

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation Cornelia Cogswell Rossi Foundation Inc		A Employer identification number 20-1420345	
% Foundation Source			
Number and street (or P O box number if mail is not delivered to street address) Foundation Source 501 Silverside Rd	Room/suite	B Telephone number (see instructions) (800) 839-1754	
City or town, state or province, country, and ZIP or foreign postal code Wilmington, DE 198091377		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 14,348,571	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

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)	0			
	2 Check <input checked="" type="checkbox"/> If the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	8,959	8,959		
	4 Dividends and interest from securities . . . . .	258,793	258,793		
	5a Gross rents . . . . .				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	918,897			
	b Gross sales price for all assets on line 6a 2,526,019				
	7 Capital gain net income (from Part IV, line 2) . . . . .		930,595		
	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 . . . . .	1,186,649	1,198,347		
	13 Compensation of officers, directors, trustees, etc	0			
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	60,173	0	0	60,173
	b Accounting fees (attach schedule) . . . . .				
	c Other professional fees (attach schedule) . . . . .	53,025	53,025		
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	7,100			
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	55,281			55,281
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	175,579	53,025	0	115,454
	25 Contributions, gifts, grants paid . . . . .	1,463,600			1,463,600
	26 Total expenses and disbursements. Add lines 24 and 25	1,639,179	53,025	0	1,579,054
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-452,530			
	b Net investment income (if negative, enter -0-)		1,145,322		
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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	3,064,246	2,651,296	2,651,296
	3	Accounts receivable ▶ <u>5,108</u>			
		Less allowance for doubtful accounts ▶ _____	1,109	5,108	5,108
	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)			
	b	Investments—corporate stock (attach schedule) . . . . .	4,970,382	4,223,058	8,935,937
	c	Investments—corporate bonds (attach schedule) . . . . .	2,049,687	2,753,432	2,756,230
	Liabilities	11	Investments—land, buildings, and equipment basis ▶ _____		
		Less accumulated depreciation (attach schedule) ▶ _____			
12		Investments—mortgage loans . . . . .			
13		Investments—other (attach schedule) . . . . .			
14		Land, buildings, and equipment basis ▶ _____			
		Less accumulated depreciation (attach schedule) ▶ _____			
15		Other assets (describe ▶ _____)			
16		<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	10,085,424	9,632,894	14,348,571
17		Accounts payable and accrued expenses . . . . .			
18		Grants payable . . . . .			
Net Assets or Fund Balances	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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
		<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24	Unrestricted . . . . .			
25	Temporarily restricted . . . . .				
26	Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
27	Capital stock, trust principal, or current funds . . . . .				
28	Paid-in or capital surplus, or land, bldg , and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds	10,085,424	9,632,894		
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	10,085,424	9,632,894		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	10,085,424	9,632,894		

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 30 (must agree with end-of-year figure reported on prior year's return)	1	10,085,424
2	Enter amount from Part I, line 27a . . . . .	2	-452,530
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	9,632,894
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	9,632,894

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

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 2,526,019		1,595,424	930,595
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			930,595
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	930,595
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	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))
2016	1,572,116	14,417,234	0 109044
2015	1,731,788	15,843,954	0 109303
2014	1,959,214	17,595,176	0 111349
2013	1,145,378	17,562,222	0 065218
2012	1,876,508	17,613,395	0 106539

<b>2</b> Total of line 1, column (d)	2	0 501453
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 100291
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	13,934,315
<b>5</b> Multiply line 4 by line 3	5	1,397,486
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	11,453
<b>7</b> Add lines 5 and 6	7	1,408,939
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	1,579,054

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	11,453
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	11,453
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	11,453
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	8,027
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	8,027
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	3,426
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

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

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► Foundation Source Telephone no ► (800) 839-1754			
Located at ► 501 Silverside Road Suite 123 Wilmington DE ZIP+4 ► 198091377				
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		<input type="checkbox"/>
<b>16</b>	At any time during calendar year 2017, 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	<b>16</b>	<b>Yes</b> <b>No</b>	<b>No</b> <b>No</b>

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2017 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 2017). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	<b>4b</b>		<b>No</b>

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

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

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	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
Charles B Kaufmann III Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Pres 5 0	0	0	0
John R Raben Jr Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Treas, VP 2 0	0	0	0
Laurie A Warren Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Sec, VP 1 0	0	0	0

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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances

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

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
Shipman & Goodwin LLP 289 Greenwich Ave Greenwich, CT 06830	Legal	60,173
Foundation Source 55 Walls Drive 3rd fl Fairfield, CT 06824	Administrative	55,231

Total number of others receiving over \$50,000 for professional services.

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

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	11,372,118
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	2,774,395
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	14,146,513
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	14,146,513
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	212,198
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	13,934,315
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	696,716

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	696,716
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	11,453
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	11,453
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	685,263
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	685,263
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	685,263

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,579,054
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,579,054
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	11,453
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,567,601

**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 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				685,263
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .				
<b>b</b> Total for prior years 2015, 2014, 2013				
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .	562,906			
<b>b</b> From 2013. . . . .	282,937			
<b>c</b> From 2014. . . . .	1,095,441			
<b>d</b> From 2015. . . . .	957,198			
<b>e</b> From 2016. . . . .	867,200			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	3,765,682			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,579,054</u>				
<b>a</b> Applied to 2016, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2017 distributable amount. . . . .				685,263
<b>e</b> Remaining amount distributed out of corpus	893,791			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,659,473			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	562,906			
<b>9 Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	4,096,567			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .	282,937			
<b>b</b> Excess from 2014. . . . .	1,095,441			
<b>c</b> Excess from 2015. . . . .	957,198			
<b>d</b> Excess from 2016. . . . .	867,200			
<b>e</b> Excess from 2017. . . . .	893,791			

**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 2017, 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization 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) )  
NONE

**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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

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

**c** Any submission deadlines

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	1,463,600
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

## Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2017)

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash. . . . .	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (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

<b>Sign Here</b>	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.	***** 2018-05-07 *****	May the IRS discuss this return with the preparer shown below? (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Jeffrey D Haskell				P01345770
	Firm's name ▶ Foundation Source				Firm's EIN ▶
	Firm's address ▶ One Hollow Ln Ste 212 Lake Success, NY 11042				Phone no (800) 839-1754

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALPHA-1 FOUNDATION INC 3300 PONCE DE LEON BLVD CORAL GABLES, FL 33134	N/A	PC	translational research Project	1,000
ALS THERAPY DEVELOPMENT FOUNDATION INC 300 TECHNOLOGY SQ STE 400 CAMBRIDGE, MA 02139	N/A	PC	General & Unrestricted	2,500
ALZHEIMER'S ASSOCIATION - CONNECTICUT CHAPTER 200 EXECUTIVE BLVD STE 4B SOUTHINGTON, CT 06489	N/A	PC	General & Unrestricted	1,000
AMERICAN CANCER SOCIETY INC - NORTHERN NEW ENGLAND 1 BOWDOIN MILL ISLAND STE 300 TOPSHAM, ME 04086	N/A	PC	General & Unrestricted	500
AMERICAN NATIONAL RED CROSS PO BOX 37839 BOONE, IA 50037	N/A	PC	Hurricane Harvey Disaster Relief Fund	50,000
<b>Total . . . . .</b> ► <b>3a</b>				1,463,600

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN SCHOOL FOR THE DEAF 139 N MAIN ST WEST HARTFORD, CT 06107	N/A	PC	General & Unrestricted	2,500
AMERICARES FOUNDATION INC 88 HAMILTON AVE STAMFORD, CT 06902	N/A	PC	Hurricane Harvey and related tropical storm relief including medical care	25,000
AMERICARES FREE CLINIC INC 88 HAMILTON AVE STAMFORD, CT 06902	N/A	PC	Stamford Free Clinic Project	25,000
B CURED INCPO BOX 1071 GREENWICH, CT 06836	N/A	PC	to fund brain tumor research	1,000
BARNARD COLLEGE3009 BROADWAY NEW YORK, NY 10027	N/A	PC	General & Unrestricted	7,000
<b>Total . . . . .</b> <b>3a</b>				1,463,600

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BARNARD COLLEGE3009 BROADWAY NEW YORK, NY 10027	N/A	PC	Barnard giving day Fund	2,000
BARNARD COLLEGE3009 BROADWAY NEW YORK, NY 10027	N/A	PC	class of 1963 endowed scholarship fund	1,000
BERKSHIRE SCHOOL INC 245 N UNDERMOUNTAIN RD SHEFFIELD, MA 01257	N/A	PC	General & Unrestricted	10,000
BERKSHIRE SCHOOL INC 245 N UNDERMOUNTAIN RD SHEFFIELD, MA 01257	N/A	PC	One Day for Berkshire Climb Fund	2,000
BOYS HOPE GIRLS HOPE OF NEW YORK INC LASALLE HALL 367 CLERMONT AVE BROOKLYN, NY 11238	N/A	PC	General & Unrestricted	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<div>Name and address (home or business)</div>				
<b>a</b> <i>Paid during the year</i>				
BREAST CANCER ALLIANCE INC 48 MAPLE AVE GREENWICH, CT 06830	N/A	PC	General & Unrestricted	4,000
BUCKLEY SCHOOL IN THE CITY OF NEW YORK 113 E 73RD ST NEW YORK, NY 10021	N/A	PC	Centennial Building Campaign	10,000
BUFFALO BILL MEMORIAL ASSOCIATION 720 SHERIDAN AVE CODY, WY 82414	N/A	PC	General & Unrestricted	5,000
CAMDEN PUBLIC LIBRARY55 MAIN ST CAMDEN, ME 04843	N/A	GOV	General & Unrestricted	3,000
CAMP SUNSHINE AT SEBAGO LAKE INC 35 ACADIA RD CASCO, ME 04015	N/A	PC	General & Unrestricted	50,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CARDINAL QUARTERBACK CLUB INC 11 COVE RIDGE LN OLD GREENWICH, CT 06870	N/A	PC	General & Unrestricted	2,000
CHILDREN OF FALLEN PATRIOTS FOUNDATION 1818 LIBRARY ST STE 500 RESTON, VA 20190	N/A	PC	General & Unrestricted	2,500
CONNECTICUT FOOD BANK INC 2 RESEARCH PKWY WALLINGFORD, CT 06492	N/A	PC	General & Unrestricted	3,000
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE STE 420 ROCKVILLE, MD 20850	N/A	PC	Fisher House Connecticut Fund	25,000
FOOD BANK OF LOWER FAIRFIELD COUNTY INC 461 GLENBROOK RD STAMFORD, CT 06906	N/A	PC	General & Unrestricted	4,500
<b>Total . . . . .</b> ► <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOOD RESCUE US INC27 ANN ST NORWALK, CT 06854	N/A	PC	General & Unrestricted	25,000
FRIENDS OF ACADIAPO BOX 45 BAR HARBOR, ME 04609	N/A	PC	Second Century Campaign Organizational Endowment Fund	100,000
FRIENDS OF NATHANIEL WITHERELL INC 70 PARSONAGE RD GREENWICH, CT 06830	N/A	PC	General & Unrestricted	2,500
GLENVILLE MAVERICKS INC 35 FIELD POINT RD GREENWICH, CT 06830	N/A	PC	General & Unrestricted	2,500
GOOD SHEPHERD FOOD-BANK PO BOX 1807 AUBURN, ME 04211	N/A	PC	President's Fund to End Hunger	50,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GOODWILL OF WESTERN AND NORTHERN CONNECTICUT INC 165 OCEAN TER BRIDGEPORT, CT 06605	N/A	PC	General & Unrestricted	1,000
GRAND CANYON ASSOCIATION PO BOX 399 GRAND CANYON, AZ 86023	N/A	PC	General & Unrestricted	500
GREENWICH ACADEMY INC 200 N MAPLE AVE GREENWICH, CT 06830	N/A	PC	General & Unrestricted	18,000
GREENWICH ADULT DAY CARE INC 125 RIVER RD EXT COS COB, CT 06807	N/A	PC	General & Unrestricted	2,000
GREENWICH COUNTRY DAY SCHOOL INC PO BOX 623 GREENWICH, CT 06836	N/A	PC	General & Unrestricted	22,000
<b>Total . . . . .</b> ► <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GREENWICH EMERGENCY MEDICAL SERVICE INCORPORATED 1111 E PUTNAM AVE RIVERSIDE, CT 06878	N/A	PC	General & Unrestricted	1,000
GREENWICH HISTORICAL SOCIETY INC 39 STRICKLAND RD COS COB, CT 06807	N/A	PC	General & Unrestricted	1,000
GREENWICH HOSPITAL 5 PERRYRIDGE RD GREENWICH, CT 06830	N/A	PC	General & Unrestricted	2,500
GREENWICH SYMPHONY ORCHESTRA INC PO BOX 35 GREENWICH, CT 06836	N/A	PC	General & Unrestricted	5,000
GREENWICH TREE CONSERVANCY INC PO BOX 4215 GREENWICH, CT 06831	N/A	PC	General & Unrestricted	500
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOSPITAL FOR SPECIAL SURGERY FUND INC 535 E 70TH ST NEW YORK, NY 10021	N/A	PC	General & Unrestricted	4,500
ISLAND CONNECTIONS 93 COTTAGE ST STE 300 BAR HARBOR, ME 04609	N/A	PC	General & Unrestricted	25,000
ISLAND INSTITUTE386 MAIN ST ROCKLAND, ME 04841	N/A	PC	General & Unrestricted	25,000
LEWA WILDLIFE CONSERVANCY USA 38 MILLER AVE BOX 507 MILL VALLEY, CA 94941	N/A	PC	General & Unrestricted	12,500
LIFEFLIGHT OF MAINE LLCPO BOX 899 CAMDEN, ME 04843	N/A	PC	General & Unrestricted	50,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAINE SEACOAST MISSION127 W ST BAR HARBOR, ME 04609	N/A	PC	General & Unrestricted	50,000
MARINE TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172	N/A	PC	General & Unrestricted	500
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST STE 540 BOSTON, MA 02114	N/A	PC	Leadership Council for Psychiatry	10,000
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST STE 540 BOSTON, MA 02114	N/A	PC	leadership council for psychiatry	2,100
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST STE 540 BOSTON, MA 02114	N/A	PC	MGH Center for Law, Brain & Behavior	500
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600


**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVE NEW YORK, NY 10065	N/A	PC	General & Unrestricted	2,500
MORYS PRESERVATION INC 306 YORK ST NEW HAVEN, CT 06511	N/A	PC	General & Unrestricted	500
MOUNT DESERT ISLAND HOSPITAL 10 WAYMAN LN BAR HARBOR, ME 04609	N/A	PC	General & Unrestricted	50,000
MOUNT DESERT NURSING ASSOCIATION PO BOX 397 NORTHEAST HARBOR, ME 04662	N/A	PC	General & Unrestricted	10,000
NATIONAL EXECUTIVE SERVICE CORPS 1177 AVE OF THE AMERICAS FL 5 NEW YORK, NY 10036	N/A	PC	General & Unrestricted	1,000
<b>Total . . . . .</b> ► <b>3a</b>				1,463,600



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATIONAL EXECUTIVE SERVICE CORPS 1177 AVE OF THE AMERICAS FL 5 NEW YORK, NY 10036	N/A	PC	Charitable Event	1,000
NATIONAL FOREST FOUNDATION BLDG 27 STE 3 FORT MISSOULA RD MISSOULA, MT 59804	N/A	PC	White Mountain National Forest Fund	50,000
NATIONAL FOREST FOUNDATION BLDG 27 STE 3 FORT MISSOULA RD MISSOULA, MT 59804	N/A	PC	White Mountain National Forest Fund	100,000
NORTH HAVEN FOUNDATION PO BOX 664 ROCKLAND, ME 04841	N/A	PC	General & Unrestricted	20,000
NORTHEAST HARBOR AMBULANCE SERVICE INC PO BOX 122 NORTHEAST HARBOR, ME 04662	N/A	PC	General & Unrestricted	25,000
<b>Total</b> . . . . . 				1,463,600
<b>3a</b>				

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NYU LANGONE MEDICAL CENTER 1 PARK AVE 17TH FL NEW YORK, NY 10016	N/A	PC	Stephen E Banner Fund for Lung Cancer Research	2,500
PACIFIC HOUSE INC 137 HENRY ST STE 205 STAMFORD, CT 06902	N/A	PC	General & Unrestricted	5,000
PATHWAYS INC175 MILBANK AVE GREENWICH, CT 06830	N/A	PC	General & Unrestricted	2,000
SALISBURY SCHOOL INC 251 CANAAN RD SALISBURY, CT 06068	N/A	PC	The Sixth Form Parents Fund - The Class of 2017 Quadrangle Campaign	15,000
SALVATION ARMY - GREATER HARTFORD AREA SERVICES 217 WASHINGTON ST HARTFORD, CT 06106	N/A	PC	General & Unrestricted	4,500
<b>Total . . . . .</b> 				1,463,600
<b>3a</b>				

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAVE THE CHILDREN FEDERATION INC 501 KINGS HWY E STE 400 FAIRFIELD, CT 06825	N/A	PC	General & Unrestricted	1,500
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	N/A	PC	medical services fund	1,000
SIMPLY SMILES INC1771 POST RD E WESTPORT, CT 06880	N/A	PC	General & Unrestricted	1,000
SIMPLY SMILES INC1771 POST RD E WESTPORT, CT 06880	N/A	PC	Reservation/USA Program	1,000
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PL MSC 512 MEMPHIS, TN 38105	N/A	PC	General & Unrestricted	2,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE ANDREW K DWYER FOUNDATION 756 GUARD HILL RD BEDFORD, NY 10506	N/A	PC	General & Unrestricted	1,000
THE MARITIME AQUARIUM AT NORWALK INC 10 N WATER ST SOUTH NORWALK, CT 06854	N/A	PC	General & Unrestricted	3,500
THE TRANSPORTATION ASSOCIATION OF GREENWICH INC 13 RIVERSIDE AVE RIVERSIDE, CT 06878	N/A	PC	General & Unrestricted	1,000
THE YANKEE INSTITUTE FOR PUBLIC POLICY STUDIES INC 216 MAIN ST HARTFORD, CT 06106	N/A	PC	General & Unrestricted	5,000
TRUSTEES OF PHILLIPS ACADEMY 180 MAIN ST ANDOVER, MA 01810	N/A	PC	General & Unrestricted	2,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF NEW HAVEN 300 BOSTON POST RD WEST HAVEN, CT 06516	N/A	PC	The Charger Challenge Campaign	7,500
VISITING NURSE & HOSPICE OF FAIRFIELD COUNTY PO BOX 489 WILTON, CT 06897	N/A	PC	General & Unrestricted	3,500
WATERSIDE SCHOOL INC 770 PACIFIC ST STAMFORD, CT 06902	N/A	PC	General & Unrestricted	3,000
WIDENER UNIVERSITY ONE UNIVERSITY PL CHESTER, PA 19013	N/A	PC	Oskin Leadership Institute Project	10,000
WILLIAM A FARNSWORTH LIBRARY AND ART MUSEUM INC 356 MAIN ST ROCKLAND, ME 04841	N/A	PC	General & Unrestricted	3,000
<b>Total . . . . .</b> ► <b>3a</b>				1,463,600

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WILLIAM F BUCKLEY JR PROGRAM AT YALE 234 CHURCH ST 7TH FL NEW HAVEN, CT 06510	N/A	PC	General & Unrestricted	5,000
YALE ALUMNI CHORUS FOUNDATION INC 1140 CHAPEL ST NEW HAVEN, CT 06511	N/A	PC	Joe Rossi Scholarship Fund	100,000
YALE NEW HAVEN HOSPITAL20 YORK ST NEW HAVEN, CT 06510	N/A	PC	General & Unrestricted	2,500
YALE UNIVERSITYPO BOX 2038 NEW HAVEN, CT 06521	N/A	PC	Connie and Joe Rossi Fund for Nursing	100,000
YALE UNIVERSITYPO BOX 2038 NEW HAVEN, CT 06521	N/A	PC	Connie and Joe Rossi Fund for Public Health	100,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,463,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
<b>a</b> Paid during the year				
YALE UNIVERSITYPO BOX 2038 NEW HAVEN, CT 06521	N/A	PC	Renovation of Manuscripts and Archives in Sterling Memorial Library	125,000
YELLOWSTONE FOREVERPO BOX 117 YELLOWSTONE NATL PARK, WY 82190	N/A	PC	General & Unrestricted	5,000
YELLOWSTONE FOREVERPO BOX 117 YELLOWSTONE NATL PARK, WY 82190	N/A	PC	Capital Campaign - Wilderness Forever Fund	25,000
YWCA GREENWICH CONNECTICUT INC 259 E PUTNAM AVE GREENWICH, CT 06830	N/A	PC	Charitable Event	5,000
ZELIENOPLE HISTORICAL SOCIETY 243 S MAIN ST ZELIENOPLE, PA 16063	N/A	PC	General & Unrestricted	7,000
Total . . . . . ▶ 3a				1,463,600

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2017 Depreciation Schedule**

**Name:** Cornelia Cogswell Rossi Foundation Inc

**EIN:** 20-1420345



**TY 2017 Investments Corporate Bonds Schedule****Name:** Cornelia Cogswell Rossi Foundation Inc**EIN:** 20-1420345**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
AMERICAN EXPRESS CREDIT MTN -	301,854	298,994
CHEVRON CORP - 1.172% - 06/24/	302,199	300,000
CVS CAREMARK CORP - 1.900% - 0	303,948	299,910
GOLDMAN SACHS BND - 2.600% - 0	301,323	300,408
IBM CORP - 1.125% - 02/06/2018	349,325	349,787
MORGAN STANLEY - 2.500% - 01/2	302,778	300,744
ORACLE CORP SR NT - 2.250% - 1	308,271	301,356
PEPSICO INC - 5.000% - 06/01/2	282,480	303,929
WELLS FARGO - 2.550% - 12/07/2	301,254	301,102

**TY 2017 Investments Corporate Stock Schedule**

**Name:** Cornelia Cogswell Rossi Foundation Inc  
**EIN:** 20-1420345

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ABBVIE INC	56,863	193,420
AFLAC INC	45,470	87,780
AIR PRODS & CHEM INC	56,842	164,080
ALPHABET INC CL A	119,069	158,010
ALTRIA GROUP INC	54,015	214,230
AMERICAN EXPRESS CO	67,546	198,620
APPLE INC	37,529	507,690
BANK OF AMERICA CORP	61,035	88,560
CERNER CORPORATION	80,623	101,085
CHEVRON CORP	144,590	250,380
CISCO SYSTEMS INC	104,580	229,800
CVS CAREMARK CORP	60,090	145,000
DEERE CO	37,181	156,510
EMERSON ELECTRIC CO	79,238	174,225
EVERSOURCE ENERGYINC	98,403	252,720
EXPRESS SCRIPTS HOLDING CO	89,972	223,920
EXXON MOBIL CORP	146,070	167,280
GENERAL ELECTRIC CO	93,450	87,250
GILEAD SCIENCES INC	45,584	143,280
HARBOR FDS INTL FD	511,666	737,796
HOME DEPOT INC	21,245	189,530
INTERNATIONAL BUSINESS MACHINE	85,480	153,420
JOHNSON & JOHNSON	118,770	279,440
JP MORGAN CHASE	125,608	358,249
LAZARD EMERGING MARKETS EQUITY	103,949	106,407
LOWES COMPANIES INC	47,651	185,880
MCDONALD'S CORP	54,890	172,120
MONDELEZ INTERNATIONAL INC	40,866	94,759
MONSANTO CO	86,945	116,780
NATL OILWELL VARCO	113,702	108,060

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
NETAPP, INC	66,500	276,600
NEXTERA ENERGY, INC	81,027	281,142
PARKER HANNIFIN CP	36,480	199,580
PAYPAL HOLDINGS, INC	68,610	73,620
PEPSICO INC	110,410	239,840
PFIZER INC	66,800	144,880
PRAXAIR INC	61,995	154,680
PROCTER GAMBLE CO	128,260	183,760
SCHLUMBERGER LTD	145,342	181,953
TARGET CORPORATION	92,700	97,875
TETRA TECH INC	79,685	144,450
TJX COMPANIES INC	89,023	114,690
UNITED TECHNOLOGIES CORP	51,055	127,570
US BANCORP	81,219	80,370
VANGUARD SM-CAP ETF	27,867	29,560
VERIZON COMMUNICATIONS	57,232	108,401
VMWARE INC	85,821	125,320
WELLS FARGO & CO	56,705	121,340
YUM BRANDS INC	47,405	204,025

**TY 2017 Legal Fees Schedule****Name:** Cornelia Cogswell Rossi Foundation Inc**EIN:** 20-1420345

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
General Consultations	60,173			60,173

**TY 2017 Other Expenses Schedule****Name:** Cornelia Cogswell Rossi Foundation Inc**EIN:** 20-1420345**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	55,231			55,231
State or Local Filing Fees	50			50

**TY 2017 Other Professional Fees Schedule****Name:** Cornelia Cogswell Rossi Foundation Inc**EIN:** 20-1420345

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Investment Management Services	53,025	53,025		

**TY 2017 Taxes Schedule****Name:** Cornelia Cogswell Rossi Foundation Inc**EIN:** 20-1420345

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2017	7,100			