



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

2011

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2011 or tax year beginning

, and ending

Name of foundation CONNECTICUT HEALTH FOUNDATION, INC.		A Employer identification number 06-1057387
Number and street (or P.O. box number if mail is not delivered to street address) 100 PEARL STREET		B Telephone number 860-724-1580
City or town, state, and ZIP code HARTFORD, CT 06103		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 102,837,450.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		2,631,339.	2,631,339.		STATEMENT 1
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		523,159.			
b Gross sales price for all assets on line 6a		171668200.			
7 Capital gain net income (from Part IV, line 2)			523,159.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		3,154,498.	3,154,498.		
13 Compensation of officers, directors, trustees, etc		395,399.	0.		398,054.
14 Other employee salaries and wages		604,779.	0.		618,333.
15 Pension plans, employee benefits		238,729.	0.		244,454.
16a Legal fees STMT 2		8,089.	0.		8,089.
b Accounting fees					
c Other professional fees STMT 3		862,136.	670,056.		877,967.
17 Interest					
18 Taxes STMT 4		49,867.	0.		95,252.
19 Depreciation and depletion		51,686.	0.		
20 Occupancy		165,580.	0.		85,257.
21 Travel, conferences, and meetings		42,538.	0.		42,538.
22 Printing and publications					
23 Other expenses STMT 5		1,281,132.	0.		1,258,707.
24 Total operating and administrative expenses. Add lines 13 through 23		3,699,935.	670,056.		3,628,651.
25 Contributions, gifts, grants paid		3,001,401.			3,192,262.
26 Total expenses and disbursements. Add lines 24 and 25		6,701,336.	670,056.		6,820,913.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-3,546,838.			
b Net investment income (if negative, enter -0-)			2,484,442.		
c Adjusted net income (if negative, enter -0-)				N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	548,111.	1,594,633.	1,594,633.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	98,537.	124,542.	124,542.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 6	114,284,602.	100,803,378.	100,803,378.
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment: basis ▶ 395,191.			
	Less: accumulated depreciation STMT 7 ▶ 80,294.	336,589.	314,897.	314,897.
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers)	115,267,839.	102,837,450.	102,837,450.
	17 Accounts payable and accrued expenses	564,039.	309,230.	
	18 Grants payable	2,752,000.	2,561,137.	
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	3,316,039.	2,870,367.	
Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>	24 Unrestricted	111,951,800.	99,967,083.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances	111,951,800.	99,967,083.	
31 Total liabilities and net assets/fund balances	115,267,839.	102,837,450.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	111,951,800.
2 Enter amount from Part I, line 27a	2	-3,546,838.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	108,404,962.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED GAINS (LOSSES)	5	8,437,879.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	99,967,083.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLIC TRADED SECURITIES			P	VARIOUS	VARIOUS
b					
c					
d					
e					

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 171,668,200.		171,145,041.	523,159.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			523,159.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7
If (loss), enter -0- in Part I, line 7 } **2** **523,159.**

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c).
If (loss), enter -0- in Part I, line 8 { } **3** **N/A**

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	6,874,691.	110,332,877.	.062309
2009	5,898,268.	100,571,788.	.058647
2008	9,275,741.	119,929,109.	.077344
2007	8,815,198.	145,479,642.	.060594
2006	9,466,096.	141,709,581.	.066799

2 Total of line 1, column (d) **2** **.325693**

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years **3** **.065139**

4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 **4** **107,406,374.**

5 Multiply line 4 by line 3 **5** **6,996,344.**

6 Enter 1% of net investment income (1% of Part I, line 27b) **6** **24,844.**

7 Add lines 5 and 6 **7** **7,021,188.**

8 Enter qualifying distributions from Part XII, line 4 **8** **6,820,913.**

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

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	49,689.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	49,689.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	49,689.
6 Credits/Payments:			
a 2011 estimated tax payments and 2010 overpayment credited to 2011		6a	100,000.
b Exempt foreign organizations - tax withheld at source		6b	
c Tax paid with application for extension of time to file (Form 8868)		6c	
d Backup withholding erroneously withheld		6d	
7 Total credits and payments. Add lines 6a through 6d		7	100,000.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	178.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	50,133.
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax <input type="checkbox"/> 50,133. Refunded <input type="checkbox"/>		11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.CTHEALTH.ORG</u>	13	X	
14	The books are in care of ► <u>CONNECTICUT HEALTH FOUNDATION, INC.</u> Telephone no. ► <u>860-724-1580</u> Located at ► <u>100 PEARL STREET, HARTFORD, CT</u> ZIP+4 ► <u>06103</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► <u>15</u> N/A			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ► <u>OTHER COUNTRY</u>	16	Yes X	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years ► _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?		X

Form 990-PF (2011)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

Organizations relying on a current notice regarding disaster assistance check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 8		342,504.	8,853.	44,042.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MONETTE GOODRICH	VP COMMUNICATIONS & PUBLIC AFFAIRS			
100 PEARL STREET, HARTFORD, CT 06103	40.00	100,378.	4,435.	27,916.
JOSEFINA PAREDES	VP OF PROGRAMS			
100 PEARL STREET, HARTFORD, CT 06103	40.00	108,670.	849.	15,774.
ELIZABETH KRAUSE	SENIOR PROGRAM OFFICER			
100 PEARL STREET, HARTFORD, CT 06103	40.00	86,926.	3,535.	24,284.
MARYLAND GRIER	SENIOR COMMUNICATIONS OFFICER			
100 PEARL STREET, HARTFORD, CT 06103	40.00	80,185.	3,009.	15,316.
Total number of other employees paid over \$50,000				0

Form 990-PF (2011)

Part VIII**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NEW ENGLAND APPLIED RESEARCH/SIGMAWORKS 17 ROSEMARY STREET, NEEDHAM, MA 02155	CONSULTING	94,232.
LSV ASSET MANAGEMENT 4842 PAYSHERE CIRCLE, CHICAGO, IL 60674	INVESTMENT MANAGEMENT	93,449.
ROCHEL LANTZ 401 PROSPECT AVENUE, WEST HARTFORD, CT 06105	CONSULTING	60,418.
HEIDI BROOKS 445 ST. RONAN STREET, NEW HAVEN, CT 06511	CONSULTING	60,000.

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

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

Form 990-PF (2011)

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	107,543,990.
b Average of monthly cash balances	1b	1,071,372.
c Fair market value of all other assets	1c	426,642.
d Total (add lines 1a, b, and c)	1d	109,042,004.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	109,042,004.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,635,630.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	107,406,374.
6 Minimum investment return. Enter 5% of line 5	6	5,370,319.

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

1 Minimum investment return from Part X, line 6	1	5,370,319.
2a Tax on investment income for 2011 from Part VI, line 5	2a	49,689.
b Income tax for 2011. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	49,689.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	5,320,630.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	5,320,630.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,320,630.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	6,820,913.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	6,820,913.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,820,913.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				5,320,630.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006	1,458,930.			
b From 2007	2,020,942.			
c From 2008	3,327,548.			
d From 2009	901,730.			
e From 2010	1,517,571.			
f Total of lines 3a through e	9,226,721.			
4 Qualifying distributions for 2011 from Part XII, line 4: ▶ \$ 6,820,913.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				5,320,630.
e Remaining amount distributed out of corpus	1,500,283.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	10,727,004.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	1,458,930.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	9,268,074.			
10 Analysis of line 9:				
a Excess from 2007	2,020,942.			
b Excess from 2008	3,327,548.			
c Excess from 2009	901,730.			
d Excess from 2010	1,517,571.			
e Excess from 2011	1,500,283.			

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 10	NA	501 (C)(3)	ORAL HEALTH	606,587.
SEE STATEMENT 10	NA	501 (C)(3)	CHILDREN'S MENTAL HEALTH	817,977.
SEE STATEMENT 10	NA	501 (C)(3)	RACIAL & ETHNIC DISPARITITES IN HEALTH CARE	912,342.
SEE STATEMENT 10	NA	501 (C)(3)	ALL PROGRAMS	436,545.
SEE STATEMENT 10	NA	501 (C)(3)	OTHER	234,311.
Total	SEE CONTINUATION SHEET(S)			3,192,262.
b Approved for future payment				
SEE STATEMENT 10	NA	501 (C)(3)	CHILDREN'S MENTAL HEALTH	-19,388.
SEE STATEMENT 10	NA	501 (C)(3)	ORAL HEALTH	-235,000.
SEE STATEMENT 10	NA	501 (C)(3)	RACIAL & ETHNIC DISPARITITES IN HEALTH CARE	571.
Total	SEE CONTINUATION SHEET(S)			-190,861.

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

- | <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | <table border="1"> <tr> <th></th> <th>Yes</th> </tr> <tr> <td>1a(1)</td> <td></td> </tr> <tr> <td>1a(2)</td> <td></td> </tr> <tr> <td>1b(1)</td> <td></td> </tr> <tr> <td>1b(2)</td> <td></td> </tr> <tr> <td>1b(3)</td> <td></td> </tr> <tr> <td>1b(4)</td> <td></td> </tr> <tr> <td>1b(5)</td> <td></td> </tr> <tr> <td>1b(6)</td> <td></td> </tr> <tr> <td>1c</td> <td></td> </tr> </table> | | Yes | 1a(1) | | 1a(2) | | 1b(1) | | 1b(2) | | 1b(3) | | 1b(4) | | 1b(5) | | 1b(6) | | 1c | |
|--|--|--|-----|-------|--|-------|--|-------|--|-------|--|-------|--|-------|--|-------|--|-------|--|----|--|
| | Yes | | | | | | | | | | | | | | | | | | | | |
| 1a(1) | | | | | | | | | | | | | | | | | | | | | |
| 1a(2) | | | | | | | | | | | | | | | | | | | | | |
| 1b(1) | | | | | | | | | | | | | | | | | | | | | |
| 1b(2) | | | | | | | | | | | | | | | | | | | | | |
| 1b(3) | | | | | | | | | | | | | | | | | | | | | |
| 1b(4) | | | | | | | | | | | | | | | | | | | | | |
| 1b(5) | | | | | | | | | | | | | | | | | | | | | |
| 1b(6) | | | | | | | | | | | | | | | | | | | | | |
| 1c | | | | | | | | | | | | | | | | | | | | | |

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date _____

► PRESIDENT & CEO

Title

May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

EDWARD G. SULLIVAN

Preparer's signature

Date _____

Check		
-------	--	--

PTIN	
------	--

Firm's name ► WHITTLESEY & HADLEY, P.C.

Firm's EIN ► 06-0903326

Firm's address ► 147 CHARTER OAK AVE.
HARTFORD, CT 06106-5100

Phone no. 860-522-3111

06-1057387

3 Grants and Contributions Paid During the Year (Continuation)

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
SEE STATEMENT 10	NA	501 (C)(3)	DISCRETIONARY	184,500.
Total from continuation sheets				184,500.

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SEE STATEMENT 10	NA	501 (C)(3)	ALL PROGRAMS	80,456.
SEE STATEMENT 10	NA	501 (C)(3)	OTHER	-17,500.
Total from continuation sheets				62,956.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	FURNITURE & FIXTURES							
103	OFFICE FURNITURE							
	030607	SL	7.00	16	963.		963.	0.
104	MONETTE & CAROL'S NEW OFFICE FURNITURE							
	091407	SL	7.00	16	4,351.		4,351.	0.
105	OFFICE FURNITURE ON 2ND & 3RD FLOOR							
	123107	SL	7.00	16	3,912.		3,912.	0.
106	NEW OFFICE FURNITURE							
	073007	SL	7.00	16	2,000.		2,000.	0.
112	MONITOR							
	022808	SL	5.00	16	232.		131.	101.
113	MONITOR SPEAKERS							
	022808	SL	5.00	16	275.		156.	119.
114	DESKTOP COMPUTER							
	022808	SL	5.00	16	897.		612.	285.
115	SERVER							
	022808	SL	5.00	16	352.		199.	153.
116	MONITOR							
	012908	SL	5.00	16	318.		318.	0.
117	DESKTOP COMPUTER							
	012908	SL	5.00	16	939.		939.	0.
118	MODEM							
	012908	SL	5.00	16	251.		251.	0.
119	SERVER RACK							
	032608	SL	5.00	16	632.		632.	0.
120	SERVER							
	092308	SL	5.00	16	4,776.		1,577.	3,199.
121	COMPUTER							
	102708	SL	5.00	16	929.		929.	0.
122	SERVER							
	112505	SL	5.00	16	686.		686.	0.
123	DESK/FILE FOR MIKE S.							
	072408	SL	5.00	16	700.		700.	0.
124	YOLANDA'S FILE CABINET							
	100208	SL	5.00	16	619.		619.	0.
125	YOLANDA'S FILE CABINET							
	012308	SL	5.00	16	770.		770.	0.
126	OFFICE FURNITURE							
	032008	SL	5.00	16	1,103.		684.	419.
128	COMPUTER EQUIPMENT							
	052809	SL	5.00	16	1,154.		613.	541.
129	COMPUTER FIREWALL							
	062909	SL	5.00	16	2,114.		613.	1,501.
130	ALARM SYSTEM							
	123110	SL	5.00	16	1,621.			1,621.
131	AV EQUIPMENT							
	123110	SL	5.00	16	12,378.			4,648.
	* 990-PF PG 1 TOTAL FURNITURE & FIXTURES							
					41,972.	0.	21,655.	12,587.
	OTHER							
132	COMPUTER EQUIPMENT							
	063010	SL	4.00	16	10,709.		1,339.	1,339.

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
-------------	--	-----------	---

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
FROM INVESTMENTS	2,631,339.	0.	2,631,339.
TOTAL TO FM 990-PF, PART I, LN 4	2,631,339.	0.	2,631,339.

FORM 990-PF	LEGAL FEES	STATEMENT	2
-------------	------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	8,089.	0.		8,089.
TO FM 990-PF, PG 1, LN 16A	8,089.	0.		8,089.

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	3
-------------	-------------------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	192,080.	0.		176,175.
INVESTMENT FEES	670,056.	670,056.		701,792.
TO FORM 990-PF, PG 1, LN 16C	862,136.	670,056.		877,967.

FORM 990-PF	TAXES	STATEMENT	4
-------------	-------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	49,867.	0.		95,252.
TO FORM 990-PF, PG 1, LN 18	49,867.	0.		95,252.

FORM 990-PF	OTHER EXPENSES	STATEMENT	5
-------------	----------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SUPPLIES	22,060.	0.		22,060.
TELEPHONE	20,355.	0.		20,355.
POSTAGE AND SHIPPING	3,763.	0.		7,896.
RENTAL-EQUIPMENT	19,754.	0.		19,754.
BOARD EXPENSES	19,688.	0.		19,688.
OTHER	20,688.	0.		20,688.
DUES AND SUBSCRIPTIONS	6,256.	0.		6,256.
INSURANCE	21,077.	0.		21,077.
PROGRAM INITIATIVES	1,095,511.	0.		1,068,953.
SPONSORSHIP	51,980.	0.		51,980.
TO FORM 990-PF, PG 1, LN 23	1,281,132.	0.		1,258,707.

FORM 990-PF	CORPORATE STOCK	STATEMENT	6
-------------	-----------------	-----------	---

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
EQUITIES	100,803,378.	100,803,378.
TOTAL TO FORM 990-PF, PART II, LINE 10B	100,803,378.	100,803,378.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	7
-------------	--	-----------	---

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE & FIXTURES	53,527.	34,242.	19,285.
OTHER	341,664.	46,052.	295,612.
TOTAL TO FM 990-PF, PART II, LN 14	395,191.	80,294.	314,897.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 8
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
SANFORD CLOUD, JR. 100 PEARL STREET HARTFORD, CT 06103	CHAIR 4.00	7,400.	0.	0.
CORINE T. NORGAARD 100 PEARL STREET HARTFORD, CT 06103	VICE CHAIR & TREASURER 3.00	2,075.	0.	0.
MARILYN ALVERIO 100 PEARL STREET HARTFORD, CT 06103	SECRETARY 3.00	4,000.	0.	0.
JEAN ADNOPOZ 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	2,625.	0.	0.
TINA BROWN-STEVENSON 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	4,150.	0.	0.
GREGORY B. BUTLER, J.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	3,900.	0.	0.
MARTIN J. GAVIN 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.
J. C. DAVID HADDEN 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.
LAUREL G. HOLMES 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	875.	0.	0.
STEVEN J. HULEATT 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	4,400.	0.	0.
ROBERT KRZYS 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.

CONNECTICUT HEALTH FOUNDATION, INC.

06-1057387

HAROLD L. RIVES 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	4,200.	0.	0.
ROBERT M. SCHREIBMAN, D.M.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.
TODD SHEPARD 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	2,500.	0.	0.
DAVID NEWTON 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	1,063.	0.	0.
MARGARITA V. TORRES 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.
VICTOR VILLAGRA, M.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	2,000.	0.	0.
TORY Z. WESTBROOK, M.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	4,000.	0.	0.
PATRICIA BAKER 100 PEARL STREET HARTFORD, CT 06103	PRESIDENT & CEO 40.00	167,581.	6,890.	11,914.
CAROL POLLACK 100 PEARL STREET HARTFORD, CT 06103	VICE PRESIDENT OF FINANCE 40.00	131,735.	1,963.	32,128.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		342,504.	8,853.	44,042.

CONNECTICUT HEALTH FOUNDATION

EIN: 06-1057387

IRS FORM 990-PF

STATEMENT # 9

	OUTSTANDING 12/31/2010	GRANTS APPROVED	PAID THRU 12/31/2011	OUTSTANDING 12/31/2011
ORAL HEALTH				
Bridgeport OH Initiative (Fiscal Agt - SW AHEC, Inc)	-	(3,413) **	(3,413) **	0
Community Health Center - New Britain	65,000		65,000	-
Ct Mission of Mercy (Fiscal Agt - Ct Fndn Dental Outreach)		25,000		25,000
Connecticut Oral Health Initiative 2010	100,000		100,000	-
Connecticut Oral Health Initiative 2011		300,000	75,000	225,000
DentQuest		50,000	50,000	-
Family Strides	65,000		65,000	-
Southwest Community Health Center	65,000		65,000	-
UConn Health Center - Research Grant	125,000		125,000	-
United Community and Family Services	65,000		65,000	-
Sub-total Oral Health	485,000	371,587	606,587	250,000

CHILDREN'S MENTAL HEALTH

Center for Children's Advocacy (Installment 2)	37,500		37,500	-
Center for Children's Advocacy (Installment 3)	37,500		37,500	-
Center for Children's Advocacy (Installment 4)	37,500			37,500
Center for Children's Advocacy 2011 (moved to Ali)				-
Clifford Beers Guidance Clinic		40,000	37,500	40,000
CT Juvenile Justice Alliance (fiscal RYASAP 2011)	37,500			-
CT Juvenile Justice Alliance (fiscal RYASAP 2012)		75,000		75,000
Education Development Center		(246) **	(246) **	0
Family Services of Gr Waterbury (2011)	185,000		185,000	-
Family Services of Gr Waterbury (2011)		(53,517) **	(53,517) **	-
Hamden Public Schools		20,000	20,000	-
Lower Naugatuck Valley (2011) DERBY NET	200,000		200,000	-
Lower Naugatuck Valley PCRC (2012)		200,000		200,000
Manchester Youth Service Bureau	137,000		137,000	-
Manchester Youth Service Bureau (2012)		137,186		137,186
Middlesex Hospital (2012)		220,166		220,166
Middlesex Hospital (iCare)	217,240		217,240	-
NAMI of Connecticut		25,000		25,000
Waterbury SUN Program		135,000		135,000
Sub-total Children's Mental Health	889,240	798,589	817,977	869,852

RACIAL & ETHNIC HEALTH

Aspen Institute Roundtable		260,000		260,000
----------------------------	--	---------	--	---------

CONNECTICUT HEALTH FOUNDATION
 EIN: 06-1057387
 IRS FORM 990-PF
 STATEMENT # 9

	OUTSTANDING 12/31/2010	GRANTS APPROVED	PAID THRU 12/31/2011	OUTSTANDING 12/31/2011
ORAL HEALTH				
Bridgeport Child Advocacy Coalition		40,000		40,000
Center for Medicare Advocacy Year 1		40,000		40,000
Center for Medicare Advocacy Year 2		40,000		40,000
Community Health Center, Inc		150,000	37,500	112,500
CT Assn of Directors of Health	50,000		37,500	12,500
CT Assn of School Based Health Centers	49,012		36,759	12,253
CT Dept Social Services		100,000	50,000	50,000
CT Peer Review/Qualidigm 2010 Grant		(14,776) **	(14,776) **	-
CT State Medical Society-Phy Health & Ed Fund Yr 2 2009	100,000		100,000	-
CT State Medical Society - 2011		100,000	100,000	-
Corporation for Supportive Housing 2011		50,000	25,000	25,000
Greater Hfid Interfaith Coalition (GHICEJ) (2011)	29,150	500	29,150	-
Health Leadership Fellows stipend - Damian Humphry			500	-
Society for New Communications Research (2011)	200,000		200,000	-
Society for New Communications Research (2012)		175,000	(27,811) **	175,000
Southern CT State University Foundation		(27,811)		-
Univ of Connecticut Foundation Year 1	116,546		280,534	116,546
Univ of Connecticut Foundation Year 2	280,534		23,000	-
Yale University 2011	23,000		34,986	34,987
Yale University PRCH Year 2 2011	69,973			
Sub-total R&E Health Disparities	918,215	912,913	912,342	918,786
SUB-TOTAL	\$2,292,455	\$ 2,083,089	\$ 2,336,906	\$ 2,038,639

ALL PROGRAMS

Center for Children's Advocacy		2,500	2,500	-
Center for Children's Advocacy 2011 (from CMH)	50,000		37,500	12,500
CT Assn Directors of Health		2,500	2,500	-
CT Assn School Based Health Centers		2,500	2,500	-
CT Assn School Based Health Centers - Year 3/2010	25,000		25,000	-
CT Assn School Based Health Centers 2012		50,000		50,000
Health Funders Collaborative (Fiscal Agt -CT Council Philanthropy)		82,000	82,000	-
CT Public Broadcasting		80,000	40,000	40,000
CT Voices for Children 2011	154,545		154,545	-
CT Voices for Children 2012		150,000		150,000
Legal Assistance Resource Cntr Of CT		2,500	2,500	-
Legal Assistance Resource Cntr Of CT-N H Legal Assistance	50,000		37,500	12,500
Legal Services Collaborative 2011 (N H Legal Aid - fiscal Agt.)		100,000	50,000	50,000
UCAN		45,000		45,000

CONNECTICUT HEALTH FOUNDATION
 EIN: 06-1057387
 IRS FORM 990-PF
 STATEMENT # 9

	OUTSTANDING 12/31/2010	GRANTS APPROVED	PAID THRU 12/31/2011	OUTSTANDING 12/31/2011
Sub-total All Programs	279,545	517,000	436,545	360,000

ORAL HEALTH

OTHER INITIATIVES

CT Center for Patient Safety (2011)	22,500		22,500	-
CT Council on Philanthropy		10,400	10,400	-
CT Council on Philanthropy (Leadership)		5,000	5,000	-
CT Food Bank		40,000		40,000
CT News Project (Fiscal Agt CT Voices for Children)	37,500		37,500	-
CT News Project 2011		125,000	62,500	62,500
Council on Foundations		13,190	13,190	-
Foodshare of Greater Hartford		20,000		20,000
Grantmakers In Health		5,500	5,500	-
Operation Fuel		40,000		40,000
Universal Health Care Foundation of CT	120,000	(42,279)	77,722	-
Sub-total Other	180,000	216,812	234,312	162,500
SUB-TOTAL	\$2,752,000	\$2,816,901	\$ 3,007,762	\$ 2,561,139

DISCRETIONARY GRANTS

Advocacy for Patients w/Chronic Illness		10,000	10,000	-
Borton, Mark (Fiscal Agt Child Health & Dev Institute)		10,000	10,000	-
CT Aids Resource Coalition		25,000	25,000	-
CT Family Support Network		5,000	5,000	-
Mission of Mercy (Fiscal Agt CT Fndn for Dental Outreach)		25,000	25,000	-
CT Legal Rights Project		17,000	17,000	-
Actual Foods (Fiscal Agt - Food Runners of CT)		20,000	20,000	-
Harriet Beecher Stowe Center		25,000	25,000	-
Mt Aery Development Corp		20,000	20,000	-
Online Journalism Project, Inc		10,000	10,000	-
State of CT - Office of Lt Gov		2,500	2,500	-
URU, The Right to Be, Inc		15,000	15,000	-
Sub-total Discretionary	\$ -	\$ 184,500	\$ 184,500	\$ -
TOTAL GRANTS	\$2,752,000 \$ -	\$3,001,401 \$ -	\$ 3,192,262 \$ -	\$ 2,561,137

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - CONNECTICUT HEALTH FOUNDATION, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	FURNITURE & FIXTURES											
103	OFFICE FURNITURE MONETTE & CAROL'S	030607SL		7.00	16	963.			963.	963.		0.
104	NEW OFFICE FURNITURE ON	091407SL		7.00	16	4,351.			4,351.	4,351.		0.
105	OFFICE FURNITURE ON 2ND & 3RD FLOOR	123107SL		7.00	16	3,912.			3,912.	3,912.		0.
106	NEW OFFICE FURNITURE	073007SL		7.00	16	2,000.			2,000.	2,000.		0.
112	MONITOR	022808SL		5.00	16	232.			232.	131.		101.
113	MONITOR SPEAKERS	022808SL		5.00	16	275.			275.	156.		119.
114	DESKTOP COMPUTER	022808SL		5.00	16	897.			897.	612.		285.
115	SERVER	022808SL		5.00	16	352.			352.	199.		153.
116	MONITOR	012908SL		5.00	16	318.			318.	318.		0.
117	DESKTOP COMPUTER	012908SL		5.00	16	939.			939.	939.		0.
118	MODEM	012908SL		5.00	16	251.			251.	251.		0.
119	SERVER RACK	032608SL		5.00	16	632.			632.	632.		0.
120	SERVER	092308SL		5.00	16	4,776.			4,776.	1,577.		3,199.
121	COMPUTER	102708SL		5.00	16	929.			929.	929.		0.
122	SERVER	112505SL		5.00	16	686.			686.	686.		0.
123	DESK/FILE FOR MIKE	072408SL		5.00	16	700.			700.	700.		0.
124	YOLANDA'S FILE CABINET	100208SL		5.00	16	619.			619.	619.		0.

2011 DEPRECIATION AND AMORTIZATION REPORT
- CURRENT YEAR FEDERAL - CONNECTICUT HEALTH FOUNDATION, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
125	YOLANDA'S FILE CABINET	012308SL	5.00	16		770.			770.	770.		0.
126	OFFICE FURNITURE	032008SL	5.00	16		1,103.			1,103.	684.		419.
128	COMPUTER EQUIPMENT	052809SL	5.00	16		1,154.			1,154.	613.		541.
129	COMPUTER FIREWALL	062909SL	5.00	16		2,114.			2,114.	613.		1,501.
130	ALARM SYSTEM	123110SL	5.00	16		1,621.			1,621.			1,621.
131	AV EQUIPMENT	123110SL	5.00	16		12,378.			12,378.			4,648.
	* 990-PF PG 1 TOTAL FURNITURE & FIXTURE					41,972.		0.	41,972.	21,655.	0.	12,587.
	OTHER											
132	COMPUTER EQUIPMENT	063010SL	4.00	16		10,709.			10,709.	1,339.		1,339.
133	EQUIPMENT	063010SL	5.00	16		2,446.			2,446.	245.		489.
134	FURNITURE	063010SL	7.00	16		75,186.			75,186.	5,369.		10,742.
135	TELEPHONE EQUIPMENT	123110SL	7.00	16		19,775.			19,775.			2,825.
136	LEASEHOLD IMPROVEMENT	123110SL	10.75	16		203,555.			203,555.			19,037.
137	COMPUTER EQUIPMENT	010111SL	8.00	16		17,472.			17,472.			2,184.
138	SOFTWARE LICENSES	010111SL	4.00	16		6,603.			6,603.			1,659.
139	TELEPHONE EQUIPMENT	010111SL	7.00	16		652.			652.			93.
140	LEASEHOLD IMPROVEMENT	010111SL	10.00	16		427.			427.			40.
141	FURNITURE	010111SL	7.00	16		4,839.			4,839.			691.

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

من

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

128102
05-01-11

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I – Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization or other filer, see instructions. CONNECTICUT HEALTH FOUNDATION, INC.	Employer identification number (EIN) or <input checked="" type="checkbox"/> 06-1057387
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 100 PEARL STREET	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. HARTFORD, CT 06103	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CONNECTICUT HEALTH FOUNDATION, INC.

- The books are in the care of ► **100 PEARL STREET - HARTFORD, CT 06103**

Telephone No. ► **860-724-1580**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for.
- ☒ calendar year **2011** or
- ☐ tax year beginning , and ending .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason. ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)