

PKF O'CONNOR DAVIES ADVISORY, LLC
500 MAMARONECK AVENUE, SUITE 301
HARRISON, NY 10528-1633

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.
40 RICHARDS AVENUE
NORWALK, CT 06854



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

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024

B Check if applicable: C Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC. D Employer identification number 06-1083893
E Telephone number (203) 750-3200
G Gross receipts \$ 95,600,577.
H(a) Is this a group return for subordinates? Yes [X] No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: [X] 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527
J Website: WWW.FCCFOUNDATION.ORG
K Form of organization: [X] Corporation Trust Association Other L Year of formation: 1982 M State of legal domicile: CT

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O; 2-7 Governance; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

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.

Signature of officer WILLIAM C. ANDREWS, CHIEF FINANCIAL OFFICER
Date
Print/Type preparer's name MELISSA MODELSON
Preparer's signature MELISSA MODELSON
Date 02/24/25
Check if self-employed
PTIN P01603524
Firm's name PKF O'CONNOR DAVIES ADVISORY, LLC
Firm's EIN 87-3231666
Firm's address 500 MAMARONECK AVENUE, SUITE 301 HARRISON, NY 10528-1633
Phone no. 914-381-8900

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SEE SCHEDULE O

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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 24,766,297. including grants of \$ 24,766,297.) (Revenue \$) GRANTS - THE COMMUNITY FOUNDATION AWARDED AND MADE GRANTS TO 501(C)(3) ORGANIZATIONS TO SUPPORT EDUCATION AND YOUTH DEVELOPMENT, COMMUNITY AND ECONOMIC DEVELOPMENT, THE EMPOWERMENT OF WOMEN AND GIRLS, HEALTH, IMMIGRATION SUPPORT AND NONPROFIT CAPACITY BUILDING.

4b (Code:) (Expenses \$ 2,424,980. including grants of \$ 0.) (Revenue \$ 2,911.) COMMUNITY LEADERSHIP - FAIRFIELD COUNTY'S COMMUNITY FOUNDATION PROMOTES AND SUPPORTS COLLABORATIONS, PARTNERSHIPS AND INITIATIVES TO MAKE AN IMPACT FOR WOMEN AND GIRLS, OLDER YOUTH (WHO ARE NOT IN SCHOOL OR EMPLOYED), EQUITABLE HEALTH, ESPECIALLY MATERNAL HEALTH, AFFORDABLE HOUSING AS WELL AS INCOME AND ASSET BUILDING.

THE COMMUNITY FOUNDATION STRENGTHENS FAIRFIELD COUNTY NONPROFITS BY PROVIDING WORKSHOPS, TRAININGS AND TECHNICAL ASSISTANCE TO AGENCIES AND THEIR STAFF & VOLUNTEERS THROUGH THE FOUNDATION'S CENTER FOR NONPROFIT EXCELLENCE.

4c (Code:) (Expenses \$ 389,155. including grants of \$ 0.) (Revenue \$ 0.) PHILANTHROPIC ADVISORY SERVICES - THE COMMUNITY FOUNDATION EDUCATES DONORS, AGENCIES AND THE COMMUNITY TO INCREASE LOCAL PHILANTHROPY TO PROVIDE A STRONG BASE OF SUPPORT FOR FAIRFIELD COUNTY NONPROFIT ORGANIZATIONS NOW AND IN THE FUTURE.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 27,580,432.

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page **3**

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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
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>		X
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>	X	
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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>	X	
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>		X
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>		X
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>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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>	X	
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>	X	
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>		X
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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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>	X	
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>	X	
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>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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>	X	
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>		X
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>		X
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		X
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>	X	
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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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>	X	

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page 4

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
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 X	
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 X	
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	X
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	X
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	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
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	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
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	X
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	X
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	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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	X
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	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	25
b Enter the number of Forms W-2G included on 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	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
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		35
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	X	
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)?		X
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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
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?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 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 on Schedule O.	1a	22		
b Enter the number of voting members included on line 1a, above, who are independent	1b	22		
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			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
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			X
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			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
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 on Schedule O	9			X

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			X
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		X	
b Describe on 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		X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c		X	
13 Did the organization have a written whistleblower policy?	13		X	
14 Did the organization have a written document retention and destruction policy?	14		X	
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		X	
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b		X	
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			X
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 NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on 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
BILL ANDREWS, CHIEF FINANCIAL OFFICER – 203-750-3200
40 RICHARDS AVENUE, NORWALK, CT 06854

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and 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.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) MENDI BLUE PRESIDENT AND CEO	40.00			X			291,897.	0.	38,243.	
(2) WILLIAM ANDREWS CHIEF FINANCIAL OFFICER	40.00			X			201,073.	0.	45,196.	
(3) JOSEPH COLLIN VP, PHILANTHROPY	40.00				X		166,061.	0.	39,645.	
(4) ELAINE MINTZ VP, STRATEGY & EXTERNAL RELATIONS	40.00				X		186,414.	0.	10,839.	
(5) TARA BERLINGO VP, PEOPLE & CULTURE	40.00				X		161,735.	0.	10,031.	
(6) LUTONYA RUSSELL-HUMES VP, GRANTS & PROGRAMS	40.00				X		156,086.	0.	9,294.	
(7) TANYA HILLS DIRECTOR, LEARNING, EVALUATION & RES	40.00				X		102,700.	0.	25,530.	
(8) MAYA REDDI BOARD CHAIR	3.00	X		X			0.	0.	0.	
(9) JOHNNA TORSONE BOARD VICE CHAIR, THRU JUNE 2024	3.00	X		X			0.	0.	0.	
(10) CLAYTON H. FOWLER BOARD VICE CHAIR	3.00	X		X			0.	0.	0.	
(11) CHRISTOPHER C. WHITNEY BOARD TREASURER	3.00	X		X			0.	0.	0.	
(12) JONATHAN FRAADE BOARD SECRETARY	3.00	X		X			0.	0.	0.	
(13) JUSTIN BEAL BOARD MEMBER, THRU JUNE 2024	1.00	X					0.	0.	0.	
(14) ANTHONY L. BENNTT BOARD MEMBER	1.00	X					0.	0.	0.	
(15) TERRENCE CHENG BOARD MEMBER	1.00	X					0.	0.	0.	
(16) AMANDA CASTELLANO BOARD MEMBER	1.00	X					0.	0.	0.	
(17) STEPHEN EDWARDS BOARD MEMBER	1.00	X					0.	0.	0.	

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page **8**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) GERALD M. FOX III BOARD MEMBER, THRU JUNE 2024	1.00	X						0.	0.	0.
(19) EDWIN FORD BOARD MEMBER	1.00	X						0.	0.	0.
(20) LAURA FARRELLY BOARD MEMBER	1.00	X						0.	0.	0.
(21) MICHELLE GARVEY BOARD MEMBER, THRU JUNE 2024	1.00	X						0.	0.	0.
(22) CAROLYN GONZALEZ BOARD MEMBER	1.00	X						0.	0.	0.
(23) JOEL GREEN BOARD MEMBER	1.00	X						0.	0.	0.
(24) MINDY HOUCK BOARD MEMBER	1.00	X						0.	0.	0.
(25) CHRISTOPHER JOHNSON BOARD MEMBER	1.00	X						0.	0.	0.
(26) JOETTE KATZ BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal								1,265,966.	0.	178,778.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,265,966.	0.	178,778.

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 8

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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>	X	
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>		X

Section B. Independent Contractors

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.

(A) Name and business address	(B) Description of services	(C) Compensation
NEPC, LLC 255 STATE STREET, BOSTON, MA 02109	INVESTMENT ADVISOR	302,200.
TURN TWO COMMUNICATIONS 9517 WHITE SPRING WAY, COLUMBIA, MD 21046	MARKETING SERVICES	199,502.
DOT THINK DESIGN 82 LOBDELL DRIVE, STRATFORD, CT 06614	MARKETING SERVICES	120,738.

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 3

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2023)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.

Form 990

06-1083893

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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			
(27) KATHARINE SACHS LUMBY BOARD MEMBER	1.00	X						0.	0.	0.
(28) CHARLES MACCORMACK BOARD MEMBER	1.00	X						0.	0.	0.
(29) NEIL MARCUS BOARD MEMBER	1.00	X						0.	0.	0.
(30) CHUCK PRESBURY BOARD MEMBER	1.00	X						0.	0.	0.
(31) MARIE ROCHA BOARD MEMBER	1.00	X						0.	0.	0.
(32) MARK RISER BOARD MEMBER, THRU JUNE 2024	1.00	X						0.	0.	0.
(33) MAYA TICHIO BOARD MEMBER, THRU JUNE 2024	1.00	X						0.	0.	0.
(34) PRESTON TISDALE BOARD MEMBER	1.00	X						0.	0.	0.
(35) NATHANIEL YORDON BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page **9**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	357,753.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	74,340.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	14,099,256.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 2,850,229.				
	h Total. Add lines 1a-1f		14,531,349.				
Program Service Revenue	2 a WORKSHOP INCOME AND SYMPOSIUM FEE	Business Code					
		900099	2,911.	2,911.			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		2,911.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,735,778.		-212,482.	2948260.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				78,309,591.			
	b Less: cost or other basis and sales expenses	7b	75,288,165.				
	c Gain or (loss)	7c	3,021,426.				
	d Net gain or (loss)		3,021,426.		68,569.	2952857.	
8 a Gross income from fundraising events (not including \$ 357,753. of contributions reported on line 1c). See Part IV, line 18	8a		12,415.				
		b Less: direct expenses	8b	49,570.			
c Net income or (loss) from fundraising events		-37,155.			-37,155.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
		b Less: cost of goods sold	10b				
		c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a MISCELLANEOUS INCOME	Business Code					
		900099	8,533.			8,533.	
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		8,533.					
12 Total revenue. See instructions		20,262,842.	2,911.	-143,913.	5872495.		

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page **10**

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 ...	24,366,745.	24,366,745.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	399,552.	399,552.		
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	626,721.	40,326.	311,562.	274,833.
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	2,810,872.	1,642,929.	908,433.	259,510.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	131,222.	76,845.	41,910.	12,467.
9 Other employee benefits	260,705.	145,857.	80,085.	34,763.
10 Payroll taxes	251,206.	125,026.	88,031.	38,149.
11 Fees for services (nonemployees):				
a Management				
b Legal	10,021.		10,021.	
c Accounting	87,300.		87,300.	
d Lobbying	13,348.		13,348.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	574,907.		574,907.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	753,388.	360,294.	287,938.	105,156.
12 Advertising and promotion	23,431.	11,331.	8,187.	3,913.
13 Office expenses	112,859.	52,253.	38,750.	21,856.
14 Information technology	238,805.	117,317.	84,757.	36,731.
15 Royalties				
16 Occupancy	253,241.	135,485.	75,337.	42,419.
17 Travel	2,381.	1,170.	845.	366.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	79,730.	39,169.	28,298.	12,263.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	44,656.	21,938.	15,849.	6,869.
23 Insurance	17,337.	9,008.	5,509.	2,820.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a UBI TAXES	10,750.	5,350.	3,767.	1,633.
b EVENT EXPENSE	116,340.	16,409.	11,855.	88,076.
c PROGRAM INITIATIVE EXPE	10,451.	10,451.		
d MISCELLANEOUS	7,607.	2,907.	721.	3,979.
e All other expenses	131.	70.	39.	22.
25 Total functional expenses. Add lines 1 through 24e	31,203,706.	27,580,432.	2,677,449.	945,825.
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)				

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Form 990 (2023)

06-1083893 Page **11**

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	1,304,550.	1		115,519.	
	2 Savings and temporary cash investments	17,461,606.	2		9,132,970.	
	3 Pledges and grants receivable, net		3			
	4 Accounts receivable, net	61.	4		4,860.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5			
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6			
	7 Notes and loans receivable, net	0.	7		10,000.	
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges	145,390.	9		180,952.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	373,052.				
	b Less: accumulated depreciation	355,345.				
	11 Investments - publicly traded securities	71,150,100.	11		82,628,686.	
	12 Investments - other securities. See Part IV, line 11	175,906,845.	12		188,836,530.	
	13 Investments - program-related. See Part IV, line 11		13			
	14 Intangible assets		14			
	15 Other assets. See Part IV, line 11	1,300,819.	15		1,103,398.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	267,327,634.	16		282,030,622.		
Liabilities	17 Accounts payable and accrued expenses	393,799.	17		530,885.	
	18 Grants payable	61,578.	18		797,522.	
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	1,518,160.	25		1,293,230.	
	26 Total liabilities. Add lines 17 through 25	1,973,537.	26		2,621,637.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27 Net assets without donor restrictions	5,857,149.	27		6,678,186.	
	28 Net assets with donor restrictions	259,496,948.	28		272,730,799.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29 Capital stock or trust principal, or current funds		29			
	30 Paid-in or capital surplus, or land, building, or equipment fund		30			
	31 Retained earnings, endowment, accumulated income, or other funds		31			
	32 Total net assets or fund balances	265,354,097.	32		279,408,985.	
33 Total liabilities and net assets/fund balances	267,327,634.	33		282,030,622.		

Form **990** (2023)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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	20,262,842.
2 Total expenses (must equal Part IX, column (A), line 25)	2	31,203,706.
3 Revenue less expenses. Subtract line 2 from line 1	3	-10,940,864.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	265,354,097.
5 Net unrealized gains (losses) on investments	5	24,992,332.
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 on Schedule O)	9	3,420.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	279,408,985.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	X	
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
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 on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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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 12, 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).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 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						

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18221388.	28631864.	41853843.	17883701.	14531349.	121122145
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	18221388.	28631864.	41853843.	17883701.	14531349.	121122145
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)						52046159.
6 Public support. Subtract line 5 from line 4.						69075986.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	18221388.	28631864.	41853843.	17883701.	14531349.	121122145
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2163827.	1139481.	997,835.	1706908.	2948260.	8956311.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,150.	2,545.			8,533.	13,228.
11 Total support. Add lines 7 through 10						130091684
12 Gross receipts from related activities, etc. (see instructions)					12	182,579.
13 First 5 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 2023 (line 6, column (f), divided by line 11, column (f))	14	53.10	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	57.15	%
16a 33 1/3% support test - 2023. 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 - 2022. 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 - 2023. 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 - 2022. 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 10 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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 5 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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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

b 33 1/3% support tests - 2022. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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 on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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>		
1		
2		

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>		
1		

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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 on line 2, above, 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>		
1		
2		
3		

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 governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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>	Yes	No
b Did the activities described on line 2a, above, 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 Parent of Supported Organizations. Answer lines 3a and 3b 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>If "Yes" or "No" 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>		
2a		
2b		
3a		
3b		

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

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 (*explain in Part VI*). **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):		
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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount	(A) Prior Year	(B) Current Year (optional)
1 Adjusted net income for prior year (from Section A, line 8, column A)	1	Current Year
2 Enter 0.85 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 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

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	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9 Distributable amount for 2023 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2019 AMOUNT: \$ 2,150.

2020 AMOUNT: \$ 2,545.

2023 AMOUNT: \$ 8,533.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Employer identification number

06-1083893

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>5,185,830.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>1,212,784.</u>	Person Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>1,075,002.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>775,400.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>654,322.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	<hr/> <hr/> <hr/>	\$ <u>494,855.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>491,333.</u>	Person Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>330,000.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>303,500.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	PUBLICLY TRADED SECURITIES _____ _____ _____	\$ <u>1,212,784.</u>	<u>12/28/23</u>
5	PUBLICLY TRADED SECURITIES _____ _____ _____	\$ <u>454,322.</u>	<u>03/20/24</u>
7	PUBLICLY TRADED SECURITIES _____ _____ _____	\$ <u>491,333.</u>	<u>11/14/23</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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 organization	FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	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 campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities

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? Yes No
- 4a Was a correction made? Yes 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? Yes 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-.

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 (grassroots lobbying)	13,348.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0.													
c Total lobbying expenditures (add lines 1a and 1b)	13,348.													
d Other exempt purpose expenditures	29,669,626.													
e Total exempt purpose expenditures (add lines 1c and 1d)	29,682,974.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	5,250.	5,625.	13,682.	13,348.	37,905.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	5,250.	5,625.	13,682.	13,348.	37,905.

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)).

	(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 not be 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 campaign activity 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).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
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 expenditures next year?	4
5 Taxable amount of lobbying and political expenditures. See instructions	5

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.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.** 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	230	
2 Aggregate value of contributions to (during year)	10,232,418.	
3 Aggregate value of grants from (during year)	16,786,059.	
4 Aggregate value at end of year	114,982,848.	
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?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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 Tax 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 on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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 2d 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 FASB 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 FASB 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

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

Schedule D (Form 990) 2023

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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 make 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 program
- 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:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 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" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	260,274,109.	253,503,134.	259,279,280.	210,013,956.	217,256,917.
b Contributions	12,813,031.	16,446,270.	40,316,195.	26,823,388.	17,100,467.
c Net investment earnings, gains, and losses	27,421,084.	19,191,189.	-18,835,172.	55,551,109.	1,114,537.
d Grants or scholarships	9,056,073.	13,513,611.	14,024,939.	13,513,611.	13,534,428.
e Other expenditures for facilities and programs					
f Administrative expenses	20,873,532.	15,352,873.	13,232,230.	19,595,562.	11,923,537.
g End of year balance	270,578,619.	260,274,109.	253,503,134.	259,279,280.	210,013,956.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 1.0300 %
- b** Permanent endowment .0000 %
- c** Term endowment 98.9700 %
- 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:
- | | Yes | No |
|--|-----|----|
| 3a(i) Unrelated organizations? | X | |
| 3a(ii) Related organizations? | | X |
| 3b If "Yes" on line 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" on 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		373,052.	355,345.	17,707.
e Other				

Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))* **17,707.**

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule D (Form 990) 2023

06-1083893 Page **3**

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) ALTERNATIVE INVESTMENTS	188,836,530.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	188,836,530.	

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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

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
(1) Federal income taxes	
(2) LIABILITY UNDER SPLIT-INTEREST	
(3) AGREEMENTS	2,922.
(4) OPERATING LEASE LIABILITY	1,290,308.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,293,230.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Schedule D (Form 990) 2023

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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	43,625,974.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	24,992,332.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	156,827.
e	Add lines 2a through 2d	2e	25,149,159.
3	Subtract line 2e from line 1	3	18,476,815.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	574,907.
b	Other (Describe in Part XIII.)	4b	1,211,120.
c	Add lines 4a and 4b	4c	1,786,027.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	20,262,842.

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	28,978,311.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	49,570.
e	Add lines 2a through 2d	2e	49,570.
3	Subtract line 2e from line 1	3	28,928,741.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	574,907.
b	Other (Describe in Part XIII.)	4b	1,700,058.
c	Add lines 4a and 4b	4c	2,274,965.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	31,203,706.

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.

PART V, LINE 4:

THE COMMUNITY FOUNDATION'S ENDOWMENT CONSISTS OF APPROXIMATELY 400

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.

ENDOWED FUNDS INCLUDE BOTH DONOR-RESTRICTED 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

Part XIII Supplemental Information (continued)

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 X, LINE 2:

THE COMMUNITY FOUNDATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS WHEN THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE COMMUNITY FOUNDATION HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. THE COMMUNITY FOUNDATION IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO FISCAL 2021.

Part XIII Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

AGENCY FUNDS - OTHER EXPENSES	103,837.
SPECIAL EVENT EXPENSES REPORTED ON PART VIII, LINE 8B	49,570.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	3,420.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	156,827.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUNDS - CONTRIBUTIONS	3,784.
AGENCY FUNDS - INVESTMENT EARNINGS	1,207,336.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	1,211,120.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES REPORTED ON PART VIII, LINE 8B	49,570.
---	---------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY FUNDS - GRANTS MADE	1,700,056.
AGENCY FUNDS - OTHER EXPENSES	2.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,700,058.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization
**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Employer identification number
06-1083893

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on 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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		47,910,427.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		5,158,803.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	INVESTMENTS		3,138,944.
3 a Subtotal	0	0			56,208,174.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			56,208,174.

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
 INC.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on 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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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 the 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 separately 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 the Instructions for Forms 3520 and 3520-A; don't 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 the 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 the 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 the 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 separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't 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.

PART IV, LINE 1:

THE ORGANIZATION IS REQUIRED TO FILE FORM 926 BECAUSE IT MEETS THE
APPLICABLE FILING THRESHOLD REQUIREMENT.

PART IV, LINE 3:

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 5471 BECAUSE IT DOES NOT
MEET THE APPLICABLE THRESHOLD FOR OWNERSHIP OR OTHER FILING
REQUIREMENTS.

PART IV, LINE 4:

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 8621 BECAUSE IT DOES NOT
MEET THE APPLICABLE THRESHOLD FOR OWNERSHIP OR OTHER FILING
REQUIREMENTS.

PART IV, LINE 5:

THE ORGANIZATION IS REQUIRED TO FILE FORM 8865 BECAUSE IT MEETS THE
APPLICABLE FILING THRESHOLD REQUIREMENT.

**SCHEDULE G
(Form 990)**

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, line 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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.**

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
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a 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 10 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			
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.

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		WOMEN & GIRLS LUNCHE (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	370,168.		370,168.
	2	Less: Contributions	357,753.		357,753.
	3	Gross income (line 1 minus line 2)	12,415.		12,415.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	22,243.		22,243.
	7	Food and beverages			
	8	Entertainment	200.		200.
	9	Other direct expenses	27,127.		27,127.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			49,570.
11	Net income summary. Subtract line 10 from line 3, column (d)			-37,155.	

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.

		(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: _____

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.

- 11 Does the organization conduct gaming activities with nonmembers?
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?
13 Indicate the percentage of gaming activity conducted in:
a The organization's facility
b An outside facility
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?
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?
b Enter the amount of distributions required under state law to be 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 provide any additional information. See instructions.

Blank lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Employer identification number
06-1083893

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
DOMUS KIDS INC 83 LOCKWOOD AVE STAMFORD, CT 06902	06-0891998	501(C)(3)	1,408,252.	0.			FOR GENERAL SUPPORT
OPTIMUS HEALTH CARE, INC. 982 E MAIN ST BRIDGEPORT, CT 06608-2409	06-0972166	501(C)(3)	683,603.	0.			FOR GENERAL SUPPORT
AMERICAN RED CROSS DISASTER RELIEF FUND HQ - PO BOX 37839 - BOONE, IA 50037	53-0196605	501(C)(3)	646,335.	0.			FOR GENERAL SUPPORT
AYCO CHARITABLE FOUNDATION 25 BRITISH AMERICAN BLVD. LATHAM, NY 12110-1405	14-1782466	501(C)(3)	573,901.	0.			FOR GENERAL SUPPORT
AMERICAN FORESTS 1220 L ST NW WASHINGTON, DC 20005-1016	53-0196544	501(C)(3)	545,000.	0.			FOR GENERAL SUPPORT
MOTHERS AGAINST DRUNK DRIVING NATIONAL PROCESSING CENTER DES MOINES, IA 50340-0165	94-2707273	501(C)(3)	500,000.	0.			FOR GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 445.

3 Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) 2023

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN IN MUSIC 322 W 57TH ST NEW YORK, NY 10019	13-3384908	501(C)(3)	475,000.	0.			FOR GENERAL SUPPORT
ALDRICH CONTEMPORARY ART MUSEUM 258 MAIN ST RIDGEFIELD, CT 06877	06-6069965	501(C)(3)	441,600.	0.			FOR GENERAL SUPPORT
HOUSATONIC COMMUNITY COLLEGE FOUNDATION - 900 LAFAYETTE BLVD - BRIDGEPORT, CT 06604-4704	06-1291848	501(C)(3)	375,000.	0.			FOR GENERAL SUPPORT
SCHOLARSHIP AMERICA, INC PO BOX 772514 DETROIT, MI 48277-2514	04-2296967	501(C)(3)	364,431.	0.			FOR GENERAL SUPPORT
IMMIGRANT JUSTICE CORPS 17 BATTERY PLACE, SUITE 1234 NEW YORK, NY 10004	46-4879076	501(C)(3)	360,509.	0.			FOR GENERAL SUPPORT
CENTRAL CONNECTICUT COAST YMCA 1240 CHAPEL ST NEW HAVEN, CT 06510	06-0662195	501(C)(3)	303,800.	0.			FOR GENERAL SUPPORT
SOUTHERN UNIVERSITY SYSTEM FOUNDATION - 598 HARDING BLVD - BATON ROUGE, LA 70813	23-7052911	501(C)(3)	300,000.	0.			FOR GENERAL SUPPORT
DAWS 94 S MAIN ST NEWTOWN, CT 06470	06-0945388	501(C)(3)	275,000.	0.			FOR GENERAL SUPPORT
UNITED WAY OF COASTAL AND WESTERN CONNECTICUT - 10 MIDDLE STREET - BRIDGEPORT, CT 06604-4704	06-0646577	501(C)(3)	269,916.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON LITERACY CENTER 1133 15TH STREET, NW SUITE 400 WASHINGTON, DC 20005	52-6063003	501(C)(3)	262,000.	0.			FOR GENERAL SUPPORT
FEED THE SOUL FOUNDATION TEXAS TOWERS HOUSTON, TX 75002	85-1724640	501(C)(3)	260,000.	0.			FOR GENERAL SUPPORT
FEEDING AMERICA 135 S LASALLE ST CHICAGO, IL 60602	36-3673599	501(C)(3)	255,000.	0.			FOR GENERAL SUPPORT
CAREER RESOURCES, INC 1000 LAFAYETTE BLVD BRIDGEPORT, CT 06604-4704	06-1427945	501(C)(3)	252,500.	0.			FOR GENERAL SUPPORT
NAACP EMPOWERMENT PROGRAMS, INC 4805 MOUNT HOPE DR BALTIMORE, MD 21215	13-1084135	501(C)(3)	250,000.	0.			FOR GENERAL SUPPORT
TALK TECH ASSOCIATION 305 WEST BROADWAY NEW YORK, NY 10013-5306	83-0666877	501(C)(3)	250,000.	0.			FOR GENERAL SUPPORT
JOE BURROW FOUNDATION 6862 LIBERTY PLAZA DR STE 100 MIDDLETOWN, OH 45044	88-3653719	501(C)(3)	250,000.	0.			FOR GENERAL SUPPORT
THE NEW YORK WOMEN'S FOUNDATION 39 BROADWAY 33RD FL NEW YORK, NY 10006	13-3457287	501(C)(3)	250,000.	0.			FOR GENERAL SUPPORT
FIVE FROGS, INC 357 COMMERCE DRIVE FAIRFIELD, CT 06825	81-3273201	501(C)(3)	250,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENWICH SCHOLARSHIP ASSOCIATION PO BOX 4627 GREENWICH, CT 06831	06-1467698	501(C)(3)	240,413.	0.			FOR GENERAL SUPPORT
NORWALK COMMUNITY COLLEGE FOUNDATION - 188 RICHARDS AVE STE E 311 - NORWALK, CT 06854-1634	06-6080293	501(C)(3)	222,553.	0.			FOR GENERAL SUPPORT
NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BLVD LOS ANGELES, CA 90010	95-4539765	501(C)(3)	200,000.	0.			FOR GENERAL SUPPORT
NEW REACH, INC 269 PECK STREET NEW HAVEN, CT 06513	22-3037451	501(C)(3)	186,090.	0.			FOR GENERAL SUPPORT
THE NORWALK ART SPACE INC 455 WEST AVENUE NORWALK, CT 06850	86-3340267	501(C)(3)	175,000.	0.			FOR GENERAL SUPPORT
BUILDING ONE COMMUNITY 417 SHIPPAN AVE STAMFORD, CT 06902	27-5024317	501(C)(3)	162,500.	0.			FOR GENERAL SUPPORT
CARVER FOUNDATION OF NORWALK INC 7 ACADEMY ST NORWALK, CT 06850	06-0862072	501(C)(3)	161,500.	0.			FOR GENERAL SUPPORT
GREENS FARMS ACADEMY 35 BEACHSIDE AVE WESTPORT, CT 06880	06-0733693	501(C)(3)	160,250.	0.			FOR GENERAL SUPPORT
IRIS FUND 79 GOLF LANE RIDGEFIELD, CT 06877	93-1891413	501(C)(3)	151,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONVOY OF HOPE PO BOX 1125 SPRINGFIELD, MO 65801	68-0051386	501(C)(3)	150,000.	0.			FOR GENERAL SUPPORT
SOCIAL IMPACT PARTNERS, INC 1221 POST ROAD E STE 302 WESTPORT, CT 06880	85-1704762	501(C)(3)	142,500.	0.			FOR GENERAL SUPPORT
UPTOGETHER ATTENTION: FINANCE TEAM OAKLAND, CA 94612	20-0784790	501(C)(3)	140,000.	0.			FOR GENERAL SUPPORT
PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND - 345 WHITNEY AVE - NEW HAVEN, CT 06511-2384	06-0263565	501(C)(3)	132,000.	0.			FOR GENERAL SUPPORT
PACKAGES FROM HOME 5643 N 52ND AVE GLENDALE, AZ 85301	20-1124013	501(C)(3)	126,000.	0.			FOR GENERAL SUPPORT
INSPIRICA, INC 141 FRANKLIN ST STAMFORD, CT 06901	06-1172535	501(C)(3)	118,280.	0.			FOR GENERAL SUPPORT
HORIZONS AT NEW CANAAN COUNTRY SCHOOL - 635 FROGTOWN RD - NEW CANAAN, CT 06840	06-0646765	501(C)(3)	118,000.	0.			FOR GENERAL SUPPORT
NORWALK ACTS INC 9 MOTT AVENUE NORWALK, CT 06850	82-5334443	501(C)(3)	117,500.	0.			FOR GENERAL SUPPORT
BILL PICKETT INVITATIONAL RODEO FOUNDATION - 2617 GRAY MILL WAY - LOGANVILLE, GA 30052	74-2509144	501(C)(3)	113,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA METROPOLITAN CHICAGO 1 N LASALLE ST CHICAGO, IL 60602	36-2179765	501(C)(3)	110,000.	0.			FOR GENERAL SUPPORT
RENEW DEMOCRACY INITIATIVE 1230 6TH AVE FL 16 NEW YORK, NY 10020	82-2547275	501(C)(3)	107,500.	0.			FOR GENERAL SUPPORT
STAMFORD MUSEUM & NATURE CENTER 39 SCOFIELDTOWN RD STAMFORD, CT 06903-4199	06-0653148	501(C)(3)	106,744.	0.			FOR GENERAL SUPPORT
AMERICARES FOUNDATION INC. 88 HAMILTON AVE STAMFORD, CT 06902	06-1008595	501(C)(3)	105,762.	0.			FOR GENERAL SUPPORT
CATALYST CT INC. 2470 FAIRFIELD AVE BRIDGEPORT, CT 06605-2647	06-1357699	501(C)(3)	105,500.	0.			FOR GENERAL SUPPORT
CONNECT US, INC 1000 LAFAYETTE BLVD 2ND FL BRIDGEPORT, CT 06604-4704	38-4043924	501(C)(3)	105,000.	0.			FOR GENERAL SUPPORT
WATERSIDE SCHOOL 770 PACIFIC ST STAMFORD, CT 06902	06-1609222	501(C)(3)	102,500.	0.			FOR GENERAL SUPPORT
NORWALK PUBLIC SCHOOLS 125 EAST AVE NORWALK, CT 06852	06-6011881	501(C)(3)	101,000.	0.			FOR GENERAL SUPPORT
PAT TILLMAN FOUNDATION 180 N. LASALLE ST., STE. 2910 CHICAGO, IL 60601	20-1072336	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMHERST EARLY MUSIC 35 WEBSTER ST WEST NEWTON, MA 02465-1859	13-3345308	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
HOMEFRONT, INC 88 HAMILTON AVE STAMFORD, CT 06902	30-0281085	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
RISE NETWORK 700 STATE STREET NEW HAVEN, CT 06511-2384	81-4104274	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
FIGHTING ATROCITIES AGAINST WOMEN WORLDWIDE, INC. - 568 JONES RD - ENGLEWOOD, NJ 07631	83-3844923	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
BUNKER LABS NFP INC 230 E OHIO ST CHICAGO, IL 60611	47-1474802	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
MARYLAND FOOD BANK, INC 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	52-1135690	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
GREATER BOSTON FOOD BANK, INC 70 SOUTH BAY AVENUE BOSTON, MA 02118	04-2717782	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
SOUTHERN INVITATIONAL SMOKE PO BOX 130407 HOUSTON, TX 77219-0407	81-2423050	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT
ASYLUM SEEKER ADVOCACY PROJECT 228 PARK AVE S NEW YORK, NY 10003	83-3011862	501(C)(3)	100,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PERSON TO PERSON, INC. 1864 POST RD DARIEN, CT 06820-5802	06-1422248	501(C)(3)	98,500.	0.			FOR GENERAL SUPPORT
GREENWICH ACADEMY ADVANCEMENT GREENWICH, CT 06830-5387	06-0653118	501(C)(3)	96,500.	0.			FOR GENERAL SUPPORT
KIDS IN CRISIS, INC 1 SALEM ST COS COB, CT 06807	06-1027885	501(C)(3)	93,075.	0.			FOR GENERAL SUPPORT
TODAY'S STUDENTS TOMORROW'S TEACHERS - 333 WESTCHESTER AVE - WHITE PLAINS, NY 10604	13-4049153	501(C)(3)	87,500.	0.			FOR GENERAL SUPPORT
EDUCATE2ENVISION INTERNATIONAL PO BOX 223 SAN LEANDRO, CA 94577	27-2998868	501(C)(3)	85,000.	0.			FOR GENERAL SUPPORT
CIRI 670 CLINTON AVE BRIDGEPORT, CT 06605-2647	06-0669118	501(C)(3)	84,500.	0.			FOR GENERAL SUPPORT
WAKEMAN BOYS & GIRLS CLUB 595 MADISON AVE BRIDGEPORT, CT 06604-4704	06-0662198	501(C)(3)	83,500.	0.			FOR GENERAL SUPPORT
ALZHEIMER'S DRUG DISCOVERY FOUNDATION - 57 W 57TH ST., STE. 904 - NEW YORK, NY 10019	20-1082179	501(C)(3)	82,189.	0.			FOR GENERAL SUPPORT
CONNECTICUT PUBLIC BROADCASTING NETWORK - 1049 ASYLUM AVE - HARTFORD, CT 06106	06-0758938	501(C)(3)	80,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
C.O.R.N.E.R.S COMMUNITY 24 HILLSIDE AVENUE STAMFORD, CT 06902	92-0922519	501(C)(3)	80,000.	0.			FOR GENERAL SUPPORT
ROCKEFELLER PHILANTHROPY ADVISORS 120 BROADWAY STE 3475 NEW YORK, NY 10271-3401	13-3615533	501(C)(3)	77,175.	0.			FOR GENERAL SUPPORT
ST. MARK'S EPISCOPAL CHURCH 111 OENOKE RIDGE NEW CANAAN, CT 06840		501(C)(3)	75,000.	0.			FOR GENERAL SUPPORT
OPEN DOORS 4 MERRITT STREET NORWALK, CT 06854-1525	22-2536909	501(C)(3)	71,000.	0.			FOR GENERAL SUPPORT
STAMFORD SENIOR CENTER 888 WASHINGTON BLVD STAMFORD, CT 06901	06-1456561	501(C)(3)	70,000.	0.			FOR GENERAL SUPPORT
MOUNT SINAI HEALTH SYSTEM ONE GUSTAVE LEVY PLACE NEW YORK, NY 10029	13-1624096	501(C)(3)	68,000.	0.			FOR GENERAL SUPPORT
HEALTH EQUITY SOLUTIONS 53 OAK STREET HARTFORD, CT 06106	46-5011055	501(C)(3)	66,666.	0.			FOR GENERAL SUPPORT
CREATIVE VISIONS FOUNDATION 18820 PACIFIC COAST HWY MALIBU, CA 90265	39-1902814	501(C)(3)	65,000.	0.			FOR GENERAL SUPPORT
COMMUNITY MINDFULNESS PROJECT PO BOX 1713 NEW CANAAN, CT 06840	81-0944116	501(C)(3)	62,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RON FINLEY PROJECT PO BOX 3664 BEVERLY HILLS, CA 90212	47-1416564	501(C)(3)	60,784.	0.			FOR GENERAL SUPPORT
CALIFORNIA ASSOCIATION OF FOOD BANKS - 1624 FRANKLIN STREET #722 - OAKLAND, CA 94612	68-0392816	501(C)(3)	60,000.	0.			FOR GENERAL SUPPORT
VISIT BALTIMORE EDUCATION & TRAINING FOUNDATION INC. - C/O VISIT BALTIMORE, INC. - BALTIMORE, MD 21202	47-1753100	501(C)(3)	60,000.	0.			FOR GENERAL SUPPORT
SOUTHWESTERN CT AGENCY ON AGING 1000 LAFAYETTE BOULEVARD BRIDGEPORT, CT 06604-4704	06-0916407	501(C)(3)	58,789.	0.			FOR GENERAL SUPPORT
CHILDREN'S LEARNING CENTERS OF FAIRFIELD COUNTY, INC - 64 PALMERS HILL RD - STAMFORD, CT 06902	06-0665191	501(C)(3)	57,623.	0.			FOR GENERAL SUPPORT
CONNECTICUT LEGAL SERVICES, INC 62 WASHINGTON ST MIDDLETOWN, CT 06457	06-0955461	501(C)(3)	57,510.	0.			FOR GENERAL SUPPORT
BRIDGEPORT PUBLIC EDUCATION FUND 446 UNIVERSITY AVE BRIDGEPORT, CT 06604-4704	06-1379383	501(C)(3)	57,034.	0.			FOR GENERAL SUPPORT
WILLIAM F. BUCKLEY, JR. PROGRAM AT YALE UNIVERSITY - 234 CHURCH STREET, 7TH FLOOR - NEW HAVEN, CT 06510	27-5131268	501(C)(3)	56,000.	0.			FOR GENERAL SUPPORT
STAMFORD HOSPITAL FOUNDATION 3001 SUMMER ST 2ND FL STAMFORD, CT 06950-4317	06-0646917	501(C)(3)	55,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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CONNECTICUT HUMANE SOCIETY 701 RUSSELL RD NEWINGTON, CT 06111	06-0667605	501(C)(3)	53,500.	0.			FOR GENERAL SUPPORT
HOUSING DEVELOPMENT FUND, INC. 100 PROSPECT ST STAMFORD, CT 06901	06-1276156	501(C)(3)	52,500.	0.			FOR GENERAL SUPPORT
NORWALK/STAMFORD GRASSROOTS TENNIS & EDUCATION, INC - 11 INGALLS AVE - NORWALK, CT 06854-1525	06-1570097	501(C)(3)	52,000.	0.			FOR GENERAL SUPPORT
LIBERATION PROGRAMS, INC 339 WEST AVENUE BRIDGEPORT, CT 06604-4704	06-0867006	501(C)(3)	51,000.	0.			FOR GENERAL SUPPORT
ARTSCONNECTION 45 WEST 34TH STREET NEW YORK, NY 10001	13-2953240	501(C)(3)	50,500.	0.			FOR GENERAL SUPPORT
WOMEN'S MENTORING NETWORK, INC 141 FRANKLIN ST STAMFORD, CT 06901	06-1470354	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
CONNECTICUT COUNCIL FOR PHILANTHROPY - 75 CHARTER OAK AVE STE 1-205 - HARTFORD, CT 06106	23-7024016	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
LESBIAN, GAY, BISEXUAL & TRANSGENDER COMMUNITY CENTER - 208 W 13TH ST - NEW YORK, NY 10011	13-3217805	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
THISTLE FARMS 5122 CHARLOTTE AVENUE NASHVILLE, TN 37209	58-2050089	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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THE TRUST FOR PUBLIC LAND 101 WHITNEY STREET NEW HAVEN, CT 06510	23-7222333	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
CITY HARVEST INC. 150 52ND STREET BROOKLYN, NY 11232	13-3170676	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE 165 E 56TH ST NEW YORK, NY 10022	13-5563393	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
DANBURY FARMERS' MARKET COMMUNITY COLLABORATIVE - 268 MAIN STREET - DANBURY, CT 06810-7835	06-1290494	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
STAMFORD PUBLIC EDUCATION FOUNDATION, INC - 177 BROAD ST 3RD FL - STAMFORD, CT 06901	06-1462359	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
THE STAMFORD PARTNERSHIP 2 LANDMARK SQUARE STAMFORD, CT 06901	06-0993590	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
OYSTER RECOVERY PARTNERSHIP 1805A VIRGINIA STREET ANNAPOLIS, MD 21401	23-7204806	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
CULTURAL ALLIANCE OF FAIRFIELD COUNTY - GATE LODGE AT MATHEWS PARK - NORWALK, CT 06850	94-3434503	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
CUREDUCHENNE 100 BAYVIEW CIRCLE, SUITE 5600 NEWPORT BEACH, CA 92660	20-0299958	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO, IL 60632	36-2971864	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
PHLUID PHOUNDATION INC 459 W 18TH ST APT 3 NEW YORK, NY 10011-3851	85-3060605	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
NORTHERN ILLINOIS FOOD BANK 273 DEARBORN COURT GENEVA, IL 60134	36-3203648	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
NEW YORK CITY CENTER 130 WEST 56TH STREET NEW YORK, NY 10019	13-2867442	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
NATIONAL FOOTBALL MUSEUM, INC. 2121 GEORGE HALAS DR NW CANTON, OH 44708	34-0898576	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
NATIONAL COWGIRL MUSEUM & HALL OF FAME - 1720 GENDY ST - FORT WORTH, TX 76107	75-1486136	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
NAN NEWARK TECH WORLD 400 HAWTHORNE AVE NEWARK, NJ 07112	81-3470980	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
HEDGE FUNDS CARE 106 W. 32ND STREET, 2ND FLOOR NEW YORK, NY 10001	43-1959796	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT
FEEDING NEW YORK STATE 33 ELK STREET ALBANY, NY 12207	20-2555423	501(C)(3)	50,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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FRIENDS OF THE FERGUSON LIBRARY 1 PUBLIC LIBRARY PLZ STAMFORD, CT 06904-2152	06-1027077	501(C)(3)	49,426.	0.			FOR GENERAL SUPPORT
CARDINAL SHEHAN CENTER 1494 MAIN ST BRIDGEPORT, CT 06604-4704	06-1101081	501(C)(3)	49,000.	0.			FOR GENERAL SUPPORT
FUTURE 5 135 ATLANTIC ST STAMFORD, CT 06902	46-2986201	501(C)(3)	47,879.	0.			FOR GENERAL SUPPORT
NORWALK SENIOR CENTER 11 ALLEN ROAD NORWALK, CT 06851-1038	23-7121169	501(C)(3)	45,881.	0.			FOR GENERAL SUPPORT
DATAHAVEN 1146 CHAPEL STREET NEW HAVEN, CT 06511-2384	06-1567201	501(C)(3)	45,000.	0.			FOR GENERAL SUPPORT
OHIO STATE UNIVERSITY PO BOX 710811 COLUMBUS, OH 43271-0811	31-1145986	501(C)(3)	42,311.	0.			FOR GENERAL SUPPORT
ST. JOSEPH HIGH SCHOOL 2320 HUNTINGTON TPKE TRUMBULL, CT 06611-5099	06-1560973	501(C)(3)	41,007.	0.			FOR GENERAL SUPPORT
ADAM J. LEWIS ACADEMY 500 STATE ST. BRIDGEPORT, CT 06604-4704	45-3859735	501(C)(3)	41,000.	0.			FOR GENERAL SUPPORT
HOUSATONIC VALLEY ASSOCIATION, INC PO BOX 28 CORNWALL BRIDGE, CT 06754	06-6049295	501(C)(3)	40,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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EVANS SCHOLARS FOUNDATION 2501 PATRIOT BOULEVARD GLENVIEW, IL 60026-8022	36-2865979	501(C)(3)	40,000.	0.			FOR GENERAL SUPPORT
BLACK BUSINESS ALLIANCE 1201 BOSTON POST RD STE 1092 MILFORD, CT 06461	92-0463170	501(C)(3)	40,000.	0.			FOR GENERAL SUPPORT
FINCA TACHIBANA INC 506 COLYTON ST LOS ANGELES, CA 90013	86-3589524	501(C)(3)	39,004.	0.			FOR GENERAL SUPPORT
BRIDGEPORT RESCUE MISSION 725 PARK AVE BRIDGEPORT, CT 06604-4704	06-1362705	501(C)(3)	38,000.	0.			FOR GENERAL SUPPORT
FAMILY & CHILDREN'S AGENCY, INC. 9 MOTT AVE 4TH FL NORWALK, CT 06850	06-0970985	501(C)(3)	38,000.	0.			FOR GENERAL SUPPORT
HORIZONS AT GREENS FARMS ACADEMY 35 BEACHSIDE AVENUE GREENS FARMS, CT 06838-0998	06-0733693	501(C)(3)	37,225.	0.			FOR GENERAL SUPPORT
CHICAGO CONVENTION & TOURISM BUREAU INC - 301 E CERMAK RD - CHICAGO, IL 60616-1578	36-2704879	501(C)(3)	37,000.	0.			FOR GENERAL SUPPORT
MINISTERIAL HEALTH FELLOWSHIP 440 WEST ST MIDDLETOWN, CT 06457	92-1311158	501(C)(3)	36,071.	0.			FOR GENERAL SUPPORT
SAVE THE CHILDREN 501 KINGS HWY E FAIRFIELD, CT 06825	06-0726487	501(C)(3)	36,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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MILL RIVER PARK COLLABORATIVE 1010 WASHINGTON BLVD STAMFORD, CT 06901	06-1507648	501(C)(3)	33,732.	0.			FOR GENERAL SUPPORT
ABILITY BEYOND 4 BERKSHIRE BLVD BETHEL, CT 06801	06-0776594	501(C)(3)	33,606.	0.			FOR GENERAL SUPPORT
BRIDGEPORT HOSPITAL FOUNDATION 267 GRANT ST BRIDGEPORT, CT 06610	22-2908698	501(C)(3)	33,509.	0.			FOR GENERAL SUPPORT
HORIZONS AT BRUNSWICK SCHOOL 100 MAHER AVENUE GREENWICH, CT 06830-5387	06-0646562	501(C)(3)	33,334.	0.			FOR GENERAL SUPPORT
AMERICA'S SECOND HARVEST OF THE BIG BEND, INC. - 4446 ENTREPOT BLVD - TALLAHASSEE, FL 32310	59-2610345	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT
FOOD LIFELINE 815 S 96TH STREET SEATTLE, WA 98108	91-1090450	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT
FEEDING SOUTH FLORIDA 2501 SW 32 TERRACE PEMBROKE PARK, FL 33023	59-2097520	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT
OREGON FOOD BANK, INC 7900 NE 33RD DRIVE PORTLAND, OR 97211	93-0785786	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT
IDAHO FOODBANK 3630 E COMMERCIAL CT MERIDIAN, ID 83642	82-0425400	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA - 411 MERCY DRIVE - ORLANDO, FL 32805	59-2142315	501(C)(3)	33,000.	0.			FOR GENERAL SUPPORT
CHICAGO NATIONAL BREWSEUM 1158 N HOWE ST C CHICAGO, IL 60610	47-3081387	501(C)(3)	32,000.	0.			FOR GENERAL SUPPORT
FILLING IN THE BLANKS, INC 346 MAIN AVE., SUITE 3A NORWALK, CT 06851-1038	46-4980002	501(C)(3)	31,850.	0.			FOR GENERAL SUPPORT
SILVERSOURCE, INC 1100 SUMMER ST STAMFORD, CT 06905-1203	06-0646916	501(C)(3)	31,500.	0.			FOR GENERAL SUPPORT
STANFORD UNIVERSITY DEVELOPMENT SERVICES STANFORD, CA 94309-0466	94-1156365	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
BRUNSWICK SCHOOL DEVELOPMENT OFFICE GREENWICH, CT 06830-5387	06-0646562	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
FUSION PARTNERSHIPS, INC 1601 GUILFORD AVE 2 SOUTH BALTIMORE, MD 21202	52-2148413	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
CT ASSOCIATION FOR COMMUNITY ACTION - 300 PLAZA MIDDLESEX - MIDDLETOWN, CT 06457	06-0924931	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
SERVING ALL VESSELS EQUALLY, INC. 31 CONCORD ST. NORWALK, CT 06854-1525	05-0616689	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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BRAIN & BEHAVIOR RESEARCH FOUNDATION - 747 THIRD AVENUE, 33RD FLOOR - NEW YORK, NY 10017	31-1020010	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
NEW FAIRFIELD COMMUNITY FOUNDATION 1 BRUSH HILL RD NEW FAIRFIELD, CT 06812-2618	06-1528030	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
UNITED WE DREAM NETWORK INC FBO CT STUDENTS FOR A DREAM WASHINGTON, DC 20033	46-2216565	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
BECKET ATHENAEUM 3367 MAIN ST BECKET, MA 01223	04-3458519	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
AMERICARES FREE CLINICS, INC 88 HAMILTON AVE STAMFORD, CT 06902	06-1422741	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
BACKFIELD IN MOTION, INC. 920 WOODLAND ST NASHVILLE, TN 37206	62-1826603	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
JUNIOR ACHIEVEMENT OF GREATER FAIRFIELD COUNTY - 100 BEARD SAWMILL RD STE #605 - SHELTON, CT 06484	06-0644315	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
YOUTH ARTS IN ACTION 95 BIG CHIEF TRL BOZEMAN, MT 59718	20-2551492	501(C)(3)	30,000.	0.			FOR GENERAL SUPPORT
COS COB VOLUNTEER FIRE DEPARTMENT 200 POST ROAD COS COB, CT 06807	06-6064017	501(C)(3)	29,742.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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DOMESTIC VIOLENCE CRISIS CENTER 1111 SUMMER ST STE 203 STAMFORD, CT 06905-1203	06-1057356	501(C)(3)	27,722.	0.			FOR GENERAL SUPPORT
ST. LUKES EPISCOPAL CHURCH 100 WASHINGTON AVENUE NEWTOWN, PA 18940		501(C)(3)	27,523.	0.			FOR GENERAL SUPPORT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - OUTSIDE SCHOLARSHIPS, FRANKLIN BLDG, RM 100 - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	27,523.	0.			FOR GENERAL SUPPORT
ST. FRANCIS IN THE VALLEY CHURCH 600 S LA CANADA DR GREEN VALLEY, AZ 85614	86-6193946	501(C)(3)	27,523.	0.			FOR GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION - CT CHAPTER - 200 EXECUTIVE BLVD - SOUTHTON, CT 06489-1058	13-3039601	501(C)(3)	27,500.	0.			FOR GENERAL SUPPORT
ALL OUR KIN 153 EAST STREET, 3RD FL NEW HAVEN, CT 06511-2384	06-1539280	501(C)(3)	27,000.	0.			FOR GENERAL SUPPORT
THE CENTER FOR WELLBEING-CENTRO BIENESTAR, INC - 30 MYANO LANE - STAMFORD, CT 06902	83-0737844	501(C)(3)	27,000.	0.			FOR GENERAL SUPPORT
CONNECTICUT'S BEARDSLEY ZOO 1875 NOBLE AVE BRIDGEPORT, CT 06610	23-7068821	501(C)(3)	26,257.	0.			FOR GENERAL SUPPORT
GREENFIELD HILL CONGREGATIONAL CHURCH - 1045 OLD ACADEMY RD - FAIRFIELD, CT 06824	06-6012213	501(C)(3)	26,200.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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STERLING HOUSE COMMUNITY CENTER 2283 MAIN ST STRATFORD, CT 06615	06-0665192	501(C)(3)	25,500.	0.			FOR GENERAL SUPPORT
PACIFIC HOUSE 597 PACIFIC STREET STAMFORD, CT 06902	06-1144355	501(C)(3)	25,500.	0.			FOR GENERAL SUPPORT
SARRC 300 N 18TH ST PHOENIX, AZ 85006	31-1496646	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
MY ARCHITECTURE WORKSHOPS INC 255 STRAWBERRY HILL AVENUE STAMFORD, CT 06902	88-1595424	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
PUBLIC ALLIES INC. 735 N WATER ST STE 550 MILWAUKEE, WI 53202	52-1759564	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
HOUSE OF 42 200 OCEAN LANE DR KEY BISCAIYNE, FL 33149	93-2917928	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
STAMFORD YOUTH SERVICES BUREAU - CITY OF STAMFORD - 888 WASHINGTON BLVD - STAMFORD, CT 06904-2152	06-1506924	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
SOUTH END COMMUNITY CENTER 19 BATES STREET STRATFORD, CT 06615	06-6002103	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
TRUSTEES OF DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HANOVER, NH 03750	02-0222111	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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THE LUSTGARTEN FOUNDATION 415 CROSSWAYS PARK DRIVE WOODBURY, NY 11797	31-1611837	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
50CAN, INC. 20 CHURCH ST MEZZANINE HARTFORD, CT 06103	27-3069592	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
VIRGINIA ATHLETICS FOUNDATION PO BOX 400833 CHARLOTTESVILLE, VA 22904	54-0517188	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
COLUMBIA UNIVERSITY 1130 AMSTERDAM AVE - OUTSIDE SCHOLA NEW YORK, NY 10027	13-5598093	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
HELP FOR KIDS 141 FRANKLIN ST STAMFORD, CT 06901	06-1398440	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
BRIDGEPORT HOSPITAL AUXILIARY 267 GRANT AVE BRIDGEPORT, CT 06610	22-2908698	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
MAKE THE ROAD NEW YORK 301 GROVE ST BROOKLYN, NY 11237	11-3344389	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
BRAVE ENOUGH TO FAIL INC 90 ASPETUCK VLG NEW MILFORD, CT 06776	47-3476922	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
FUTURE FORWARD CT 9 MENLO ST BOSTON, MA 01223	85-3880867	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN PARKS 21 W 46TH ST NEW YORK, NY 10036	30-0241904	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
GUIDE DOGS FOR THE BLIND PO BOX 151200 SAN RAFAEL, CA 94912	94-1196195	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
CIRCLE CARE CENTER 618 WEST AVENUE NORWALK, CT 06850	27-2210659	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
LIVEGIRL PO BOX 223 NEW CANAAN, CT 06840	81-0872133	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
ACLU FOUNDATION OF CT 765 ASYLUM AVE 2ND FL HARTFORD, CT 06105-2290	06-0871754	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
MICHIGAN VETERANS FOUNDATION 4626 GRAND RIVER AVE DETROIT, MI 48208	38-2857628	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
FOODNBEV CONNECT INC 158 MAIN ST DANBURY, CT 06810-7835	85-2646858	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
ALPFA FOUNDATION 3571 FAR WEST BLVD #3695 AUSTIN, TX 78731	86-1118036	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
CENTER FOR MUSICAL ARTS 200 E BASELINE RD LAFAYETTE, CO 80026	84-0735716	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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UNIVERSITY OF ROCHESTER 300 E. RIVER ROAD ROCHESTER, NY 14627	16-0743209	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
INTERNATIONAL RESCUE COMMITTEE PO BOX 6068 ALBERT LEA, MN 56007	13-5660870	501(C)(3)	25,000.	0.			FOR GENERAL SUPPORT
CITY LIGHTS/BRIDGEPORT ART TRAIL 265 GOLDEN HILL ST BRIDGEPORT, CT 06604-4704	20-5462244	501(C)(3)	24,500.	0.			FOR GENERAL SUPPORT
ST. THERESA SCHOOL 55 ROSEMOND TERRACE TRUMBULL, CT 06611-1300	06-0737923	501(C)(3)	22,507.	0.			FOR GENERAL SUPPORT
HOMES WITH HOPE PO BOX 631 WESTPORT, CT 06880	22-2534326	501(C)(3)	22,500.	0.			FOR GENERAL SUPPORT
ANN'S PLACE, INC 80 SAW MILL RD DANBURY, CT 06810-7835	22-3181832	501(C)(3)	22,044.	0.			FOR GENERAL SUPPORT
NEIGHBOR TO NEIGHBOR 248 E PUTNAM AVE GREENWICH, CT 06830-5387	06-6071605	501(C)(3)	22,000.	0.			FOR GENERAL SUPPORT
CONNECTICUT FAIR HOUSING CENTER, INC - 60 POPIELUSZKO COURT - HARTFORD, CT 06106	06-1453727	501(C)(3)	22,000.	0.			FOR GENERAL SUPPORT
BURROUGHS COMMUNITY CENTER 2470 FAIRFIELD AVE BRIDGEPORT, CT 06605-2647	06-1418097	501(C)(3)	22,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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DANBURY STUDENT AND BUSINESS CONNECTION - DANBURY PUBLIC SCHOOLS - DANBURY, CT 06810-7835	06-1590417	501(C)(3)	22,000.	0.			FOR GENERAL SUPPORT
GIRL SCOUTS OF CONNECTICUT FUND DEVELOPMENT HARTFORD, CT 06106	06-0662134	501(C)(3)	21,989.	0.			FOR GENERAL SUPPORT
FAMILY AND CHILDREN'S AID 77 WEST ST DANBURY, CT 06810-7835	06-0888719	501(C)(3)	21,500.	0.			FOR GENERAL SUPPORT
PARTNERSHIP FOR STRONG COMMUNITIES 227 LAWRENCE ST HARTFORD, CT 06106	20-0882009	501(C)(3)	21,500.	0.			FOR GENERAL SUPPORT
FIRST CHURCH OF CHRIST CONGREGATIONAL - 25 CROSS HIGHWAY - REDDING, CT 06875		501(C)(3)	21,500.	0.			FOR GENERAL SUPPORT
MEMORIAL SLOAN-KETTERING CANCER CENTER - PO BOX 27106 - NEW YORK, NY 10087-7106	91-2154267	501(C)(3)	21,262.	0.			FOR GENERAL SUPPORT
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036	52-1481896	501(C)(3)	21,200.	0.			FOR GENERAL SUPPORT
PALACE THEATRE 61 ATLANTIC STREET STAMFORD, CT 06901	06-1048684	501(C)(3)	21,073.	0.			FOR GENERAL SUPPORT
SOUNDWATERS COVE ISLAND PARK STAMFORD, CT 06902	06-1263947	501(C)(3)	21,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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UNITARIAN UNIVERSALIST CONGREGATION IN WESTPORT - 10 LYONS PLAINS ROAD - WESTPORT, CT 06880	06-0766361	501(C)(3)	21,000.	0.			FOR GENERAL SUPPORT
CHILD GUIDANCE CENTER OF MID-FAIRFIELD COUNTY - 100 EAST AVE - NORWALK, CT 06851-1038	06-0725052	501(C)(3)	21,000.	0.			FOR GENERAL SUPPORT
DOCTORS WITHOUT BORDERS PO BOX 5030 HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	20,500.	0.			FOR GENERAL SUPPORT
PT BARNUM FOUNDATION PO BOX 1212 BRIDGEPORT, CT 06601-0999	22-2655681	501(C)(3)	20,152.	0.			FOR GENERAL SUPPORT
MCGIVNEY COMMUNITY CENTER PO BOX 5220 BRIDGEPORT, CT 06610	22-3059815	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
EMPOWER HER INC 759 CHEIF JUSTICE CUSHING HWY #317 COHASSET, MA 02025-2115	46-3196791	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
MALTA HOUSE 139 WEST ROCKS ROAD EAST NORWALK, CT 06851-1038	06-1604710	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
SVMC HOLDINGS D/B/A ST. VINCENT'S MEDICAL CENTER - 2800 MAIN STREET - BRIDGEPORT, CT 06606	83-2550272	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
BERKLEE COLLEGE OF MUSIC 1140 BOYLSTON STREET, MS-855 IA BOSTON, MA 02215	04-2300472	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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REGIONAL PLAN ASSOCIATION ONE WHITEHALL STREET, 16TH FLOOR NEW YORK, NY 10004	13-1624154	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
BANTAM CINEMA & ARTS CENTER PO BOX 262 LITCHFIELD, CT 06759	85-3849864	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
BALLET SCHOOL OF STAMFORD STAMFORD TOWN CENTER STAMFORD, CT 06901	06-1517402	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
THE STOREHOUSE PROJECT, INC. 192 MEADOW STREET MILFORD, CT 06461	46-4513921	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
JESSE LEE MEMORIAL UNITED METHODIST CHURCH - 207 MAIN ST - RIDGEFIELD, CT 06877	06-0769724	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
MARK TWAIN LIBRARY 439 REDDING RD REDDING, CT 06896	06-0776655	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
JAZZREACH PERFORMING ARTS & EDUCATION - 45 MAIN ST - BROOKLYN, NY 11201	11-3179208	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
MAGPIES & PEACOCKS 4502 MCKINNEY ST HOUSTON, TX 77023	45-4665467	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
CAMP TLC 2285 SPRUCE GOOSE STREET, 227 LAS VEGAS, NV 89135	22-3453810	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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ATHENS COUNTY FOOD PANTRY C/O TREASURER ATHENS, OH 45701	34-1313139	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
SATURDAY ACADEMY PO BOX 702 NORWALK, CT 06854-1525	06-1440458	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
BOYS CLUB & GIRLS CLUB OF BRIDGEPORT INC - 102 PARK ST - BRIDGEPORT, CT 06608-2409	06-0669105	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
PECONIC HOCKEY FOUNDATION VETERANS MEMORIAL PARK - PECONIC IC CALVERTON, NY 11933	47-5633677	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
PRO BONO PARTNERSHIP 327 MAMARONECK AVE WHITE PLAINS, NY 10605	06-1264823	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
CENTER FOR FAMILY JUSTICE, INC 753 FAIRFIELD AVE BRIDGEPORT, CT 06604-4704	06-0646991	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
MID-OHIO FOODBANK PO BOX 182883 COLUMBUS, OH 43218	31-0865343	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
FOUNDATION FOR APPALACHIAN OHIO PO BOX 456 NELSONVILLE, OH 45764	31-1620483	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
BOSTON COLLEGE OFFICE OF STUDENT SERVICES - LYONS CHESTNUT HILL, MA 02467	04-2103545	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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FREESTORE FOODBANK 3401 ROSENTHAL WAY CINCINNATI, OH 45202	23-7122205	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
GREATER CLEVELAND FOOD BANK 13815 COIT RD CLEVELAND, OH 44110	34-1292848	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
ROWAN CENTER 1111 SUMMER ST. STAMFORD, CT 06901	06-1037583	501(C)(3)	20,000.	0.			FOR GENERAL SUPPORT
MOZAIC SENIOR LIFE 4200 PARK AVE BRIDGEPORT, CT 06604-4704	06-0846991	501(C)(3)	19,957.	0.			FOR GENERAL SUPPORT
ELDERHOUSE 7 LEWIS ST NORWALK, CT 06851-1038	06-0963343	501(C)(3)	19,150.	0.			FOR GENERAL SUPPORT
MUSICARES ATTN: DEVELOPMENT SANTA MONICA, CA 90404	95-4470909	501(C)(3)	19,000.	0.			FOR GENERAL SUPPORT
ACT OF CONNECTICUT 36 OLD QUARRY ROAD RIDGEFIELD, CT 06877	81-3092871	501(C)(3)	18,800.	0.			FOR GENERAL SUPPORT
WPKN INC 277 FAIRFIELD AVENUE BRIDGEPORT, CT 06604-4704	22-3162248	501(C)(3)	18,367.	0.			FOR GENERAL SUPPORT
BRIDGEPORT ROTARY CLUB FOUNDATION, INC. - PO BOX 1399 - BRIDGEPORT, CT 06601-0999	20-5655260	501(C)(3)	17,902.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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BRIDGEPORT ECONOMIC DEVELOPMENT CORPORATION - 10 MIDDLE STREET 14TH FL - BRIDGEPORT, CT 06604-4704	23-7374878	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
STEPPING STONES MUSEUM FOR CHILDREN - MATHEWS PARK - NORWALK, CT 06850	22-3199269	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
GIRLS WITH IMPACT 15 E. PUTNAM AVE. #276 GREENWICH, CT 06830-5387	83-1742762	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
HOMEBRIDGE VENTURES ONE LAFAYETTE CIR STE 102 BRIDGEPORT, CT 06604-4704	86-1687817	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
CONNECTICUT COALITION TO END HOMELESSNESS - 257 LAWRENCE ST - HARTFORD, CT 06106	06-1126880	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
CT AGAINST GUN VIOLENCE EDUCATION FUND INC - PO BOX 123 - RIDGEFIELD, CT 06877	06-1460665	501(C)(3)	17,500.	0.			FOR GENERAL SUPPORT
SET SAIL FOUNDATION 488 BROOKLAWN AVE BRIDGEPORT, CT 06604-4704	83-4686372	501(C)(3)	17,250.	0.			FOR GENERAL SUPPORT
OPERATION HOPE OF FAIRFIELD, INC 636 OLD POST ROAD FAIRFIELD, CT 06824	06-1193489	501(C)(3)	17,000.	0.			FOR GENERAL SUPPORT
DAMASCUS CITIZENS FOR SUSTAINABILITY - P.O. BOX 147 - MILANVILLE, PA 18443	26-2951372	501(C)(3)	17,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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HOMES FOR THE BRAVE 655 PARK AVE BRIDGEPORT, CT 06604-4704	06-1520511	501(C)(3)	17,000.	0.			FOR GENERAL SUPPORT
COASTAL BEND FOOD BANK 826 KRILL ST CORPUS CHRISTI, TX 78408	74-2234089	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
EL PASOANS FIGHTING HUNGER 9541 PLAZA CIR EL PASO, TX 79927	45-2893839	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
SAN ANTONIO FOOD BANK 5200 HISTORIC OLD HWY 90 SAN ANTONIO, TX 78227	74-2122979	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LANE PLANO, TX 75075	75-1785357	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
HOUSTON FOOD BANK 535 PORTWALL STREET HOUSTON, TX 77029	74-2181456	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
FEED THE NEED MISSIONS P.O. BOX 1542 BASTROP, TX 78602	27-3419631	501(C)(3)	16,500.	0.			FOR GENERAL SUPPORT
HARTFORD FOUNDATION FOR PUBLIC GIVING - HARTFORD SQUARE NORTH - HARTFORD, CT 06106	06-0699252	501(C)(3)	16,343.	0.			FOR GENERAL SUPPORT
NEIGHBORHOOD STUDIOS OF FAIRFIELD COUNTY - 150 ELM STREET - BRIDGEPORT, CT 06604-4704	06-0993269	501(C)(3)	16,090.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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AVON THEATRE FILM CENTER 8 SOUND SHORE DR GREENWICH, CT 06830-5387	90-0069073	501(C)(3)	16,000.	0.			FOR GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH OF NEW CANAAN - 178 OENOKE RIDGE ROAD - NEW CANAAN, CT 06840	06-0885172	501(C)(3)	16,000.	0.			FOR GENERAL SUPPORT
THE DOOR 121 AVENUE OF THE AMERICAS SUITE 50 NEW YORK, NY 10013	13-6127348	501(C)(3)	15,793.	0.			FOR GENERAL SUPPORT
NORWALK COMMUNITY HEALTH CENTER 120 CONNECTICUT AVE NORWALK, CT 06854-1525	06-1436620	501(C)(3)	15,500.	0.			FOR GENERAL SUPPORT
BIG BROTHERS-BIG SISTERS OF CONNECTICUT, INC. - 30 LAUREL ST STE 3 - HARTFORD, CT 06106	06-0850379	501(C)(3)	15,500.	0.			FOR GENERAL SUPPORT
JESUIT REFUGEE SERVICE 1627 K STREET, NW WASHINGTON, DC 20006	52-1355257	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
ASSET FUNDERS NETWORK 2045 WEST GRAND AVE CHICAGO, IL 60612-1577	83-1215288	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
MYSTIC AQUARIUM ATTN: DEVELOPMENT MYSTIC, CT 06355	06-1480300	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
AUDUBON CONNECTICUT 613 RIVERSVILLE RD GREENWICH, CT 06831	13-1624102	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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STIR FRIDAY NIGHT 1103 W ADDISON ST CHICAGO, IL 60613	36-4208111	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
MENTAL HEALTH SERVICES AT BRIDGEPORT HOSPITAL - C/O NORMA PFRIEM BREAST CENTER AT BRIDGEPORT HOSPITAL - FAIRFIELD, CT 06824	06-0646554	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
NEAR & FAR AID ASSOCIATION, INC PO BOX 717 SOUTHPORT, CT 06890-1710	23-7036523	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
NETWORK FOR TEACHING ENTREPRENEURSHIP - NY METRO DIVISION - NEW YORK, NY 10005	13-3408731	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
WILLIAM AND LANAEA C FEATHERSTONE FOUNDATION INC - 11101 RESORT RD #107 - ELLICOTT CITY, MD 21042	26-3827474	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
BRIDGEPORT REGIONAL BUSINESS COUNCIL - 10 MIDDLE ST - BRIDGEPORT, CT 06601-0999	06-0271980	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
WSHU PUBLIC RADIO 5151 PARK AVE FAIRFIELD, CT 06825	06-0776644	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
MASSACHUSETTS GENERAL HOSPITAL DEVELOPMENT OFFICE BOSTON, MA 02114	04-1564655	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
WAKE FOREST UNIVERSITY UNIVERSITY ADVANCEMENT WINSTON SALEM, NC 27109	56-2038194	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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ABILIS INC 50 GLENVILLE STREET GREENWICH, CT 06831	06-6009327	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
RUGBY LEAGUE UNITED CORPORATION 397 DEGRAW STREET, NO. 2 BROOKLYN, NY 11231	92-3785656	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
WILDLIFE IN CRISIS, INC PO BOX 1246 WESTON, CT 06883	22-3020015	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
DOCUMENTING HOPE PROJECT C/O EPIDEMIC ANSWERS WINDSOR, CT 06095	27-0459304	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
FLORIDA INSTITUTE OF TECHNOLOGY OFFICE OF FINANCIAL AID MELBOURNE, FL 32901	59-6046500	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
RISING STARR HORSE RESCUE 93 SILVER SPRING ROAD WILTON, CT 06897	47-4027991	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
A BETTER WAY FOUNDATION PO BOX 942 HARTFORD, CT 06143	06-1576383	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
OPERATION FUEL 75 CHARTER OAK AVE HARTFORD, CT 06106	06-1253091	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
CONNECTICUT COUNCIL OF FAMILY SERVICE AGENCIES, INC - 35 COLD SPRING RD - ROCKY HILL, CT 06067	06-1184674	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHT STARS OF BETHLEHEM PO BOX 771055 CHICAGO, IL 60677	38-3685603	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
CHILDREN IN PLACEMENT 470 JAMES STREET NEW HAVEN, CT 06513	06-1182114	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
VALLEY FORGE MILITARY ACADEMY & COLLEGE - 1001 EAGLE RD - WAYNE, PA 19087-3613	23-1178880	501(C)(3)	15,000.	0.			FOR GENERAL SUPPORT
YWCA GREENWICH 259 E PUTNAM AVE GREENWICH, CT 06830-5387	06-0646992	501(C)(3)	14,000.	0.			FOR GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION 225 N MICHIGAN AVE CHICAGO, IL 60601	13-3039601	501(C)(3)	13,762.	0.			FOR GENERAL SUPPORT
SALVATION ARMY, SOUTHERN NEW ENGLAND DIVISION - 855 ASYLUM AVE - HARTFORD, CT 06105-2290	13-5562351	501(C)(3)	13,762.	0.			FOR GENERAL SUPPORT
LAUREL HOUSE, INC 1616 WASHINGTON BOULEVARD STAMFORD, CT 06902	22-2511467	501(C)(3)	13,500.	0.			FOR GENERAL SUPPORT
NOROTON PRESBYTERIAN CHURCH 2011 POST RD DARIEN, CT 06820-5802	54-0994577	501(C)(3)	13,500.	0.			FOR GENERAL SUPPORT
COUNCIL OF CHURCHES OF GREATER BRIDGEPORT - 1718 CAPITOL AVENUE - BRIDGEPORT, CT 06604-4704	06-0647008	501(C)(3)	13,412.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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FAMILY CENTERS, INC 40 ARCH ST GREENWICH, CT 06830-5387	06-0646656	501(C)(3)	13,192.	0.			FOR GENERAL SUPPORT
PARKINSONS BODY AND MIND INC. PO BOX 5032 GREENWICH, CT 06831	87-2045866	501(C)(3)	13,000.	0.			FOR GENERAL SUPPORT
NEW PARADIGM THEATRE 2777 SUMMER ST STE 401 STAMFORD, CT 06905-1203	45-3834269	501(C)(3)	12,500.	0.			FOR GENERAL SUPPORT
INNER-CITY SCHOLARSHIP FUND 1011 FIRST AVE NEW YORK, NY 10022-4134	51-0453629	501(C)(3)	12,500.	0.			FOR GENERAL SUPPORT
FRIENDSHIP CIRCLE OF CONNECTICUT 48 UNION STREET #25 STAMFORD, CT 06906	26-1093886	501(C)(3)	12,500.	0.			FOR GENERAL SUPPORT
THE WORKPLACE 1000 LAFAYETTE BOULEVARD BRIDGEPORT, CT 06604-4704	22-2484517	501(C)(3)	12,500.	0.			FOR GENERAL SUPPORT
HAWAII COMMUNITY FOUNDATION 444 HNA HWY STE 201 KAHULUI, HI 96732	99-0261283	501(C)(3)	12,500.	0.			FOR GENERAL SUPPORT
CONNECTICUT BALLET 20 ACOSTA ST STAMFORD, CT 06902	06-1039302	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
YALE UNIVERSITY YALE SCHOOL OF MEDICINE NEW HAVEN, CT 06519	06-0646973	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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PROJECT MUSIC 1127 HIGH RIDGE RD., STE 167 STAMFORD, CT 06905-1203	81-2610342	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
PAN MASSACHUSETTS CHALLENGE 77 4TH AVE NEEDHAM, MA 24940	04-2746912	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
BOYS & GIRLS CLUB OF HAWAII 1000 BISHOP ST, SUITE 505 HONOLULU, HI 96813	99-6005407	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
DURHAM ACADEMY OFFICE OF PHILANTHROPY DURHAM, NC 27705	56-0538019	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
STARFISH CONNECTION, INC 1127 HIGH RIDGE RD STAMFORD, CT 06905-1203	26-2410124	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	13-1624086	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
SHELTON HIGH SCHOOL 120 MEADOW STREET SHELTON, CT 06484	27-4802342	501(C)(3)	12,000.	0.			FOR GENERAL SUPPORT
HIGH SCHOOL SCHOLARSHIP FOUNDATION OF FAIRFIELD - PO BOX 682 - FAIRFIELD, CT 06824	06-1273415	501(C)(3)	11,738.	0.			FOR GENERAL SUPPORT
ST. VINCENT'S MEDICAL CENTER FOUNDATION - 2800 MAIN STREET - BRIDGEPORT, CT 06606	22-2558132	501(C)(3)	11,700.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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MIKEY'S WAY FOUNDATION 1925 BLACK ROCK TPKE FAIRFIELD, CT 06825	20-3825973	501(C)(3)	11,000.	0.			FOR GENERAL SUPPORT
GREENWICH EMERGENCY MEDICAL SERVICES, INC - 1111 EAST PUTNAM AVE - RIVERSIDE, CT 06878	22-2721171	501(C)(3)	11,000.	0.			FOR GENERAL SUPPORT
ST. PAUL'S EPISCOPAL CHURCH FAIRFIELD - 661 OLD POST RD - FAIRFIELD, CT 06824	06-0655484	501(C)(3)	11,000.	0.			FOR GENERAL SUPPORT
CLASP HOMES, INC 246 POST RD E WESTPORT, CT 06880	06-1074055	501(C)(3)	11,000.	0.			FOR GENERAL SUPPORT
THE HOTCHKISS SCHOOL ALUMNI & DEVELOPMENT OFFICE LAKEVILLE, CT 06039-2141	06-0647018	501(C)(3)	11,000.	0.			FOR GENERAL SUPPORT
FAIRFIELD UNIVERSITY OFFICE OF THE BURSAR FAIRFIELD, CT 06825	06-0646623	501(C)(3)	10,717.	0.			FOR GENERAL SUPPORT
BRAC USA, INC 110 WILLIAM ST. NEW YORK, NY 10038	20-8456741	501(C)(3)	10,700.	0.			FOR GENERAL SUPPORT
PET ANIMAL WELFARE SOCIETY OF CONNECTICUT, INC - 504 MAIN AVE - NORWALK, CT 06851-1038	06-6067445	501(C)(3)	10,572.	0.			FOR GENERAL SUPPORT
BARTLETT ARBORETUM AND GARDENS 151 BROOKDALE RD STAMFORD, CT 06903-4199	06-6079591	501(C)(3)	10,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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PLANNED PARENTHOOD FEDERATION OF AMERICA, INC - PO BOX 97166 - WASHINGTON, DC 20090	13-1644147	501(C)(3)	10,500.	0.			FOR GENERAL SUPPORT
NEWTOWN SCHOLARSHIP ASSOCIATION PO BOX 302 NEWTOWN, CT 06470	06-6059483	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
SAN FRANCISCO-MARIN FOOD BANK PO BOX 7203 SAN FRANCISCO, CA 94120	94-3041517	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
CITY LAX, INC 65 WEST 89TH ST NEW YORK, NY 10024	20-4531166	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
COLLABORATIVE SUPPORT SERVICES INC 720 UNIVERSITY AVE STE 200 LOS GATOS, CA 95032	83-0599239	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
FRIENDS OF THE SECOND COMPANY GOVERNOR'S HORSE GUARD - 4 WILDLIFE DRIVE - NEWTOWN, CT 06470	22-2786804	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
POLLINATOR PATHWAY PO BOX 33 WILTON, CT 06897	87-2704374	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
KEEP AMERICA BEAUTIFUL, INC 1010 WASHINGTON BLVD STAMFORD, CT 06901	13-1761633	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
CARTIE 326 NAVAJO LOOP SHELTON, CT 06484	84-4194200	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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UNITED WAY OF GREATER KANSAS CITY PO BOX # 871400 KANSAS CITY, MO 64187-1400	44-0545812	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PARKINSON'S FOUNDATION 200 SE 1ST ST STE 800 MIAMI, FL 33131	13-1866796	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
NAMI - NYC 307 W 38TH ST 8TH FLOOR NEW YORK, NY 10018	13-3077692	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
LA GESTA INC 1178 GREENE AVE # 4R BROOKLYN, NY 11211	99-2005692	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
SUSTAINABLE CT, INC. PO BOX 300 STORRS, CT 06268	82-4894473	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
FOOD SHARE VENTURA COUNTY 4156 SOUTHBANK RD OXNARD, CA 93036	77-0018162	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PIVOT MINISTRIES 485 JANE ST BRIDGEPORT, CT 06608-2409	06-0839030	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
FEEDING SAN DIEGO 9477 WAPLES ST STE 100 SAN DIEGO, CA 92121	26-0457477	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PHYSICIANS FOR REPRODUCTIVE HEALTH PO BOX 35 HARTSDALE, NY 10530-0035	13-3693391	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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RIDGEFIELD PLAYHOUSE 80 E RIDGE AVE RIDGEFIELD, CT 06877	06-1463501	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
RETHINK FOOD NYC, INC. 75 BROAD ST 7TH FL STE 707 NEW YORK, NY 10004	82-1632259	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
GIRLS WHO CODE INC. 1250 BROADWAY 17TH FL NEW YORK, NY 10001	30-0728021	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
LOS ANGELES REGIONAL FOOD BANK 1734 E 41ST STREET LOS ANGELES, CA 90058	95-3135649	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
GRACE-BASED FILMS C/O STEVEN FLEENOR LOS ANGELES, CA 90005	84-4720181	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
ON COURSE FOUNDATION USA 7812 PALM PKWY ORLANDO, FL 32836	45-3780269	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PLACER FOOD BANK 8284 INDUSTRIAL AVENUE ROSEVILLE, CA 95678	94-1740316	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
REACH PREP 1 DOCK STREET STAMFORD, CT 06902	06-1438889	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
QUINNIPIAC UNIVERSITY SCHOOL OF LAW - 275 MOUNT CARMEL AVE - HAMDEN, CT 06518	06-0646701	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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FAIRFIELD COUNTY FARM BUREAU EDUCATION FOUNDATION, INC - 19 CHURCH HILL RD, 2ND FL - NEWTOWN, CT 06470	81-2293127	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
ENCOURAGE KIDS FOUNDATION 1560 BROADWAY NEW YORK, NY 10036	13-3442216	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
LIFTING UP WESTCHESTER 35 ORCHARD STREET WHITE PLAINS, NY 10603	13-3121606	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PRIMOS DALLAS 6060 N CENTRAL EXPY STE 500 DALLAS, TX 75206	83-0847453	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
GREATER WASHINGTON COMMUNITY FOUNDATION - PO BOX 49010 - BALTIMORE, MD 21297-4910	23-7343119	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
HAWAII FOODBANK 2611 KILIHOU STREET HONOLULU, HI 96819-2021	99-0220699	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
HOUSATONIC VALLEY WALDORF SCHOOL 40 DODGINGTOWN RD NEWTOWN, CT 06470	06-1468130	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
NATIONAL YOUTH EMPLOYMENT COALITION - 1155 15TH STREET - WASHINGTON, DC 20005	13-3031098	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
BIGS & LITTLES NYC MENTORING 137 EAST 2ND STREET NEW YORK, NY 10009	13-5564115	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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URBAN CONCEPTS INC 38 GLENDALE STREET HAMDEN, CT 06517	80-0370324	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
URBAN JUSTICE CENTER 40 RECTOR ST NEW YORK, NY 10006	13-3442022	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
BOYS CLUB OF NEW YORK 91 5TH AVE, 7TH FLOOR NEW YORK, NY 10003	13-5591750	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
BOYS HOPE GIRLS HOPE OF ILLINOIS 1100 N LARAMIE AVE WILMETTE, IL 60091	51-0248353	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
TIYYA FOUNDATION INC 505 N TUSTIN AVE STE 280 SANTA ANA, CA 92705	27-3128801	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
INTERNATIONAL SENIOR LAWYERS PROJECT - 207 WEST 25TH STREET - NEW YORK, NY 10001	52-2241212	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
NEWTOWN FOREST ASSOCIATION, INC PO BOX 213 NEWTOWN, CT 06470	06-6079549	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
HIGHER EDUCATION LITERACY PROFESSIONALS, INC - PO BOX 1333 - NORWALK, CT 06856-9968	47-5033668	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
PORT CHESTER CARVER CENTER 400 WESTCHESTER AVE PORT CHESTER, NY 10573	13-1832949	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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HORIZONS NATIONAL 120 POST RD W WESTPORT, CT 06880	06-1310057	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	63-0598743	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
HANDEL AND HAYDN SOCIETY 9 HARCOURT STREET BOSTON, MA 21160	04-2126598	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
THIRD OPTION FOUNDATION 11160-C1 SOUTH LAKES DRIVE RESTON, VA 20191	46-4884866	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
NATIONAL NETWORK OF ABORTION FUNDS 9450 SW GEMINI DR., PMB 16009 BEAVERTON, OR 97008	04-3236982	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
IRIS - INTEGRATED REFUGEE & IMMIGRANT SERVICES - 235 NICOLL STREET - NEW HAVEN, CT 06511-2384	06-0653044	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
THE DIAPER BANK OF CONNECTICUT 370 STATE STREET NORTH HAVEN, CT 06473	20-1179912	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
METROPOLITAN GOLF ASSOCIATION FOUNDATION - 49 KNOLLWOOD RD - ELMSFORD, NY 10523	13-6100835	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
MARC COMMUNITY RESOURCES 25 INDUSTRIAL PARK RD MIDDLETOWN, CT 06457	06-6011968	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

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THE PUBLIC THEATER/NEW YORK SHAKESPEARE FESTIVAL - 425 LAFAYETTE STREET - NEW YORK, NY 10003	13-1844852	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
ALBANO BALLET COMPANY 15 GIRARD AVENUE HARTFORD, CT 06105-2290	23-7335889	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
MAKE THE ROAD NEW YORK 301 GROVE ST BROOKLYN, NY 11237	11-3344389	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
AMERICAN MUSEUM OF NATURAL HISTORY 200 CENTRAL PARK WEST NEW YORK, NY 10024-5192	13-6162659	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
YOUNG NEW YORKERS 30 3RD AVE STE 103 BROOKLYN, NY 11217	81-1465388	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT
THE NORWALK CONSERVATORY OF THE ARTS - 130 WEST NORWALK RD - NORWALK, CT 06850	86-2159959	501(C)(3)	9,600.	0.			FOR GENERAL SUPPORT
WESTPORT LIBRARY 20 JESUP RD WESTPORT, CT 06880	06-0672798	501(C)(3)	9,462.	0.			FOR GENERAL SUPPORT
THRIVE COOPERATIVE CENTER FOR WELLNESS - 131 ALGONQUIN ROAD - FAIRFIELD, CT 06825	88-3921625	501(C)(3)	9,000.	0.			FOR GENERAL SUPPORT
FRIENDS OF RIDGEFIELD PARKS & RECREATION, INC. - PO BOX 385 - RIDGEFIELD, CT 06877	22-2717110	501(C)(3)	9,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

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ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	8,808.	0.			FOR GENERAL SUPPORT
NORWALK HOSPITAL FOUNDATION 34 MAPLE ST NORWALK, CT 06856-9968	22-2577707	501(C)(3)	8,610.	0.			FOR GENERAL SUPPORT
SELF CARE FOR RECOVERY 22 QUARRY KNOLL GREENWICH, CT 06830-5387	87-3187040	501(C)(3)	8,500.	0.			FOR GENERAL SUPPORT
UNITED JEWISH FEDERATION OF GREATER STAMFORD NEW CANAAN AND DARIEN - 2009 SUMMER ST - STAMFORD, CT 06905-1203	06-0923384	501(C)(3)	8,500.	0.			FOR GENERAL SUPPORT
CARE PO BOX 1870 MERRIFIELD, VA 22116	13-1685039	501(C)(3)	8,257.	0.			FOR GENERAL SUPPORT
HARTFORD HEALTHCARE AT HOME 765 FAIRFIELD AVE BRIDGEPORT, CT 06604-4704	06-0646938	501(C)(3)	8,216.	0.			FOR GENERAL SUPPORT
IMPACT FAIRFIELD COUNTY PO BOX 7666 GREENWICH, CT 06836	47-2770533	501(C)(3)	8,200.	0.			FOR GENERAL SUPPORT
CONGREGATION B'NAI ISRAEL 2710 PARK AVENUE BRIDGEPORT, CT 06604-4704	06-0653159	501(C)(3)	8,047.	0.			FOR GENERAL SUPPORT
TEAM WOFGANG & CO, INC 2490 BLACK ROCK TPKE, STE 401 FAIRFIELD, CT 06824	82-2473868	501(C)(3)	8,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOST TREE VILLAGE CHARITABLE FOUNDATION - 8 CHURCH LANE - NORTH PALM BEACH, FL 33408	59-2104920	501(C)(3)	8,000.	0.			FOR GENERAL SUPPORT
FAMILY REENTRY 75 WASHINGTON AVENUE BRIDGEPORT, CT 06604-4704	04-3461434	501(C)(3)	8,000.	0.			FOR GENERAL SUPPORT
CATHOLIC CHARITIES OF FAIRFIELD COUNTY - 238 JEWETT AVE - BRIDGEPORT, CT 06606	06-0653053	501(C)(3)	8,000.	0.			FOR GENERAL SUPPORT
GREATER BRIDGEPORT SYMPHONY SOCIETY - 2385 PARK AVE. - BRIDGEPORT, CT 06604-4704	06-6012460	501(C)(3)	7,771.	0.			FOR GENERAL SUPPORT
STAPLES HIGH SCHOOL TUITION GRANTS COMMITTEE - PO BOX 5159 - WESTPORT, CT 06881-5159	51-0182993	501(C)(3)	7,724.	0.			FOR GENERAL SUPPORT
LIFEBRIDGE COMMUNITY SERVICES 475 CLINTON AVE BRIDGEPORT, CT 06605-2647	06-0646974	501(C)(3)	7,549.	0.			FOR GENERAL SUPPORT
GREENWICH HOSPITAL GREENWICH HOSPITAL OFFICE OF DEVELOPMENT COS COB, CT 06807	06-0646659	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
YALE NEW HAVEN HEALTH OFFICE OF DEVELOPMENT BOSTON, MA 02241-9176	06-0646652	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
CHRIST & HOLY TRINITY CHURCH 75 CHURCH LANE WESTPORT, CT 06880	06-0646602	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CIRCLE OF CARE FOR FAMILIES OF CHILDREN WITH CANCER - 144 DANBURY ROAD - WILTON, CT 06897	26-2224475	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
SNOWMASS WESTERN HERITAGE ASSOCIATION - PO BOX 5745 - SNOWMASS VILLAGE, CO 81615	90-0138524	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
BRENNAN CENTER FOR JUSTICE 120 BROADWAY NEW YORK, NY 10271	13-3839293	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
MARITIME AQUARIUM AT NORWALK 10 N WATER ST NORWALK, CT 06854-1525	06-1062912	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
TINY MIRACLES FOUNDATION 1540 POST RD DARIEN, CT 06820-5802	41-2125069	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
FAIRFIELD THEATRE COMPANY, INC 70 SANFORD ST FAIRFIELD, CT 06824	06-1594125	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
CATHERINE VIOLET HUBBARD FOUNDATION - PO BOX 3571 - NEWTOWN, CT 06470	46-1967347	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
WOMEN FOR WOMEN INTERNATIONAL GLOBAL SUPPORT CENTER CENTRAL ISLIP, NY 11722	52-1838756	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT
FAIRFIELD COUNTY 4-H 67 STONY HILL ROAD BETHEL, CT 06801	47-3806389	501(C)(3)	7,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE BETH EL 350 ROXBURY RD STAMFORD, CT 06902	06-0646922	501(C)(3)	7,000.	0.			FOR GENERAL SUPPORT
GEORGETOWN UNIVERSITY STUDENT FINANCIAL SERVICES, HEALY H WASHINGTON, DC 20057	53-0196603	501(C)(3)	7,000.	0.			FOR GENERAL SUPPORT
ASSOCIATION OF RELIGIOUS COMMUNITIES - 24 DELAY STREET - DANBURY, CT 06810-7835	06-0942514	501(C)(3)	7,000.	0.			FOR GENERAL SUPPORT
KIDS HELPING KIDS 347 STILLWATER AVE STAMFORD, CT 06902	27-1224284	501(C)(3)	7,000.	0.			FOR GENERAL SUPPORT
CONNECTICUT AUDUBON SOCIETY 314 UNQUOWA RD FAIRFIELD, CT 06824	06-0653531	501(C)(3)	6,500.	0.			FOR GENERAL SUPPORT
THE KENNEDY COLLECTIVE 2440 RESERVOIR AVE TRUMBULL, CT 06611-1300	06-0709295	501(C)(3)	6,110.	0.			FOR GENERAL SUPPORT
APPALACHIAN MOUNTAIN CLUB 10 CITY SQUARE BOSTON, MA 21290	04-6001677	501(C)(3)	6,039.	0.			FOR GENERAL SUPPORT
MISSION PO BOX 566 SOUTHPORT, CT 06890-1710	20-2777748	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT
UCONN LAW SCHOOL LEGAL CLINIC CLIENT FUND - ASYLUM AND HUMAN RIGHTS CLINIC - HARTFORD, CT 06105-2290	06-6070722	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY AT ALBANY FOUNDATION UAB 226 ALBANY, NY 12222	14-1503972	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT
NOURISH BRIDGEPORT 2200 NORTH AVE BRIDGEPORT, CT 06604-4704	27-4186000	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT
HUMAN SERVICES COUNCIL INC 1 PARK ST 2ND FL NORWALK, CT 06851-1038	06-6102160	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT
STAYING PUT IN NEW CANAAN PO BOX 484 NEW CANAAN, CT 06840	20-8465004	501(C)(3)	6,000.	0.			FOR GENERAL SUPPORT
UNITED WAY OF COASTAL FAIRFIELD COUNTY - 855 MAIN ST - BRIDGEPORT, CT 06604-4915	06-0864341	501(C)(3)	5,866.	0.			FOR GENERAL SUPPORT
TRUMBULL LIBRARY 33 QUALITY ST TRUMBULL, CT 06611-1300	23-7098043	501(C)(3)	5,816.	0.			FOR GENERAL SUPPORT
AMERICAN RED CROSS CONNECTICUT 209 FARMINGTON AVENUE FARMINGTON, CT 06032	53-0196605	501(C)(3)	5,505.	0.			FOR GENERAL SUPPORT
SANDY HOOK PROMISE FOUNDATION PO BOX 3489 NEWTOWN, CT 06470	46-1657101	501(C)(3)	5,500.	0.			FOR GENERAL SUPPORT
UMBRELLA CLUB PO BOX 112238 STAMFORD, CT 06911	22-3314578	501(C)(3)	5,500.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

Schedule I (Form 990)

06-1083893

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENWICH LIBRARY 101 WEST PUTNAM AVE GREENWICH, CT 06830-5387	06-6002281	501(C)(3)	5,500.	0.			FOR GENERAL SUPPORT
LOS ANGELES CHILDRENS CHORUS 585 E. COLORADO BLVD PASADENA, CA 91101	95-4431730	501(C)(3)	5,500.	0.			FOR GENERAL SUPPORT
MAKE-A-WISH FOUNDATION OF CONNECTICUT - 56 COMMERCE DRIVE - TRUMBULL, CT 06611-1300	22-2710919	501(C)(3)	5,477.	0.			FOR GENERAL SUPPORT
YOUTH BUSINESS INITIATIVE 304 MAIN AVENUE #147 NORWALK, CT 06851-1038	85-0594373	501(C)(3)	5,400.	0.			FOR GENERAL SUPPORT
SALVATION ARMY - BRIDGEPORT CORPS 30 ELM STREET BRIDGEPORT, CT 06605-2647	13-5562351	501(C)(3)	5,257.	0.			FOR GENERAL SUPPORT
CITY SQUASH, INC PO BOX 619 BRONX, NY 10458	42-1535583	501(C)(3)	5,200.	0.			FOR GENERAL SUPPORT
LOUNSBURY HOUSE 316 MAIN STREET RIDGEFIELD, CT 06877	06-0691290	501(C)(3)	5,109.	0.			FOR GENERAL SUPPORT

Schedule I (Form 990)

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

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 noncash assistance
SCHOLARSHIPS TO RESIDENTS OF FAIRFIELD COUNTY FOR POST-SECONDARY EDUCATION IN A 2 OR 4 YEAR ACCREDITED INSTITUTION	202	399,552.	0.		

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

PART I, LINE 2:

ORGANIZATIONS THAT ARE AWARDED COMPETITIVE GRANTS BY FCCF MUST SUBMIT ANNUAL OR SEMI-ANNUAL REPORTING (DEPENDING ON GRANT SIZE) 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.

Part IV Supplemental Information

THE FOUNDATION AWARDS SCHOLARSHIPS TO STUDENTS ATTENDING ELIGIBLE
EDUCATIONAL INSTITUTIONS. CHECKS ARE ISSUED DIRECTLY TO THE SCHOOL IN ORDER
TO ENSURE THAT THE FUNDS ARE USED FOR QUALIFIED EDUCATION-RELATED EXPENSES.

THE MAJORITY OF APPLICATIONS RECEIVED ARE REVIEWED AND EVALUATED BY AN
INDEPENDENT THIRD PARTY TO ENSURE THE SELECTION PROCESS IS FAIR AND
IMPARTIAL.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.** Employer identification number **06-1083893**

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- 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.

Only section 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?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2023

**FAIRFIELD COUNTY'S COMMUNITY FOUNDATION,
INC.**

06-1083893

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 aren't 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 and/or 1099-NEC 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) MENDI BLUE PRESIDENT AND CEO	(i)	291,828.	69.	0.	15,128.	23,115.	330,140.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) WILLIAM ANDREWS CHIEF FINANCIAL OFFICER	(i)	201,008.	65.	0.	10,762.	34,434.	246,269.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOSEPH COLLIN VP, PHILANTHROPY	(i)	165,989.	72.	0.	9,020.	30,625.	205,706.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELAINE MINTZ VP, STRATEGY & EXTERNAL RELATIONS	(i)	186,346.	68.	0.	9,360.	1,479.	197,253.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TARA BERLINGO VP, PEOPLE & CULTURE	(i)	161,649.	86.	0.	8,136.	1,895.	171,766.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LUTONYA RUSSELL-HUMES VP, GRANTS & PROGRAMS	(i)	156,000.	86.	0.	7,846.	1,448.	165,380.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 7:

CERTAIN INDIVIDUALS INCLUDED IN SCHEDULE J, PART II RECEIVED A \$75
DISCRETIONARY BONUS DURING CALENDAR YEAR 2023, WHICH WAS INCLUDED IN COLUMN
B(II) HEREIN AND IN THEIR 2023 FORM W-2, BOX 5, AS TAXABLE MEDICARE WAGES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.**

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	15	2,850,229.	AVG. SELLING PRICE
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 V, Donee Acknowledgement **29** **0**

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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X
33		

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

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

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

b If "Yes," describe in Part II.

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

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

Schedule M (Form 990) 2023

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.

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.

**SCHEDULE O
(Form 990)**

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization	FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number 06-1083893
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION SERVES THE 23 TOWNS AND CITIES
 IN FAIRFIELD COUNTY, CT. WE WORK CLOSELY WITH COMMUNITY ORGANIZATIONS,
 NONPROFITS, BUSINESSES, AND PHILANTHROPISTS TO ADDRESS CHALLENGES AND
 IDENTIFY OPPORTUNITIES TO CREATE A FAIRFIELD COUNTY WHERE EVERYONE HAS
 AN EQUITABLE OPPORTUNITY TO THRIVE. ESTABLISHED IN 1992, THE COMMUNITY
 FOUNDATION HAS AWARDED OVER \$390 MILLION IN GRANTS TO NONPROFITS IN
 FAIRFIELD COUNTY AND BEYOND.

THE COMMUNITY FOUNDATION:

- PROVIDES PERSONALIZED PHILANTHROPIC ADVISORY SERVICES, GRANT
SERVICES, AND FINANCIAL STEWARDSHIP TO ITS FUND HOLDERS.
- AWARDS GRANTS AND PROVIDES TECHNICAL SUPPORT, LEADERSHIP DEVELOPMENT,
AND TRAINING TO BUILD THE CAPACITY OF LOCAL NONPROFITS.
- BUILDS COMMUNITY POWER AND PUBLIC WILL TO CHANGE POLICY AND PRACTICE
FOR MORE EQUITABLE AND JUST SOCIAL SYSTEMS.
- BRINGS PEOPLE TOGETHER TO IDENTIFY AND PURSUE SOLUTIONS TO FAIRFIELD
COUNTY'S MOST PRESSING CHALLENGES.

FORM 990, PART III, LINE 1:

FAIRFIELD COUNTY'S COMMUNITY FOUNDATION (THE "COMMUNITY FOUNDATION"),
 PARTNERS WITH OUR COMMUNITY TO CREATE A FAIRFIELD COUNTY WHERE EVERY
 PERSON HAS AN EQUITABLE OPPORTUNITY TO THRIVE.

THE OVERARCHING GOAL OF THE COMMUNITY FOUNDATION IS TO CLOSE THE
 OPPORTUNITY GAP IN FAIRFIELD COUNTY. THIS MEANS ELIMINATING

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.**

Employer identification number
06-1083893

DISPARITIES IN INCOME, EDUCATION, EMPLOYMENT, HOUSING AND HEALTH. TO DO THIS TRANSFORMATIVE WORK, THE COMMUNITY FOUNDATION FOSTERS AND FACILITATES THE COMING TOGETHER OF THE PUBLIC, PRIVATE AND NONPROFIT SECTORS.

AS A COMMUNITY LEADER, THE COMMUNITY FOUNDATION IS ADVISOR AND CATALYST FOR EFFECTIVE PHILANTHROPY, CREATES AND MANAGES CHARITABLE FUNDS AND ADDRESSES COMMUNITY NEEDS WITH STRATEGIC GRANTMAKING, PARTNERSHIPS AND INITIATIVES.

THE COMMUNITY FOUNDATION PROVIDES:

- PERSONALIZED PHILANTHROPIC ADVISORY SERVICES, GRANT SERVICES AND FINANCIAL STEWARDSHIP TO FUND HOLDERS.

- COMMUNITY LEADERSHIP AND STRATEGIC, COLLABORATIVE INITIATIVES TO ADDRESS KEY REGIONAL ISSUES, SUCH AS EDUCATION, AFFORDABLE HOUSING, HEALTH, ECONOMIC OPPORTUNITY AND OTHER AREAS, WITH AN EMPHASIS ON OLDER YOUTH, WOMEN AND GIRLS AND IMMIGRANTS.

- 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.

FORM 990, PART VI, SECTION B, LINE 11B:

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

Name of the organization	FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number	06-1083893
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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. 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 CFO AND PROVIDED TO THE PRESIDENT FOR REVIEW. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

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.

FORM 990, PART VI, SECTION B, LINE 15:

Name of the organization	FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.	Employer identification number	06-1083893
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FCCF HAS ESTABLISHED A WRITTEN COMPENSATION POLICY WHEREBY THE EXECUTIVE COMMITTEE REVIEWS COMPENSATION ANNUALLY FOR THE CEO 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 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.

COMPENSATION FOR THE CEO AND KEY EMPLOYEES WAS LAST REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE IN JUNE 2024.

FORM 990, PART VI, SECTION C, LINE 19:

FAIRFIELD COUNTY'S 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, AND THE ORGANIZATION'S WEBSITE. IN ADDITION, 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 OR BY CALLING THE ORGANIZATION DIRECTLY.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

Name of the organization **FAIRFIELD COUNTY'S COMMUNITY FOUNDATION, INC.**

Employer identification number
06-1083893

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS **3,420.**

FORM 990, PART XII, LINE 2C:

THE FOUNDATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.