



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



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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

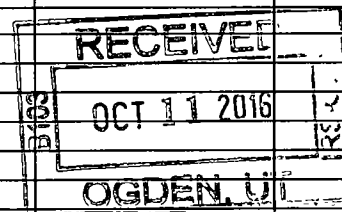
2015

Open to Public Inspection

For calendar year 2015, or tax year beginning , 2015, and ending

Name of foundation MITCHELL D PHAIAH FOUNDATION, INC.		A Employer identification number 47-3978418
Number and street (or P.O. box number if mail is not delivered to street address) P.O. BOX 379		B Telephone number (see instructions) (860) 230-8180
City or town, state or province, country, and ZIP or foreign postal code PUTNAM CT 06260		C If exemption application is pending, check here. ▶ <input checked="" type="checkbox"/>
G Check all that apply		D 1 Foreign organizations, check here ▶ <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>
H Check type of organization. <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, column (c), line 16) ▶ \$ 3,990,154.		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc. received (attach schedule)				
	2 Ck ▶ <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	0.	L-6a Stmt		
	b Gross sales price for all assets on line 6a	140,000.			
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
See Line 11 Stmt	186,700.				
12 Total Add lines 1 through 11.	186,700.				
ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc.	36,000.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits.				
	16a Legal fees (attach schedule)	10,189.			
	b Accounting fees (attach sch)				
	c Other prof. fees (attach sch)				
	17 Interest	3,276.			
	18 Taxes (attach schedule) (see instrs) See Line 18 Stmt	8,869.			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	7,089.			
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Line 23 Stmt	3,366.			
	24 Total operating and administrative expenses Add lines 13 through 23	68,789.			
	25 Contributions, gifts, grants paid	361,246.			361,246.
26 Total expenses and disbursements. Add lines 24 and 25	430,035.			361,246.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-243,335.				
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)					



SCANNED OCT 25 2016

P 4

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
A S S E T S	1	Cash — non-interest-bearing	184,556.	99,165.	99,165.
	2	Savings and temporary cash investments		48,994.	48,994.
	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 sch) 256,931.	L-7 Stmt		
		Less: allowance for doubtful accounts 0.	50,000.	256,931.	256,931.
	8	Inventories for sale or use	330,000.	140,000.	140,000.
	9	Prepaid expenses and deferred charges			
	10a	Investments — U.S. and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
	c	Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis 50,000.			
		Less: accumulated depreciation (attach schedule) L-11 Stmt 0.	50,000.	50,000.	50,000.
L I A B I L I T I E S	12	Investments — mortgage loans L-12 Stmt	3,568,933.	3,345,064.	3,345,064.
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe L-15 Stmt)	50,000.	50,000.	50,000.
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I).	4,233,489.	3,990,154.	3,990,154.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)	118,000.	118,000.	
	23	Total liabilities (add lines 17 through 22)	118,000.	118,000.	
F U N D A S S E T S O F F E R S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>			
	24	Unrestricted	4,115,489.	3,872,154.	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	4,115,489.	3,872,154.	
	31	Total liabilities and net assets/fund balances (see instructions)	4,233,489.	3,990,154.	

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	4,115,489.
2	Enter amount from Part I, line 27a	2	-243,335.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	3,872,154.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	3,872,154.

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 shares MLC Company)

	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a			
b			
c			
d			
e			

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

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

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
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 the 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))
2014	37,200.		
2013			
2012			
2011			
2010			

2 Total of line 1, column (d)	2
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
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4 0.
5 Multiply line 4 by line 3	5
6 Enter 1% of net investment income (1% of Part I, line 27b)	6
7 Add lines 5 and 6	7
8 Enter qualifying distributions from Part XII, line 4	8

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

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

1 a 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 instrs)			
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	
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	
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments			
a 2015 estimated tax pmts and 2014 overpayment credited to 2015	6 a		
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		0.
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0.
11 Enter the amount of line 10 to be Credited to 2016 estimated tax	11	Refunded	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		X
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		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

BAA

Form 990-PF (2015)

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes', attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address N/A				
14	The books are in care of MICHAEL CRISTINA Telephone no (860) 230-8180			
	Located at P.O. BOX 339 PUTNAM CT ZIP + 4 06260			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, 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		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. 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
1 a	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input 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? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1 b		X
	Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>		
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 2015? 1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	If 'Yes,' list the years 20 14 , 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) 2 b		X
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		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes,' did it have excess business holdings in 2015 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 2015) 3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4 a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? 4 b		X

BAA

Form 990-PF (2015)

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

5 a 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)?

5 b

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).

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

6 b

If 'Yes' to 6b, file Form 8870

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

7 b

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

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
MICHAEL CRISTINA P.O. BOX 339 PUTNAM CT 06260	DIRECTOR 2.50	6,000.	0.	0.
BEVERLY CRISTINA P.O. BOX 339 PUTNAM CT 06260	DIRECTOR 7.00	18,000.	0.	0.
JEANNETTE CHAMBERS 374 MASON HILL ROAD DAYVILLE CT 06241	DIRECTOR 0.50	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		12,000.	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 ☐ None

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		None

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	
Total. Add lines 1 through 3	

BAA

Form 990-PF (2015)

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	1 a	
b	Average of monthly cash balances	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.

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	0.
2 a	Tax on investment income for 2015 from Part VI, line 5	2 a	0.
b	Income tax for 2015. (This does not include the tax from Part VI.)	2 b	
c	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.

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	1 a	361,246.
b	Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	361,246.
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	361,246.

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.

BAA

Form 990-PF (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2015.				
a Enter amount for 2014 only			0.	
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2015				
a From 2010	0.			
b From 2011	0.			
c From 2012	0.			
d From 2013	0.			
e From 2014	37,200.			
f Total of lines 3a through e	37,200.			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 361,246.				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	361,246.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	398,446.			
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				
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	398,446.			
10 Analysis of line 9:				
a Excess from 2011	0.			
b Excess from 2012	0.			
c Excess from 2013	0.			
d Excess from 2014	37,200.			
e Excess from 2015	361,246.			

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
a Paid during the year				
ST. ALBANS CHURCH 254 BROAD STREET DANIELSON CT 06239		501(C) (3)	CHARITABLE PURPOSES	36,000.
WYNDHAM LAND TRUST P.O. BOX 302 POMFRET CENTER CT 06259		501(C) (3)	CHARITABLE PURPOSES	311,146.
ATWOOD HOSE FIRE DEPARTMENBT 24 WAUREGAN ROAD WAUREGAN CT 06387		501(c) (3)	CHARITABLE PURPOSES	500.
BIG LIFE FOUNDATION USA 240190 NE TREEHILL DRIVE TROUTDALE OR 97060		501(C) (3)	CHARITABLE PURPOSES	6,000.
CT AUDOBAN SOCIETY P.O. BOX 11 POMFRET CENTER CT 06259		501(C) (3)	CHARITABLE PURPOSES	500.
DANA FARBER 44 BINNEY STREET BOSTON MA 02115		501(C) (3)	CHARITABLE PURPOSES	500.
DOCTORS WITHOUT BORDERS 337 7TH AVENUE NEW YORK NY 10001		501(C) (3)	CHARITABLE PURPOSES	1,000.
LIONS GUARDIAN US P.O. BOX 9641 WASHINGTON DC 20016		501(C) (3)	CHARITABLE PURPOSES	1,000.
NRDC 40 W 40TH STREET NEW YORK NY 10018		501(C) (3)	CHARITABLE PURPOSES	100.
See Line 3a statement				4,500.
Total			3 a	361,246.
b Approved for future payment				
Total			3 b	

**Form 990-PF Part II,
Lines 6 and 7**

Receivables

2015

Name MITCHELL D PHAIAH FOUNDATION, INC.	Employer Identification Number 47-3978418
--	--

Lender Information

Loan Receivable Type 3

Borrower's Name LABOSSIERE CONSTRUCTION, LLC Borrower's Title OWNER

Check Box, if Borrower is a Business ☒ Relationship of Borrower (other loans only) N/A

Repayment Terms DUE ON SALE Borrower's Security 1ST MORTGAGE

Purpose of Loan REHAB Description of Consideration 80 MAPLE DANIELSON, CT

Original Amount 109,931. Beginning Year Balance 0. Year End Balance 109,931.

FMV of at Year End 109,931. FMV of Consideration 140,000.

Allowance for Doubtful Accounts (other loans only) 0.

Date of Note 04/22/15 Maturity Date 12/31/16 Interest Rate 10.00

Loan Receivable Type 3

Borrower's Name LABOSSIERE CONSTRUCTION, LLC Borrower's Title OWNER

Check Box, if Borrower is a Business ☒ Relationship of Borrower (other loans only) N/A

Repayment Terms DUE ON SALE Borrower's Security 1ST MORTGAGE

Purpose of Loan REHAB Description of Consideration 46 RAILROAD DAYVILLE, CT

Original Amount 31,000. Beginning Year Balance 0. Year End Balance 31,000.

FMV of at Year End 31,000. FMV of Consideration 50,000.

Allowance for Doubtful Accounts (other loans only) 0.

Date of Note 04/22/15 Maturity Date 12/31/16 Interest Rate 10.00

Loan Receivable Type 3

Borrower's Name LABOSSIERE CONSTRUCTION, LLC Borrower's Title OWNER

Check Box, if Borrower is a Business ☒ Relationship of Borrower (other loans only) N/A

Repayment Terms DUE ON SALE Borrower's Security 1ST MORTGAGE

Purpose of Loan REHAB Description of Consideration 165 TALMAN NORWICH, CT

Original Amount 56,000. Beginning Year Balance 0. Year End Balance 56,000.

FMV of at Year End 56,000. FMV of Consideration 80,000.

Allowance for Doubtful Accounts (other loans only) 0.

Date of Note 10/21/15 Maturity Date 12/31/16 Interest Rate 10.00

Loan Receivable Type 3

Borrower's Name See Receivables Borrower's Title

Check Box, if Borrower is a Business ☐ Relationship of Borrower (other loans only)

Repayment Terms Borrower's Security

Purpose of Loan Description of Consideration

Original Amount Beginning Year Balance Year End Balance

FMV of at Year End FMV of Consideration

Allowance for Doubtful Accounts (other loans only)

Date of Note Maturity Date Interest Rate

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
MORTGAGE LOANS	175,175.		
BUSINESS LOAN	11,525.		

Total 186,700.

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
PROPERTY TAX	7,979.			
ANNUITY PAYBACK	890.			

Total 8,869.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
INSURANCE	956.			
OFFICE EXPENSE	2,383.			
MISCELLANEOUS	27.			

Total 3,366.

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(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
Person . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> STEPHEN M. PHAIAH 373 CHRISTIAN HILL ROAD BROOKLYN CT 06234	DIRECTOR 5.00	12,000.	0.	0.
Person . <input checked="" type="checkbox"/> Business . <input type="checkbox"/> IRWIN KALMER 12 SMITH AVENUE GREENVILLE RI 02828	DIRECTOR 0.50	0.	0.	0.

Total

12,000. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

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	Person or Business Checkbox
Name and address (home or business)				Amount
a Paid during the year				
PET PALS NE				Person or <input type="checkbox"/>
P.O. BOX 64				Business <input checked="" type="checkbox"/>
PLAINFIELD CT 06374		501(C)(3)	CHARITABLE PURPOSES	1,500.
PUTNAM BPOE				Person or <input type="checkbox"/>
64 EDMOND STREET				Business <input checked="" type="checkbox"/>
PUTNAM CT 06260		501(C)(3)	CHARITABLE PURPOSES	1,000.
SMILE TRAIN				Person or <input type="checkbox"/>
41 MADISON AVENUE 28TH FLOOR				Business <input checked="" type="checkbox"/>
NEW YORK NY 10010		501(C)(3)	CHARITABLE PURPOSES	1,000.
TOMMY TOY FUND				Person or <input type="checkbox"/>
66 FRANKLIN STREET				Business <input checked="" type="checkbox"/>
NORWICH CT 06360		501(C)(3)	CHARITABLE PURPOSES	500.
WOUNDED WARRIORS				Person or <input type="checkbox"/>
4899 BELFORD ROAD SUITE 300				Business <input checked="" type="checkbox"/>
JACKSONVILLE FL 32256		501(C)(3)	CHARITABLE PURPOSES	500.

Total

4,500.

Form 990-PF, Part II, Lines 6 and 7

Receivables**Lender Information:**

Loan Receivable Type 3
 Borrowers Name 8 BROAD STREET, LLC Borrower's Title OWNER
 Check Box, if Borrower is a Business. ☒ Relationship of Borrower (Other loans only) N/A
 Repayment Terms 1 YEAR BALLOON Borrower's Security NONE
 Purpose of Loan REPAIRS Description of Consideration N/A
 Original Amount 30,000. Beginning Year Balance 0. Year End Balance 30,000.
 FMV at Year End 30,000. FMV of Consideration 0.
 Allowance for Doubtful Accounts(other loans only) 0.
 Date of Note 07/29/15 Maturity Date 07/29/16 Interest Rate 10.00

Loan Receivable Type 3
 Borrowers Name NEW ENGLAND METAL BUILDING PROS, LLC Borrower's Title OWNER
 Check Box, if Borrower is a Business. ☒ Relationship of Borrower (Other loans only) N/A
 Repayment Terms 1 YEAR BALLOON Borrower's Security ACCOUNTS RECEIVABLES
 Purpose of Loan CASH FLOW Description of Consideration ACCOUNTS RECEIVABLES
 Original Amount 10,000. Beginning Year Balance 0. Year End Balance 10,000.
 FMV at Year End 10,000. FMV of Consideration 20,000.
 Allowance for Doubtful Accounts(other loans only) 0.
 Date of Note 12/02/15 Maturity Date 12/02/16 Interest Rate 10.00

Loan Receivable Type 3
 Borrowers Name WILLIAM COUTURE Borrower's Title INDIVIDUAL
 Check Box, if Borrower is a Business. ☐ Relationship of Borrower (Other loans only) N/A
 Repayment Terms 1 YEAR BALLOON Borrower's Security RESIDENCE
 Purpose of Loan REHAB Description of Consideration N/A
 Original Amount 20,000. Beginning Year Balance 0. Year End Balance 20,000.
 FMV at Year End 20,000. FMV of Consideration 50,000.
 Allowance for Doubtful Accounts(other loans only) 0.
 Date of Note 10/20/15 Maturity Date 10/20/16 Interest Rate 10.00

Form 990-PF, Page 2, Part II, Line 12

L-12 Stmt

Line 12 - Investments - Mortgage loans:	End of Year	
	Book Value	Fair Market Value
LABOSSIÈRE (15)	2,077,358.	2,077,358.
PROULX (1)	1,130,106.	1,130,106.
LABOSSIÈRE NORWICH (3)	137,600.	137,600.
Total	<u>3,345,064.</u>	<u>3,345,064.</u>

Form 990-PF, Page 2, Part II, Line 11

L-11 Stmt

Line 11b - Description of Investments Land, Buildings and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
LOT FAYETTE, ME	20,000.	0.	20,000.
LOT STERLING, CT	30,000.	0.	30,000.
Total	<u>50,000.</u>	<u>0.</u>	<u>50,000.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
ANTIQUES	50,000.	50,000.	50,000.
Total	<u>50,000.</u>	<u>50,000.</u>	<u>50,000.</u>

Supporting Statement of:

Form 990-PF, p1/Line 20(a)

Description	Amount
CLEANING	1,848.
REPAIRS	1,263.
UTILITIES	3,978.
Total	<u>7,089.</u>

Supporting Statement of:

Form 990-PF, p2/Line 8(c)

Description	Amount
PERSONAL RESIDENCE	140,000.
Total	<u>140,000.</u>