u>	
Pu		and complete lines 26 through 30.			
Ī	26	Capital stock, trust principal, or current funds	0.	(	).
Sor	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		j.
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	0.	1,930,334	1.
As	29	Total net assets or fund balances	0.	1,930,334	
Ref	- 3	Total net assets of fame suranous			
	30	Total liabilities and net assets/fund balances	0.	1,930,334	1.
			<b>_</b>		
Р	art	Analysis of Changes in Net Assets of Fund Ba	iaiices		
1	Tota	I 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 0.
2	•	r amount from Part I, line 27a			2 5,009,668.
		r increases not included in line 2 (itemize)			3 0.
		lines 1, 2, and 3			4 5,009,668.
		eases not included in line 2 (itemize)	SEE ST	ATEMENT 2	5 3,079,334.
6	<u>Tota</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29		6 1,930,334.
					Form <b>990-PF</b> (2019)

METROPOULOS FAMILY FOUNDATION

(a) List and describe th	ne kınd(s) (	of property sold (for exa common stock, 200 shs	mple, real esta		ΙP	How ac - Purc - Dona	quired hase ation	(c) Date a (mo., da	cquired y, yr.)	(d) Date sold (mo., day, yr.)
1a					╂—					
b NON	E				╁—					<del></del>
<u> </u>	_				+				<del></del>	·
<u>d</u>					+					<del></del>
<u>e                                      </u>	(f) D <sub>0</sub>	tion allowed	/=\ Co	et er ether beere				(h) Go	ın or (loss)	
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale					(f) minus (	
a			<u> </u>							
<u>b</u>			<u> </u>							<u> </u>
<u>c</u>		_	<del> </del>					_		<del></del>
<u>d</u>			<del>                                     </del>							
Complete only for assets showing	usin in co	lumn (h) and owned by	the foundation	n on 12/31/69				I) Gains (Co	ol (b) gain	minue
Complete only for assets showing			T	xcess of col (i)				il. (k). but n	ot less than	1 -0-) <b>or</b>
(i) FMV as of 12/31/69		Adjusted basis s of 12/31/69		r col. (j), if any				Losses (	from col. (I	h))
a										
b										
C									-	
d										
e					-				-	
<u> </u>		C If name also ente	r in Part I. line	. 7	<u> </u>					
2 Capital gain net income or (net cap	ital loss)	If gain, also ente	)- in Part I, line	e 7	P	2				
3 Net short-term capital gain or (loss		•			ĺ					
If gain, also enter in Part I, line 8, o			iiu (0)		Ĵ					
If (loss), enter -0- in Part I, line 8						3				
Part V Qualification Un	der Se	ction 4940(e) for	Reduced	Tax on Net	Inve	estme	ent Inc	ome		<del></del>
(For optional use by domestic private t	foundation	s subject to the section	4940(a) tax or	ı net investment ir	come	:.)				N/A
If section 4940(d)(2) applies, leave thi	s part blan	k.								
Was the foundation liable for the section					riody					Yes No
If "Yes," the foundation doesn't qualify  1 Enter the appropriate amount in ea					ntries					
(a)	ich colum		iisti uctions oc	Tore making any c				~ T		(d)
Base periód years		(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha		use assets	s   (		putión ratio ided by col. (c))
Calendar year (or tax year beginning	<del>]                                      </del>							+-	con (b) aiv	idea by coi. (c))
2018 2017								_		
2016				<del></del>						
2015										
2014		<del></del>								
2011				·						
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the 5	-vear base	period - divide the total	on line 2 by 5.	.0, or by the numb	er of	years				<u></u>
the foundation has been in existent			•			-		3		
		•								
4 Enter the net value of noncharitable	e-use asset	ts for 2019 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment income	(1% of Pa	ırt I, line 27b)						6		
								T		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from	Part XII, III	ne 4						8		
If line 8 is equal to or greater than	line 7, che	ck the box in Part VI, lin	e 1b, and com	plete that part usii	ng a 1	% tax r	ate.			
See the Part VI instructions.										

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Par	t VI Excise Tax Based on Investment Income (Section 494	0(a), 4	940(b), 4940	<u>(e),</u> or 49	48 -	see in	struc	tions	<u>s)                                    </u>
1a E	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 ne	cessary-	see instructions)			ı——			
þ (	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	ightharpoons	and enter 1%	}	1	<u> </u>			0.
C	of Part I, line 27b								
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Part	I, line 12, col. (b)	.J					
2 1	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or	thers, en	ter -0-)		2	<u> </u>			0.
3 /	Add lines 1 and 2				3				0.
4 9	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; or	thers, er	nter -0-)		4				0.
5 1	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5	<u> </u>			0.
6 (	Credits/Payments:					[			
a 2	2019 estimated tax payments and 2018 overpayment credited to 2019	6a		0.		İ			•
b E	Exempt foreign organizations - tax withheld at source	_6b_		0.					1
с	Tax paid with application for extension of time to file (Form 8868)	6c		0.					
d E	Backup withholding erroneously withheld	6d		0.					
7 1	Total credits and payments. Add lines 6a through 6d				7				0.
8 E	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	ached			8				0.
9 1	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			•	9				0.
10 (	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<b>•</b>	10				
11 <u>E</u>	Enter the amount of line 10 to be: Credited to 2020 estimated tax		Re	funded 🕨	11	<u> </u>			
Par	rt VII-A Statements Regarding Activities								
1a [	During the tax year, did the foundation attempt to influence any national, state, or local legi	slation o	r did it participate	or intervene	ın			Yes	
á	any political campaign?						1a		<u>X</u>
<b>b</b> [	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? Se	e the instructions	for the defini	tion		1b		<u>X</u>
I	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any m	naterials published	or					
(	distributed by the foundation in connection with the activities.								
c [	Did the foundation file Form 1120-POL for this year?						1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th								
(	(1) On the foundation. > \$ (2) On foundation manager	s. 🕨 💲		0.			}	ļ	ı
e E	Enter the reimbursement (if any) paid by the foundation during the year for political expend	liture tax	imposed on found	dation			1		, ]
Г	managers. ▶ \$ 0 .								
2	Has the foundation engaged in any activities that have not previously been reported to the	RS?					2		<u>X</u>
i	If "Yes," attach a detailed description of the activities.								
3 H	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrume	ent, articles of inco	rporation, or	1				<u></u>
t	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?					4a		X
b I	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/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								
6 /	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	uther:							i i
	By language in the governing instrument, or								
•	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandato</li> </ul>	ry directi	ons that conflict v	/ith the state	law				J
	remain in the governing instrument?						6	X	<b></b>
7 [	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	plete Par	t II, col. (c), and P	art XV			7	Х	
8a i	Enter the states to which the foundation reports or with which it is registered. See instructi	ons. 🟲							
	DE		_						
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney	General (or desigr	nate)					
	of each state as required by General Instruction G2 If "No," attach explanation						8b	X	/
	Is the foundation claiming status as a private operating foundation within the meaning of s	ection 49	942(j)(3) or 4942(j	)(5) for caler	ndar				ــــــــــــــــــــــــــــــــــــــ
3	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," cor	nplete Pa	art XIV				9		<u>x</u> (/
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	lule listing	their names and addr	esses S	MT		10	<u> </u>	<u></u>
						For	m <b>99</b> 0	-PF	(2019)

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Pa	art VII-A Statements Regarding Activities (continued)			
			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		х
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		х
13		13	Х	
	Website address ► N/A			
14	The books are in care of ▶ C. DEAN METROPOULOS  Telephone no. ▶ 914	-426-3	600	
•		▶06830		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	<b></b>
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1.0		
	foreign country			
Pa	art 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	a 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?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?	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	Ì		
	termination of government service, if terminating within 90 days.)	No		
b	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	A 1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
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		_X
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)):			
а	a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?	No		
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	,		
	statement - see instructions.)	A 2b		<u> </u>
C	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_				
за	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	.		
	during the year?	NO		ŀ
D	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 Form 4720, Schedule C. to determine if the foundation had excess business holdings in 2019.)	λ   <del></del>		<b></b> -
4.			$\vdash$	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 <u>a</u>	$\vdash$	
0	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4b		<u></u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	Form <b>99</b>	0-PF	
		I OI III OO		(2013)

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	<u> </u>			<del> </del>	
		•			
<del></del>			_		
<del></del>	7				
Total number of other employees paid over \$50,000				<b>•</b>	0
`				Fo	rm <b>990-PF</b> (2019)

Į <b>P</b>	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	508,416.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	508,416.
е	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	<u> </u>
3	Subtract line 2 from line 1d	3	508,416.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,626.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	500,790.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	9,055.
P	art XI■ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ■ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	9,055.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	9,055.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,055.
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	9,055.
P	art:XIII 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	23,547.
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	23,547.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,547.
	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 th	e section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) · 2018	( <b>d</b> ) 2019
1 Distributable amount for 2019 from Part XI,				9,055.
line 7  2 Undistributed income, if any, as of the end of 2019			<del></del>	9,033.
- · · · · · · · · · · · · · · · · · · ·			0.	
a Enter amount for 2018 only b Total for prior years:		<del></del>		<u></u>
b total for prior years.		0.		
3 Excess distributions carryover, if any, to 2019		<u> </u>		
1				
a From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 23,547.	į		_	
a Applied to 2018, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				1
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				9,055.
e Remaining amount distributed out of corpus	14,492.		<u> </u>	
5 Excess distributions carryover applied to 2019 (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:	14,492.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,492.			
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 instr.			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	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	14,492.			
F				
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019 14,492.				!

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Form **990-PF** (2019)

Form **990-PF** (2019)

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er gross amounts unless otherwise indicated.	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
or group arrivants arrives out or wise more area.	(a)	(b)	(C)	(d)	Related or exempt
Program service revenue:	Business code	Amount	sion	Amount	function income
-	1000	*	İ	<u> </u>	· · · · · · · · · · · · · · · · · · ·
			t		
· · · · · · · · · · · · · · · · · · ·					
<u> </u>			$\vdash$	<del></del>	
d					
·	_		<u> </u>		
	_		<b>├</b>		ļ
Fees and contracts from government agencies	-		<u> </u>		
Membership dues and assessments	<u> </u>		<u> </u>		
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities			<u> </u>		
let rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			1		
Other revenue:					
a			<del>                                     </del>		
b			<del>                                     </del>		
C			<del>                                     </del>		
d	_		<del>                                     </del>		
_		0.		0.	
B		0.	<u> </u>		I
Subtotal. Add columns (b), (d), and (e)					
Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)				13	-
Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)	.)			13	
Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  Tworksheet in line 13 instructions to verify calculations.			empt		
Subtotal. Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities	s to the Accom	plishment of Exc		Purposes	
Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  THE Relationship of Activities  e No. Explain below how each activity for which in	ncome is reported in c	plishment of Excolumn (e) of Part XVI-A		Purposes	
subtotal. Add columns (b), (d), and (e)  fotal Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  THE XVI-B Relationship of Activities	ncome is reported in c	plishment of Excolumn (e) of Part XVI-A		Purposes	
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Subtotal. Add columns (b), (d), and (e)  Fotal Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities  The No. Explain below how each activity for which in	ncome is reported in c	plishment of Excolumn (e) of Part XVI-A		Purposes	

Form **990-PF** (2019)

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#### Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No

1 Dic	d the org	ganization directly or indire	ectly engage in any o	of the followin	g with any other organization	on described in sec	tion 501(c)	Yes No
(01	ther than	section 501(c)(3) organi	zations) or in sectioi	n 527, relating	to political organizations?			
a Tra	ansfers 1	from the reporting founda	tion to a noncharitat	ole exempt org	ganization of:			
(1)	Cash							1a(1) X
(2)	) Other	assets						1a(2) X
<b>b</b> Ot	her trans	sactions:						
(1)	•	of assets to a noncharitab			1b(1) X 1b(2) X			
(2)	,	ases of assets from a non			<del></del>			
	•	l of facilities, equipment, o	or other assets					<del>-                                    </del>
		oursement arrangements						<del>                                     </del>
		or loan guarantees	mharchia ar fundrais	una colicitatio	ne			1b(5) X 1b(6) X
• •		rmance of services or mer facilities, equipment, mai	•	-				1c X
	_				dule. Column (b) should al	ways show the fair	market value of the goods	<u></u>
					ed less than fair market valu			
		) the value of the goods, o						•
(a) Line r		(b) Amount involved			e exempt organization	(d) Description	on of transfers, transactions, ar	d sharing arrangements
				N/A				
				-				
	_							
	-							
						<del>-</del>		
	+					-		
	+		_			-		
	+				<del> </del>			
2a Is	the four	idation directly or indirect	ly affiliated with, or i	elated to, one	or more tax-exempt organ	izations described		
ın	section	501(c) (other than section	n 501(c)(3)) or in se	ction 527?				Yes X No
b If	"Yes," co	mplete the following sche			1 <del>-</del>	<del></del>	( ) D	
		(a) Name of org	anization		(b) Type of organization		(c) Description of relation	insnip
		N/A						<del></del>
			-		<del> </del>	+		<del></del>
			<del> </del>		<del>                                     </del>	+		
					accompanying schedules and s			May the IRS discuss this
Sign	and be	elief, it is true, correct, and com	plete Declaration of pre	parer (other than	taxpayer) is based on all informa	ation of which preparer	nas any knowledge	return with the preparer shown below? See instr
Here		Will	EN		16/10/2021	TREAS		X Yes No
	Sign	ature of officer or trustee			Date	Title		
	<u> </u>	Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if PTI	N
							self- employed	
Paid		WILLIAM ZA'			m a. Zatorski	05/08/2020_		00846377
Prep		Firm's name ▶ PRI	CEWATERHO	USECOO	PERS LLP		Firm's EIN ► 13-	4008324
Use	Only							
		Firm's address ► 40						\ 006 4000
		FL	ORHAM PAR	K, NJ	07932		Phone no. (973	) 236-4000 - 200 PF - 2010
								Form <b>990-PF</b> (2019)

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

METROPOULOS FAMILY FOUNDATION

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

OMB No 1545-0047

2019

Name of the organization

Employer identification number

84-2835335

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

Organization type (check one)								
Filers of:		Section:						
Form 990	or 990-EZ	501(c)( ) (enter number) organization						
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
		527 political organization						
Form 990-PF		X 501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
Note: On	ly a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions	·					
General I	Rule							
	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (ii one contributor Complete Parts I and II See instructions for determining a contributor's total contribution						
Special F	Rules							
!	sections 509(a)(1) a any one contributor	in described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulation and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that report, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, I line 1 Complete Parts I and II	ceived from					
	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							
:	year, contributions is checked, enter h purpose Don't con	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributors exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If there the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexcluste, etc., contributions totaling \$5,000 or more during the year.	this box					
but it mu	st answer "No" on	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, 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						

Name of organization

**Employer identification number** 

### METROPOULOS FAMILY FOUNDATION

84-2835335

Part I	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	C. DEAN METROPOULOS  200 GREENWICH AVENUE  GREENWICH, CT 06830	\$ 5,033,215.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate 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	(ċ) 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 Noncash (Complete Part II for noncash contributions)

Name of organization

**Employer identification number** 

## METROPOULOS FAMILY FOUNDATION

84-2835335

1			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		\$ 5,009,668.	12/13/19
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	
(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
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization

**Employer identification number** 

-2835335

METROPOULOS FAMILY FOUNDATION	84
Part III Exclusively religious, charitable, etc , contributions to organizations described in section 501(c)(7), (8), or	(10) that total
from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations	

	e duplicate copies of Part III if additional	space is needed	less for the year (Enter this info once)		
D. 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-   -					
		(e) Transfer of gif	t		
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif	it		
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
	(h) Durage of of	(c) Use of gift	(d) Description of how gift is held		
	(b) Purpose of gift	(c) Use of gift	(d) Description of now girt is need		
_		(e) Transfer of gif	t		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
=					
-	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
GORDON, FOURNARIS & MAMMARELLA, PA	23,547.	0.		23,547.	
TO FM 990-PF, PG 1, LN 16A	23,547.	0.		23,547.	

FORM 990-PF OTHER DECREASES IN NET ASSETS OR	FUND BALANCES	STATEMENT 2
DESCRIPTION		AMOUNT
UNREALIZED APPRECIATION ON DONATED SECURITIES	3,079,334.	
TOTAL TO FORM 990-PF, PART III, LINE 5	-	3,079,334.
FORM 990-PF . CORPORATE STOCK		STATEMENT 3
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
3,500 SHARES AGILENT TECHNOLOGIES INC 10,000 SHARES CHEVRON CORP 5,726 SHARES CORTEVA INC 6,726 SHARES DOW INC 6,726 SHARES DUPOINT DE NEMOURS INC 25,000 SHARES INTEL 5,000 SHARES IBM 4,750 SHARES VALERO ENERGY CORP	72,440. 345,460. 43,203. 162,022. 230,039. 551,750. 446,085. 79,335.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,930,334.	5,084,157.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 4
NAME OF CONTRIBUTOR	ADDRESS	
C. DEAN METROPOULOS	200 GREENWICH AVENUE GREENWICH, CT 06830	

		OF OFFICERS, DI FOUNDATION MANAG		STAT	EMENT 5
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
C. DEAN METROPOULOS 200 GREENWICH AVENUE GREENWICH, CT 06830		PRESIDENT 1.00	0.	0.	0.
MARIANNE METROPOULOS 200 GREENWICH AVENUE GREENWICH, CT 06830		DIRECTOR 1.00	0.	0.	0.
J. DAREN METROPOULOS 200 GREENWICH AVENUE GREENWICH, CT 06830		VICE PRESIDENT 1.00	0.	0.	0.
EVAN METROPOULOS 200 GREENWICH AVENUE GREENWICH, CT 06830		VICE PRESIDENT	0.	0.	0.
MICHAEL ENGEL 200 GREENWICH AVENUE GREENWICH, CT 06830		SECRETARY & TRE	CASURER 0.	0.	0.
TOTALS INCLUDED ON 990	-PF, PAGE 6,	PART VIII	0.	0.	0.