


Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2015 Open to Public Inspection
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A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016			
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION		D Employer identification number 06-1083893
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address) 383 MAIN AVENUE	Room/suite	E Telephone number (203) 750-3200
	City or town, state or province, country, and ZIP or foreign postal code NORWALK, CT 06851		G Gross receipts \$ 44,219,617
	F Name and address of principal officer JUANITA T JAMES 383 MAIN AVENUE NORWALK, CT 06851		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ WWW.FCCFOUNDATION.ORG	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1992	M State of legal domicile CT

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, (THE "COMMUNITY FOUNDATION") PROMOTES PHILANTHROPY AS A MEANS TO CREATE CHANGE IN FAIRFIELD COUNTY, FOCUSING ON INNOVATIVE AND COLLABORATIVE SOLUTIONS TO CRITICAL ISSUES IMPACTING THE COMMUNITY THE COMMUNITY FOUNDATION PROVIDES -- PERSONALIZED PHILANTHROPIC ADVISORY SERVICES, GRANT SERVICES, AND FINANCIAL STEWARDSHIP TO FUNDHOLDERS -- COMMUNITY LEADERSHIP AND STRATEGIC, COLLABORATIVE INITIATIVES TO ADDRESS KEY REGIONAL ISSUES, SUCH AS OLDER YOUTH, WOMEN AND GIRLS, AFFORDABLE HOUSING, ECONOMIC OPPORTUNITY, AND OTHER AREAS-- GRANTS, COUNSEL AND PROFESSIONAL DEVELOPMENT/LEADERSHIP AND OTHER TRAINING TO LOCAL NONPROFITS-- RESEARCH ON NONPROFITS AND CAUSES, DUE DILIGENCE AND CONSULTATION WITH AGENCIES, AND MONITORING AND EVALUATION OF GRANT PROGRAMS AND FOUNDATION INITIATIVES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	38
	6 Total number of volunteers (estimate if necessary)	6	150
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	8,810
	b Net unrelated business taxable income from Form 990-T, line 34	7b	4,454
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	19,995,452	14,379,340
	9 Program service revenue (Part VIII, line 2g)	44,943	83,940
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,248,052	6,407,737
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-62,189	35,206
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,226,258	20,906,223
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,538,376	13,353,458
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,566,832	2,754,984
	16a Professional fundraising fees (Part IX, column (A), line 11e)	30,900	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>▶762,488</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,967,901	2,840,570
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	19,104,009	18,949,012
	19 Revenue less expenses Subtract line 18 from line 12	13,122,249	1,957,211
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	189,251,073	175,494,767
	21 Total liabilities (Part X, line 26)	2,177,091	1,664,415
	22 Net assets or fund balances Subtract line 21 from line 20	187,073,982	173,830,352

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	*****		2016-11-15		
	Signature of officer		Date		
	JOSEPH BAKER VP, FINANCE				
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name GARRETT M HIGGINS	Preparer's signature GARRETT M HIGGINS	Date 2016-11-14	Check <input type="checkbox"/> if self-employed	PTIN P00543209
	Firm's name ▶ PKF O'CONNOR DAVIES LLP			Firm's EIN ▶ 27-1728945	
	Firm's address ▶ 500 MAMARONECK AVENUE HARRISON, NY 105281633			Phone no (914) 381-8900	

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

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1

Briefly describe the organization’s mission

THE FAIRFIELD COUNTY COMMUNITY FOUNDATION, IN PARTNERSHIP WITH FUNDHOLDERS AND DONORS, PROMOTES SMART PHILANTHROPY TO MAKE OUR COMMUNITIES HEALTHY, VIBRANT AND SUPPORTIVE TO ALL WE SERVE AS A LEADER, ADVISOR AND CATALYST FOR EFFECTIVE PHILANTHROPY, CREATE AND MANAGE CHARITABLE FUNDS AND IDENTIFY AND RESPOND TO COMMUNITY NEEDS WITH STRATEGIC GRANTMAKING, PARTNERSHIPS AND INITIATIVES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes

☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes

☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 13,242,674 including grants of \$ 13,242,674) (Revenue \$ 83,940)

GRANTS - THE ORGANIZATION AWARDED AND MADE GRANTS TO 501(C)(3)ORGANIZATIONS TO PROMOTE EDUCATION AND YOUTH DEVELOPMENT, COMMUNITY &ECONOMIC DEVELOPMENT, THE ARTS, HEALTH AND HUMAN SERVICES, THEENVIRONMENT, EMPOWER WOMEN AND GIRLS, AND NONPROFIT CAPACITY BUILDING IN FISCAL YEAR 2016, THE ORGANIZATION AWARDED 755 GRANTS FOR EDUCATIONAND YOUTH DEVELOPMENT TOTALING \$6,096,983, 481 GRANTS FOR THATS INCREASE ECONOMIC OPPORTUNITY FOR COUNTY RESIDENTS TOTALING \$4,572,352, 127 GRANTS FOR THE ARTS TOTALING \$822,929, 82 GRANTS FOR ENVIRONMENT TOTALING \$607,566, 21 GRANTS FOR WOMEN & GIRLS PROGRAMS TOTALING \$488,000, 45 GRANTS FOR NONPROFIT CAPACITY BUILDING TOTALING \$207,087 AND 94 GRANTS FOR OTHER PROGRAMS TOTALING \$447,757

4b

(Code) (Expenses \$ 1,857,078 including grants of \$ 110,784) (Revenue \$)

COMMUNITY LEADERSHIP - FCCF PROMOTES AND SUPPORTS COLLABORATIONS,PARTNERSHIPS AND INITIATIVES TO INCREASE FAMILY ECONOMIC SECURITY, HELP YOUNG PEOPLE BECOME SELF-SUFFICIENT, EMPOWER WOMEN AND GIRLS, PROTECT THE LOCAL ENVIRONMENT, AND SUPPORT THE VIBRANCY OF THE ARTS FCCF STRENGTHENS FAIRFIELD COUNTY NONPROFIT'S BY PROVIDING WORKSHOPS, TRAININGS AND TECHNICAL ASSISTANCE TO AGENCIES AND THEIR STAFF & VOLUNTEERS THROUGH THE FOUNDATION'S CENTER FOR NONPROFIT EXCELLENCE THE CENTER FOR NONPROFIT EXCELLENCE PROVIDED SERVICES TO 872 INDIVIDUALS REPRESENTING 377 NONPROFIT ORGANIZATIONS WE SPONSORED 19 PROFESSIONAL DEVELOPMENT WORKSHOPS AND 12 ROUTABLE/NETWORKING EVENTS FOR NONPROFIT STAFF AND BOARD MEMBERS WE ALSO CONDUCTED 11 EXECUTIVE LEADERSHIP COACHING SESSIONS FOR LEADERS OF HIGH IMPACT ORGANIZATIONS AND OFFERED FINANCIAL MANAGEMENT TRAINING FCCF PROVIDES GRANTS SERVICES, RESEARCH AND EVALUATION - INCLUDING BACKGROUND RESEARCH ON ALL GRANT APPLICATIONS, IDENTIFICATION OF REGIONAL TRENDS IN THE NON-PROFIT SECTOR, CONDUCTING POST-GRANT MONITORING AND EVALUATION, AND RESEARCHING INTEREST AREAS FOR OUR DONOR-ADVISED FUNDHOLDERS IN ADDITION, THE ORGANIZATION PRODUCES RESEARCH PAPERS ON TOPICS OF INTEREST TO DONORS, COMMUNITY LEADERS AND STATE & LOCAL POLICYMAKERS

4c

(Code) (Expenses \$ 702,594 including grants of \$) (Revenue \$)

FINANCIAL RESOURCE DEVELOPMENT - THE ORGANIZATION EDUCATES DONORS, AGENCIES AND THE COMMUNITY TO INCREASE LOCAL PHILANTHROPY TO PROVIDE A STRONG BASE OF SUPPORT FOR FAIRFIELD COUNTY NON-PROFIT ORGANIZATIONS NOW AND IN THE FUTURE FCCF INITIATED FC GIVES, A COMMUNITY-WIDE DAY OF GIVING THAT RAISED \$1,240,000 IN GIVING TO LOCAL CHARITIES

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 15,802,346

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance	
Check if Schedule O contains a response or note to any line in this Part V <input type="checkbox"/>	
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 29
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 38
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a Yes
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b
7 Organizations that may receive deductible contributions under section 170(c).	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8 No
9a Did the sponsoring organization make any taxable distributions under section 4966?	9a No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b No
10 Section 501(c)(7) organizations. Enter	
a Initiation fees and capital contributions included on Part VIII, line 12	10a
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b
11 Section 501(c)(12) organizations. Enter	
a Gross income from members or shareholders	11a
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b
c Enter the amount of reserves on hand	13c
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	27	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	27	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CT
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records JOSEPH BAKER VP OF FINANCE C/O 383 MAIN AVENUE NORWALK, CT 068511543 (203) 750-3200	

Check if Schedule O contains a response or note to any line in this Part VII ☐

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 6			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 5	
---	--

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	441,739			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	13,937,601			
	g	Noncash contributions included in lines 1a-1f \$		945,764			
	h	Total. Add lines 1a-1f ▶		14,379,340			
Program Service Revenue	2a	WORKSHOP INCOME AND SYMPOSIUM FEE	Business Code 900099	83,940	83,940		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f ▶		83,940			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		1,730,322		-2,587
4		Income from investment of tax-exempt bond proceeds . . ▶					
5		Royalties ▶					
6a		Gross rents	(i) Real 6,522	(ii) Personal			
b		Less rental expenses	0				
c		Rental income or (loss)	6,522				
d		Net rental income or (loss) ▶		6,522			6,522
7a		Gross amount from sales of assets other than inventory	(i) Securities 27,845,895	(ii) Other			
b		Less cost or other basis and sales expenses	23,168,480				
c		Gain or (loss)	4,677,415				
d		Net gain or (loss) ▶		4,677,415		11,397	4,666,018
8a		Gross income from fundraising events (not including \$ 441,739 of contributions reported on line 1c) See Part IV, line 18 . . .					
a			173,198				
b		Less direct expenses	b	144,914			
c		Net income or (loss) from fundraising events . . ▶		28,284			28,284
9a		Gross income from gaming activities See Part IV, line 19					
a							
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . . . ▶					
10a		Gross sales of inventory, less returns and allowances . . .					
a							
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code					
11a	OTHER INCOME	900099	400			400	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		400				
12	Total revenue. See Instructions ▶		20,906,223	83,940	8,810	6,434,133	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	12,628,898	12,628,898		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	724,560	724,560		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	421,088	188,886	181,853	50,349
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	1,914,254	1,128,919	430,586	354,749
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	92,899	54,848	20,806	17,245
9	Other employee benefits.	160,434	97,715	32,044	30,675
10	Payroll taxes.	166,309	94,464	42,741	29,104
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	71,850		71,850	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	1,240,791		1,240,791	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	459,666	289,714	130,843	39,109
12	Advertising and promotion.	60,503	34,275	3,255	22,973
13	Office expenses.	120,525	74,737	28,243	17,545
14	Information technology.	169,576	96,319	43,581	29,676
15	Royalties.				
16	Occupancy.	378,033	214,723	97,154	66,156
17	Travel.	12,895	7,324	3,314	2,257
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	141,080	80,133	36,258	24,689
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	4,135	2,348	1,063	724
23	Insurance.	10,907	2,052	8,223	632
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	EVENT EXPENSE	126,151	57,020	242	68,889
b	PROGRAM INITIATIVE EXPE	21,692	12,321	5,575	3,796
c	MISCELLANEOUS	15,965	9,068	4,103	2,794
d	REPAIRS & MAINTENANCE	6,801	4,022	1,653	1,126
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	18,949,012	15,802,346	2,384,178	762,488
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			241,121	1	383,747
	2	Savings and temporary cash investments			6,377,546	2	10,930,675
	3	Pledges and grants receivable, net			2,173,872	3	63,887
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			146,670	9	163,409
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	123,070			
	b	Less: accumulated depreciation	10b	110,562	9,743	10c	12,508
	11	Investments—publicly traded securities			65,627,560	11	59,231,040
	12	Investments—other securities. See Part IV, line 11			114,582,872	12	104,677,339
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			91,689	15	32,162
	16	Total assets. Add lines 1 through 15 (must equal line 34)			189,251,073	16	175,494,767
Liabilities	17	Accounts payable and accrued expenses			170,594	17	333,641
	18	Grants payable			1,901,777	18	1,252,545
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D			104,720	25	78,229
	26	Total liabilities. Add lines 17 through 25			2,177,091	26	1,664,415
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			5,043,820	27	3,715,448
	28	Temporarily restricted net assets			182,030,162	28	170,114,904
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			187,073,982	33	173,830,352
	34	Total liabilities and net assets/fund balances			189,251,073	34	175,494,767

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,906,223
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,949,012
3	Revenue less expenses Subtract line 2 from line 1	3	1,957,211
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	187,073,982
5	Net unrealized gains (losses) on investments	5	-15,244,425
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	43,584
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	173,830,352

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		No
	Separate basis Consolidated basis Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	Yes	
	Separate basis Consolidated basis Both consolidated and separate basis		
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 06-1083893
Name: FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
VICKI CRAVER BOARD VICE CHAIR	3 00	X		X				0	0	0
GREG HARTCH BOARD TREASURER	4 00	X		X				0	0	0
KATHARINE WELLING BOARD SECRETARY	2 00	X		X				0	0	0
LIZANNE MEGRUE BOARD CHAIR	4 00	X		X				0	0	0
JOHN BAILEY BOARD MEMBER	3 00	X						0	0	0
MAXWELL BONNIE BOARD MEMBER	2 00	X						0	0	0
BRIGGS L TOBIN BOARD MEMBER	1 00	X						0	0	0
ANNIE BURLEIGH BOARD MEMBER	3 00	X						0	0	0
BRANDON L CARDWELL BOARD MEMBER	2 00	X						0	0	0
ABELARDO S CURDUMI BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
AMY DOWNER BOARD MEMBER	3 00	X						0	0	0
BOB EYDT BOARD MEMBER	3 00	X						0	0	0
CLAYTON H FOWLER BOARD MEMBER	2 00	X						0	0	0
BRUNCE WINNINGHAM BOARD MEMBER	2 00	X						0	0	0
JOHN FREEMAN BOARD MEMBER	0 50	X						0	0	0
MITCHELLE KAY GARVEY BOARD MEMBER	2 00	X						0	0	0
STEVEN GOLDSTEIN BOARD MEMBER	2 00	X						0	0	0
DAVID L LEVINSON PHD BOARD MEMBER	2 00	X						0	0	0
GERALD M FOX BOARD MEMBER	1 00	X						0	0	0
DON KENDALL JR BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MAYA LOUISE TICHIO BOARD MEMBER	2 00	X						0	0	
JACQUELINE MILLAN BOARD MEMBER	3 00	X						0	0	
JONATHAN MOFFLY BOARD MEMBER	2 00	X						0	0	
ELISABETH MORTEN BOARD MEMBER	2 00	X						0	0	
MARTHA OLSON BOARD MEMBER	3 00	X						0	0	
M SUZETTE RECINOS BOARD MEMBER	1 00	X						0	0	
EILEEN SWERDLICK BOARD MEMBER	3 00	X						0	0	
STEVEN WOLFF BOARD MEMBER THRU JULY 2015	2 00	X						0	0	
JUANITA JAMES PRESIDENT AND CEO	55 00			X				264,392	0	22,156
JOSEPH BAKER VP, FINANCE AND ADMINISTRATION	55 00			X				121,851	0	16,893

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FIONA HODGSON VP, DEVELOPMENT & MARKETING	55 00					X		201,253	0	11,210
KAREN BROWN VP, INNOVATION & STRATEGIC	55 00					X		162,592	0	21,543
SUZANNE PETERS VP, FUND FOR WOMEN & GIRLS	55 00					X		113,278	0	20,103
NANCY VON EULER PROG DIRECTOR FOR HHS & EO	55 00					X		108,899	0	6,238

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8

☒

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See**section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	17,403,480	11,909,531	14,619,662	19,995,952	14,379,340	78,307,965
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	17,403,480	11,909,531	14,619,662	19,995,952	14,379,340	78,307,965
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,109,174
6 Public support. Subtract line 5 from line 4						69,198,791

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015		(f)Total
7 Amounts from line 4	17,403,480	11,909,531	14,619,662	19,995,952	14,379,340		78,307,965
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,298,897	2,555,771	2,410,204	1,675,240	1,736,844		10,676,956
9 Net income from unrelated business activities, whether or not the business is regularly carried on		4,091	2,663	9,008			15,762
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	40,315	20,151	22,580	309	400		83,755
11 Total support. Add lines 7 through 10							89,084,438
12 Gross receipts from related activities, etc (see instructions)					12	373,476	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>							

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	77.680 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	64.030 %
16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 <u>Activities Test</u> Answer (a) and (b) below.	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2011 AMOUNT \$ 40,315 2012 AMOUNT \$ 20,151 2013 AMOUNT \$ 22,580 2014 AMOUNT \$ 309 2015 AMOUNT \$ 400

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION	Employer identification number 06-1083893
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	\$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	1,283													
c	Total lobbying expenditures (add lines 1a and 1b)	1,283													
d	Other exempt purpose expenditures	18,185,241													
e	Total exempt purpose expenditures (add lines 1c and 1d)	18,186,524													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes

☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(e) Total
2a Lobbying nontaxable amount	1,000,000	942,367	1,000,000	1,000,000	3,942,367
b Lobbying ceiling amount (150% of line 2a, column(e))					5,913,551
c Total lobbying expenditures				1,283	1,283
d Grassroots nontaxable amount	250,000	235,592	250,000	250,000	985,592
e Grassroots ceiling amount (150% of line 2d, column (e))					1,478,388
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)	(b)	
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
FORM 990, SCHEDULE C, PART II-A	THE FOUNDATION HAS MADE AN ELECTION UNDER 501(H) DURING FISCAL YEAR 2016 THE FOUNDATION EXPENDED \$1,283 ON DIRECT LOBBYING EFFORTS DIRECTED THROUGH THE "FOUNDATIONS ON THE HILL" CONFERENCE

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	195	
2 Aggregate value of contributions to (during year)	9,012,136	
3 Aggregate value of grants from (during year)	7,345,205	
4 Aggregate value at end of year	68,797,680	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Protection of natural habitat

☐ Preservation of open space

☐ Preservation of an historically important land area

☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2015

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

(continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

Amount

1c

1d

1e

1f

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	185,287,196	177,956,551	155,723,154	146,321,147	151,341,376
b Contributions	12,496,533	16,185,159	13,267,475	10,890,596	17,326,533
c Net investment earnings, gains, and losses	-8,984,946	5,133,848	22,593,760	19,137,911	-3,188,253
d Grants or scholarships	13,353,458	13,538,376	11,441,996	18,562,518	16,652,521
e Other expenditures for facilities and programs					
f Administrative expenses	4,272,956	449,986	2,185,842	2,063,982	2,505,988
g End of year balance	171,172,369	185,287,196	177,956,551	155,723,154	146,321,147

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶ 0 130 %

b

Permanent endowment ▶ 0 %

c

Temporarily restricted endowment ▶ 99 870 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

3a(i)

Yes

No

3a(ii)

No

3b

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

☐

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a)Cost or other basis (investment)	(b)Cost or other basis (other)	(c)Accumulated depreciation	(d)Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		123,070	110,562	12,508
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				12,508

Schedule D (Form 990) 2015

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) LIMITED TRUST PARTNERSHIPS	76,994,339	F
(B) SILCHESTER INTERNATIONAL VALUE	19,102,733	F
(C) DISCOVERY GLOBAL OPPORTUNITIES	8,580,267	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	104,677,339	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
LIABILITY UNDER SPLIT-INTEREST AGREEMENTS	3,286
DEFERRED RENT	74,943
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	78,229

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	5,173,651
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains (losses) on investments	2a	-15,244,425
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	764,644
e	Add lines 2a through 2d	2e	-14,479,781
3	Subtract line 2e from line 1	3	19,653,432
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,240,791
b	Other (Describe in Part XIII)	4b	12,000
c	Add lines 4a and 4b	4c	1,252,791
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	20,906,223

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	17,443,805
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	144,913
e	Add lines 2a through 2d	2e	144,913
3	Subtract line 2e from line 1	3	17,298,892
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,240,791
b	Other (Describe in Part XIII)	4b	409,329
c	Add lines 4a and 4b	4c	1,650,120
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	18,949,012

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART V, LINE 4	THE COMMUNITY FOUNDATION'S ENDOWMENT CONSISTS OF 579 INDIVIDUAL FUNDS ESTABLISHED BY HUNDREDS OF DONORS TO PROVIDE GRANTS, SCHOLARSHIPS AND OTHER SERVICES TO IMPROVE THE QUALITY OF LIFE IN FAIRFIELD COUNTY AND BEYOND. THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED FUNDS AND BOARD-DESIGNATED FUNDS THAT FUNCTION AS ENDOWMENTS. THE COMMUNITY FOUNDATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT SEEK TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO ORGANIZATIONS AND PROGRAMS SUPPORTED BY ITS ENDOWMENT, WHILE MAINTAINING THE PURCHASING POWER OF THE ENDOWMENT ASSETS TO SATISFY ITS LONG-TERM RATE-OF-RETURN OBJECTIVES. THE COMMUNITY FOUNDATION RELIES ON A TOTAL RETURN STRATEGY IN WHICH INVESTMENT RETURNS ARE ACHIEVED THROUGH BOTH CAPITAL APPRECIATION (REALIZED AND UNREALIZED) AND CURRENT YIELD (INTEREST & DIVIDENDS). THE COMMUNITY FOUNDATION TARGETS A DIVERSIFIED ASSET ALLOCATION THAT PLACES A GREATER EMPHASIS ON EQUITY-BASED INVESTMENTS TO ACHIEVE ITS LONG-TERM RETURN OBJECTIVES WITHIN PRUDENT RISK CONSTRAINTS. THE INVESTMENT COMMITTEE FOCUSES ON ASSET ALLOCATION AMONG EQUITY, DEBT, AND OTHER INVESTMENT OPPORTUNITIES THAT BALANCE GROWTH, INCOME AND LIQUIDITY. THE INVESTMENT COMMITTEE SEEKS A RETURN IN LINE WITH THE COMMUNITY FOUNDATION'S SPENDING POLICY AS IT RELATES TO LONG-TERM GRANTMAKING GOALS THAT ARE BASED UPON CURRENT AND CHANGING CHARITABLE NEEDS IN THE COMMUNITY. THE SPENDING POLICY SEEKS TO PRESERVE AND BUILD THE FUNDS ENTRUSTED TO THE COMMUNITY FOUNDATION ON A REAL DOLLAR BASIS AND TO MAINTAIN GRANT LEVELS IN PERIODS OF DOWN MARKETS. THE SPENDING POLICY APPLIES TO ALL DISCRETIONARY, DONOR-DESIGNATED, FIELD OF INTEREST, SCHOLARSHIP AND OTHER FUNDS, UNLESS THE DONOR HAS CLEARLY EXPRESSED A DIFFERENT INTENT. ADHERENCE TO THE SPENDING POLICY IS OPTIONAL FOR CERTAIN DONOR ADVISED FUNDS.

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES REPORTED ON PART VIII, LINE 8B 144,913 AGENCY FUNDS-EARNING 531,978 AGENCY FUNDS-OTHER EXPENSES 87,193 CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 560
PART XI, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUNDS-CONTRIBUTIONS 12,000
PART XII, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES REPORTED ON PART VIII, LINE 8B 144,913
PART XII, LINE 4B - OTHER ADJUSTMENTS	AGENCY FUNDS-GRANTS MADE 366,305 FORFEITED SCHOLARSHIPS 43,024

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I

General Information on Activities Outside the United States.
Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		57,485,873
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			57,485,873
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			57,485,873

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)*

☐ Yes ☒ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, LINE 1	THE ORGANIZATION IS REQUIRED TO FILE FORM 926 BECAUSE IT MEETS THE APPLICABLE FILING THRESHOLD REQUIREMENT

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, LINE 3	THE ORGANIZATION IS NOT REQUIRED TO FILE FORMS 5471 OR FORM 8621 BECAUSE IT DOES NOT MEET THE APPLICABLE THRESHOLD OWNERSHIP OR OTHER FILING REQUIREMENTS

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, LINE 5	THE ORGANIZATION IS REQUIRED TO FILE FORM 8865 BECAUSE IT MEETS THE APPLICABLE FILING THRESHOLD REQUIREMENT

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I Fundraising Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☐ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a)Event #1 FUN FOR WOMEN AND GIRLS (event type)	(b)Event #2 MARY'S GOLF (event type)	(c)Other events 1 (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	446,827	121,185	46,925	614,937
	2 Less Contributions	394,825	32,939	13,975	441,739
	3 Gross income (line 1 minus line 2)	52,002	88,246	32,950	173,198
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	43,775	12,400	11,358	67,533
	8 Entertainment	44,844	9,312		54,156
	9 Other direct expenses	23,030	195		23,225
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				144,914
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				28,284

Part III Gaming.

Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ **Yes** ☐ **No**

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ **Yes** ☐ **No**

13

Indicate the percentage of gaming activity conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ **Yes** ☐ **No**

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c

If "Yes," enter name and address of the third party

Name ▶

Address ▶

16

Gaming manager information

Name ▶

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ **Yes** ☐ **No**

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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2015

Open to Public Inspection

06-1083893

☒ Yes ☐ No

(h) Purpose of grant or assistance

Schedule I (Form 990) 2015

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS TO RESIDENTS OF FAIRFIELD COUNTY FOR POST-SECONDARY EDUCATION IN A 2 OR 4 YEAR ACCREDITED INSTITUTION	143	724,560			

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	ORGANIZATIONS THAT ARE AWARDED COMPETITIVE GRANTS BY FCCF MUST SUBMIT SEMI-ANNUAL REPORTING OF EXPENDITURES INCURRED FOR THEIR PROGRAMS OR ORGANIZATIONS FOR WHICH THE GRANT WAS RECEIVED, AS WELL AS COMPLETE A DETAILED GRANTEE REPORT THAT INCLUDES THE EXPENSES AND NARRATIVE PER THE GRANT AGREEMENT FOUNDATION STAFF ALSO COMPLETE SITE VISITS TO MANY ORGANIZATIONS WHICH RECEIVE FOUNDATION GRANTS THE FOUNDATION WILL ALSO MONITOR THE MANAGEMENT OF GRANT FUNDS FOR SELECTED SIGNIFICANT GRANTS MADE FROM DONOR ADVISED FUNDS THE FOUNDATION AWARDS SCHOLARSHIPS TO STUDENTS ATTENDING ELIGIBLE EDUCATIONAL INSTITUTIONS TYPICALLY, THE FOUNDATION ISSUES THE CHECK DIRECTLY TO THE SCHOOL IN ORDER TO ENSURE THAT THE CHECK IS USED FOR QUALIFIED EDUCATION-RELATED EXPENSES HOWEVER, INFREQUENTLY, THE FOUNDATION ISSUES A CHECK DIRECTLY TO THE STUDENT THE FOUNDATION REQUIRES THE INDIVIDUAL TO SIGN A W-9 FORM AND AN ATTESTATION FORM IN AGREEMENT/UNDERSTANDING THAT THE SCHOLARSHIP AWARD IS STRICTLY FOR TUITION AND EDUCATION RELATED EXPENSES

Additional Data

Software ID:
Software Version:
EIN: 06-1083893
Name: FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABCD INC 1070 PARK AVENUE BRIDGEPORT, CT 06604	06-0797841	501(C)(3)	22,363				FOR GENERAL SUPPORT
ACADEMY FOR TEACHERS 10 WEST 90TH ST NEW YORK, NY 10024	45-4681404	501(C)(3)	5,000				FOR GENERAL SUPPORT
ACHIEVEMENT FIRST 403 JAMES STREET NEW HAVEN, CT 06513	65-1203744	501(C)(3)	222,228				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ALS ASSOCIATION - CT CHAPTER 4 OXFORD ROAD UNIT E-4 MILFORD, CT 06460	04-3417472	501(C)(3)	5,000				FOR FUNDING OF THE WALK EVENT
ALS WORLDWIDE 5808 DAWLEY DRIVE FITCHBURG, WI 53711	26-3632267	501(C)(3)	10,000				FOR GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION 225 NORTH MICHIGAN AVENUE 17TH FLOOR CHICAGO, IL 60601	13-3039601	501(C)(3)	5,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMERICAN CANCER SOCIETY SOUTHERN NEW ENGLAND REGION 38 RICHARDS AVENUE NORWALK, CT 06854	13-1788491	501(C)(3)	46,664				FOR GENERAL SUPPORT
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	13-6162659	501(C)(3)	12,000				FOR GENERAL SUPPORT
AMERICARES FOUNDATION INC 88 HAMILTON AVENUE STAMFORD, CT 06902	06-1008595	501(C)(3)	231,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDREW SHAW MEMORIAL TRUST AND SCOUT CABIN PO BOX 2315 DARIEN, CT 06820	06-6444446	501(C)(3)	6,027				FOR GENERAL SUPPORT
ANN'S PLACE INC 80 SAW MILL ROAD DANBURY, CT 06810	22-3181832	501(C)(3)	18,230				FOR GENERAL SUPPORT
ARCHIPELAGO INC PO BOX 112016 STAMFORD, CT 06902	20-3800166	501(C)(3)	23,020				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ARI OF CONNECTICUT INC 174 RICHMOND HILL AVENUE STAMFORD, CT 06902	06-0712017	501(C)(3)	11,500				FOR GENERAL SUPPORT
ARTS FOR HEALING 24 GROVE STREET NEW CANAAN, CT 06840	06-1595505	501(C)(3)	5,000				FOR GENERAL SUPPORT
AT HOME IN DARIEN INC 2 RENSHAW ROAD DARIEN, CT 06820	27-2250386	501(C)(3)	15,500				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ATLANTIC SALMON FEDERATION PO BOX 807 CALAIS, ME 04619	13-2618801	501(C)(3)	7,500				FOR GENERAL SUPPORT
AUDUBON CONNECTICUT 613 RIVERSVILLE ROAD GREENWICH, CT 06831	13-1624102	501(C)(3)	59,000				FOR GENERAL SUPPORT
BACKCOUNTRY JAZZ 15 EAST PUTNAM AVENUE 397 GREENWICH, CT 06830	20-8523846	501(C)(3)	20,500				FOR MUSIC EDUCATION INITIATIVE, BRIDGEPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BALLET SCHOOL OF STAMFORD INC 175 ATLANTIC STREET STAMFORD, CT 06901	06-1517402	501(C)(3)	20,000				FOR GENERAL SUPPORT
BARTLETT ARBORETUM AND GARDENS 151 BROOKDALE ROAD STAMFORD, CT 06903	06-6079591	501(C)(3)	10,000				FOR GENERAL SUPPORT
BECKET ATHENAEUM 3367 MAIN STREET BECKET, MA 01223	04-3458519	501(C)(3)	8,000				FOR SUMMER 2016 CAMP SCHOLARSHIP FUNDING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BEST BUDDIES CONNECTICUT ONE LONG WHARF DRIVE 302 NEW HAVEN, CT 06511	52-1614576	501(C)(3)	15,000				FOR FAIRFIELD COUNTY MIDDLE AND HIGH SCHOOL PROJECT
BIBLIO CHARITABLE WORKS INC 78 1/2 PATTON AVENUE ASHEVILLE, NC 28801	20-3349067	501(C)(3)	12,800				FOR GENERAL SUPPORT
BLOSSOM HILL FOUNDATION 33 SOUNDVIEW LANE NEW CANAAN, CT 06840	26-4094865	501(C)(3)	11,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOTTOM LINE - NEW YORK 44 COURT STREET STE 300 BROOKLYN, NY 11201	04-3351427	501(C)(3)	8,100				FOR GENERAL SUPPORT
BOY SCOUTS OF AMERICA CONNECTICUT YANKEE COUNCIL 60 WELLINGTON ROAD MILFORD, CT 06460	06-0646793	501(C)(3)	15,000				FOR GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREENWICH 4 HORSENECK LANE GREENWICH, CT 06830	06-0646655	501(C)(3)	35,000				FOR THE ANNUAL APPEAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS AND GIRLS CLUB OF HAWAII 345 QUEEN STREET SUITE 900 HONOLULU, HI 96813	99-6005407	501(C)(3)	27,500				FOR GENERAL SUPPORT
BRADY CENTER TO PREVENT GUN VIOLENCE 840 FIRST STREET NE SUITE 400 WASHINGTON, DC 20002	52-1285097	501(C)(3)	10,500				FOR GENERAL SUPPORT
BRAVO VAIL MUSIC FESTIVAL 2271 N FRONTAGE RD W SUITE C VAIL, CO 81657	84-1389134	501(C)(3)	5,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BREAST CANCER ALLIANCE 48 MAPLE AVENUE GREENWICH, CT 06830	06-1453500	501(C)(3)	28,200				FOR MEDICAL RESEARCH AND EDUCATION
BRIDGEPORT CARIBE YOUTH LEAGUE 1067 PARK AVENUE BRIDGEPORT, CT 06604	20-0421577	501(C)(3)	20,000				FOR YOUTH ATHLETIC AND ENRICHMENT PROGRAM
BRIDGEPORT CHILD ADVOCACY COALITION 2470 FAIRFIELD AVE C/O BURROUGHS CC BRIDGEPORT, CT 06605	55-0823238	501(C)(3)	113,544				FOR GENERAL SUPPORT

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BRIDGEPORT HOSPITAL FOUNDATION 267 GRANT ST BRIDGEPORT, CT 06610	22-2908698	501(C)(3)	88,900				FOR YOUTH ATHLETIC AND ENRICHMENT PROGRAM
BRIDGEPORT NEIGHBORHOOD TRUST INC 570 STATE STREET BRIDGEPORT, CT 06604	22-2809353	501(C)(3)	33,500				FOR GENERAL SUPPORT
BRIDGEPORT PUBLIC EDUCATION FUND 446 UNIVERSITY AVENUE BRIDGEPORT, CT 06604	06-1379383	501(C)(3)	13,741				FOR GENERAL SUPPORT

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BRIDGEPORT PUBLIC SCHOOLS 45 LYON TERRACE BRIDGEPORT, CT 06604	06-6001865	501(C)(3)	9,400				FOR GENERAL SUPPORT
BRIDGEPORT REGIONAL BUSINESS COUNCIL 10 MIDDLE STREET BRIDGEPORT, CT 06601	06-0271980	501(C)(3)	15,000				FOR CREATIVE PLACEMAKING AT HISTORIC MCLEVY GREEN
BRIDGEPORT RESCUE MISSION 1088 FAIRFIELD AVENUE BRIDGEPORT, CT 06605	06-1362705	501(C)(3)	11,500				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BUSINESS COUNCIL OF FAIRFIELD COUNTY ONE LANDMARK SQUARE SUITE 300 STAMFORD, CT 06901	06-0986055	501(C)(3)	30,000				FOR GENERAL SUPPORT
CAMP TLCJOEY DIPAOLO AIDS FOUNDATION 812 N MARTELL AVENUE APT 1 LOS ANGELES, CA 90046	22-3453810	501(C)(3)	25,000				FOR GENERAL SUPPORT
CAPE ELEUTHERA FOUNDATION 89 SOUTH STREET STE 203 BOSTON, MA 02111	31-1591503	501(C)(3)	5,500				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CARAMOOR CENTER FOR MUSIC AND THE ARTS 149 GIRDLE RIDGE ROAD BOX 816 KATONAH, NY 10536	13-5643627	501(C)(3)	5,000				FOR GENERAL SUPPORT
CARDINAL SHEHAN CENTER 1494 MAIN STREET BRIDGEPORT, CT 06604	06-1101081	501(C)(3)	5,846				FOR GENERAL SUPPORT
CAROLINE HOUSE 574 STILLMAN STREET BRIDGEPORT, CT 06608	06-1455101	501(C)(3)	12,000				FOR SUPPORT THE MOTHER & CHILD LITERACY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CARVER FOUNDATION 7 ACADEMY STREET NORWALK, CT 06850	06-0862072	501(C)(3)	49,000				FOR FRESHMAN SUMMER SUCCESS ACADEMY AND YOUTH DEVELOPMENT
CATHOLIC CHARITIES OF FAIRFIELD COUNTY 238 JEWETT AVENUE BRIDGEPORT, CT 06606	06-0653053	501(C)(3)	17,000				FOR GENERAL SUPPORT
CAYUGA MEDICAL CENTER FOUNDATION 101 DATES DRIVE ITHACA, NY 14850	16-1072414	501(C)(3)	10,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CENTER FOR CHILDREN'S ADVOCACY INC 65 ELIZABETH STREET HARTFORD, CT 06105	06-1489575	501(C)(3)	15,000				FOR GENERAL SUPPORT
CENTER FOR REPRODUCTIVE RIGHTS 120 WALL STREET 14TH FLOOR NEW YORK, NY 10005	13-3669731	501(C)(3)	20,000				FOR GENERAL SUPPORT
CF LEADS 1055 BROADWAY SUITE 130 KANSAS CITY, MO 64105	43-1645180	501(C)(3)	5,000				FOR 2016 MEMBERSHIP CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHARITY WATER 40 WORTH STREET STE 330 NEW YORK, NY 10013	22-3936753	501(C)(3)	6,500				FOR INSTALLATION OF CLEAN WATER SYSTEM IN CAMBODIA
CHARTER OAK CULTURAL CENTER 21 CHARTER OAK AVENUE HARTFORD, CT 06106	06-1026597	501(C)(3)	22,000				FOR GENERAL SUPPORT
CHELSEA PIERS SCHOLARSHIP FUND PIER 62 THE FIELD HOUSE NEW YORK, CT 10011	13-3998842	501(C)(3)	7,500				FOR AUGUST 2016 GIRLS LEADERSHIP CAMP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILD ADVOCATES OF CONNECTICUT 383 MAIN AVENUE SUITE 409 NORWALK, CT 06851	27-2518861	501(C)(3)	15,000				FOR GENERAL SUPPORT
CHILD GUIDANCE CENTER OF SOUTHERN CT INC 196 GREYROCK PLACE STAMFORD, CT 06951	06-0712058	501(C)(3)	115,750				FOR SUPPORT THE CHILD & FAMILY THERAPY PROGRAM
CHILD HEALTH AND DEVELOPMENT INSTITUTE OF CT 270 FARMINGTON AVENUE SUITE 367 FARMINGTON, CT 06032	06-1504725	501(C)(3)	9,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILDCARE LEARNING CENTERS INC 64 PALMERS HILL ROAD STAMFORD, CT 06902	06-0665191	501(C)(3)	130,706				FOR SUPPORT THE VITA CO-EDUCATORS
CHILDREN'S RESCUE MISSION 3 PAPP STREET NORWALK, CT 06854	06-1532209	501(C)(3)	6,000				FOR GENERAL SUPPORT
CHRIST CHURCH GREENWICH 254 E PUTNAM AVENUE GREENWICH, CT 06830	06-0653266	501(C)(3)	10,000				FOR THE CAPITAL CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CICATRICIAL ALOPECIA RESEARCH FDN 303 WEST STATE STREET GENEVA, IL 60134	20-2049037	501(C)(3)	5,000				FOR GENERAL SUPPORT
CITY LAX INC 65 WEST 89TH STREET NEW YORK, NY 10024	20-4531166	501(C)(3)	5,000				FOR GENERAL SUPPORT
CITY LIGHTS AND COMPANY 37 MARKLE COURT BRIDGEPORT, CT 06604	20-5462244	501(C)(3)	15,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF NORWALK 125 EAST AVENUE NORWALK, CT 06851	06-6011881	501(C)(3)	30,000				FOR MAYOR'S SUMMER YOUTH EMPLOYMENT PROGRAM
CITY SQUASH INC PO BOX 619 FORDHAM STATION BRONX, NY 10458	42-1535583	501(C)(3)	60,100				FOR GENERAL SUPPORT
CITYCENTER DANBURY 186 MAIN STREET DANBURY, CT 06810	06-1033623	501(C)(4)	34,000				FOR THE DANBURY FARMERS MARKET COLLABORATIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COLGATE UNIVERSITY 13 OAK DRIVE ATTN FINANCIAL AID OFFICE HAMILTON, NY 13346	15-0532078	501(C)(3)	5,000				FOR GENERAL SUPPORT
COLLEGE SUMMIT INC 1763 COLUMBIA ROAD NW 2ND FL WASHINGTON, DC 20009	52-2007028	501(C)(3)	10,000				FOR GENERAL SUPPORT
COLONIAL WILLIAMSBURG FOUNDATION FUND POST OFFICE BOX 1776 WILLIAMSBURG, VA 23187	54-0505888	501(C)(3)	5,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COMMUNITY CENTERS INC 61 EAST PUTNAM AVENUE GREENWICH, CT 06830	06-0703570	501(C)(3)	10,000				FOR GENERAL SUPPORT
COMMUNITY FOUNDATION OF GREATER CHATTANOOGA 1270 MARKET ST CHATTANOOGA, TN 37402	62-6045999	501(C)(3)	10,000				FOR GENERAL SUPPORT
COMMUNITY FUND OF DARIEN 701 POST ROAD PO BOX 926 DARIEN, CT 06820	06-0737286	501(C)(3)	51,000				FOR GENERAL SUPPORT

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COMPREHENSIVE DEVELOPMENT INC 240 SECOND AVENUE NEW YORK, NY 10003	13-3861648	501(C)(3)	5,000				FOR GENERAL SUPPORT
CONGREGATION B'NAI ISRAEL 2710 PARK AVENUE BRIDGEPORT, CT 06604	06-0653159	501(C)(3)	7,575				FOR GENERAL SUPPORT
CONNECTICUT ASSOCIATION FOR HUMAN SERVICES 110 BARTHOLOMEW AVENUE SUITE 4030 HARTFORD, CT 06105	06-0653158	501(C)(3)	20,000				FOR VOLUNTEER INCOME TAX PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CONNECTICUT AUDUBON SOCIETY STATE HEADQUARTERS 314 UNQUOWA ROAD FAIRFIELD,CT 06824	06-0653531	501(C)(3)	10,000				FOR THE SMITH RICHARDSON PRESERVE CLEAN UP PROJECT
CONNECTICUT BALLET 20 ACOSTA STREET STAMFORD,CT 06902	06-1039302	501(C)(3)	5,000				FOR DANCE EDUCATION PROGRAMS
CONNECTICUT BEARDSLEY ZOO 1875 NOBLE AVENUE BRIDGEPORT,CT 06610	23-7068821	501(C)(3)	15,245				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT CENTER FOR SCHOOL CHANGE 151 NEW PARK AVENUE SUITE 203 HARTFORD, CT 06106	06-1525201	501(C)(3)	20,000				FOR LEADERSHIP FOR THE BRIDGEPORT PUBLIC SCHOOLS
CONNECTICUT COALITION FOR ACHIEVEMENT NOW (CONNCAN) 85 WILLOW STREET SUITE 4 NEW HAVEN, CT 06511	20-1612161	501(C)(3)	150,500				FOR GENERAL SUPPORT
CONNECTICUT COALITION TO END HOMELESSNESS 257 LAWRENCE STREET HARTFORD, CT 06106	06-1126880	501(C)(3)	20,000				FOR CT STATEWIDE HOMELESS YOUTH COUNT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CONNECTICUT COUNCIL FOR PHILANTHROPY 221 MAIN STREET HARTFORD, CT 06106	23-7024016	501(C)(3)	19,084				FOR ANNUAL MEMBERSHIP DUES
CONNECTICUT FOOD BANK INC 2 RESEARCH PARKWAY WALLINGFORD, CT 06492	06-1063025	501(C)(3)	13,500				FOR THE BACKPACK PROGRAM
CONNECTICUT FUND FOR THE ENVIRONMENT 900 CHAPEL STREET SUITE 2202 NEW HAVEN, CT 06510	06-0990195	501(C)(3)	166,750				FOR CFE/SAVE THE SOUND'S GREEN INFRASTRUCTURE CONSULTANCY

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CONNECTICUT IMMIGRANT RIGHTS ALLIANCE 169 GRAND AVENUE NEW HAVEN, CT 06513	23-7066862	501(C)(3)	10,000				FOR COMMUNITY OUTREACH TO DACA AND DAPA CT RESIDENTS
CONNECTICUT LEGAL SERVICES 62 WASHINGTON STREET MIDDLETOWN, CT 06457	06-0955461	501(C)(3)	40,000				FOR SUPPORTING WORK WITH PT PARTNERS AND PT BARNUM RESIDENTS
CONNECTICUT MIRROR 36 RUSS STREET HARTFORD, CT 06106	27-0583046	501(C)(3)	9,500				FOR GENERAL SUPPORT

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CONNECTICUT VOICES FOR CHILDREN 33 WHITNEY AVENUE NEW HAVEN, CT 06510	06-1435280	501(C)(3)	25,000				FOR GENERAL OPERATING SUPPORT
CORPORATION FOR SUPPORTIVE HOUSING 77 BUCKINGHAM STREET HARTFORD, CT 06106	13-3600232	501(C)(3)	25,000				FOR SOCIAL INNOVATION FUND PILOT IN FAIRFIELD COUNTY
COS COB VOLUNTEER FIRE DEPARTMENT 200 POST ROAD COS COB, CT 06807	06-6064017	501(C)(3)	27,998				FOR GENERAL SUPPORT

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COUNCIL OF CHURCHES OF GREATER BRIDGEPORT INC 1100 BOSTON AVENUE BUILDING 5A BRIDGEPORT, CT 06610	06-0647008	501(C)(3)	38,965				FOR GENERAL SUPPORT
CREATIVE YOUTH PRODUCTIONS INC 53 DAVIS AVENUE 1ST FLOOR BRIDGEPORT, CT 06605	45-3539007	501(C)(3)	35,000				FOR YOUTH LEADERSHIP THROUGH THE ARTS
CT CENTER FOR PATIENT SAFETY 857 POST ROAD 220 FAIRFIELD, CT 06824	20-1517678	501(C)(3)	10,000				FOR GENERAL SUPPORT

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CULTURAL ALLIANCE OF WESTERN CONNECTICUT 287 MAIN STREET DANBURY, CT 00610	26-0811232	501(C)(3)	10,000				FOR ACCESSIBLE ART PROJECT
CURTAIN CALL 1349 NEWFIELD AVENUE STAMFORD, CT 06905	06-1343144	501(C)(3)	26,000				FOR GIVING DAY PRIZES
DANBURY SCHOOL AND BUSINES COLLABORATIVE 63 BEAVER BROOK ROAD DANBURY PUBLIC SCHOOLS DANBURY, CT 06810	06-1590417	501(C)(3)	5,000				FOR WORKPLACE LEARNING E-MENTORING PROGRAM

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DARIEN EMS-POST 53 PO BOX 2066 DARIEN, CT 06820	06-1625224	501(C)(3)	6,000				FOR GENERAL SUPPORT
DARIEN YMCA 2420 POST ROAD DARIEN, CT 06820	06-0859795	501(C)(3)	10,000				FOR GENERAL SUPPORT
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE C/O GIFT RECORDING OFFICE HANOVER, NH 03755	02-0222111	501(C)(3)	200,500				FOR GENERAL SUPPORT

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DARTMOUTH COLLEGE FRIENDS OF DARTMOUTH SQUASH 6083 ALUMNI GYMNASIUM HANOVER,NH 03755	02-0222111	501(C)(3)	5,000				FOR GENERAL SUPPORT
DATAHAVEN 129 CHURCH STREET 6TH FLOOR NEW HAVEN,CT 06510	06-1567201	501(C)(3)	44,000				FOR COMMUNITY WELLBEING REPORT
DISCOVERY MUSEUM AND PLANETARIUM 4450 PARK AVENUE BRIDGEPORT,CT 06604	06-0740527	501(C)(3)	28,000				FOR UPGRADES TO THE PLANETARIUM

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DOMUS KIDS INC 83 LOCKWOOD AVENUE STAMFORD, CT 06902	06-0891998	501(C)(3)	131,756				FOR GENERAL SUPPORT
DWIGHT HALL AT YALE PO BOX 209008 NEW HAVEN, CT 06520	06-0653140	501(C)(3)	10,000				FOR THE J-Z AMP PARTNERSHIP
EARTHPLACE INC 10 WOODSIDE LANE WESTPORT, CT 06680	06-0740523	501(C)(3)	80,250				FOR THE HARBOR WATCH PROGRAM

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EASTER SEALS INC (HEADQUARTERS) 233 SOUTH WACKER DRIVE SUITE 2400 CHICAGO, IL 60606	36-2171729	501(C)(3)	5,000				FOR GENERAL SUPPORT
ELDERHOUSE 7 LEWIS STREET NORWALK, CT 06851	06-0963343	501(C)(3)	24,000				FOR GENERAL SUPPORT
ELIM PARK 140 COOK HILL ROAD CHESHIRE, CT 06410	06-0658099	501(C)(3)	5,000				FOR THE RESIDENT BENEVOLENCE FUND

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EMORY UNIVERSITY 200 DOWMAN DRIVE SUITE 300 ATLANTA, GA 30322	58-0566256	501(C)(3)	18,000				FOR GENERAL SUPPORT
ENCOURAGE KIDS FOUNDATION 1560 BROADWAY SUITE 600 NEW YORK, NY 10036	13-3442216	501(C)(3)	5,500				FOR GENERAL SUPPORT
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)(3)	11,000				FOR GENERAL SUPPORT

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EPILEPSY THERAPY PROJECT PO BOX 742 MIDDLEBURG,VA 20118	20-8640700	501(C)(3)	80,000				FOR GENERAL SUPPORT
EQUINE VOICES RESCUE & SANCTUARY PO BOX 1685 GREEN VALLEY,AZ 85622	74-3127794	501(C)(3)	10,000				FOR THE CARE OF THE HORSES
EVANS SCHOLARS FOUNDATION 1 BRIAR ROAD GOLF,IL 60029	36-2865979	501(C)(3)	10,000				FOR GENERAL SUPPORT

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EXCEL BRIDGEPORT 1057 BROAD STREET SUITE 302 BRIDGEPORT, CT 06604	45-0824113	501(C)(3)	19,500				FOR PARENT AND STUDENTS ORGANIZING AND LEADERSHIP ACADEMY
EXCHANGE CLUB PARENTING SKILLS CENTER 141 FRANKLIN STREET STAMFORD, CT 06901	06-1398440	501(C)(3)	32,500				FOR HOME BASED HOPE EDUCATE LOVE HELP FOR KIDS
FACING ADDICTION INC 100 MILL PLAIN ROAD 3RD FLOOR DANBURY, CT 06811	27-0163591	501(C)(3)	54,768				FOR GENERAL SUPPORT

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FACING HISTORY AND OURSELVES 16 HURD ROAD BROOKLINE, MA 02445	04-2761636	501(C)(3)	5,000				FOR GENERAL SUPPORT
FAIRFIELD THEATRE COMPANY NC 70 SANFORD STREET FAIRFIELD, CT 06824	06-1594125	501(C)(3)	40,750				FOR GENERAL SUPPORT
FAIRFIELD UNIVERSITY 1073 NORTH BENSON ROAD FAIRFIELD, CT 06824	06-0646623	501(C)(3)	19,181				FOR GENERAL SUPPORT

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FAMILY & CHILDREN'S AGENCY 9 MOTT AVENUE NORWALK, CT 06850	06-0970985	501(C)(3)	37,000				FOR GIVING DAY PRIZES
FAMILY CENTERS INC 40 ARCH STREET PO BOX 7550 GREENWICH, CT 68230	06-0646656	501(C)(3)	15,447				FOR THE ANNUAL APPEAL
FAMILY REENTRY 9 MOTT AVENUE STE 104 NORWALK, CT 06850	06-1196124	501(C)(3)	11,500				FOR THE ANNUAL APPEAL

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FELLOWSHIP FOUNDATION INC DBA INTERNATIONAL FOUNDATION PO BOX 23813 WASHINGTON, DC 20026	53-0204604	501(C)(3)	100,000				FOR GENERAL SUPPORT
FERGUSON LIBRARY ONE PUBLIC LIBRARY PLAZA STAMFORD, CT 06904	06-0646528	501(C)(3)	16,000				FOR GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH OF NEW CANAAN 178 OENOKE RIDGE NEW CANAAN, CT 06840	06-0767791	501(C)(3)	5,500				FOR GENERAL SUPPORT

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FOOD BANK OF LOWER FAIRFIELD COUNTY 461 GLENBROOK ROAD STAMFORD, CT 06906	02-0684220	501(C)(3)	5,000				FOR GENERAL SUPPORT
FOOD TANK 317 ROYAL STREET STE 4 NEW ORLEANS, LA 70130	46-0970124	501(C)(3)	5,000				FOR GENERAL SUPPORT
FRACTURED ATLAS 248 WEST 35TH STREET 10TH FLOOR NEW YORK, NY 10001	11-3451703	501(C)(3)	5,000				FOR REBIRTH ARTS FESTIVAL

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FRANKLIN STREET WORKS 41 FRANKLIN STREET STAMFORD, CT 06901	03-0410556	501(C)(3)	15,500				FOR GET UP AND GIVE LAUNCH PRIZE
FRIENDS OF NATHANIEL WITHERELL INC 70 PARSONAGE ROAD GREENWICH, CT 06830	22-3934788	501(C)(3)	5,500				FOR THE ANNUAL APPEAL
FRIENDS OF THE FERGUSON LIBRARY ONE PUBLIC LIBRARY PLAZA STAMFORD, CT 06904	06-1027077	501(C)(3)	47,993				FOR GENERAL SUPPORT

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FUTURE 5 135 ATLANTIC STREET STAMFORD, CT 06902	46-2986201	501(C)(3)	10,000				FOR GENERAL SUPPORT
GEORGETOWN UNIVERSITY DEPARTMENT NUMBER 0734 GIFT PROCESSING WASHINGTON, DC 20073	53-0196603	501(C)(3)	106,500				FOR GENERAL SUPPORT
GILDER LEHRMAN INSTITUTE OF AMERICAN HISTORY 49 W 45TH STREET 6TH FLOOR NEW YORK, NY 10036	13-3795391	501(C)(3)	5,000				FOR GENERAL SUPPORT

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GIRL SCOUTS OF CONNECTICUT 340 WASHINGTON STREET HARTFORD, CT 06106	06-0662134	501(C)(3)	16,000				FOR GENERAL SUPPORT
GLOBAL LYME ALLIANCE 222 RAILROAD AVENUE STE 2B GREENWICH, CT 06830	06-1559393	501(C)(3)	10,000				FOR SUPPORT OF THE APRIL 2, 2016 GALA
GOT OCEAN INC PO BOX 1027 PENTWATER, MI 49449	47-2787337	501(C)(3)	5,000				FOR ANNUAL APPEAL

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GREAT COMMISSION FOUNDATION OF CAMPUS CRUSADE FOR CHRIST INC 100 LAKE HART DRIVE 3600 ORLANDO, FL 32832	95-2814920	501(C)(3)	10,500				FOR GENERAL SUPPORT
GREATER BRIDGEPORT SYMPHONY SOCIETY 446 UNIVERSITY AVENUE BRIDGEPORT, CT 06604	06-6012460	501(C)(3)	13,276				FOR GENERAL SUPPORT
GREATER FRAMINGHAM COMMUNITY CHURCH PO BOX 629 FRAMINGHAM, MA 01704	04-3203768	501(C)(3)	15,400				FOR GENERAL SUPPORT

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GREEN VILLAGE INITIATIVE 325 LAFAYETTE STREET UNIT 9101 BRIDGEPORT, CT 06604	27-1439954	501(C)(3)	40,000				FOR GENERAL SUPPORT
GREENS FARMS ACADEMY 35 BEACHSIDE AVENUE PO BOX 998 GREENS FARMS, CT 06438	06-0733693	501(C)(3)	41,000				FOR GENERAL SUPPORT
GREENWICH ADULT DAY CARE 125 RIVER ROAD EXTENSION COS COB, CT 06807	06-1066787	501(C)(3)	23,500				FOR THE 2016 GARDEN PARTY

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GREENWICH ALLIANCE FOR EDUCATION 48 MAPLE AVENUE GREENWICH, CT 06830	20-4356460	501(C)(3)	24,000				FOR GENERAL SUPPORT
GREENWICH COUNTRY DAY SCHOOL PO BOX 623 GREENWICH, CT 06830	06-0646657	501(C)(3)	56,000				FOR GENERAL SUPPORT
GREENWICH HISTORICAL SOCIETY 39 STRICKLAND ROAD COS COB, CT 06807	06-6036049	501(C)(3)	10,000				FOR THE ANNUAL APPEAL

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GREENWICH HOSPITAL CO GREENWICH HOSPITAL FOUNDATION 5 PERRYRIDGE ROAD GREENWICH, CT 06830	06-0646659	501(C)(3)	11,000				FOR GENERAL SUPPORT
GREENWICH LAND TRUST 370 ROUND HILL ROAD GREENWICH, CT 06831	06-0950851	501(C)(3)	6,500				FOR GENERAL SUPPORT
GREENWICH LIBRARY 101 WEST PUTNAM AVENUE TRUSTEES OFFICE GREENWICH, CT 06830	06-6002281	501(C)(3)	10,000				FOR GENERAL SUPPORT

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GREENWICH SCHOLARSHIP ASSOCIATION PO BOX 4627 GREENWICH, CT 06831	06-1467698	501(C)(3)	220,474				FOR 2016 SCHOLARSHIP AWARDS
GREENWICH TOWN PARTY INC PO BOX 59 OLD GREENWICH, CT 06870	45-3555667	501(C)(3)	5,000				FOR HELP WITH GREENWICH TOWN PARTY
HARLEM ACADEMY 1330 FIFTH AVENUE NEW YORK, NY 10026	56-2454573	501(C)(3)	50,000				FOR GENERAL SUPPORT

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HARLEM CHILDREN'S ZONE 35 EAST 125TH STREET NEW YORK,NY 10035	23-7112974	501(C)(3)	50,000				FOR GENERAL SUPPORT
HARTFORD PERFORMS 233 PEARL STREET CITY ARTS ON PEARL HARTFORD,CT 06103	46-1484114	501(C)(3)	20,000				FOR SUPPORT HARTFORD PERFORMS'
HARVARD BUSINESS SCHOOL SOLDIERS FIELD DEVELOPMENT OPER TEELE HALL BOSTON,MA 02163	04-2103580	501(C)(3)	80,000				FOR GENERAL SUPPORT

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HARVARD GLEE CLUB FOUNDATION INC 1753 MASSACHUSETTS AVENUE 3RD FLOOR FLOOR CAMBRIDGE,MA 02140	04-2313930	501(C)(3)	5,000				FOR GENERAL SUPPORT
HARVARD UNIVERSITY CO OFFICE OF THE RECORDING SECRETARY 124 MT AUBURN STREET SUITE 430 N CAMBRIDGE,MA 02138	04-2103580	501(C)(3)	7,500				FOR GENERAL SUPPORT
HEALTHY EYES ALLIANCE 129 CHURCH STREET SUITE 820 NEW HAVEN,CT 06510	06-1273415	501(C)(3)	15,000				FOR HEALTHY EYES FOR FAIRFIELD

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HIGH SCHOOL SCHOLARSHIP FOUNDATION OF FAIRFIELD PO BOX 682 FAIRFIELD, CT 06824	06-1273415	501(C)(3)	10,734				FOR GENERAL SUPPORT
HIGH WATER WOMEN FOUNDATION C/O CORBIN CAPITAL PARTNERS 590 MADISON AVE 31ST FLOOR NEW YORK, NY 10022	20-3609323	501(C)(3)	20,000				FOR GENERAL SUPPORT
HOBART & WILLIAM SMITH COLLEGES OFFICE OF ADVANCEMENT 300 PULTENEY STREET GENEVA, NY 14456	16-0743040	501(C)(3)	10,000				FOR THE ALUMNI FUND

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HOLE IN THE WALL GANG CAMP 555 LONG WHARF DRIVE NEW HAVEN, CT 06511	06-1157655	501(C)(3)	10,000				FOR GENERAL SUPPORT
HOMEFRONT INC 88 HAMILTON AVENUE STAMFORD, CT 06902	30-0281085	501(C)(3)	10,000				FOR GENERAL SUPPORT
HOMES WITH HOPE 49 RICHMONDVILLE AVENUE SUITE 112 WESTPORT, CT 06880	22-2534326	501(C)(3)	77,750				FOR GENERAL SUPPORT

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HORIZONS AT SACRED HEART UNIVERSITY 5151 PARK AVENUE FAIRFIELD, CT 06825	06-0776644	501(C)(3)	21,000				FOR GENERAL SUPPORT
HORIZONS NATIONAL 120 POST ROAD WEST SUITE 202 WESTPORT, CT 06880	06-1468129	501(C)(3)	335,000				FOR THE ANNUAL APPEAL
HORIZONS STUDENT ENRICHMENT PROGRAM - NEW CANAAN COUNTRY SCHOOL 635 FROGTOWN ROAD NEW CANAAN, CT 06840	06-0646765	501(C)(3)	32,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HORIZONS STUDENT ENRICHMENT PROGRAM GREENS FARMS ACADEMY 35 BEACHSIDE AVENUE PO BOX 998 GREENS FARMS, CT 06838	06-0733693	501(C)(3)	67,500				FOR HORIZONS AT GFA 2016 SUMMER PROGRAM
HOUSATONIC COMMUNITY COLLEGE FOUNDATION 900 LAFAYETTE BOULEVARD BRIDGEPORT, CT 06604	06-1291848	501(C)(3)	375,000				FOR LEONHARDT SCHOLARS PROGRAM
HOUSATONIC VALLEY ASSOCIATION INC PO BOX 28 CORNWALL BRIDGE, CT 06754	06-6049295	501(C)(3)	20,000				FOR STILL RIVER YOUTH STEWARDSHIP PROGRAM

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HOUSING DEVELOPMENT FUND INC 100 PROSPECT STREET SUITE 100 STAMFORD,CT 06901	06-1276156	501(C)(3)	5,000				FOR THE FIRST-TIME HOMEBUYER PROGRAM
HUMAN SERVICES COUNCIL INC ONE PARK STREET NORWALK,CT 06851	06-6102160	501(C)(3)	20,000				FOR SCHOOL BASED HEALTH CENTERS
HUMANE SOCIETY OF THE UNITED STATES 2100 L STREET NW WASHINGTON,DC 20037	53-0225390	501(C)(3)	21,000				FOR GENERAL SUPPORT

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ICE HOCKEY IN HARLEM 127 W 127TH STREET STE 415 NEW YORK, NY 10027	13-3577519	501(C)(3)	5,100				FOR GENERAL SUPPORT
IMENTOR 30 BROAD STREET 9TH FLOOR NEW YORK, NY 10004	30-0105507	501(C)(3)	25,000				FOR GENERAL SUPPORT
IMPACT WATER INC PO BOX 780025 SAN ANTONIO, TX 78278	74-2504163	501(C)(3)	31,000				FOR INSTALLATION OF A CLEAN WATER SYSTEM IN HONDURAS

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INDEPENDENCE CHARTER SCHOOL 1600 LOMBARD STREET PHILADELPHIA, PA 19146	23-3060261	501(C)(3)	5,000				FOR GENERAL SUPPORT
INDIAN HARBOR YACHT CLUB FOUNDATION 710 STEAMBOAT ROAD GREENWICH, CT 06830	27-3193524	501(C)(3)	10,000				FOR THE WATERFRONT IMPROVEMENT PROJECT
INSPIRICA INC 141 FRANKLIN STREET STAMFORD, CT 06901	06-1172535	501(C)(3)	105,000				FOR GENERAL SUPPORT

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INSTITUTE FOR HUMANE STUDIES 3434 WASHINGTON BLVD MS 1C5 ARLINGTON, VA 22201	94-1623852	501(C)(3)	15,100				FOR GENERAL SUPPORT
INTERNATIONAL CHILDREN'S HEART FOUNDATION 275 S WALNUT BEND ROAD SUITE 102 MEMPHIS, TN 38018	62-1570622	501(C)(3)	10,000				FOR FREE PEDIATRIC CARDIAC SURGERY ABROAD
INTERNATIONAL INSTITUTE OF CONNECTICUT 670 CLINTON AVENUE BRIDGEPORT, CT 06605	06-0669118	501(C)(3)	64,000				FOR REFUGEE RESETTLEMENT

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INTERNATIONAL RESCUE COMMITTEE 122 E 42ND STREET NEW YORK, NY 10168	13-5660870	501(C)(3)	101,500				FOR GENERAL SUPPORT
JACOB BURNS FILM CENTER 405 MANVILLE ROAD PLEASANTVILLE, NY 10570	13-4038441	501(C)(3)	6,000				FOR GENERAL SUPPORT
JEWISH CENTER FOR COMMUNITY SERVICES 431 POST ROAD EAST SUITE 17 WESTPORT, CT 06880	06-0655499	501(C)(3)	9,243				FOR FY16 ANNUAL DISTRIBUTION

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JEWISH HIGH SCHOOL OF CONNECTICUT 1937 WEST MAIN STREET STAMFORD, CT 06902	20-5952939	501(C)(3)	10,000				FOR EDUCATIONAL SUPPORT
JEWISH SENIOR SERVICES FOUNDATION 175 JEFFERSON STREET FAIRFIELD, CT 06825	06-0846991	501(C)(3)	7,397				FOR GENERAL SUPPORT
JWV COMMUNITY SCHOLARSHIPS INC 22 FIRST STREET C/O RICHARD REDNISS STAMFORD, CT 06905	20-8421057	501(C)(3)	10,000				FOR GENERAL SUPPORT

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KANSAS UNIVERSITY ENDOWMENT ASSOCIATION PO BOX 928 LAWRENCE, KS 66044	48-0547734	501(C)(3)	8,000				FOR THE BENEFIT OF WEF
KENNEDY CENTER 2440 RESERVOIR AVENUE TRUMBULL, CT 06611	06-0709295	501(C)(3)	75,934				FOR GENERAL SUPPORT
KENT CONGREGATIONAL CHURCH 97 NORTH MAIN STREET PO BOX 306 KENT, CT 06757	06-6042383	501(C)(3)	13,000				FOR GENERAL SUPPORT

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KIDS EMPOWERED BY YOUR SUPPORT PO BOX 532 NEW CANAAN, CT 06840	20-4846463	501(C)(3)	20,000				FOR MUSIC FOR LIFE PROGRAM
KIDS IN CRISIS ONE SALEM STREET COS COB, CT 06807	06-1027885	501(C)(3)	42,777				FOR GENERAL SUPPORT
KLEIN FOUNDATION 910 FAIRFIELD AVENUE BRIDGEPORT, CT 06605	06-1474233	501(C)(3)	34,364				FOR THE BENEFIT OF AFTER SCHOOL AT THE KLEIN

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LAUREL HOUSE 1616 WASHINGTON BOULEVARD STAMFORD, CT 06902	22-2511467	501(C)(3)	21,000				FOR THINKING WELL PROGRAM
LEARNING THROUGH AN EXPANDED ARTS PROGRAM 441 WEST END AVENUE STE 2G NEW YORK, NY 10024	13-2925233	501(C)(3)	5,000				FOR GENERAL SUPPORT
LEARY FIREFIGHTERS FOUNDATION 594 BROADWAY STE 409 NEW YORK, NY 10012	13-4125074	501(C)(3)	223,800				FOR GENERAL SUPPORT

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LET'S GET READY 50 BROADWAY 25TH FLOOR NEW YORK, NY 10004	31-1698832	501(C)(3)	8,000				FOR NORWALK LGR
LEUKEMIA & LYMPHOMA SOCIETY 3601 EISENHOWER AVENUE STE 450 ALEXANDRIA, VA 22304	13-5644916	501(C)(3)	10,000				FOR THE "EVERY SAVE COUNTS"
LIBERATION PROGRAMS INC 129 GLOVER AVENUE 1ST FLOOR NORWALK, CT 06850	06-0867006	501(C)(3)	5,500				FOR GENERAL SUPPORT

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LIFEBRIDGE COMMUNITY SEERVICES 475 CLINTON AVENUE BRIDGEPORT, CT 06605	06-0646974	501(C)(3)	125,461				FOR GENERAL SUPPORT
LINCOLN CENTER FOR THE PERFORMING ARTS 70 LINCOLN CENTER PLAZA NEW YORK, NY 10023	13-1847137	501(C)(3)	5,000				FOR GENERAL SUPPORT
LISC-LOCAL INITIATIVES SUPPORT CORP 75 CHARTER OAK AVENUE SUITE 2-250 HARTFORD, CT 06106	13-3030229	501(C)(3)	170,000				FOR AFFORDABLE HOUSING

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LITERACY CENTER OF MILFORD INC 16 DIXON STREET MILFORD, CT 06460	06-1402186	501(C)(3)	7,500				FOR STRENGTHENING ENGLISH IN ADULTS PROJECT
LITERACY LAB PO BOX 3462 WASHINGTON, DC 20010	27-1777117	501(C)(3)	20,000				FOR GENERAL SUPPORT
LITERACY VOLUNTEERS OF AMERICA STAMFORD GREENWICH 44 ARCH STREET GREENWICH, CT 06830	51-0207941	501(C)(3)	5,000				FOR GENERAL SUPPORT

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LITTLE KIDS ROCK 271 GROVE AVE BLDG E2 VERONA,NJ 07044	94-3396568	501(C)(3)	70,000				FOR CONNECTICUT IMPLEMENTATION AND NATIONAL PROGRAM
LONG NOW FOUNDATION 2 MARINA BLVD FORT MASON CENTER BLDG A SAN FRANCISCO,CA 94123	68-0384748	501(C)(3)	20,000				FOR THE HEATH HEN PROJECT
MARC COMMUNITY RESOURCES 124 WASHINGTON STREET MIDDLETOWN,CT 06457	06-6011968	501(C)(3)	10,000				FOR GENERAL SUPPORT

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MARITIME AQUARIUM 10 NORTH WATER STREET NORWALK, CT 06854	06-1062912	501(C)(3)	25,000				FOR TEMPEST PROGRAM
MASONIC CHARITY FOUNDATION OF CT PO BOX 70 WALLINGFORD, CT 06492	06-1435920	501(C)(3)	52,000				FOR GENERAL SUPPORT
MCGIVNEY COMMUNITY CENTER PO BOX 5220 BRIDGEPORT, CT 06610	22-3059815	501(C)(3)	21,000				FOR GENERAL SUPPORT

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MEDIA MATTERS FOR AMERICA PO BOX 52155 WASHINGTON,DC 20091	47-0928008	501(C)(3)	50,000				FOR ENVIRONMENTAL ISSUES
MERCY LEARNING CENTER OF BRIDGEPORT INC 637 PARK AVENUE BRIDGEPORT,CT 06604	22-2859879	501(C)(3)	40,168				FOR GENERAL SUPPORT
MESERVE-KUNHARDT FOUNDATION 48 WHEELER AVENUE 3RD FLOOR PLEASANTVILLE,NY 10570	20-2412662	501(C)(3)	5,000				FOR GENERAL SUPPORT

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MIAMI UNIVERSITY 725 E CHESTNUT STREET PANUSKA DEVELOPMENT CENTER OXFORD, OH 45056	31-6402089	501(C)(3)	25,000				FOR THE LINDMOR PROFESSORSHIP FUND
MILL RIVER COLLABORATIVE 1010 WASHINGTON BLVD STAMFORD, CT 06901	06-1507648	501(C)(3)	26,080				FOR CAPITAL SUPPORT
MISS HALL'S SCHOOL 492 HOLMES ROAD PITTSFIELD, MA 01202	04-2104273	501(C)(3)	50,000				FOR THE ANNUAL FUND

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MULLY CHILDREN'S FAMILY USA INC 3000 OLD ALABAMA STE 119-302 ALPHARETTA, GA 30022	20-4105702	501(C)(3)	13,821				FOR GENERAL SUPPORT
MUSIC HAVEN INC PO BOX 207332 NEW HAVEN, CT 06520	01-0870395	501(C)(3)	24,500				FOR FELLOWSHIP SUPPORT FOR PARTICIPATION
NAMI CONNECTICUT 576 FARMINGTON AVENUE HARTFORD, CT 06105	22-2605701	501(C)(3)	15,000				FOR CHILDREN'S MENTAL HEALTH INITIATIVE

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NARAL PRO-CHOICE AMERICA 1156 15TH STREET NW WASHINGTON,DC 20005	52-1100361	501(C)(3)	50,000				FOR GENERAL SUPPORT
NATL SOC DAUGHTERS OF AM REV 1776 D STREET NW WASHINGTON,DC 20006	53-0205923	501(C)(3)	5,000				FOR GENERAL SUPPORT
NATURE CONSERVANCY-COLORADO OFFICE 2424 SPRUCE STREET BOULDER,CO 80302	53-0242652	501(C)(3)	50,000				FOR GENERAL SUPPORT

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NAUGATUCK VALLEY COMMUNITY COLLEGE FOUNDATION 750 CHASE PKWY WATERBURY, CT 06708	23-7165869	501(C)(3)	100,000				FOR LEONHARDT SCHOLARS PROGRAM
NEAR & FAR AID ASSOCIATION INC PO BOX 717 SOUTHPORT, CT 06890	23-7036523	501(C)(3)	5,000				FOR GENERAL SUPPORT
NEIGHBOR-TO-NEIGHBOR 248 EAST PUTNAM AVENUE GREENWICH, CT 06830	06-6071605	501(C)(3)	57,700				FOR NEIGHBOR TO NEIGHBOR 2016 STRATEGIC PLAN

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NEIGHBORHOOD STUDIOS OF FAIRFIELD COUNTY 391 EAST WASHINGTON AVENUE BRIDGEPORT, CT 06608	06-0993269	501(C)(3)	52,750				FOR ARTS EDUCATION
NEIGHBORS LINK STAMFORD 75 SELLECK STREET STAMFORD, CT 06902	27-5024317	501(C)(3)	29,000				FOR EXPANDED SUMMER READING
NEW BEGINNINGS FAMILY ACADEMY 184 GARDEN STREET SUITE 110 BRIDGEPORT, CT 06605	06-1578214	501(C)(3)	25,000				FOR GENERAL SUPPORT

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NEW CANAAN COUNTRY SCHOOL 545 PONUS RIDGE PO BOX 997 NEW CANAAN, CT 06840	06-0646765	501(C)(3)	9,500				FOR THE ANNUAL FUND
NEW CANAAN HIGH SCHOOL 11 FARM ROAD NEW CANAAN, CT 06850	06-6002043	501(C)(3)	10,000				FOR GENERAL SUPPORT
NEW FAIRFIELD COMMUNITY FOUNDATION ONE BRUSH HILL ROAD BOX 307 NEW FAIRFIELD, CT 06812	06-1528030	501(C)(3)	10,000				FOR GENERAL SUPPORT

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NEW PROFIT INC 200 CLARENDON STREET 29TH FLOOR BOSTON, MA 02116	04-3396766	501(C)(3)	15,000				FOR SUPPORT TO THE EARLY LEARNING FUND
NEW REACH INC 153 EAST STREET 3RD FLOOR NEW HAVEN, CT 06511	22-3037451	501(C)(3)	170,000				FOR FAIRFIELD COUNTY HOUSING FIRST PROGRAM
NEW STORY INC 870 MARKET STREET SUITE 1246 SAN FRANCISCO, CA 94102	47-2529408	501(C)(3)	31,600				FOR CONSTRUCTION OF A HOUSE IN LEVEQUE, HAITI

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NORWALK ACTS CO STEPPING STONES MUSEUM 303 WEST AVENUE NORWALK, CT 06854	31-0671799	501(C)(3)	35,000				FOR GENERAL SUPPORT
NORWALK COMMUNITY COLLEGE 188 RICHARDS AVENUE ATTN FINANCIAL AID OFFICE NORWALK, CT 06854	06-6080293	501(C)(3)	216,000				FOR GENERAL SUPPORT
NORWALK GRASSROOTS TENNIS INC 394 WEST AVENUE NORWALK, CT 06850	06-1570097	501(C)(3)	10,000				FOR NORWALK GRASSROOTS TENNIS &

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NORWALK HOSPITAL FOUNDATION 34 MAPLE STREET NORWALK, CT 06856	22-2577707	501(C)(3)	12,605				FOR GENERAL SUPPORT
NORWALK HOUSING FOUNDATION 24 1/2 MONROE STREET PO BOX 508 NORWALK, CT 06856	06-0962362	501(C)(3)	12,500				FOR 2016 SCHOLARSHIP PROGRAM
NORWALK SENIOR CENTER 11 ALLEN ROAD NORWALK, CT 06851	23-7121169	501(C)(3)	14,451				FOR SENIOR HOUSING ASSISTANCE FUND

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NPH USA 265 WILLARD STREET 3RD FLOOR QUINCY, MA 02129	65-1229309	501(C)(3)	15,000				FOR GENERAL SUPPORT
OBIE HARRINGTON-HOWES FOUNDATION PO BOX 2221 DARIEN, CT 06820	13-3980775	501(C)(3)	5,000				FOR GENERAL SUPPORT
OMPRAKASH FOUNDATION 112 ROSEBROOK ROAD NEW CANAAN, CT 06840	20-8655418	501(C)(3)	5,000				FOR GENERAL SUPPORT

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OPEN DOOR SHELTER 4 MERRITT STREET NORWALK, CT 06854	22-2536909	501(C)(3)	45,000				FOR GENERAL SUPPORT
OPERATION HOPE 636 OLD POST ROAD FAIRFIELD, CT 06824	06-1193489	501(C)(3)	26,000				FOR GENERAL SUPPORT
ORTHOPAEDIC FOUNDATION FOR ACTIVE LIFESTYLES 2777 SUMMER STREET STAMFORD, CT 06905	06-1605002	501(C)(3)	5,000				FOR GENERAL SUPPORT

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OUR PIECE OF THE PIE INC 20-28 SARGEANT STREET 2ND FLOOR HARTFORD, CT 06105	06-0939659	501(C)(3)	80,469				FOR PATHWAYS TO CAREER
PACKAGES FROM HOME 1201 S 7TH AVE STE 50 PHOENIX, AZ 85007	20-1124013	501(C)(3)	25,000				FOR GENERAL SUPPORT
PALACE THEATRE (STAMFORD CENTER FOR THE ARTS) 61 ATLANTIC STREET STAMFORD, CT 06901	06-1048684	501(C)(3)	15,159				FOR GET UP AND GIVE LAUNCH PRIZE

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PARENT PROJECT MUSCULAR DYSTROPHY (PPMD) 401 HACKENSACK AVENUE 9TH FLOOR HACKENSACK, NJ 07601	31-1405490	501(C)(3)	50,000				FOR MEDICAL RESEARCH
PARTNERS IN HEALTH PO BOX 845578 BOSTON, MA 02284	04-3567502	501(C)(3)	10,500				FOR THE ANNUAL APPEAL
PARTNERSHIP FOR STRONG COMMUNITIES 227 LAWRENCE STREET THE LYCEUM HARTFORD, CT 06106	20-0882009	501(C)(3)	20,000				FOR HOME CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENCILS OF PROMISE 37 WEST 28TH STREET 3RD FLOOR NEW YORK, NY 10001	26-3618722	501(C)(3)	50,000				FOR GENERAL SUPPORT
PEQUOT LIBRARY 720 PEQUOT AVENUE SOUTHPORT, CT 06890	06-0672790	501(C)(3)	15,356				FOR GENERAL SUPPORT
PERSON-TO-PERSON 1864 POST ROAD DARIEN, CT 06820	06-1422248	501(C)(3)	179,691				FOR GENERAL SUPPORT

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PHILLIPS EXETER ACADEMY NATHANIEL GILMAN ALUMNI/AE HOUSE 20 MAIN STREET EXETER, NH 03833	02-0222174	501(C)(3)	150,000				FOR GENERAL SUPPORT
PILATES METHOD ALLIANCE INC 1666 KENNEDY CAUSEWAY SUITE 402 NORTH BAY VILLAGE, FL 33141	65-1074374	501(C)(3)	5,000				FOR GENERAL SUPPORT
PINK AID INC PO BOX 5157 WESTPORT, CT 06880	13-3848582	501(C)(3)	5,000				FOR GENERAL SUPPORT

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PIVOT MINISTRIES 485 JANE STREET BRIDGEPORT, CT 06608	06-0839030	501(C)(3)	5,000				FOR GENERAL SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA INC 434 WEST 33RD STREET NEW YORK, NY 10001	13-1644147	501(C)(3)	6,500				FOR GENERAL SUPPORT
PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND 345 WHITNEY AVENUE NEW HAVEN, CT 06511	06-0263565	501(C)(3)	72,200				FOR GENERAL SUPPORT

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POSITIVE DIRECTIONS 420 POST ROAD WEST WESTPORT CT, CT 06880	06-0935732	501(C)(3)	8,250				FOR GENERAL SUPPORT
POSSE FOUNDATION 14 WALL STREET SUITE 8A-6 NEW YORK, NY 10005	13-3840394	501(C)(3)	25,000				FOR GENERAL SUPPORT
PRINCETON UNIVERSITY PO BOX 591 220 WEST COLLEGE FINANCIAL AID PRINCETON, NJ 08542	21-0634501	501(C)(3)	41,000				FOR LACROSSE AND FIELD HOCKEY CONSTRUCTION PROJECT

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PROJECT MORRY 350 EXECUTIVE BLVD SUITE 125 ELMSFORD, NY 10523	13-3851126	501(C)(3)	20,000				FOR YEAR-ROUND YOUTH DEVELOPMENT
PROSPECTS OPPORTUNITY AND ENRICHMENT INC 25 PROSPECT STREET RIDGEFIELD, CT 06877	46-1904997	501(C)(3)	15,000				FOR THE PROSPECTOR'S JOB TRAINING PROGRAM
PROTECT OUR DEFENDERS FOOUNDATION 20 PARK ROAD SUITE E BURLINGAME, CA 94010	45-4044997	501(C)(3)	10,000				FOR GENERAL SUPPORT

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QUINNIPIAC UNIVERSITY OFFICE OF FINANCIAL AID 275 MOUNT CARMEL AVENUE HAMDEN, CT 06518	06-0646701	501(C)(3)	1,000				FOR GENERAL SUPPORT
REACH PREP ONE DOCK STREET SUITE 100 STAMFORD, CT 06905	06-1438889	501(C)(3)	80,500				FOR GENERAL SUPPORT
READ TO A CHILD 20 WILLIAM STREET G25 WELLESLEY, MA 02841	20-3526239	501(C)(3)	10,000				FOR GENERAL SUPPORT

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REGIONAL YMCA OF WESTERN CONNECTICUT 246 FEDERAL ROAD UNIT B21 BROOKFIELD, CT 06804	06-6051610	501(C)(3)	21,000				FOR 2016 CAMP GREENKNOLL
RENEWAL HOUSE 18 AARON SAMUELS BOULEVARD PO BOX 622 DANBURY, CT 06813	22-3221915	501(C)(3)	20,000				FOR RENEWAL HOUSE PROGRAM
RESILIENCY CENER OF NEWTOWN 153 SOUTH MAIN STREET NEWTOWN, CT 06470	47-3404300	501(C)(3)	15,000				FOR RESILIENCY CENTERS MENU OF TRAUMA THERAPIES

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RHODE ISLAND COMMUNITY FOUNDATION ONE UNION STATION PROVIDENCE, RI 02903	22-2604963	501(C)(3)	9,323				FOR TO BE ADDED TO DAN LEVINSON'S RI FOUNDATION ACCOUNT
RIDGEFIELD PLAYHOUSE 80 EAST RIDGE RIDGEFIELD, CT 06877	06-1463501	501(C)(3)	10,000				FOR THE TICKET OUTREACH PROGRAM
RIDGEFIELD SYMPHONY ORCHESTRA 90 EAST RIDGE AVENUE RIDGEFIELD, CT 06877	06-6098657	501(C)(3)	6,000				FOR RSO/SPHERE PROGRAM

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RINGLING COLLEGE OF ART AND DESIGN OFFICE OF ADVANCEMENT 2700N TAMIAMI TRAIL SARASOTA, FL 34234	59-0637903	501(C)(3)	34,167				FOR GENERAL SUPPORT
ROGER WILLIAMS UNIVERSITY ONE OLD FERRY ROAD OFFICE OF STUDENT FINANCIAL AID BRISTOL, RI 02809	05-0277222	501(C)(3)	1,000				FOR SCHOLARSHIP FOR SAMANTHA ROCCA, ID# 1143832
ROOT CAPITAL 130 BISHOP ALLEN DRIVE 2ND FLOOR CAMBRIDGE, MA 02139	04-3478123	501(C)(3)	10,000				FOR SOCIAL ENTREPRENEURS LEADERSHIP FORUM

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ROTARY CLUB OF BRIDGEPORT 16 CENTERVIEW DRIVE SHELTON, CT 06484	20-5655260	501(C)(3)	5,726				FOR GENERAL SUPPORT
RYASAP (REGIONAL YOUTH AND ADULT SOCIAL ACTION PARTNERSHIP) 2470 FAIRFIELD AVENUE BRIDGEPORT, CT 06605	06-1357699	501(C)(3)	45,000				FOR THE STREET SAFE MENTORING PROGRAM
SACRED HEART UNIVERSITY 5151 PARK AVENUE STUDENT FINANCIAL ASSISTANCE OFFICE FAIRFIELD, CT 06825	06-0776644	501(C)(3)	1,123				FOR SCHOLARSHIP SUPPORT FOR NURSING PROGRAM

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SAINT ANN'S SCHOOL 129 PIERREPONT STREET ATTN DEVELOPMENT OFFICE BROOKLYN, NY 11201	11-2606681	501(C)(3)	20,000				FOR GENERAL SUPPORT
SAINT JOSEPH PARENTING CENTER 566 ELM STREET 2ND FLOOR STAMFORD, CT 06902	27-0490589	501(C)(3)	5,000				FOR GENERAL SUPPORT
SALVATION ARMY 30 ELM STREET BRIDGEPORT, CT 06605	13-5562351	501(C)(3)	21,450				FOR GENERAL SUPPORT

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SAVE THE CHILDREN 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD, CT 06825	06-0726487	501(C)(3)	10,003				FOR GENERAL SUPPORT
SCHOLARSHIP AMERICA INC ONE SCHOLARSHIP WAY ST PETER, MN 56082	04-2296967	501(C)(3)	191,889				FOR GENERAL SUPPORT
CHILD AND FAMILY GUIDANCE CENTER 180 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	06-0669106	501(C)(3)	17,000				FOR GENERAL SUPPORT

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SERIOUSFUN CHILDREN'S NETWORK 228 SAUGATUCK AVENUE WESTPORT,CT 06880	31-1794455	501(C)(3)	50,000				FOR GENERAL SUPPORT
SHELTER FOR THE HOMELESS 137 HENRY STREET SUITE 205 STAMFORD,CT 06901	06-1144355	501(C)(3)	30,000				FOR GENERAL SUPPORT
SHEPHERDS INC 299 WASHINGTON AVENUE BRIDGEPORT,CT 06604	31-1724639	501(C)(3)	26,150				FOR GENERAL SUPPORT

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SMITH COLLEGE PO BOX 340029 BOSTON, MA 02241	04-1843040	501(C)(3)	7,000				FOR GENERAL SUPPORT
SOUNDWATERS 1281 COVE RD STAMFORD, CT 06902	06-1263947	501(C)(3)	79,500				FOR GENERAL SUPPORT
SOUTH END COMMUNITY CENTER 19 BATES STREET STRATFORD, CT 06615	06-6002103	501(C)(3)	15,000				FOR GENERAL SUPPORT

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SOUTHERN CONNECTICUT STATE UNIVERSITY 501 CRESCENT STREET OFFICE OF FINANCIAL AID NEW HAVEN, CT 06515	23-7208882	501(C)(3)	3,600				FOR GENERAL SUPPORT
SOUTHPORT CONGREGATIONAL CHURCH 524 PEQUOT AVENUE PO BOX 366 SOUTHPORT, CT 06490	13-1957221	501(C)(3)	5,357				FOR GENERAL SUPPORT
SOUTHWESTERN CT AREA AGENCY ON AGING INC 1000 LAFAYETTE BOULEVARD 9TH FLOOR BRIDGEPORT, CT 06604	06-0916407	501(C)(3)	39,840				FOR GENERAL SUPPORT

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SQUASH HAVEN 70 TOWER PARKWAY NEW HAVEN, CT 06520	20-5500876	501(C)(3)	5,000				FOR GENERAL SUPPORT
SQUASHBUSTERS 795 COLUMBUS AVENUE ROXBURY CROSSING, MA 02120	04-3330698	501(C)(3)	50,000				FOR GENERAL SUPPORT
ST JOSEPH HIGH SCHOOL 2320 HUNTINGTON TURNPIKE TRUMBULL, CT 06611	06-1560973	501(C)(3)	15,000				FOR 16 DISTRIBUTION FOR SCHOLARSHIP SUPPORT

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ST LUKE'S EPISCOPAL CHURC 1864 POST ROAD DARIEN,CT 06820	06-0662180	501(C)(3)	56,750				FOR THE COLUMBARIUM CAPITAL PROJECT
ST LUKE'S SCHOOL 377 NORTH WILTON ROAD DEVELOPMENT OFFICE NEW CANAAN,CT 06840	23-7099149	501(C)(3)	7,000				FOR YOUR CAPITAL CAMPAIGN
ST PAUL'S EPISCOPAL CHURCH 661 OLD POST ROAD FAIRFIELD,CT 06824	06-0655484	501(C)(3)	10,000				FOR GENERAL SUPPORT

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ST PIUS X PARISH 834 BROOKSIDE DRIVE FAIRFIELD, CT 06824	06-0772959	501(C)(3)	5,500				FOR GENERAL SUPPORT
ST THERESA SCHOOL 55 ROSEMOND TERRACE TRUMBULL, CT 06611	06-0737923	501(C)(3)	15,000				FOR GENERAL SUPPORT
ST VINCENT'S MEDICAL CENTER FOUNDATION 2800 MAIN STREET BRIDGEPORT, CT 06606	22-2558132	501(C)(3)	46,000				FOR GENERAL SUPPORT

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STAMFORD HISTORICAL SOCIETY 1508 HIGH RIDGE ROAD STAMFORD, CT 06903	06-6039238	501(C)(3)	10,000				FOR GENERAL SUPPORT
STAMFORD HOSPITAL 1351 WASHINGTON BLVD STAMFORD, CT 06902	06-0737923	501(C)(3)	128,000				FOR GENERAL SUPPORT
STAMFORD MUSEUM & NATURE CENTER 39 SCOFIELDTOWN ROAD STAMFORD, CT 06903	06-0653148	501(C)(3)	22,636				FOR GENERAL SUPPORT

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STAMFORD SYMPHONY ORCHESTRA 263 TRESSER BOULEVARD STAMFORD, CT 06901	06-6100039	501(C)(3)	40,000				FOR GENERAL SUPPORT
STAMFORD YOUTH SERVICES BUREAU - CITY OF STAMFORD 888 WASHINGTON BOULEVARD PO BOX 10152 STAMFORD, CT 06904	06-6001536	501(C)(3)	30,000				FOR MAYOR'S YOUTH SUMMER EMPLOYMENT PROGRAM
STANWICH CONGREGATIONAL CHURCH 202 TACONIC ROAD GREENWICH, CT 06831	06-0860015	501(C)(3)	10,000				FOR THE ANNUAL FUND

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STAR INC LIGHTING THE WAY 182 WOLFPIT AVENUE NORWALK, CT 06852	06-0726489	501(C)(3)	35,000				FOR FIRST JOB PROGRAM
STARFISH CONNECTION 1127 HIGH RIDGE ROAD 255 STAMFORD, CT 06905	26-2410124	501(C)(3)	8,500				FOR GENERAL SUPPORT
STARLIGHT STARBRIGHT CHILDREN'S FOUNDATION 2049 CENTURY PARK EAST SUITE 4320 LOS ANGELES, CA 90067	95-3802159	501(C)(3)	5,000				FOR GENERAL SUPPORT

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CONNECTICUT OFFICE OF HIGHER ED 61 WOODLAND STREET HARTFORD, CT 06105	06-6000798	501(C)(3)	5,297				FOR GENERAL SUPPORT
STEPPING STONES MUSEUM FOR CHILDREN MATHEWS PARK 303 WEST AVENUE NORWALK, CT 06850	22-3199269	501(C)(3)	20,000				FOR GENERAL SUPPORT
STERLING HOUSE 2283 MAIN STREET STRATFORD, CT 06615	06-0665192	501(C)(3)	10,000				FOR GENERAL SUPPORT

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STORYVILLE CENTER FOR THE SPOKEN WORD 481 BROADWAY 3RD FLOOR NEW YORK, NY 10013	13-3880953	501(C)(3)	5,000				FOR GENERAL SUPPORT
SUMMER ON THE HILL INC 4662 TIBBETT AVENUE RIVERDALE, NY 10471	65-1232087	501(C)(3)	10,000				FOR GENERAL SUPPORT
SUNRISE ROTARY 21ST CENTURY FOUNDATION INC PO BOX 43 WESTPORT, CT 06881	06-1616012	501(C)(3)	19,820				FOR GENERAL SUPPORT

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SUPPORT CENTER FOR NONPROFIT MANAGEMENT 42 BROADWAY 20TH FLOOR NEW YORK, NY 10004	13-3911548	501(C)(3)	6,000				FOR GENERAL SUPPORT
TEACH FOR AMERICA 370 JAMES STREET SUITE 404 NEW HAVEN, CT 06513	13-3541913	501(C)(3)	56,100				FOR GENERAL SUPPORT
TEAK FELLOWSHIP 16 W 22ND STREET 3RD FLOOR NEW YORK, NY 10010	13-4011465	501(C)(3)	75,000				FOR GENERAL SUPPORT

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TELEMACHUS FOUNDATION INC 21 DEMPSEY LANE GREENWICH, CT 06830	45-1841414	501(C)(3)	20,000				FOR GENERAL SUPPORT
THE CENTER FOR FAMILY JUSTICE INC 753 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	06-0646991	501(C)(3)	21,500				FOR GENERAL SUPPORT
THE CHILDREN'S SCHOOL 118 SCOFIELDTOWN ROAD STAMFORD, CT 06903	06-1104354	501(C)(3)	5,500				FOR GENERAL SUPPORT

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THE HEARING & SPEECH AGENCY OF METROPOLITAN BALTIMORE 5900 METRO DR HENRYJEANETTE WEINBERG BUILDING BALTIMORE, MD 21215	52-0591577	501(C)(3)	10,000				FOR GENERAL SUPPORT
THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS PO BOX 101510 ARLINGTON, VA 22210	53-0245017	501(C)(3)	10,000				FOR GENERAL SUPPORT
THE WORKPLACE INC 350 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	22-2484517	501(C)(3)	20,000				FOR PLATFORM TO EMPLOYMENT YOUTH

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THIRTEENWNET 825 EIGHTH AVENUE NEW YORK, NY 10019	13-1945149	501(C)(3)	6,000				FOR GENERAL SUPPORT
TREETOPS CHAMBER MUSIC SOCIETY -- NY OFFICE PO BOX 735 NEW YORK, NY 10033	20-4519702	501(C)(3)	8,200				FOR ARTISTS MENTOR YOUTH--A TREETOPS CMS MUSIC OUTREACH
TRINITY COLLEGE 300 SUMMIT STREET STUDENT ACCOUNTS OFFICE HARTFORD, CT 06106	06-0646927	501(C)(3)	10,000				FOR GENERAL SUPPORT

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TRINITY EPISCOPAL CHURCH (NICHOLS) 1734 HUNTINGTON TURNPIKE TRUMBULL, CT 06611	06-6042592	501(C)(3)	10,000				FOR GENERAL SUPPORT
TROMBONE SHORTY FOUNDATION 650 POYDRAS STREET SUITE 2245 NEW ORLEANS, LA 70130	45-4524559	501(C)(3)	20,000				FOR GENERAL SUPPORT
TRUMBULL LIBRARY 33 QUALITY STREET TRUMBULL, CT 06611	23-7098043	501(C)(3)	5,475				FY16 ANNUAL DISTRIBUTION

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TRUSTEES OF RESERVATIONS 572 ESSEX STREET BEVERLY, MA 01915	04-2105780	501(C)(3)	10,000				FOR GENERAL SUPPORT
TUFTS UNIV - SCH OF OCC THERAPY 26 WINTHROP STREET MEDFORD, MA 02155	04-2103634	501(C)(3)	10,000				FOR GENERAL SUPPORT
UJAFEDERATION OF GREENWICH ONE HOLLY HILL LANE GREENWICH, CT 06830	06-6068624	501(C)(3)	10,000				FOR GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UN MUNDO 250 VINCENT DRIVE MOUNTAIN VIEW, CA 94041	91-2157711	501(C)(3)	8,000				FOR AFTER SCHOOL LITERACY PROGRAMS FOR HONDURAN VILLAGES
UNITED CONGREGATIONAL CHURCH 877 PARK AVENUE BRIDGEPORT, CT 06604	06-0646934	501(C)(3)	6,500				FOR GENERAL SUPPORT
UNITED JEWISH FEDERATION OF GREATER STAMFORD INC 1035 NEWFIELD AVENUE SUITE 200 STAMFORD, CT 06905	06-0923384	501(C)(3)	5,500				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF COASTAL FAIRFIELD COUNTY 855 MAIN STREET 10TH FLOOR BRIDGEPORT, CT 06604	06-0864341	501(C)(3)	7,811				FOR GENERAL SUPPORT
UNITED WAY OF GREENWICH ONE LAFAYETTE COURT GREENWICH, CT 06830	06-0646578	501(C)(3)	60,550				FOR GENERAL SUPPORT
UNIVERSITY OF BRIDGEPORT 126 PARK AVENUE BRIDGEPORT, CT 06604	06-0646936	501(C)(3)	6,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CONNECTICUT BURSARS OFFICE 233 GLENBROOK UNIT 4100 STORRS, CT 06269	06-0772160	501(C)(3)	17,000				FOR GENERAL SUPPORT
UNIVERSITY OF CONNECTICUT FOUNDATION 2390 ALUMNI DRIVE UNIT STORRS, CT 06269	06-6070722	501(C)(3)	5,500				FOR GENERAL SUPPORT
UNIVERSITY OF VIRGINIA - DARDEN SCHOOL FOUNDATION PO BOX 400894 CHARLOTTESVILLE, VA 00907	54-6046419	501(C)(3)	9,800				FOR THE DARDEN ANUUAL FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN LEAGUE OF SOUTHERN CONNECTICUT 2777 SUMMER STREET STE 201 STAMFORD, CT 06905	06-0856692	501(C)(3)	30,000				FOR URBAN YOUTH EMPOWERMENT PROGRAM
URU THE RIGHT TO BE INC PO BOX 26925 WEST HAVEN, CT 06516	56-2520642	501(C)(3)	10,000				FOR GENERAL SUPPORT
VACAMAS PROGRAMS FOR YOUTH 256 MACOPIN ROAD WEST MILFORD, NJ 07480	13-5641852	501(C)(3)	15,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VAIL VALLEY FOUNDATION PO BOX 309 VAIL, CO 81658	74-2215035	501(C)(3)	5,000				FOR YOUR ANNUAL APPEAL
VASSAR COLLEGE 124 RAYMOND AV OFFICE OF ALUMNAE AFFAIRS BOX725 POUGHKEEPSIE, NY 12604	14-1338587	501(C)(3)	205,000				FOR GENERAL SUPPORT
VILAR PERFORMING ARTS CENTER PO BOX 3822 AVON, CO 81620	84-1316133	501(C)(3)	10,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VISITING NURSE SERVICES OF CONNECTICUT INC 765 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	06-0665196	501(C)(3)	7,733				FOR GENERAL SUPPORT
WAKEMAN BOYS & GIRLS CLUB 385 CENTER STREET SOUTHPORT, CT 06890	06-0662198	501(C)(3)	15,000				FOR GENERAL SUPPORT
WASHINGTON NATIONAL CATHEDRAL 3101 WISCONSIN AVE NW ATTN DEVELOPMENT WASHINGTON, DC 20016	53-0196604	501(C)(3)	5,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WATER 1ST 1904 3RD AVE SUITE 1012 SEATTLE, WA 98101	20-2601035	501(C)(3)	88,315				FOR GENERAL SUPPORT
WATERISLIFE PO BOX 2038 PHOENIX, AZ 85001	26-4470550	501(C)(3)	33,200				FOR GENERAL SUPPORT
WATERSIDE SCHOOL 770 PACIFIC STREET STAMFORD, CT 06902	06-1609222	501(C)(3)	26,500				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WE ACT FOR ENVIRONMENTAL JUSTICE 1854 AMSTERDAM AVENUE 2ND FLOOR NEW YORK, NY 10031	13-3800068	501(C)(3)	5,000				FOR GENERAL SUPPORT
WESTCHESTER GOLF ASSOCIATION CADDIE SCHOLARSHIP FUND INC 49 KNOLLWOOD ROAD ELMSFORD, NY 10523	13-6100835	501(C)(3)	6,000				FOR GENERAL SUPPORT
WESTPORT ARTS CENTER INC 51 RIVERSIDE AVENUE WESTPORT, CT 06880	06-0890501	501(C)(3)	5,600				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTPORT COUNTRY PLAYHOUSE 25 POWERS COURT WESTPORT, CT 06880	23-7357943	501(C)(3)	17,750				FOR GENERAL SUPPORT
WESTPORT LIBRARY ASSOCIATION ARNOLD BERNHARD PLAZA 20 JESUP ROAD ROAD WESTPORT, CT 06880	06-0672798	501(C)(3)	5,805				FOR GENERAL SUPPORT
WHOLESOME WAVE 855 MAIN STREET SUITE 910 BRIDGEPORT, CT 06604	26-0352899	501(C)(3)	8,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILDLIFE IN CRISIS INC PO BOX 1246 WESTON,CT 06883	22-3020015	501(C)(3)	18,500				FOR GIVING DAY PRIZES
WNYC - NEW YORK PUBLIC RADIO PO BOX 1550 NEW YORK,NY 10116	13-3015230	501(C)(3)	5,500				FOR GENERAL SUPPORT
WOMEN'S BUSINESS DEVELOPMENT COUNCIL 184 BEDFORD STREET SUITE 201 STAMFORD,CT 06901	06-1493737	501(C)(3)	67,000				FOR SUPPORT STAFFING NEW MICROLENDING INITIATIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S JUSTICE INITIATIVE A-625 PO BOX 669004 MIAMI SPRINGS, FL 33266	30-0681223	501(C)(3)	50,000				FOR THE ANNUAL APPEAL
WOMEN'S MENTORING NETWORK INC 141 FRANKLIN STREET STAMFORD, CT 06901	06-1470354	501(C)(3)	15,000				FOR WMN DONOR DIVERSIFICATION PROJECT
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063	95-1922279	501(C)(3)	5,000				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE CANCER CENTER PO BOX 7611 NEW HAVEN, CT 06519	06-0646973	501(C)(3)	25,000				FOR GENERAL SUPPORT
YANCY FORUMS LLC 33 RAILROAD AVENUE UNIT 4 MILFORD, CT 06460	46-3284034	501(C)(3)	15,000				FOR YANCY FORUMS FOR EDUCATIONAL LEADERS
YANKEE INSTITUTE FOR PUBLIC POLICY 216 MAIN STREET HARTFORD, CT 06106	52-1358144	501(C)(3)	5,200				FOR GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YEAR UP - BOSTON 45 MILK STREET 9TH FLOOR BOSTON, MA 02109	04-3534407	501(C)(3)	13,000				FOR THE "TEAM UP WITH YEAR UP" & ANNUAL APPEAL
YMCA CENTRAL CONNECTICUT COAST 1240 CHAPEL STREET NEW HAVEN, CT 06511	06-0662195	501(C)(3)	201,233				FOR GENERAL SUPPORT
YOUNG MARINERS FOUNDATION MERGED WITH SOUNDWATERS 68 SOUTHFIELD AVENUE SUITE 100 STAMFORD, CT 06902	06-1427077	501(C)(3)	10,000				FOR BLUE WATER BOUND SUMMER CAMP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA OF GREENWICH 259 E PUTNAM AVENUE GREENWICH, CT 06830	06-0646992	501(C)(3)	57,295				FOR THE 2015 SPIRIT OF GREENWICH AWARDS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a	No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JUANITA JAMES PRESIDENT AND CEO	(i)	264,392 -----	0 -----	0 -----	13,220 -----	8,936 -----	286,548 -----	0 -----
	(ii)	0	0	0	0	0	0	0
2 FIONA HODGSON VP, DEVELOPMENT & MARKETING	(i)	201,253 -----	0 -----	0 -----	10,063 -----	1,147 -----	212,463 -----	0 -----
	(ii)	0	0	0	0	0	0	0
3 KAREN BROWN VP, INNOVATION & STRATEGIC	(i)	162,592 -----	0 -----	0 -----	8,130 -----	13,413 -----	184,135 -----	0 -----
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Department of the Treasury
Internal Revenue Service

Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION

Employer identification number
06-1083893

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	26	945,764	FMV, DATE OF DEPOSIT
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

290

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	COLUMN (B) REPORTS THE NUMBER OF CONTRIBUTORS

SCHEDULE O
(Form 990 or
990-EZ)Department of the
Treasury
Internal Revenue
Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2015**Open to Public
Inspection**Name of the organization
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION**Employer identification number**

06-1083893

**Return
Reference****Explanation**

FORM 990, PART VI, SECTION B, LINE 11	FAIRFIELD COUNTY'S COMMUNITY FOUNDATION HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE, AND IS READY TO BE FILED WITH THE IRS, IT IS SUBMITTED ELECTRONICALLY TO MEMBERS OF THE BOARD OF DIRECTORS FOR ANY COMMENTS PRIOR TO ITS SUBMISSION. A REDACTED COPY OF THE RETURN WITH THE DONOR NAMES REMOVED IS PROVIDED TO THE BOARD. THE BOARD MEMBERS ARE GIVEN 10 DAYS TO REVIEW THE PREPARED FORM 990 AND PROVIDE THEIR COMMENTS. ANY COMMENTS ARE THEN GROUPED AND SUMMARIZED BY THE VP OF FINANCE AND PROVIDED TO THE PRESIDENT FOR REVIEW. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.
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Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>FCCF HAS IN PLACE A CONFLICT OF INTEREST POLICY WHICH IT ANNUALLY MONITORS AND ENFORCES THE BOARD MANDATES THAT ALL FOUNDATION BOARD MEMBERS, COMMITTEE MEMBERS AND STAFF ANNUALLY SIGN A CONFLICT OF INTEREST POLICY AND DISCLOSE ANY POTENTIAL OR ACTUAL CONFLICTS THAT MAY EXIST THE SIGNED CONFLICT OF INTEREST POLICY IS SUBMITTED TO THE CEO/PRESIDENT, WHO REVIEWS THE SIGNED ATTESTATIONS FOR POTENTIAL OR ACTUAL CONFLICTS IF A POTENTIAL OR ACTUAL CONFLICT OF INTEREST EXISTS, IT IS THE RESPONSIBILITY OF EACH BOARD MEMBER, COMMITTEE MEMBER AND STAFF PERSON TO INFORM THE PRESIDENT OF ANY DUAL OR CONFLICTING ROLES THEY MAY HAVE OR HAVE KNOWLEDGE OF, IF SUCH ARE NOT OTHERWISE MADE KNOWN IN THE FOREGOING PROCESS IT IS THEN THE RESPONSIBILITY OF THE PRESIDENT TO INFORM THE CHAIRPERSON OF THE BOARD AND/OR AFFECTED COMMITTEE CHAIRS OF THE DUAL OR CONFLICTING ROLES, FOR DISCUSSION AND RESOLUTION BY THE BOARD AT ITS NEXT SCHEDULED MEETING IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE INTERESTED PERSON WILL NOT BE ALLOWED TO VOTE OR BE A PART OF ANY DECISIONS ABOUT ANY SUCH TRANSACTIONS THAT HAVE TO DO WITH THE CONFLICT UNTIL SUCH TIME AS THERE IS NO LONGER A CONFLICT</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>FCCF HAS ESTABLISHED A WRITTEN COMPENSATION POLICY WHEREBY THE EXECUTIVE COMMITTEE REVIEWS COMPENSATION ANNUALLY FOR THE CEO, THE FINANCIAL OFFICER AND KEY EMPLOYEES IN A PROCESS THAT IS FREE OF CONFLICT OF INTEREST. THE EXECUTIVE COMMITTEE, WHICH FUNCTIONS AS A COMPENSATION COMMITTEE, REVIEWS APPROPRIATE AND ADEQUATE DATA TO DETERMINE THE REASONABLENESS OF COMPENSATION BEING CONSIDERED. THE EXECUTIVE COMMITTEE USES INFORMATION AND STUDIES TO SET AN APPROPRIATE COMPENSATION LEVEL FOR ITS CEO AND PRESIDENT. THE EXECUTIVE COMMITTEE USES SIMILAR DATA TO REVIEW AND APPROVE COMPENSATION RECOMMENDATIONS FOR OFFICERS AND KEY EMPLOYEES AS WELL. THE EXECUTIVE COMMITTEE'S COMPENSATION RECOMMENDATION IS DOCUMENTED AND INCLUDES THE DATE THE RECOMMENDATION IS REACHED, THE MEMBERS PRESENT AND VOTING, THE TERMS OF THE COMPENSATION THAT WERE APPROVED, AND THE COMPARABLE DATA USED TO MAKE THE RECOMMENDATION. THE COMPENSATION DECISION IS THEN PRESENTED TO THE BOARD OF DIRECTORS AT A REGULARLY SCHEDULED MEETING FOR APPROVAL. COMPENSATION FOR THE CEO, VP, FINANCE, VP, PROGRAMS AND VP, DEVELOPMENT AND MARKETING WERE LAST REVIEWED AND APPROVED DURING 2014.</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FAIRFIELD COUNTY COMMUNITY FOUNDATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR.ORG, THE ORGANIZATION'S WEBSITE AND A LINK TO GUIDESTAR.ORG IS POSTED ON THEIR OWN WEBSITE. IN ADDITION, THE FORM 990, THE GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR INSPECTION AT THE FOUNDATION'S OFFICES AND COPIES ARE AVAILABLE UPON WRITTEN REQUEST AT 383 MAIN AVENUE, NORWALK, CT 06851-1543 OR BY CALLING THE ORGANIZATION DIRECTLY AT 203-750-3200.

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 560 RETURN GRANTS 43,024

Return Reference	Explanation
PART XII, LINE 2C EXPLANATION	THE FOUNDATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR