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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

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▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2014**

Open to Public Inspection

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

Name of foundation CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC		<b>A Employer identification number</b>  06-1562154	
Number and street (or P O box number if mail is not delivered to street address) CHASE ENTERPRISES225 ASYLUM STFL 29		<b>B Telephone number</b> (see instructions)  (860) 549-1674	
City or town, state or province, country, and ZIP or foreign postal code HARTFORD, CT 06103		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 2,579,348		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	1,284,015			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities. . . . .	95,040	95,040		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a _____				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .		0		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	1,379,055	95,040		
Operating and Administrative Expenses	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule) . . . . .				
	<b>b</b> Accounting fees (attach schedule) . . . . .	8,250	7,425		825
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .	14,532	0		0
	<b>18</b> Taxes (attach schedule) (see instructions) . . . .	2,800	0		0
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule) . . . . .	300	300		0
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	25,882	7,725		825
	<b>25</b> Contributions, gifts, grants paid . . . . .	353,294			353,294
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	379,176	7,725		354,119
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	999,879			
	<b>b Net investment income</b> (if negative, enter -0-)		87,315		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	181	318	318
	2	Savings and temporary cash investments . . . . .	796	538	538
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	1,319,310	1,319,310	2,578,492
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,320,287	1,320,166	2,579,348	
Liabilities	17	Accounts payable and accrued expenses . . . . .	8,250	8,250	
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons	3,158,390	2,158,390	
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .	3,166,640	2,166,640	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .	-1,846,353	-846,474	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions) . . . . .	-1,846,353	-846,474	
	31	Total liabilities and net assets/fund balances (see instructions) . . .	1,320,287	1,320,166	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1 -1,846,353
2	Enter amount from Part I, line 27a . . . . .	2 999,879
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 -846,474
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 -846,474

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

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	300,003	2,036,541	0 147310	
2012	533,593	2,073,240	0 257372	
2011	326,743	1,903,283	0 171673	
2010	526,430	1,714,298	0 307082	
2009	464,487	1,614,736	0 287655	
2	Total of line 1, column (d). . . . .		2	1 171092
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .		3	0 234218
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .		4	2,544,274
5	Multiply line 4 by line 3. . . . .		5	595,915
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .		6	873
7	Add lines 5 and 6. . . . .		7	596,788
8	Enter qualifying distributions from Part XII, line 4. . . . .		8	354,119
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)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
	Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	1	1,746
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2. . . . .	3	1,746
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	1,746
6	Credits/Payments		
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	1,946
b	Exempt foreign organizations—tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments. Add lines 6a through 6d. . . . .	7	1,946
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <input type="checkbox"/>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <input type="checkbox"/>	10	200
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> 200 <b>Refunded</b> <input type="checkbox"/>	11	0

Part VII-A

Statements Regarding Activities

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

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address N/A				
14	The books are in care of JOHN P REDDING Telephone no (860) 549-1674 Located at GOODWIN SQ 225 ASYLUM ST 29TH FL HARTFORD CT ZIP +4 06103			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	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?	16	Yes	No
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				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

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

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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

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
CHERYL A CHASE	PRESIDENT/CHAIRMAN 5 00	0	0	0
C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD,CT 06103				
JOHN P REDDING	SECRETARY/DIRECTOR 1 00	0	0	0
C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD,CT 06103				
DAVID T CHASE	DIRECTOR 1 00	0	0	0
C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD,CT 06103				
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		
Total number of others receiving over \$50,000 for professional services. . . . .		0

Part IX-A

Summary of Direct Charitable Activities

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

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
1	
2	
All other program-related investments. See instructions.	
3	0
Total. Add lines 1 through 3. . . . .	0



Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	2,578,492
b	Average of monthly cash balances. . . . .	1b	4,527
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	2,583,019
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	2,583,019
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	38,745
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,544,274
6	Minimum investment return. Enter 5% of line 5. . . . .	6	127,214

Part XI

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

1	Minimum investment return from Part X, line 6. . . . .	1	127,214
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	1,746
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	1,746
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	125,468
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	125,468
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	125,468

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	354,119
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	354,119
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 (see instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	354,119
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
1 Distributable amount for 2014 from Part XI, line 7				125,468
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .	385,528			
b From 2010. . . . .	442,481			
c From 2011. . . . .	233,333			
d From 2012. . . . .	431,673			
e From 2013. . . . .	199,922			
f Total of lines 3a through e. . . . .	1,692,937			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 354,119				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				125,468
e Remaining amount distributed out of corpus	228,651			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,921,588			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
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 may be required - see instructions). . . . .	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	385,528			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	1,536,060			
10 Analysis of line 9				
a Excess from 2010. . . .	442,481			
b Excess from 2011. . . .	233,333			
c Excess from 2012. . . .	431,673			
d Excess from 2013. . . .	199,922			
e Excess from 2014. . . .	228,651			

Part XIVPrivate 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)

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

Part XVSupplementary 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  
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	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	353,294
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

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?

(1) Cash. . . . .

(2) Other assets. . . . .

**(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.

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

(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.


\* \* \* \* \*

Date

Title

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

PTIN


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).**


CHERYL A CHASE
DAVID T 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> Paid during the year				
AMERICAN CANCER SOCIETY 825 BROOK STREET - 1-91 TECH CTR ROCKY HILL,CT 060673405	N/A	PUBLIC CHARITY	IN MEMORY OF ARLENE HEALEY	500
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS,TX 752315129	N/A	PUBLIC CHARITY	2015 GREATER HARTFORD HEART BALL	2,500
AMERICAN LIVER FOUNDATION 127 WASHINGTON AVE NORTH HAVEN,CT 064731715	N/A	PUBLIC CHARITY	LIVER LIFE WALK, HARTFORD	1,000
ANTI-DEFAMATION LEAGUE 1952 WHITNEY AVENUE 3RD FLR HAMDEN,CT 065171209	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	3,333
AURORA FOUNDATION PO BOX 271035 WEST HARTFORD,CT 061271035	N/A	PUBLIC CHARITY	SIGNATURE BREAKFAST FUNDRAISERS	1,000
AURORA FOUNDATION PO BOX 271035 WEST HARTFORD,CT 061271035	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
BROOKLYN MUSEUM 200 EASTERN PARKWAY BROOKLYN,NY 112386052	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	150
BUSHNELL 166 CAPITOL AVE HARTFORD,CT 061061621	N/A	PUBLIC CHARITY	2014-2015 SEASON ANNUAL FUND	15,000
CHOATE ROSEMARY HALL 333 CHRISTIAN ST WALLINGFORD,CT 064923818	N/A	PUBLIC CHARITY	PARENTS & GRANDPARENTS GIVING	1,000
CIESLA FOUNDATION 5005 LINNEAN AVE NW WASHINGTON,DC 200082042	N/A	PUBLIC CHARITY	MAKING OF "THE ROSENWALD SCHOOLS"	10,000
CLARK MUSEUM 225 SOUTH STREET WILLIAMSTOWN,MA 012679951	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
CONGREGATION BETH ISRAEL 701 FARMINGTON AVE WEST HARTFORD,CT 061191799	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,800
CONGREGATION BETH ISRAEL 701 FARMINGTON AVE WEST HARTFORD,CT 061191799	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	54
CONNECTICUT APPLESEED 25 DUDLEY ROAD WILTON,CT 068973508	N/A	PUBLIC CHARITY	IN HONOR OF GREGORY B BUTLER	833
CONNECTICUT BAR FOUNDATION 31 PRATT ST HARTFORD,CT 061031631	N/A	PUBLIC CHARITY	2015 SUSTAINING LIFE FELLOW	250
<b>Total . . . . .</b>  <b>3a</b>				353,294




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> Paid during the year				
CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON ST HARTFORD,CT 061063322	N/A	PUBLIC CHARITY	ACES FOR KIDS	500
CONNECTICUT FOOD BANK PO BOX 8686 NEW HAVEN,CT 065310686	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	450
CONNECTICUT PUBLIC BROADCASTING 1049 ASYLUM AVENUE HARTFORD,CT 061052432	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	7,500
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD,CT 061032802	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	15,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD,CT 061032802	N/A	PUBLIC CHARITY	2015 GREEN GALA SPONSORSHIP	5,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD,CT 061032802	N/A	PUBLIC CHARITY	SPONSORSHIP - DCF GROUP VISIT	3,900
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD,CT 061032802	N/A	PUBLIC CHARITY	WILD MUSIC SPONSORSHIP	50,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD,CT 061032802	N/A	PUBLIC CHARITY	VISIONARIES SOCIETY	15,000
CONNECTICUT WOMEN'S EDUCATION AND LEGAL FUND ONE HARTFORD SQUARE WEST SUITE 1-300 HARTFORD,CT 061061953	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	325
CONNECTICUT WOMEN'S HALL OF FAME 320 FITCH ST NEW HAVEN,CT 065151306	N/A	PUBLIC CHARITY	ANNUAL FUND	500
CORNELL UNIVERSITY ADVANCEMENT SERVICES 130 E SENECA ST SUITE 400 ITHACA,NY 148504378	N/A	PUBLIC CHARITY	CORNELL ANNUAL FUND	500
FLORENCE GRISWOLD MUSEUM 96 LYME STREET OLD LYME,CT 063711426	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
FOODSHARE 450 WOODLAND AVE BLOOMFIELD,CT 060021342	N/A	PUBLIC CHARITY	EVENT "THANKS A MILLION, GLORIA!"	2,500
FOODSHARE 450 WOODLAND AVE BLOOMFIELD,CT 060021342	N/A	PUBLIC CHARITY	ANNUAL FOOD DRIVE	1,000
GREATER HARTFORD ARTS COUNCIL 100 PEARL ST PO BOX 231436 HARTFORD,CT 061231436	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,500
<b>Total . . . . .</b>  <b>3a</b>				353,294


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>				
GREATER HARTFORD ARTS COUNCIL 100 PEARL ST PO BOX 231436 HARTFORD,CT 061231436	N/A	PUBLIC CHARITY	LUNCHEON "THE ARTS-AN EXPRESSION OF WHO WE ARE"	175
HARTFORD STAGE 50 CHURCH ST HARTFORD,CT 061031201	N/A	PUBLIC CHARITY	PRESENTING SPONSORSHIP "KISS ME, KATE"	25,000
HARTFORD SYMPHONY ORCHESTRA 166 CAPITOL AVENUE HARTFORD,CT 061061629	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE, ANNUAL FUND 2014-2015	5,000
HOLE IN THE WALL GANG CAMP 555 LONG WHARF DRIVE NEW HAVEN,CT 065116107	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
JUVENILE DIABETES RESEARCH FOUNDATION INTERNATIONAL 20 BATTERSON PARK ROAD 3RD FLOOR FARMINGTON,CT 060324502	N/A	PUBLIC CHARITY	2015 PROMISE BALL	3,334
JEWISH FEDERATION OF GREATER HARTFORD 333 BLOOMFIELD AVE SUITE C WEST HARTFORD,CT 061171500	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
JEWISH MUSEUM 1109 FIFTH AVE NEW YORK,NY 101280118	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
JFACT FUND INC 40 WOODLAND STREET HARTFORD,CT 061052331	N/A	PUBLIC CHARITY	VOICES OF HOPE	334
JUNIOR ACHIEVEMENT 70 FARMINGTON AVENUE HARTFORD,CT 061051538	N/A	PUBLIC CHARITY	LIAM MCGEE MEMORIAL FUND	200
JUNIOR ACHIEVEMENT 70 FARMINGTON AVENUE HARTFORD,CT 061051538	N/A	PUBLIC CHARITY	2015 HARTFORD BUSINESS HALL OF FAME	1,500
KATAHDIN PRODUCTIONS INC PO BOX 2218 BERKELEY,CA 947020218	N/A	PUBLIC CHARITY	FILMING OF "WHO WILL WRITE OUR HISTORY"	5,000
KINGSWOOD OXFORD 170 KINGSWOOD ROAD WEST HARTFORD,CT 061191430	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
KINGSWOOD OXFORD 170 KINGSWOOD ROAD WEST HARTFORD,CT 061191430	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
LITERACY VOLUNTEERS OF GREATER HARTFORD 30 ARBOR STREET HARTFORD,CT 061061374	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVE WEST HARTFORD,CT 061171500	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
<b>Total . . . . .</b>  <b>3a</b>				353,294


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>				
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVE WEST HARTFORD,CT 061171500	N/A	PUBLIC CHARITY	16TH ANNUAL MANDELL JCC SCHOLARSHIP TOURNAMENT	1,500
MARK TWAIN HOUSE & MUSEUM 351 FARMINGTON AVE HARTFORD,CT 061054401	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
MERCY HOUSING AND SHELTER CORPORATION 211 WETHERSFIELD AVE HARTFORD,CT 061141148	N/A	PUBLIC CHARITY	2015 DREAMS CAN COME TRUE GALA	3,500
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NEWYORK,NY 100280198	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
MUSEUM OF FINE ARTS BOSTON 465 HUNTINGTON AVE BOSTON,MA 021155523	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	3,000
MUSEUM OF JEWISH HERITAGE 36 BATTERY PLACE NEWYORK,NY 102801502	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	180
MUSEUM OF MODERN ART 11 WEST 53 ST NEWYORK,NY 100195401	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
NATIONAL MUSEUM OF WOMEN IN THE ARTS 1250 NEWYORK AVENUE NW WASHINGTON,DC 200053970	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	275
NATIONAL CONFERENCE FOR COMMUNITY AND JUSTICE 820A PROSPECT HILL ROAD WINDSOR,CT 060951559	N/A	PUBLIC CHARITY	ANNUAL HUMAN RELATIONS AWARD BANQUET	1,667
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON ST NEWBRITAIN,CT 060521412	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON ST NEWBRITAIN,CT 060521412	N/A	PUBLIC CHARITY	SPONSORSHIP FOR SPRING GALA	3,333
ORDER OF ST JOHN 1850 M STREET NW SUITE 1070 WASHINGTON,DC 200365856	N/A	PUBLIC CHARITY	IN MEMORY OF MR THOMAS RIGGS COX III, CSTJ	500
PARKINSON'S DISEASE FOUNDATION 1359 BROADWAY SUITE 1509 NEWYORK,NY 100187867	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
RABBI EMERITUS DISCRETIONARY FUND 15 LEWIS ST HARTFORD,CT 061031201	N/A	PUBLIC CHARITY	PUBLISHING OF THE BOOK "THE PURPOSE OF LIFE"	1,000
SAINT FRANCIS FOUNDATION 95 WOODLAND STREET HARTFORD,CT 061051230	N/A	PUBLIC CHARITY	IN MEMORY OF ROBINSON A GROVER	250
<b>Total . . . . .</b>  <b>3a</b>				353,294

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> Paid during the year				
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DRIVE LOS ANGELES,CA 900354709	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 381051942	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
ST LUKE'S EPISCOPAL CHURCH 915 MAIN STREET SOUTH GLASTONBURY,CT 060732230	N/A	PUBLIC CHARITY	IN MEMORY OF SHARON FISZEL HARRIS	200
THEATHERWORKS 233 PEARL ST HARTFORD,CT 061031201	N/A	PUBLIC CHARITY	SPONSORSHIP OF "I'LL EAT YOU LAST A CHAT WITH SUE MENGERS"	5,000
TRI-COUNTY ANIMAL RESCUE 21287 BOCA RIO ROAD BOCA RATON,FL 334332203	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
UCONN FOUNDATION 2390 ALUMNI DRIVE UNIT 3206 STORRS,CT 062693206	N/A	PUBLIC CHARITY	NEAG COMPREHENSIVE CANCER CENTER FUND	10,000
UCONN FOUNDATION 2390 ALUMNI DRIVE UNIT 3206 STORRS,CT 062693206	N/A	PUBLIC CHARITY	UCONN HEALTH CENTER GALA (ANNUAL WHITE COAT GALA )	1,667
UCONN LAW SCHOOL FOUNDATION 45 ELIZABETH ST HARTFORD,CT 061052213	N/A	PUBLIC CHARITY	DESIGNATED TEMPORARY RESTRICTED FUND	100
UCONN LAW SCHOOL FOUNDATION 45 ELIZABETH ST HARTFORD,CT 061052213	N/A	PUBLIC CHARITY	ANNUAL FUND 2014-2015	5,000
UNITED WAY OF CENTRAL AND NORTHEASTERN CONNECTICUT 30 LAUREL STREET HARTFORD,CT 061061374	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD,CT 061171545	N/A	PUBLIC CHARITY	JERRY WAGNER JEWISH MUSIC COLLECTION FUND	500
UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD,CT 061171545	N/A	PUBLIC CHARITY	HILLEL, ANNUAL UNRESTRICTED	334
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN ST HARTFORD,CT 061032990	N/A	PUBLIC CHARITY	ANNUAL FUND	50,000
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN ST HARTFORD,CT 061032990	N/A	PUBLIC CHARITY	EIGHTH ANNUAL SPLENDOR GALA	5,000
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN ST HARTFORD,CT 061032990	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	23,000
<b>Total . . . . .</b>  <b>3a</b>				353,294

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>				
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN ST HARTFORD,CT 061032990	N/A	PUBLIC CHARITY	EXHIBITION "WARHOL & MAPPLETHORPE GUISE & DOLLS"	5,000
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN ST HARTFORD,CT 061032990	N/A	PUBLIC CHARITY	IN MEMORY OF JANET S SMITH	250
WEST HARTFORD ART LEAGUE 37 BUENA VISTA ROAD WEST HARTFORD,CT 061073203	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	200
WESTFIELD STATE UNIVERSITY DANCE TEAM 1076 MAIN STREET SOUTH WINDSOR,CT 060742407	N/A	N/A	SPONSOR DANCE TEAM	200
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEWYORK,NY 100142790	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
YALE UNIVERSITY PO BOX 2038 NEW HAVEN,CT 065212038	N/A	PUBLIC CHARITY	CLOSER TO FREE FUND	250
<b>Total . . . . .</b>  <b>3a</b>				353,294

## TY 2014 Accounting Fees Schedule

**Name:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC

**EIN:** 06-1562154

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

**TY 2014 All Other Program  
Related Investments Schedule**

**Name:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC  
**EIN:** 06-1562154

Category	Amount
N/A	0

# TY 2014 Investments Corporate Stock Schedule

**Name:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC

**EIN:** 06-1562154

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UIL HOLDINGS CORPORATION	1,319,310	2,578,492



**TY 2014 Loans from Officers Schedule****Name:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC**EIN:** 06-1562154

<b>Item No.</b>	<b>1</b>
<b>Lender's Name</b>	CHERYL A CHASE
<b>Lender's Title</b>	OFFICER
<b>Original Amount of Loan</b>	2158390
<b>Balance Due</b>	2158390
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	DEMAND
<b>Interest Rate</b>	0.000000000000
<b>Security Provided by Borrower</b>	NONE
<b>Purpose of Loan</b>	TO FUND CHARITABLE EXPENDITURES
<b>Description of Lender Consideration</b>	CASH
<b>Consideration FMV</b>	

TY 2014 Other Expenses Schedule

**Name:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC

**EIN:** 06-1562154

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:** CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC

**EIN:** 06-1562154

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	2,800	0		0

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>CHERYL CHASE &amp; STUART BEAR FAMILY FOUNDATION INC</div>	<div>Employer identification number</div> <div>06-1562154</div>
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

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).

**Employer identification number**  
06-1562154

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHERYL ANNE CHASE C/O CHASE ENTERPRISES GOODWIN SQ 22 HARTFORD, CT 06103	\$ 1,284,015	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contributions )

<b>Name of organization</b> CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC	<b>Employer identification number</b> 06-1562154
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**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

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

<b>Name of organization</b> CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC	<b>Employer identification number</b> 06-1562154
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<b>Part III</b>	<b>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.</b> Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed.
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(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	
	_____ _____	_____ _____ _____	