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Form 990-PF

Return of Private Foundation

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

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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For calendar year 2014, or tax year beginning 10-01-2014, and ending 09-30-2015

Name of foundation: RHODA & DAVID CHASE FAMILY FOUNDATION INC. A Employer identification number: 06-1499922. B Telephone number: (860) 549-1674. G Check all that apply: Initial return, Final return, Address change. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$2,262,031. J Accounting method: Accrual.

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26), leading to Total expenses and disbursements of 470,360 and Net investment income of 69,400.

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

<b>Part II Balance Sheets</b>		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	35,737	118,925	118,925		
	<b>2</b>	Savings and temporary cash investments . . . . .	123,439	5,266	5,266		
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>5</b>	Grants receivable . . . . .					
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>8</b>	Inventories for sale or use . . . . .					
	<b>9</b>	Prepaid expenses and deferred charges . . . . .					
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)					
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	1,174,020 <input checked="" type="checkbox"/>	1,174,020	2,112,840		
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	<b>12</b>	Investments—mortgage loans . . . . .					
	<b>13</b>	Investments—other (attach schedule) . . . . .					
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
<b>15</b>	Other assets (describe ▶ _____)	<input checked="" type="checkbox"/> 25,000	<input checked="" type="checkbox"/> 25,000	<input checked="" type="checkbox"/> 25,000			
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,358,196	1,323,211	2,262,031			
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .	8,250	8,250			
	<b>18</b>	Grants payable . . . . .					
	<b>19</b>	Deferred revenue . . . . .					
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b>	Other liabilities (describe ▶ _____)					
<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	8,250	8,250				
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.</b>						
	<b>24</b>	Unrestricted . . . . .	1,349,946	1,314,961			
	<b>25</b>	Temporarily restricted . . . . .					
	<b>26</b>	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.</b>						
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .					
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund					
<b>29</b>	Retained earnings, accumulated income, endowment, or other funds						
<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,349,946	1,314,961				
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,358,196	1,323,211				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	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) . . . . .	<b>1</b>	1,349,946
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-34,985
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	1,314,961
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	1,314,961

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

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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

<b>2</b>	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 }	<b>2</b>	
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	<b>3</b>	

**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))
2013	543,508	1,775,942	0.306039
2012	781,722	1,848,629	0.422866
2011	654,084	1,863,144	0.351065
2010	720,136	2,144,700	0.335775
2009	647,882	1,802,633	0.359409

<b>2</b>	Total of line 1, column (d).	<b>2</b>	1,775,154
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.355031
<b>4</b>	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.	<b>4</b>	2,024,837
<b>5</b>	Multiply line 4 by line 3.	<b>5</b>	718,880
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).	<b>6</b>	694
<b>7</b>	Add lines 5 and 6.	<b>7</b>	719,574
<b>8</b>	Enter qualifying distributions from Part XII, line 4.	<b>8</b>	459,935

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 page 18 of the instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,388
<b>c</b>	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,388
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	<b>5</b>	1,388
<b>6</b>	Credits/Payments		
<b>a</b>	2014 estimated tax payments and 2013 overpayment credited to 2014	<b>6a</b>	1,941
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments Add lines 6a through 6d. . . . .	<b>7</b>	1,941
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	553
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> 553 <b>Refunded</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ 0 <b>(2)</b> On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	Yes	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

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

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>JOHN P REDDING</b> Telephone no <b>(860) 549-1674</b> Located at <b>CHASE ENTERP225 ASYLUM ST FL 29 HARTFORD CT</b> ZIP +4 <b>06103</b>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country	<b>16</b>	<b>Yes</b>	<b>No</b>

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>1b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input checked="" type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>1c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>20__ , 20__ , 20__ , 20__</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ).	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>20__ , 20__ , 20__ , 20__</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2014 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i> )	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	<b>4b</b>		<b>No</b>

**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 4945(d)(4)(A)? (see instructions).  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)? **5b**  Yes  No  
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?  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? **6b**  Yes  No  
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? **7b**  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(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
DAVID T CHASE C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	DIRECTOR/PRESIDENT 5 00	0	0	0
RHODA L CHASE C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	DIRECTOR/VICE PRESIDENT 1 00	0	0	0
THERESA A KASUGA-LALIBERTE C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	SECRETARY 1 00	0	0	0
JOHN P REDDING C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	DIRECTOR/VICE PRES/ASSTSEC 1 00	0	0	0

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

(a) Name and address of each employee paid more than \$50,000	(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
NONE				

**Total** number of other employees paid over \$50,000.  0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> 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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

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



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	1,980,097
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	50,575
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	25,000
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	2,055,672
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	2,055,672
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	30,835
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	2,024,837
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	101,242

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

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	101,242
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5. . . . .	<b>2a</b>	1,388
<b>b</b>	Income tax for 2014 (This does not include the tax from Part VI). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	1,388
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	99,854
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	99,854
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	99,854

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	459,935
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	459,935
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	459,935

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

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7				99,854
<b>2</b> Undistributed income, if any, as of the end of 2014				
<b>a</b> Enter amount for 2013 only. . . . .			0	
<b>b</b> Total for prior years 20__ , 20__ , 20__		0		
<b>3</b> Excess distributions carryover, if any, to 2014				
<b>a</b> From 2009. . . . .	559,536			
<b>b</b> From 2010. . . . .	615,059			
<b>c</b> From 2011. . . . .	562,547			
<b>d</b> From 2012. . . . .	690,905			
<b>e</b> From 2013. . . . .	456,287			
<b>f</b> Total of lines 3a through e. . . . .	2,884,334			
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <u>459,935</u>				
<b>a</b> Applied to 2013, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2014 distributable amount. . . . .				99,854
<b>e</b> Remaining amount distributed out of corpus	360,081			
<b>5</b> Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,244,415			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . . .	559,536			
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a. . . . .	2,684,879			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2010. . . . .	615,059			
<b>b</b> Excess from 2011. . . . .	562,547			
<b>c</b> Excess from 2012. . . . .	690,905			
<b>d</b> Excess from 2013. . . . .	456,287			
<b>e</b> Excess from 2014. . . . .	360,081			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
 JOHN P REDDING CO CHASE ENTERPRISES  
 GOODWIN SQ 225 ASYLUM ST 29TH FL  
 HARTFORD, CT 06103  
 (860) 549-1674

**b** The form in which applications should be submitted and information and materials they should include  
 NO SPECIFIC FORM

**c** Any submission deadlines  
 NONE

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
 NONE

**Part XV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3a</b> 459,110
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>▶ 3b</b> 0



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

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?
a Transfers from the reporting foundation to a noncharitable exempt organization of
(1) Cash.
(2) Other assets.
b Other transactions
(1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
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.

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [ ] Yes [X] No

b If "Yes," complete the following schedule
Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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.
Sign Here: Signature of officer or trustee, Date (2016-05-16), Title.
May the IRS discuss this return with the preparer shown below (see instr)? [ ] Yes [X] No

Paid Preparer Use Only
Print/Type preparer's name, Preparer's Signature, Date, Check if self-employed [X], PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

DAVID T CHASE
RHODA L CHASE

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AGUDATH ISRAEL OF AMERICA INC 42 BROADWAY14TH FL NEW YORK,NY 100043889	N/A	PUBLIC CHARITY	PASSEVER FUND	100
ALZHEIMER'S COMMUNITY CARE 800 NORTHPOINT PKWY WEST PALM BEACH,FL 334071978	N/A	PUBLIC CHARITY	PALM BEACH FASHION SHOW AND FUNDRAISER	10,000
AMERICAN CANCER SOCIETY 235 SOUTH COUNTY RD SUITE 2 PALM BEACH,FL 334804292	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	15,000
AMERICAN COMMITTEE FOR SHAARE ZEDEK MEDICAL CENTER IN JERUSALEM 55 WEST 39TH STREET 4TH FLOOR NEW YORK,NY 100180563	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
AMERICAN FRIENDS OF MAGEN DAVID ADOM 352 SEVENTH AVENUE SUITE 400 NEW YORK,NY 100015012	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	15,000
AMERICAN HEART ASSOCIATION 11207 BLUE HERON BLVD NORTH ST PETERSBURG,FL 337163721	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	15,000
AMERICAN JEWISH COMMITTEE 165 EAST 56 STREET NEW YORK,NY 100222709	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
AMERICAN KIDNEY FUND 11921 ROCKVILLE PIKE SUITE 300 ROCKVILLE,MD 208522737	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
AMERICAN LUNG ASSOCIATION 2701 NORTH AUSTRALIAN AVE SUITE 100 WEST PALM BEACH,FL 334074512	N/A	PUBLIC CHARITY	2015 BREATH OF LIFE LUNCHEON	10,000
AMERICAN RED CROSS 1250 NORTHPOINT PARKWAY WEST PALM BEACH,FL 334071912	N/A	PUBLIC CHARITY	2015 AMERICAN RED CROSS INTERNATIONAL BALL	10,000
AMERICAN SOCIETY FOR YAD VASHEM INC 500 FIFTH AVENUE 42ND FLOOR NEW YORK,NY 101104299	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
ANTI-DEFAMATION LEAGUE 1952 WHITNEY AVE 3RD FL HAMDEN,CT 065171206	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	3,333
ARTHRITIS FOUNDATION 400 HIBISCUS ST SUITE 100 WEST PALM BEACH,FL 334015822	N/A	PUBLIC CHARITY	HOLIDAY LUNCHEON	2,500
ARTHRITIS FOUNDATION 29 CRAFTS ST SUITE 450 NEWTON,MA 024581274	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,500
B'NAI BRITH INTERNATIONAL 2020 K ST NW 7TH FL WASHINGTON,DC 200061828	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
<b>Total . . . . .</b>				459,110



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
B'NAI TIKVOH-SHOLOM 180 STILL ROAD BLOOMFIELD,CT 060022272	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	661
BASCOM PALMER EYE INSTITUTE 900 NW 17TH STREET MIAMI,FL 331361119	N/A	PUBLIC CHARITY	PALM BEACH GALA "THE BEAUTY OF THE EYE"	20,000
BESS & PAUL SIGEL HEBREW ACADEMY 53 GABB ROAD BLOOMFIELD,CT 060020442	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
BLOOMFIELD ROTARY FOUNDATION INC PO BOX 442 BLOOMFIELD,CT 060020442	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,500
BOYS TOWN JERUSALEM FOUNDATION OF AMERICA INC 1 PENN PLAZA SUITE 6250 NEW YORK,NY 101190002	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
BUSHNELL CENTER FOR THE PERFORMING ARTS 166 CAPITOL AVENUE HARTFORD,CT 061061621	N/A	PUBLIC CHARITY	THE BUSNELL'S 2014-2015 ANNUAL FUND	5,000
CHRISTOPHER & DANA REEVE FOUNDATION PO BOX 9004 WALDORF,MD 206049004	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	55
CIESLA FOUNDATION 5005 LINNEAN AVE NW WASHINGTON,DC 200082042	N/A	PUBLIC CHARITY	THE ROSENWALD SCHOOLS FILM PROJECT	10,000
CLEVELAND CLINIC FOUNDATION 3050 SCIENCE PARK DRIVE/AC322 BEACHWOOD,OH 441227316	N/A	PUBLIC CHARITY	CLEVELAND CLINIC FLORIDA BALL FUND	10,000
CONGREGATION BETH ISRAEL 701 FARMINGTON AVE WEST HARTFORD,CT 061191799	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,326
CONNECTICUT APPLESEED 25 DUDLEY ROAD WILTON,CT 068973508	N/A	PUBLIC CHARITY	EVENT TO HONOR GREGORY B BUTLER	833
CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON STREET HARTFORD,CT 061063322	N/A	PUBLIC CHARITY	ACES FOR KIDS	500
CONNECTICUT PUBLIC BROADCASTING 1049 ASYLUM AVE HARTFORD,CT 061052432	N/A	PUBLIC CHARITY	CPTV'S LADY GRANTHAM EVENT	5,100
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD SUITE 200 BETHESDA,MD 208145200	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	25,000
DANA-FARBER CANCER INSTITUTE 220 SUNRISE AVE SUITE 204 PALM BEACH,FL 334803803	N/A	PUBLIC CHARITY	24TH ANNUAL DISCOVERY CELEBRATION	10,000
<b>Total . . . . .</b>			<b>3a</b>	459,110

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DOROT 171 WEST 85TH STREET NEW YORK, NY 100244400	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	36
DREYFOOS SCHOOL OF THE ARTS FOUNDATION PO BOX 552 WEST PALM BEACH, FL 334020552	N/A	PUBLIC CHARITY	SCHOOL OF THE ARTS FOUNDATION GUILD MUSICAL LUNCHEON SERIES	1,000
EASTER SEALS PO BOX 626 WINDSOR, CT 060950626	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
FLAME PO BOX 590359 SAN FRANCISCO, CA 941590381	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
FLORENCE GRISWOLD MUSEUM 96 LYME ST OLD LYME, CT 063711426	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
FOODSHARE 450 WOODLAND AVE BLOOMFIELD, CT 060021342	N/A	PUBLIC CHARITY	CONGREGATION BETH ISRAEL ANNUAL FOOD DRIVE	500
FOUNDATION FOR THE ADVANCEMENT OF CATHOLIC SCHOOLS 467 BLOOMFIELD AVE BLOOMFIELD, CT 060022903	N/A	PUBLIC CHARITY	FACS 2014 ANNUAL APPEAL	5,000
FRIENDS OF ISRAEL DEFENSE FORCES 7700 CONGRESS AVE STE 3207 BOCA RATON, FL 334871358	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
FRIENDS OF ISRAEL DISABLED VETERANS PO BOX 1911 HICKSVILLE, NY 118029810	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
HARTFORD POLICE UNION PO BOX 232 HARTFORD, CT 061010232	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
HARTFORD SYMPHONY ORCHESTRA 166 CAPITOL AVENUE HARTFORD, CT 061061621	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
HEBREW FREE BURIAL 224 WEST 35TH STREET RM 300 NEW YORK, NY 100011035	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
HILL-STEAD MUSEUM 35 MOUNTAIN RD FARMINGTON, CT 060322372	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
INTERNATIONAL SOCIETY OF PALM BEACH 44 COCOANUT ROW M-207C PALM BEACH, FL 334804069	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	25,000
ISRAEL CANCER ASSOCIATION USA 525 SOUTH FLAGLER DR SUITE 202 WEST PALM BEACH, FL 334015932	N/A	PUBLIC CHARITY	2015 GALA, SABRA CABARET	10,000
<b>Total . . . . .</b>				<b>459,110</b>

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ISRAEL CANCER RESEARCH FUND 295 MADISON AVENUE SUITE 1030 NEW YORK, NY 100177754	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	118
ISRAEL SPECIAL KIDS FUND 505 EIGHTH AVE NEW YORK, NY 100186505	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
JEWISH FAMILY SERVICES 333 BLOOMFIELD AVENUE SUITE A WEST HARTFORD, CT 061171500	NA	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
JEWISH FEDERATION OF GREATER HARTFORD 333 BLOOMFIELD AVENUE SUITE C WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
JEWISH NATIONAL FUND PO BOX 5609 HICKSVILLE, NY 118025609	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
JFACT FUND INC 40 WOODLAND STREET HARTFORD, CT 061052331	N/A	PUBLIC CHARITY	2015 VOICES OF HOPE PROJECT	333
JOSLIN DIABETES CENTER ONE JOSLIN PLACE BOSTON, MA 022155306	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
JUDY DWORIN PERFORMANCE PROJECT 233 PEARL ST HARTFORD, CT 061032109	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
JUVENILE DIABETES RESEARCH FOUNDATION 1641 WORTHINGTON RD SUITE 340 WEST PALM BEACH, FL 334096704	N/A	PUBLIC CHARITY	2015 GEM OF AN EVENING GALA	10,000
JUVENILE DIABETES RESEARCH FOUNDATION 20 BATTERSON PARK ROAD 3RD FLOOR FARMINGTON, CT 060324502	N/A	PUBLIC CHARITY	2015 PROMISE BALL	3,333
KATAHDIN PRODUCTIONS INC PO BOX 2218 BERKELEY, CA 947020218	N/A	PUBLIC CHARITY	PRODUCTION OF FILM	5,000
LEUKEMIA & LYMPHOMA SOCIETY 3230 COMMERCE PLACE SUITE B WEST PALM BEACH, FL 334071968	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	15,000
LUBAVITCHER YESHIVA ACADEMY 1148 CONVERSE STREET LONGMEADOW, MA 011061787	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DR CLARKSBURY, MD 208711952	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	45
MAKE A WISH FOUNDATION PO BOX 97104 WASHINGTON, DC 200907104	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
<b>Total . . . . .</b>			<b>3a</b>	459,110

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVE NEW YORK, NY 100656007	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
MISHKAN ISRAEL DAY CAMP 77 MT PLESANT DR TRUMBULL, CT 066113424	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
NATIONAL CONFERENCE FOR COMMUNITY & JUSTICE 820A PROSPECT HILL ROAD WINDSOR, CT 060951782	N/A	PUBLIC CHARITY	HUMAN RELATIONS AWARD BANQUET	1,667
NATIONAL GALLERY OF ART 2000B SOUTH CLUB DRIVE LANDOVER, MD 207853228	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
NATIONAL HEMOPHILIA FOUNDATION 116 W32ND ST FL 11 NEW YORK, NY 100013212	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
NATIONAL JEWISH HEALTH PO BOX 5898 DENVER, CO 802179171	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
NATIONAL OSTEOPOROSIS FOUNDATION PO BOX 96173 WASHINGTON, DC 200777456	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
NATIONAL PARKINSON FOUNDATION 200 SE 1ST STREET MIAMI, FL 331311907	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON ST NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	SPRING GALA	3,334
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON ST NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
PALM BEACH ROUND TABLE 44 COCOANUT ROW SUITE T-12 PALM BEACH, FL 334804069	N/A	PUBLIC CHARITY	PALM BEACH ROUND TABLE SCHOLARSHIP PROGRAM	10,000
PAN-MASS CHALLENGE 77 4TH AVE NEEDHAM, MA 024942704	N/A	PUBLIC CHARITY	ANNUAL BIKE-A-THON	500
RABBI EMERITUS DISCRETIONARY FUND 15 LEWIS STREET HARTFORD, CT 061032502	N/A	PUBLIC CHARITY	PUBLISHING OF THE BOOK "THE PURPOSE OF LIFE"	1,000
RABBINICAL COLLEGE OF AMERICA PO BOX 1996 MORRISTOWN, NJ 079621996	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100,000
RICHARD DAVID KANN MELANOMA FOUNDATION 2751 S DIXIE HIGHWAY-STE 2A WEST PLAM BEACH, FL 334051233	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
<b>Total . . . . .</b>				<b>459,110</b>

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SMITHSONIAN INSTITUTE PO BOX 9016 PITTSFIELD,MA 012029951	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	150
ST LUKE'S EPISCOPAL CHURCH 915 MAIN STREET SOUTH GLASTONBURY,CT 060732230	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	200
TRI-COUNTY ANIMAL RESCUE 21287 BOCA RIO RD BOCA RATON,FL 334332203	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
UNION FOR REFORM JUDAISM 633 THIRD AVENUE NEW YORK,NY 101643288	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE SW WASHINGTON,DC 200242126	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
UNITED WAY OF CENTRAL AND NORTHEASTERN CONNECTICUT 30 LAUREL STREET HARTFORD,CT 061067361	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
UNIVERSITY OF CONNECTICUT FOUNDATION INC 2390 ALUMNI DRIVE UNIT 3206 STORRS,CT 062693206	N/A	PUBLIC CHARITY	UCONN HEALTH CENTER ANNUAL WHITE COAT GALA	21,667
UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD,CT 061171545	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	333
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES,FL 331241530	N/A	PUBLIC CHARITY	PALM BEACH NEUROLOGY GALA	10,000
WORLD AFFAIRS COUNCIL OF CONNECTICUT 1049 ASYLUM AVENUE HARTFORD,CT 061052432	N/A	PUBLIC CHARITY	2015 LUMINARY AWARD	5,000
WORLD JEWISH CONGRESS 501 MADISON AVE NEW YORK,NY 100225602	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	36
ZIONIST ORGANIZATION OF AMERICA 4 E 34TH ST FL 3 NEW YORK,NY 100164333	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
<b>Total . . . . .</b>			<b>3a</b>	459,110

## TY 2014 Accounting Fees Schedule

**Name:** RHODA & DAVID CHASE FAMILY FOUNDATION INC

**EIN:** 06-1499922

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RETURN PREPARATION FEES	8,250	7,425		825

**TY 2014 Investments Corporate  
Stock Schedule**

**Name:** RHODA & DAVID CHASE FAMILY FOUNDATION INC

**EIN:** 06-1499922

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UIL HOLDINGS CORPORATION	1,074,020	2,010,800
HSBC HOLDINGS PLC	100,000	102,040

## TY 2014 Other Assets Schedule

**Name:** RHODA & DAVID CHASE FAMILY FOUNDATION INC

**EIN:** 06-1499922

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM RABBINICAL COLLEGE OF AMERICA	25,000	25,000	25,000



## TY 2014 Other Expenses Schedule

**Name:** RHODA & DAVID CHASE FAMILY FOUNDATION INC

**EIN:** 06-1499922

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT RELATED FEES	300	300		0

## TY 2014 Taxes Schedule

**Name:** RHODA & DAVID CHASE FAMILY FOUNDATION INC

**EIN:** 06-1499922

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	2,700	0		0

**Schedule B**  
(Form 990, 990-EZ, or 990-PF)

**Schedule of Contributors**

OMB No 1545-0047

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990, 990-EZ, or 990-PF.**  
▶ **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at**  
[www.irs.gov/form990](http://www.irs.gov/form990).

**2014**

**Name of the organization**

RHODA & DAVID CHASE FAMILY FOUNDATION INC

**Employer identification number**

06-1499922

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

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

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

**Name of organization**  
RHODA & DAVID CHASE FAMILY FOUNDATION INC

**Employer identification number**  
06-1499922

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID T CHASE C/O CHASE ENTERPRISES GOODWIN SQ 22 HARTFORD, CT 06103	\$ 243,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
2	ONE FORDHAM PLAZA LLC C/O CHASE ENTERPRISES GOODWIN SQ 22 HARTFORD, CT 06103	\$ 115,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Name of organization  
RHODA & DAVID CHASE FAMILY FOUNDATION INC

Employer identification number  
06-1499922

**Part II** Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization  
RHODA & DAVID CHASE FAMILY FOUNDATION INC

Employer identification number  
06-1499922

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions ) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

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

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

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

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

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

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

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

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