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Form 990-PF

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.

Ford	calen	dar year 2014 or tax year beginning		, and ending		
Nan	ne of	foundation			A Employer identification	number
CC	ONNE	CTICUT HEALTH FOUNDATION, INC.			06-1057387	
Nun	nber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
10	00 P	EARL STREET			860-724-1580	
		own, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is p	ending, check here
$\overline{}$		ORD, CT 06103				
G C	heck	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test.
		Address change	Name change		check here and attach co	mputation
HU	٦.	type of organization: X Section 501(c)(3) ex	cempt private toundation Other taxable private found:	-1	E If private foundation state	
<u> </u>		ction 4947(a)(1) nonexempt charitable trust	· · · · · · · · · · · · · · · · · · ·	x Accrual	under section 507(b)(1)	
		· ' '	ther (specify)	ACCIUAI	F If the foundation is in a (under section 507(b)(1)	
(// >		109 ,668 ,949 . (Part I, colu		basis)	under section 507(b)(1)	(b), check here
<u> </u>	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		Ine total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				× «
	2	Check X if the foundation is not required to attach Sch. 8 Interest on savings and temporary	,	* * \$ 7 .	`,	,
	3	cash investments	2 222 225	0 022 205	2 222 205	
	4	Dividends and interest from securities	2,233,295.	2,233,295.	2,233,295.	
		Gross rents				* *
	_	Net rental income or (loss)	11,479,158.			
e		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		******	* * * *	
Revenue	b	assets on line 6a 60 , 242 , 129 . Capital gain net income (from Part IV, line 2)	% °	11,479,158.	, , , , , , , , , , , , , , , , , , ,	
Вè	_		*,5,	11,479,130.	N/A	` *
	8	Net short-term capital gain			N/A	
	9	Income modifications Gross sales less returns		` i * i ·		
	10a		**************************************	` \$ * \$ * \	** *** *** *** *** *** *** *** *** ***	
	1	Less Cost of goods sold Gross profit or-(loss)	* * * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·	***	,
	i	Other income				
	12	Total. Add lines 1 through 11	13,712,453,	13,712,453.	2,233,295.	,
	13	Compensation of officers, directors, trustees, etc	562,986.	0.	0.	46,500
	14	Other employee salaries and wages	527,368.	0.	0.	1,043,854
	15	Pension plans, employee benefits	249,121.	0.	0.	249,252
ses	16a	Legal fees STMT 2	4,983.	0.	0.	4,983
penses	Ь	Accounting fees				
Ĕ	C	Other professional fees STMT-3	715,783.	499,289.	0.	216,494
ĕ.	17	Interest		<u> </u>	<u>.</u>	
ınıstrat	18	Taxes STMT 4	241,872. Q 49,131.	0.	0.	198,211
uls	19	Depreciation and depletion OV 3 0 2015	Q 49,131.	0.	0.	
툫	20		160,279.	0.	0.	167,837
ďρ	21	Travel, conferences, and meetings	22,080.	0.	0.	22,080
an	22	Printing and publications GDEN, UT	1			
gu	23	Other expenses STMT 5	1,302,006.	0.	0.	1,289,355
Operating and Administrative	24	Total operating and administrative	3 935 600	499,289	0.	3 330 566
Ö	25	expenses. Add lines 13 through 23	3,835,609. 2,507,248.	433,283	0.	3,238,566 2,817,858
:		Contributions, gifts, grants paid Total expenses and disbursements.	2,307,240.			2,017,038
Operating and	20	Add lines 24 and 25	6,342,857.	499,289.	0.	6,056,424
<u>"—</u>	27	Subtract line 26 from line 12;		133,203		2,000,324
7	1	Excess of revenue over expenses and disbursements	7,369,596.			
	1	Net investment income (if negative, enter -0-)	, , , , , , , , , , , , , , , , , , , ,	13,213,164.		
	1	Adjusted net income (if negative, enter -0-)		,	2,233,295.	
4235					40 -	

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
	art.	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	988,224.	1,245,468.	1,245,468.
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 24,905.			
		Less: allowance for doubtful accounts	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	24,905.	24,905.
	4	Pledges receivable ►	vii ii i	\$ 2 × ×	
		Less; allowance for doubtful accounts	li ann an	Chara	man
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other	··· ·		
	Ĭ	disqualified persons			
	7	Other notes and loans receivable			1 13.2 ***
	'	Less: allowance for doubtful accounts		A AA A2 *	.i. ill it:
10		Inventories for sale or use			
Assets	i i	Prepaid expenses and deferred charges	44,749.	38,216.	20 216
Ass	ı	• •	44,747.	30,210.	38,216.
-	1	Investments - U.S. and state government obligations	111 400 526	100 155 100	100 155 100
	}	Investments - corporate stock STMT 7	111,400,536.	108,156,409.	108,156,409.
	1	Investments - corporate bonds		× 1 8 8 8 8 8	
	יון	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans			
	l .	Investments - other	**		
	14	Land, buildings, and equipment: basis 412,248.	X 8" 66 L * x ~	M L '1114.	
		Less accumulated depreciation 208,297.	247,316.	203,951.	203,951.
	15	Other assets (describe)	····		
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	112,680,825.	109,668,949.	109,668,949.
	17	Accounts payable and accrued expenses	173,718.	232,429.	***************************************
	18	Grants payable	1,903,097.	1,592,488.	
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)	2,076,815.	1,824,917.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ances	24	Unrestricted	110,604,010.	107,844,032.	
aŭ	25	Temporarily restricted			
Bal	1	Permanently restricted			
or Fund Bal		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds			* 4 · · · · · · · · · · · · · · · · · ·
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			** , % ,
As	29	Retained earnings, accumulated income, endowment, or other funds			
let	30	Total net assets or fund balances	110,604,010.	107,844,032.	
_				, , , , , ,	
	31	Total liabilities and net assets/fund balances	112,680,825.	109,668,949.	
			-	, , ,	
LP	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	110,604,010.
2	•	amount from Part I, line 27a		2	7,369,596.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	117,973,606.
5	Decr	eases not included in line 2 (itemize)	SEE STATE		10,129,574.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	107,844,032.
_				1	Form 990-PF (2014)

Part IV Capital Gains a	nd Losse	s for Tax on I	nvestmen	t Income						1 ago o
		of property sold (e.g mmon stock, 200 sh			(b) l	How a - Purc - Don	cquired chase ation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLIC TRADED SECURITI	ES							VARIOU	S	VARIOUS
b								·		
C					<u> </u>					
<u>d</u>					<u> </u>					
<u>e</u>	(f) Donro	austion allowed	(a) Co	at or other been	Щ			/h) C	nn na (lana	
(e) Gross sales price		ciation allowed allowable)	1 '-'	st or other basis expense of sale					ain or (loss s (f) minus	
a 60,242,129.				48,762,9	71.					11,479,158.
C					\dashv					
d					_					· · · · · ·
e					\neg				<u> </u>	
Complete only for assets showing	gain in colum	nn (h) and owned by	the foundation	on 12/31/69			(1)	Gains (C	ol. (h) gain	minus
(i) F.M.V. as of 12/31/69		justed basis f 12/31/69		cess of col. (i) col. (j), if any			col.	(k), but r	not less tha (from col. (n -0-) o r
a									· · ·	11,479,158.
b										
C										
d										
е										
2 Capital gain net income or (net cap	ital loss)	If gain, also ente			}	2				11,479,158.
3 Net short-term capital gain or (loss) as defined in									
If gain, also enter in Part I, line 8, co			(-).		ĴΙ					
If (loss), enter -0- in Part I, line 8					Ц	3	<u> </u>			11,479,158.
Part V Qualification Un	_	· · · · · · · · · · · · · · · · · · ·					nent inc	ome		
(For optional use by domestic private f	oundations si	ubject to the section	4940(a) tax on	net investment in	come	e.)				
If section 4940(d)(2) applies, leave this	s part blank.									
Was the foundation liable for the section	n 1012 tay o	n the dictributable an	nount of any ve	oar in the bace per	nod2					Yes X No
If "Yes," the foundation does not qualify				-	iou					L res LA NO
Enter the appropriate amount in ea					ntries		<u>-</u>			
(a) Base period years		(b)		· · · · · · · · · · · · · · · · · · ·	(c)		"	1	Dietrik	(d) oution ratio
Calendar year (or tax year beginning	ın) A	djusted qualifying dis	stributions	Net value of no			use assets		(col. (b) div	rided by col. (c))
2013			,985,834.			108	,460,028			.055189
2012			,132,061.		_		,449,945			.058708
2011		· - · · · · · · · · · · · · · · · · · ·	5,820,913.	<u> </u>			,406,374			.063506
2010			874,691.				,332,877	$\overline{}$.062309
2009			5,898,268.			100	<u>,</u> 571,788	╫	-	.058647
2 Total of line 1, column (d)								2		.298359
3 Average distribution ratio for the 5-	vear hase ner	nod - divide the total	on line 2 by 5	or hy the number	of ve	are				.298359
the foundation has been in existence	•			o. by the names	o. , o.	u. 0		3		.059672
		- ,								
4 Enter the net value of noncharitable	-use assets fo	or 2014 from Part X,	line 5	-				4		110,827,603.
5 Multiply line 4 by line 3								5		6,613,305.
6 Enter 1% of net investment income	(1% of Part I	l, line 27b)						6		132,132.
7 Add lines 5 and 6								7		6,745,437.
8 Enter qualifying distributions from	Part XII, line 4	1						8		6,056,424.
If line 8 is equal to or greater than I See the Part VI instructions.	•		e 1b, and comp	elete that part using	g a 19	% tax ı	rate.			

FORM 990-PF (2014) CONNECTICUT HEALTH FOUNDATION, INC.	0/ > 40.40/! > 40.40/! >		057387		Page 4
Part VI Excise Tax Based on Investment Income (Section 494		948	- see inst	ructio	วทร)
1a Exempt operating foundations described in section 4940(d)(2), check here and element of the section 4940(d)(2), check here	nter "N/A" on line 1.		li k	. «	
Date of ruling or determination letter: (attach copy of letter if nec	· ' I	N.	*}. l.:		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► and enter 1%	1		264	1,263.
of Part I, line 27b		<4		43:	, ,
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, col. (b). 丿			Ľ.	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	2			0.
3 Add lines 1 and 2		3		264	,263.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. 0	Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		264	,263.
6 Credits/Payments;			.13 % ;	\$	
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 215,154.	i.		Ą	į
b Exempt foreign organizations - tax withheld at source	6b	1			
c Tax paid with application for extension of time to file (Form 8868)	6c		,		e 1
d Backup withholding erroneously withheld	6d			*	4
7 Total credits and payments. Add lines 6a through 6d		7		215	154.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attain	ched	8			16.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		49	,125.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			,
11 Enter the amount of line 10 to be: Gredited to 2015 estimated tax	Refunded	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or intervene	ın		Yes	No
any political campaign?			1a		x
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for the definition	12	1b	 	x
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and			\ \tag{\cdot\}	 	130
distributed by the foundation in connection with the activities	- copies or any massimo position		Ž.		
c Did the foundation file Form 1120-POL for this year?			10		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear		10	-	-
(1) On the foundation. > \$ 0. (2) On foundation managers	-		1 3		Ř.
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi	· · ·			}	, s
managers. ▶ \$ 0.	, , , , , , , , , , , , , , , , , , ,			3	1
2 Has the foundation engaged in any activities that have not previously been reported to the IF	BS?		2	3	x
If "Yes," attach a detailed description of the activities			 	 	*
3 Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorporation, of	r		_	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	,	•	3	` *-	××
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year			4a	x	
b If "Yes," has it filed a tax return on Form 990-T for this year?			4b	x	\vdash
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,		5	†	x
If "Yes," attach the statement required by General Instruction T			L.2	T^-	1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:			1.	*
By language in the governing instrument, or			* ,	* 7/g	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
By state legislation that effectively amends the governing instrument so that no mandatory	v directions that conflict with the state	law	,'		
remain in the governing instrument?	,		6		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nolete Part II. col. (c), and Part XV		7	х	
	inprote rait in, eer (e), and rait it		<u> </u>	1	+
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ne) ►				4 4
CT		-	 -		***
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	ttorney General (or designate)	-			*
of each state as required by General Instruction G? If "No," attach explanation			Вь	, X	Salar ann A
9 Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(i)(3) or 4942(i)(5) for cale	ndar	30	+=	-
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," c	.,, .	·uui	9		x .
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu			10	 	X
ataura sciedu	no nothing their marines and addresses		Form 99	0-PF	
			. 01111 33	((2017)

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0.

0.

0

3,400

2.560

JENNIFER WHINNEM

100 PEARL STREET,

YOLANDA WILSON

HARTFORD,

100 PEARL STREET HARTFORD CT 06103

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

CT 06103

COMMUNICATIONS OFFICER

40.00

40.00

OFFICE MANAGER

61,411.

52,661

Part VIII 'Information About Officers, Directors, Trustees, Formation About Officers, Directors, Continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	e, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
CAMBRIDGE ASSOCIATES, LLC		- `
125 HIGH STREET, BOSTON, MA 02110	INVESTMENT MANAGEMENT SERVIC	ES 280,385.
HEIDI BROOKS		
445 ST. RONAN STREET, NEW HAVEN, CT 06511	CONSULTING	96,000.
NEW ENGLAND APPLIED RESEARCH GROUP, SIGMAWORKS		<u> </u>
17 ROSEMARY STREET, NEEDHAM, MA 02155	CONSULTING	50,000.
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 releval number of organizations and other beneficiaries served, conferences convened, research pap		Expenses
1 N/A	, ,	
2		
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.

For	m 990-PF (2014) CONNECTICUT HEALTH FOUNDATION, INC.	06-1057387	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see instru	ictions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	111,047,496
þ	Average of monthly cash balances	1b	1,225,670
C	Fair market value of all other assets	1c	242,167
d	Total (add lines 1a, b, and c)	1d	112,515,333
е	Reduction claimed for blockage or other factors reported on lines 1a and	** *	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	112,515,333
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,687,730
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	110,827,603
6	Minimum investment return, Enter 5% of line 5	6	5,541,380.
P	art XI.* Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	· —
1	Minimum investment return from Part X, line 6	1	5,541,380,
2a	Tax on investment income for 2014 from Part VI, line 5 264, 263.		
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b 3,326.	2	
C	Add lines 2a and 2b	Žc	267,589,
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,273,791,
4	Recoveries of amounts treated as qualifying distributions	4	0,
5	Add lines 3 and 4	5	5,273,791.
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	5,273,791,
<u> </u>	Qualifying Distributions (see instructions)	L	,,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,056,424.
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:		
а	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	6,056,424.
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	6,056,424.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for the section	n

Part,XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	<u> </u>	Four opinion to 2010	2010	2014
line 7	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	<u> </u>	*	5,273,791.
2 Undistributed income, if any, as of the end of 2014				3,273,731.
a Enter amount for 2013 only	, ,		0.	
b Total for prior years:	»			
	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.		
3 Excess distributions carryover, if any, to 2014:	^			
a From 2009 901,730.			,	
bFrom 2010 1,517,571.			•	
c From 2011 1,500,283.	r unitale de	. * .		İ
dFrom 2012 990,195.			, * , *	, ,
eFrom 2013 640,812.		·	1 2 3 7 3	· · ·
f Total of lines 3a through e	5,550,591.		`	i
4 Qualifying distributions for 2014 from	**	, >		
Part XII, line 4: ►\$6,056,424.	% i '	, , ** *	•	
a Applied to 2013, but not more than line 2a	* ,	* \$	0.	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·			1. 19.
years (Election required - see instructions)		0.	. 🔅 .	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	*		
d Applied to 2014 distributable amount				5,273,791.
e Remaining amount distributed out of corpus	782,633.	1 × 1 × 1		10 42 1
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.		3 % 4 .	0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,333,224.			* *
b Prior years' undistributed income. Subtract	*		**	· ;
line 4b from line 2b	, , , ,	0.	v \$ &	
c Enter the amount of prior years'	34			
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	, 2 901	0.	,	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	*	0.		f
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	t .
f Undistributed income for 2014. Subtract			,	
lines 4d and 5 from line 1. This amount must	, *,		* *	
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				4
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	901,730.			
9 Excess distributions carryover to 2015.				٠
Subtract lines 7 and 8 from line 6a	5,431,494.			
10 Analysis of line 9:				,
a Excess from 2010 1,517,571.				
b Excess from 2011 1,500,283.				
c Excess from 2012 990, 195.				
d Excess from 2013 640,812.				
e Excess from 2014 782,633.	<u> </u>	· · · · · ·		Form 990-DF (2014)

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

Form **990-PF** (2014)

PROP/BDGT DUE 14 WEEKS, CONCEPT PAPER DUE 18 WEEKS PRIOR TO QUARTER END

GRANTS ARE LIMITED TO CONNECTICUT AND GRANTEES MUST BE EXEMPT UNDER

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year 501 (C) (3) SEE STATEMENT 9 ORAL HEALTH 345,000. CHILDREN'S MENTAL SEE STATEMENT 9 501 (C) (3) HEALTH 579,966. 501 (C) (3) HEALTH EQUITY SEE STATEMENT 9 1,543,782. 501 (C) (3) CROSS PRIORITY SEE STATEMENT 9 262,500. 501 (C) (3) OTHER SEE STATEMENT 9 86,610. 2,817,858. ➤ 3a **b** Approved for future payment 501 (C) (3) SEE STATEMENT 9 ORAL HEALTH 409,888. 501 (C) (3) CHILDREN'S MENTAL SEE STATEMENT 9 HEALTH 62,500. 501 (C) (3) HEALTH EQUITY SEE STATEMENT 9 932,600. SEE CONTINUATION SHEET(S) 1,592,488. Total

	•
Part XVI-A	Analysis of Income-Producing Activities
1 411,7111 7	Analysis of moorns i readoning nourines

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code	Amount	code	Amount	Tunction income	
a	 					
b	 				· · · · · · · · · · · · · · · · · · ·	
c			 	·		
d						
e	·		 		<u> </u>	
g Fees and contracts from government agencies						
2 Membership dues and assessments			 			
3 Interest on savings and temporary cash		* **	 -		-	
investments						
4 Dividends and interest from securities			14	2,233,295.		
5 Net rental income or (loss) from real estate:		. , , , ,	/ \		20 . 12 1 4	
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory	523000	11,479,158.				
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b				<u> </u>		
c						
d	.					
e						
12 Subtotal. Add columns (b), (d), and (e)		11,479,158.		2,233,295.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	13,712,453	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	kempt F	Purposes		
Line No. Explain below how each activity for which inc the foundation's exempt purposes (other than			contribute	d importantly to the accomp	lishment of	

the foundation's exempt purposes (other than by providing funds for such	
	
14	Form 990-PF

Form 990-PF (2		ICUT HEALTH				06-1057			age 13
Part XVII	' Information Re Exempt Organ		ansfers To	and Transactions	and Relatio	nships With Nonc	haritabl	е	
1 Did the or			nv of the following	ng with any other organizati	on described in s	section 501(c) of	·I	Yes	No
				27, relating to political orga					1
a Transfers	from the reporting found	ation to a nonchar	ritable exempt or	ganization of:					
(1) Cash							1a(1)		x
(2) Other	assets						1a(2)		х
b Other tran	sactions:								
	of assets to a noncharita	· -					1b(1)		х
• •	ases of assets from a no	•	ot organization				1b(2)	!	Х
• •	l of facilities, equipment,						1b(3)	-	X
• •	oursement arrangements s or loan guarantees	•					1b(4)	_	X
, ,	rmance of services or me	emhershin or fund	raising solicitate	ons			1b(5) 1b(6)		x
• •	facilities, equipment, ma	· ·	-				1c	† —	x
-				edule. Column (b) should a	lways show the fa	air market value of the goo		sets.	
				ed less than fair market val				.,	
column (d) the value of the goods,	other assets, or se	ervices received.						
(a)Line no	(b) Amount involved	(c) Name	of noncharitable	e exempt organization	(d) Descri	ption of transfers, transactions,	and sharing ai	rangeme	ents
			N/A	_		·			
				·					
				 ,					
									
					-				
					 				
					 				
					·				
						 			
2a Is the four	adation directly or indirec	the affiliated with	or related to one	e or more tax-exempt organ	uzatione deceribe				
	501(c) of the Code (othe	•	•		nzations describe	:u	Yes	x	□No
	emplete the following sch		.(0)(0)) 01 111 000	don of the					_ NO
	(a) Name of org			(b) Type of organization	,	(c) Description of relat	onship		
	N/A							_	
				<u></u>					
	-				ļ				
Under	penalties of periory, I declare	that have examined	I this return∠includi	ng accompanying schedules and	d statements, and to	the best of my knowledge			
				an taxpayer) is based on all infor			May the IRS return with th	e prepar	rer
Here	The Marie	// A/c/		11/13/15	Pers	dent + CEO	shown below		No No
Sigr	nature of officer or trustee	y y		Date	Title		163	· L	J NO
	Print/Type preparer's n	ame	Preparet	signatur	Date	Check If P	TIN		
			Ka	Kalil		self- employed			
Paid	LORI BUDNICK		LOKI BUD	AIGH WW -	11/10/15		00046310)	
Preparer	Firm's name > BLUM	, SHAPIRO &	COMPANY, P.	.C., CPA'S		Firm's EIN ► 06-1	.009205		
Use Only	Frem's address by a -								
	Firm's address > 29	S. MAIN STR	EET P.O. BO	X 272000		l l			

423622 11-24-14

WEST HARTFORD, CT 06127-2000

Phone no. 860-561-4000

Grants and Contributions Approved for Fut	If recipient is an industrial	<u>'</u>		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
E STATEMENT 9		501 (C) (3)	CROSS PRIORITY	187,5
			 	
· · · · · · · · · · · · · · · · · · ·				

FORM 9'90-PF DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1	
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
FROM INVESTMENTS 2,233,29	5.	0. 2,233,295	0.	2,233,295.	
TO PART I, LINE 4 2,233,29	5.	0. 2,233,295	0.	2,233,295.	
FORM 990-PF	LEGAL	FEES	Si	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	4,983.	0.	0.	4,983.	
TO FM 990-PF, PG 1, LN 16A	4,983.	0.	0.	4,983.	
FORM 990-PF C	OTHER PROFES	SIONAL FEES	Si	PATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES INVESTMENT FEES	216,494. 499,289.		0.	216,494.	
TO FORM 990-PF, PG 1, LN 16C	715,783.	499,289.	0.	216,494.	
FORM 990-PF	TAX	ES	Si	TATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
EXCISE TAX	241,872.	0.	0.	198,211.	
TO FORM 990-PF, PG 1, LN 18	241,872.	0.	0.	198,211.	

FORM 990-PF	OTHER E	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		(D) CHARITABL PURPOSES		
SUPPLIES	21,945.	0.		0.	21,94		
TELEPHONE	17,675.	0.		0.	17,67		
POSTAGE AND SHIPPING	4,406.	0.		0.	4,40		
RENTAL EQUIPMENT	21,442.	0.		0.	21,442		
BOARD EXPENSES	26,620.	0.		0.	26,620		
OTHER	33,062.	0.		0.	33,062		
DUES AND SUBSCRIPTIONS	6,974.	0.		0.	6,97		
INSURANCE	20,534.	0.		0.	20,53		
PROGRAM INITIATIVES	1,107,517.	0.		0.	1,094,866		
SPONSORSHIP	29,818.	0.		0.	29,818		
OTHER CONTRIBUTIONS	12,013.	0.		0.	12,013		
TO FORM 990-PF, PG 1, LN 23	1,302,006.	0.		0.	1,289,355		
			DAT ANCIEC	CMAG			
		SETS OR FUND E	BALANCES		EMENT		
FORM 990-PF OTHER DECREA	SES IN NET AS	SETS OR FUND E	BALANCES				
FORM 990-PF OTHER DECREA DESCRIPTION UNREALIZED LOSSES	SES IN NET AS	SETS OR FUND E	BALANCES		MOUNT 8,852,944		
FORM 990-PF OTHER DECREA DESCRIPTION UNREALIZED LOSSES ADJUSTMENT FOR GAINS (LOSSE	SES IN NET AS	SETS OR FUND P	BALANCES	A	MOUNT 8,852,944 1,276,630		
FORM 990-PF OTHER DECREA DESCRIPTION UNREALIZED LOSSES ADJUSTMENT FOR GAINS (LOSSE TOTAL TO FORM 990-PF, PART	SES IN NET AS S) REPORTED O	SETS OR FUND P	BALANCES	STAT	MOUNT 8,852,944 1,276,630 10,129,574		
FORM 990-PF OTHER DECREA DESCRIPTION UNREALIZED LOSSES ADJUSTMENT FOR GAINS (LOSSE TOTAL TO FORM 990-PF, PART FORM 990-PF	SES IN NET AS S) REPORTED O	SETS OR FUND P		STAT	8,852,944 1,276,630 10,129,574 EMENT		

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

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
SANFORD CLOUD, JR. 100 PEARL STREET HARTFORD, CT 06103	CHAIR 4.00	7,400.	0.	0.
MARILYN ALVERIO 100 PEARL STREET HARTFORD, CT 06103	SECRETARY 3.00	4,000.	0.	Ο.
TINA BROWN-STEVENSON 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	4,650.	0.	0.
GREGORY B. BUTLER 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 3.00	3,900.	0.	0.
MARTIN J. GAVIN 100 PEARL STREET HARTFORD, CT 06103	VICE CHAIR 2.00	0.	0.	0.
J.C. DAVID HADDEN 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	3,000.	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.
ELAINE O'KEEFE 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	4,000.	0.	0.
HAROLD L. RIVES 100 PEARL STREET HARTFORD, CT 06103	TREASURER 2.00	4,400.	0.	0.
ROBERT SCHREIBMAN 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	0.	0.	0.

CONNECTICUT HEALTH FOUNDATION	, INC.		06-1057	7387
KENNETH ALLEYNE, M.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	1,000.	0.	0.
DAVID NEWTON 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	3,750.	0.	0.
VICTOR VILLAGRA, M.D. 100 PEARL STREET HARTFORD, CT 06103	DIRECTOR 2.00	3,500.	0.	0.
TODD SHEPARD 100 PEARL STREET HARTFORD, CT 06103	FORMER DIRECTOR 2.00	1,250.	0.	0.
MARGARITA TORRES 100 PEARL STREET HARTFORD, CT 06103	FORMER DIRECTOR	1,250.	0.	0.
PATRICIA BAKER 100 PEARL STREET HARTFORD, CT 06103	PRESIDENT & CEO	189,572.	21,682.	٥.
CAROL POLLACK 100 PEARL STREET HARTFORD, CT 06103	VICE PRESIDENT 1	FINANCE & OPE		٥.
ELIZABETH KRAUSE 100 PEARL STREET HARTFORD, CT 06103	VICE PRESIDENT (COMMUNICATION 102,459.		0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	481,052.	35,789.	0.

CONNECTICUT HEALTH FOUNDATION GRANTS APPROVED, PAID & OUTSTANDING IN 2014

EIN: 06-1009205 IRS FORM 990-PF STATEMENT #9

-	OUT- STANDING 12/31/2013	GRANTS APPROVED	PAID THRU 12/31/14	OUT- STANDING 12/31/2014	Payable 2016
ORAL HEALTH					
Children's Dental Health Project Connecticut Assn. School Based Health Centers Connecticut Oral Health Initiative (COHI) Gr Hartford Legal Aid Quinnipiack Valley Health District United CT Action for Neighborhoods (UCAN) The Institute for Community Research Connecticut Voices for Children	35,000	25,000 40,000 100,000 248,000 40,000 40,000 60,000	25,000 20,000 75,000 20,000 20,000 45,000 35,000	20,000 25,000 248,000 20,000 20,000 15,000	124,000
UCONN Health Center/Low Income Pregnant Women Connecticut Foundation for Dental Outreach Denta Quest Foundation 2012 (two years) St. Francis Hospital Center for Women's Health 2012 (corrected and moved to HE St Francis Balance)	61,888 30,000 50,000		30,000 50,000	61,888 - - -	
Sub-total Oral Health	176,888	553,000_	320,000	409,888	
CHILDREN'S MENTAL HEALTH					
LNV Parent Child Resource Center, Inc. Middlesex Hospital Ctr Behav Health Family Adv. Center for Children's Advocacy Year 2 (2014) Center for Children's Advocacy Year 1 (2013) CT Juvenile Justice Alliance (fiscal RYASAP 2012) 2 Manchester Youth Service Bureau 2012 (8 months) NAMI of Connecticut 2012 (two years)	200,000 220,166 75,000 37,500 37,500 25,000 12,500		200,000 220,166 37,500 37,500 37,500	37,500 - 25,000	
Sub-total Children's Mental Health	607,666		545,166	62,500	
HEALTH EQUITY					
African Caribbean Amer Parents of Children w/Disab. Bridgeport Child Advocacy Coalition Community Catalyst Community Health Center Assn of CT Community Health Services, Inc CT Assn School Based Health Ctrs CT Choosing Wisely Collaborative/CT Cntr. Primary C Connecticut State Medical Society Gr. New England Minority Supplier Dev Cncl (GNEMS Harvard College - Pres & Fellows/School Public Healt Hispanic Alliance of S E CT/AA Health Cncl S E. CT Hispanic Federation NAMI CT	are DC)	25,000 *** 25,000 50,000 50,000 75,000 75,000 45,000 76,625 48,750 49,913 50,000 50,000 30,000	25,000 25,000 25,000 38,313 24,375 25,000 25,000	50,000 25,000 75,000 75,000 45,000 38,313 24,375 49,913 25,000 25,000 30,000	
Optimus Health Care Inc Society for New Communications The Texas Health Institute Connecticut Legal Services Saint Francis Hospital 2012 (two years) CT News Project CT Public Broadcasting/WNPR	150,000 50,000 50,000	100,000 70,000 75,000 300,000	50,000 75,000 100,000 50,000 50,000	50,000 70,000 - 300,000 50,000	

Access Health CT (AHCT)	62,500		62,500	-
Planned Parenthood of So. New England, Inc.	50,000		50,000	•
Society for New Communications Research	140,000		140,000	-
Universal Health Care Foundation	25,000		25,000	-
Office of the Healthcare Advocate - State of CT	42,500		42,500	-
CT Children's Medical Center Foundation	48,544		48,544	-
Christian Community Action, Inc.	50,000		50,000	-
CT Legal Services (fiscal Agt For CT Health Entity)	125,000		125,000	-
Partnership for Strong Communities	50,000		50,000	-
Southwestern AHEC/CT AHEC Network	50,000		50,000	-
State of Connecticut/Office of Health Reform/Innovation Wheeler Clinic	on 100,000	(24,905) **	(24,905) 100,000	-
Sub-total Health Equity	993,544	1,170,383	1,231,327	932,600
CROSS PRIORITY				
Connections Nove Project		75,000	37,500	27 500
Connecticut News Project Connecticut Voices for Children		100,000	37,500	37,500 100,000
		50,000	50,000	100,000
United CT Action for Neighborhoods (UCAN)		100,000	50,000 50,000	50.000
New Haven Legal Svcs Adv Collab. (fiscal agent New Haven Legal Assistance Assn)		100,000	50,000	50,000
` ;	E0 000		50,000	
New Haven Legal Assistance Association (2013) CT Assn. School Based Health Centers 2012 2 years	50,000 25.000		50,000 25,000	-
CT Voices for Children 2012 - Two year	50.000		50,000	-
•				<u>-</u>
Sub-total Cross Priority	125,000	325,000	262,500	187,500
SUB-TOTAL	\$ 1,903,098	\$ 2,048,383	2,358,993	\$ 1,592,488
OTHER GRANTS				
Connecticut Council for Philanthropy		10,400	10,400	-
Connecticut Food Bank		10,000	10,000	-
Council on Foundations		12,010	12,010	-
Foodshare		10,000	10,000	-
Grantmakers for Effective Organizations		2,550	2,550	-
Grantmakers In Health-Funding Partner Grant		6,325	6,325	-
Hartford Communities That Care		10,000	10,000	-
Operation Fuel		10,000	10,000	-
Sub-total Other		71,285	71,285	-
DISCRETIONARY GRANTS				
Oral Health				
Fair Haven Community Health Center		25,000	25,000	-
Sub-total		25,000	25,000	
Sub-total		23,000	25,000	<u>-</u>
Childrens' Mental Health				
AFCAMP		15,000	15,000	-
Foundation for Children		9,800	9,800	-
Northwestern CT AHEC		10,000	10,000	-
Sub-total		34,800	34,800	_
oub-total			,000	
Health Equity				
Action for Bridgeport Community Development		5,000	5,000	_
Agency on Aging of So. Central CT		5,000	5,000	-
Bridgeport Child Advocacy Coalition		5,000	5,000	-
Center for Medicare Advocacy		15,000	15,000	
School for Michigan Advocacy		13,000	13,000	-

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Chase School Family Resource Cente	r	5,000	5,000	-	
Christian Community Action		5,000	5,000	-	
Community Action Agcy of New Haver	า	5,000	5,000	-	
Community Health Cntr Assn of CT		10,000	10,000	-	
Community Renewal Team		5,000	5,000	-	
CSEA/SEIU/Fisca Agt -CT Center for A	A New Economy	10,000	10,000	-	
CT Center for Patient Safety		25,000	25,000	=	
CT Health I-Team		25,000	25,000	-	
Eastern Area Health Education Center	r	5,000	5,000	-	
Faithcare, Inc.		15,000	15,000	_	
Fit Haven		10,000	10,000	-	
Hispanic Ctr Of Gr. Danbury		5,000	5,000	-	
Hispanic Health Council		5,000	5,000	_	
Interaction Institute for Social Change		9,455	9,455	-	
Mount Aery Development Corp.		5,000	5,000	_	
Open Communities Alliance (Fiscal Ag	at CT Urban Legal) #1	25,000	25,000	_	
Open Communities Alliance (Fiscal Ag		25,000	25,000	_	
Penguenas Ligas Hispanas de New H	• • •	10,000	10,000	-	
Southwestern AHEC		5,000	5,000	_	
St James Roman Catholic Church		5,000	5,000	-	
The Community Action Agcy Of West	ern CT	5,000	5,000	_	
The Connecticut Forum		18,000	18,000	_	
The Legacy Foundation of Htfd, Inc		10,000	10,000	_	
Town of Old Saybrook		5,000	5,000	_	
URU The Right to Be		25,000	25,000	_	
West Hartford-Bloomfield Health Distri	ict	5,000	5,000	_	
		-,	5,555		
Sub-total		312,455	312,455	<u> </u>	
Other Grants					
Foundation for Educational Advancem	nent	2,325	2,325	_	
HeartBeat Ensemble		13,000	13,000	_	
Treatibeat Ensemble		70,000	10,000		
Sub-total		15,325	15,325		
Sub-total Discr	retionary \$ -	\$ 387,580	\$ 387,580	\$ -	
TOTAL GRAN	TS <u>\$1,903,098</u>	\$ 2,507,248	2,817,858	\$ 1,592,488	124,000

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