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Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0052

Fo	r cal	endar year 2015 or tax year beginning	07/	01 , 2015, and	ending		<u>06/30,2016</u>
	ame	of foundation				A Employer Identific	ation number
(GRE.	ATER BRIDGEPORT RETIRED TEAC	CHERS FUND INC.			23-	7258527
		er and street (or P.O. box number if mail is not delivered		Room	/suite	B Telephone number	(see instructions)
•	2 0	BOX 1802		1		888	3 <u>-8</u> 66-3 <u>27</u> 5
		town, state or province, country, and ZIP or foreign pos	stal code				
						C If exemption application	on is
	DRO.	VIDENCE, RI 02901-1802				pending, check here.	
		ck all that apply Initial return	Initial return	of a former public	charity	1	
٠	0110	Final return	Amended ret	•	,	D 1 Foreign organization 2 Foreign organization	
		Address change	Name change			85% test, check he	re and attach
	Cho	ck type of organization X Section 5010				computation	
ï	$\overline{}$	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri			E If private foundation s	_ L I
1		_market_value_of_ all_assets_at J-Acco				under section 507(b)(
			ther (specify)	asii-[Accidai		F If the foundation is in	
		· · · · · · · · · · · · · · · · · · ·	column (d) must be on ca	-h hann l		under section 507(b)(1)(d), check here .
				sii basis j		<u> </u>	(d) Disbursements
Li	air.	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Hevenue and	(b) Net investment	ı	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	income	- 1	income	purposes
-		column (a) (see instructions))					(cash basis only)
ļ	1	Contributions, gifts, grants, etc., received (attach schedule). Check X if the foundation is not required to attach Sch. R					
	2	attach Sch D					
^/_\	3	Interest on savings and temporary cash investments.	27.000	06.76			
	4	Dividends and interest from securities	27,098.	26,70	<u> </u>		STMT 1
	5a	Gross rents					
(e)	ь	Net rental income or (loss)	02 021				
ne	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-23,031.				
- u	-	assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2) .					
	8	Net short-term capital gain					
	9 10a	Income modifications					
,		Gross sales less returns and allowances					
:	b	Less Cost of goods sold	2				
; [C		2				
۱	11	Other income lettach schedule) (. 2015.	447.	0.6	3.		STMT 2
\dashv	12	Total. Add lines through 11	4,514.	26,70			
	13	Compensation of officers directors trustees etc.	8,375.	5,02			3,350
S	14	Other employee salaries and wages, . U.T	 		NE	NONE	
ē	15	Pension plans, employee benefits		NC	NE	NONE	
		Legal fees (attach schedule)	1 050				
او	b	Accounting fees (attach schedule) STMT. 3.	1,250.	NC	NE_	NONE	1,250
Ę.	C	Other professional fees (attach schedule)		 			
ţ	17	Interest	1 (70				
·	18	Taxes (attach schedule) (see instruStEMS). 4.	1,679.	54	7.		
Έ	19	Depreciation (attach schedule) and depletion.					
PA	20	Occupancy					
= 1	21	Travel, conferences, and meetings			NE	NONE	
ā	22	Printing and publications	4 150		NE	NONE	
Operating	23	Other expenses (attach schedule) STMT. 5.	4,159.	47	1 -		3,855
at	24	Total operating and administrative expenses.	15 463		_		<u> = =</u>
be		Add lines 13 through 23	15,463.	6,04	3.	NONE	8,455
0		Contributions, gifts, grants paid	36,961.		_		<u>36,961</u> .
4	26	Total expenses and disbursements Add lines 24 and 25	52,424.	6,04	3.	NONE	45,416
	27	Subtract line 26 from line 12	45.00			ļ	
ļ	а	Excess of revenue over expenses and disbursements	-47,910.				
}		Net investment income (if negative, enter -0-)		20,66	· U .		
- 1	c	Adjusted net income (if negative, enter -0-).	Į.	l	- 1		

JSA For Paperwork Reduction Act Notice, see instructions.

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23-7258527

Þ	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
_	art II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	28,749.	32,327	32,327
	3	Accounts receivable >			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable >	ate and advantage and in a country processing	The state of the black of the state of the s	
	ĺ	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 ▶ NONE			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments - U S and state government obligations (attach schedule), .			
	ь	Investments - corporate stock (attach schedule) . STMT .6	1,049,671.	991,278.	1,037,651
	С	Investments - corporate bonds (attach_schedule)			
	11	lavostmanta land huddanan .		-	
		Less accumulated depreciation (attach schedule)	The state of the s		
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·
	13	Investments - other (attach schedule)			
	14	Land, buildings, and			1
		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)	1.078.420	1,023,605.	1,069,978
_	17	Accounts payable and accrued expenses	2701071201	2/023/005.	1,005,570
	18	Grants payable			1
Š	19	Deferred revenue			,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons.			
園	21	Mortgages and other notes payable (attach schedule)			
2	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)		NONE	
\neg		Foundations that follow SFAS 117, check here		110112	£.
જ		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted		:	7
Balances	25	Temporarily restricted			7,4
B B		Permanently restricted			
		Foundations that do not follow SFAS 117,			42.00
피		check here and complete lines 27 through 31.			3 /*
0	27 28 29 30 31	Capital stock, trust principal, or current funds	1,078,420.	1,023,605.	,
ध	28	Paid-in or capital surplus, or land, bldg , and equipment fund			, i
SS	29	Retained earnings, accumulated income, endowment, or other funds			t
٤	30	Total net assets or fund balances (see instructions)	1,078,420.	1,023,605.	
흿	31	Total liabilities and net assets/fund balances (see	1,0,0,120.		-
	- '	instructions)	1,078,420.	1,023,605.	
P	art III				
1	Tota	I net assets or fund balances at beginning of year - Part I		nust agree with	
		of-year figure reported on prior year's return)			1,078,420.
·2		r amount from Part I, line 27a			-47,910.
		er increases not included in line 2 (itemize) > SEE STAT		3	6,796.
		lines 1, 2, and 3			1,037,306.
		reases not included in line 2 (itemize) ► SEE STAT		5	13,701.
		I net assets or fund balances at end of year (line 4 minus li			1,023,605.
					Form 990-PF (2015)

Pa	rt IV Capital Gains	s and Losses for Tax on Inve	estment Income						
	(a) List an	d describe the kind(s) of property sold (•	(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)			
	PUBLICLY TRADED			D - Donation	(1101) 0077 717				
	OTHER GAINS AND								
C									
d									
e									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu				
a	a 208,443. 232,32523,882.								
b 105,907. 105,056.									
<u>c</u>									
<u>d</u>									
ө		<u> </u>							
	Complete only for assets	showing gain in column (h) and owned	· · · · · · · · · · · · · · · · · · ·		Gains (Col. (h) ga				
	(i)-F M.Vas-of-1-2/-3-1/69	(j)_Adjusted_basis = = as of 12/31/69	over col. (i), if any	col	(k), but-not-less t Losses (from co				
		03 01 127 017 03	Over con this in any						
<u>a</u>						-23,882. 851.			
<u>b</u>					·	051.			
_c d									
e									
<u> </u>		(If	gain, also enter in Part I, line 7			· · · · · · · · · · · · · · · · · · ·			
2	Capital gain net income	ar inat canital lacel	(loss), enter -0- in Part I, line 7	2		-23,031.			
3	Net short-term capital ga	in or (loss) as defined in sections 1							
		art 1, line 8, column (c) (see inst							
	Part I, line 8	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u></u> <u>.</u> <u>.</u>	3					
Pa	Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income								
Was		leave this part blank. the section 4942 tax on the distribution to qualify under section 4940(e). I		ase period	j?	Yes X No			
1		nount in each column for each year		anv entr	ies.				
<u> </u>	(a)	(b)	(c)	<u> </u>	(d)				
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by				
	2014	63,527.	1,122,161.			0.056611			
	2013	61,592.	1,128,530.			0.054577			
	2012	50,180.	1,069,598.			0.046915			
	2011	37,165.	1,020,447.			0.036420			
	2010	46,987.	1,033,853.			0.045448			
2		٠,		2		0.239971			
3	•	o for the 5-year base period - divide	• • •			0.047004			
	number of years the four	ndation has been in existence if less	s than 5 years	3		0.047994			
4	Enter the net value of no	ncharitable-use assets for 2015 fro	om Part X, line 5	4	1,	044,129.			
5	5 Multiply line 4 by line 3								
6	Enter 1% of net investme	6	6 207.						
7	50.21								
8	Enter qualifying distribut	ions from Part XII, line 4		8		45,416.			
_	If line 8 is equal to or g	reater than line 7, check the box	in Part VI, line 1b, and complete t		using a 1% tax				

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	s)		
_	Exempt operating foundations described in section 4940(d)(2), check here					
	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		4	113.		
	here and enter 1% of Part I, line 27b					
С	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		4	13.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		N	ONE		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		4	13.		
6	Credits/Payments					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 652 .					
ь	Exempt foreign organizations - tax withheld at source 6b NONE					
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE					
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d		6	52.		
8	Enter any penalty for underpayment_of_estimated_tax. Check_hereif Form-2220-is-attached8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	239.		
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 239. Refunded ▶ 11					
Par	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		Yes	No		
	participate or intervene in any political campaign?	1a		X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?	1b		<u> X</u>		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		i	l		
	published or distributed by the foundation in connection with the activities			Х		
	c Did the foundation file Form 1120-POL for this year?					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.					
	(1) On the foundation ► \$ (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		1	J		
	foundation managers > \$		Ì			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities.		i			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_ 5		X		
	If "Yes," attach the statement required by General Instruction T					
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	1				
	conflict with the state law remain in the governing instrument?	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ľ			
	CT	İ				
þ	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	8b	<u> X</u>			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		İ			
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			٠,		
	complete Part XIV	9		<u> X</u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			v		
	names and addresses	10	O DE	<u> </u>		

(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

charitable	purpose	that	had	not	been	removed	from	jeopardy	before	the	fırst	day	of t	the	tax	year	beginning	ın	20157	4b		X X
																				-0.0	O DE	

34

2b

3b

4a

NONE

NONE

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NONE

NONE

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	n foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	1,030,290.
b	Average of monthly cash balances	1b	29,739.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,060,029.
6	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	1,060,029.
4	Subtract line 2 from line 1d		
	instructions),	4	15,900.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,044,129.
6	Minimum investment return. Enter 5% of line 5	6	52,206.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	dations	
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6 /	1	52,206.
2 a	Tax on investment income for 2015 from Part VI, line 5	1	
b	Income tax for 2015. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	413.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	51,793.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	51,793.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	51,793.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	45,416.
b	Program-related investments - total from Part IX-B	1b	<u></u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	45,416.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		-5/110.
	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	45,416.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instruc	tions)			
1 Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
line 7				51,793.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only,	1		NONE	
b Total for prior years 20,20		NONE		
3 Excess distributions carryover, if any, to 2015.				
a From 2010 NONE	l			
b From 2011 NONE				
c From 2012				
d From 2013				
e From 2014 8, 069.				
f Total of lines 3a through e ,	15,350.			
4 Qualifying distributions for 2015 from Part XII,				
line 4 ▶ \$45,416			;	
a Applied to 2014, but not more than line 2a			NONE	
b Applied to undistributed income of prior years				
(Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election				
required - see instructions)	NONE			
d Applied to 2015 distributable amount				45,416.
e Remaining amount distributed out of corpus	NONB			
5 Excess distributions carryover applied to 2015.	6,377.			6,377.
(If an amount appears in column (d), the same amount must be shown in column (a))			Î	
6 Enter the net total of each column as				
indicated below	0.073			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,973.			
b Prior years' undistributed income. Subtract		MONIE		
line 4b from line 2b		NONE		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a)		NONE		
tax has been previously assessed		TAOME		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2014. Subtract line				
4a from line 2a Taxable amount - see			NONE	
Instructions			NONE	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2016				NONE
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)	NONB			
8 Excess distributions carryover from 2010 not				
applied on line 5 or line 7 (see instructions)	NONE			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	8,973.			
10 Analysis of line 9				
a Excess from 2011 NONE			Ì	
b Excess from 2012 NONE			}	
c Excess from 2013 904.				
d Excess from 2014 8,069.			1	
e Excess from 2015				orm 990-PF (2015)

Pa	rt XIV Private Ope	erating Foundations	s (see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABLE		
1 a	1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling							
h						1/1/21 4042/-1/51		
Ü	Check box to indicate v	Tax year	is a private operating	Prior 3 years	section 4942	2(j)(3) or 4942(j)(5)		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total		
	I or the minimum investment return from Part X for each year listed		,	(0, 20.0	(0) 2012			
ь	85% of line 2a							
	Qualifying distributions from Part							
	Xil, line 4 for each year listed							
u	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	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 "Assets" alternative test enter							
	(1) Value of all assets (2) Value of assets qualifying under section							
b	4942(j)(3)(B)(i) 'Endowment' alternative test-	-						
	enter 2/3 of minimum investment return shown in Part X line 6 for each year listed			<i>t</i>				
C								
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities							
	loans (section 512(a)(5)), or royalties)							
	public and 5 or more exempt organizations as provided in section 4942							
	(3) Largest amount of support from an exampt organization.							
	(4) Gross investment income,							
Pai		tary Information (C Iring the year - see		only if the foundat	ion had \$5,000 o	or more in assets at		
1	Information Regarding	Foundation Manager	s:					
а	List any managers of the before the close of any	the foundation who h tax year (but only if th	nave contributed more ney have contributed m	e than 2% of the tota nore than \$5,000). (Se	I contributions receive section 507(d)(2).	ived by the foundation)		
h	N/A List any managers of	the foundation who	own 10% or more of	the steel of a servi	and the second	U. James and A.		
b	ownership of a partners					ly large portion of the		
	N/A							
2	Information Regarding		•					
	Check here ▶ if the unsolicited requests for other conditions, comp	or funds, If the founda	atıon makes gifts, gra	to preselected charit nts, etc. (see instruct	table organizations ions) to individuals	and does not accept or organizations under		
a	The name, address, and	d telephone number o	r e-mail address of the	person to whom appl	ications should be a	ddressed.		
	SEE STATEMENT 1		mutted and information	n and materials there	hould believe			
a	The form in which appl SEE ATTACHED ST			n and materials they s	nioula include:			
C	Any submission deadlin SEE ATTACHED ST		NE 2					
- A				phical areas charita	hle fields kinds of	institutions or other		
u	d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors							
SA	SEE ATTACHED ST	ATEMENT FOR LI	NE 2			5 000 PF (00.5)		

	na the Vear or Annr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager, or substantial contributor	Foundation status of		
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
BE ATTACHED SCHEDULE	n/A	PC	SUPPORT NEEDY RETIRED TBACHERS	36,961.
•				
				,
Total	······	1	▶ 3a	36,961.
a Approved for fature payment				
	į		,	
Total			▶ 3b	

JSA 5E1491 1 000

Form 990-PF		icina Acti	vities			Page 12
Part XVI-	amounts unless otherwise indicated	1	ated business income	Excluded by	section 512, 513, or 514	(e)
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a						
				_		
f						
g Fees	and contracts from government agencies					· · · · · · · · · · · · · · · · · · ·
	ship dues and assessments					
	n savings and temporary cash investments. Is and interest from securities			14	27,098.	
	al income or (loss) from real estate					
	-financed property					
b_Not_c	debt-financed property					
	I income or (loss) from personal property.					
	vestment income			18	-23,031.	
	oss) from sales of assets other than inventory me or (loss) from special events · · ·			- • 	23,032.	
	ofit or (loss) from sales of inventory.					
11 Other re						
ь <u>ЕХ</u>	CISE TAX REFUND			1	447.	
е						
	Add columns (b), (d), and (e)				4,514.	
Part XVI- Line No. ▼	Relationship of Activities Explain below how each activity accomplishment of the foundation	y for which	n income is reported	ın column (e	e) of Part XVI-A contribu	
			NOT APPLICAB	LE		
		-				
						
 -						
	<u> </u>					Form 990-PF (2015)

Form 990-PF (2	2015)				23-7258527	Page 13
Part XVII	Information R Exempt Orga		ansfers To and Tr	ansactions a	and Relationships With None	haritable
ın sect					any other organization described a section 527, relating to political	Yes No
-		g foundation to	a noncharitable exem	pt organization	of.	
(1) Ca	sh					
	•					1a(2) X
	transactions: les of assets to a non	charitable exer	not organization			1b(1) X
						1b(3) X
					. Column (b) should always show	
value	of the goods, other	assets, or serv	ices given by the rep	orting foundation	on. If the foundation received less	than_fair_market.
$\overline{}$			·		ue of the goods, other assets, or so	
(a) Line no.	(b) Amount involved	(c) Name of	noncharitable exempt organi	zation (d) [Description of transfers, transactions, and shar	ing arrangements
				 		
		ļ				
					T	
		<u> </u>				
	·	<u> </u>				
						
describ	ped in section 501(c)	of the Code (c			ore tax-exempt organizations ion 527?	Yes X No
b If "Yes	," complete the follow		(h) Timo of our		(1)	t
	(a) Name of organizatio	···	(b) Type of orga	3112311011	(c) Description of relations	nip
corre			ined this return, including acco taxpayer) is based on all informat	ion of which preparer h		e and belief, it is true,
Sign Here Sign	MANUW Lo	Figlar	10/24/a	2016 Title	PAESEDENT: May the IRS with the pre (see instruction	
	Print/Type preparer's na	me	Preparer's signature	10.0	Date Check if F	TIN
Paid	1	ALMFORTH	Helines	Shala Sk	In	P01217680
Preparer	Firm's name ► BA		RICA, N.A.			1687665
Use Only		O BOX 1802	2			
	PR	OVIDENCE,	RI	02901-1		78-8930
					For	m 990-PF (2015)

23-7258527

	NET INVESTMENT INCOME	3,587. 10,060. 3,185. 334. 809. 814. 814. 6,527. 6,527.
ROM SECURITIES	REVENUE AND EXPENSES PER BOOKS	171. 3,587. 550. 10,060. 3,185. 334. 809. -152. 814. 6,527.
FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES	DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS OTHER INTEREST FOREIGN INTEREST FOREIGN INTEREST U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE NON-TAXABLE FOREIGN INCOME NONDISTRIBUTIVE FOREIGN DIVIDENDS US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS

7

FUND INC.
EACHERS
RETIRED T
BRIDGEPORT
GREATER

23-7258527

FORM 990PF, PART I - OTHER INCOME			
		REVENUE AND	NET NET
DESCRIPTION		PER BOOKS	INCOME
EXCISE TAX REFUND PARTNERSHIP INCOME		447.	R
TOT	TOTALS	447.	3 .

GA4044 L775 10/03/2016 07:00:44

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,250.	
ADJUSTED NET INCOME	NONE	
NET INVESTMENT INCOME	NONE	
REVENUE AND EXPENSES PER BOOKS	1,250.	
DESCRIPTION	TAX PREPARATION FEE - BOA TOTALS	

NET INVESTMENT INCOME	508.	547.
REVENUE AND EXPENSES PER BOOKS	508. 808. 324. 30.	1,679.
DESCRIPTION	FOREIGN TAXES EXCISE TAX - PRIOR YEAR EXCISE TAX ESTIMATES FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

23-7258527

GREATER BRIDGEPORT RETIRED TEACHERS FUND INC.

FORM 990PF, PART I - TAXES

26

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INC.
FUND
TEACHERS
RETIRED
BRIDGEPORT
GREATER

23-7258527

	NET INVESTMENT INCOME	152. 152.	471.
	REVENUE AND EXPENSES PER BOOKS	152. 152. 3,855.	4,159.
FORM 990PF, PART I - OTHER EXPENSES	DESCRIPTION	OTHER ALLOCABLE EXPENSE-PRINCI OTHER ALLOCABLE EXPENSE-INCOME OTHER CHARITABLE EXPENSES PARTNERSHIP EXPENSES	TOTALS

3,855.

3,855.

CHARITABLE PURPOSES

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	END ING FMV
464287507 ISHARES CORE S&P MID 464287655 ISHARES RUSSELL 2000 921943858 VANGUARD FTSE DEVELO 922908553 VANGUARD REIT ETF 693390841 PIMCO HIGH YIELD FD 202671913 AGGREGATE BOND CTF 207543877 SMALL CAP GROWTH LEA 29099J109 EMERGING MARKETS STO 30299393 MID CAP VALUE CTF 323991307 MID CAP VALUE CTF 45399C107 DIVIDEND INCOME COMM 99Z466163 HIGH QUALITY CORE CO 99Z466163 HIGH QUALITY CORE CO 99Z466163 HIGH QUALITY CORE CO 99Z501647 STRATEGIC GROWTH COM 73935S105 POWERSHARES DB COMMO 466001864 IVY ASSET STRATE 464287200 ISHARES CORE S&P 500 92203J407 VANGUARD TOTAL INTL 977177701 WISDOMTREE EUROPE HE 693390882 PIMCO FOREIGN BD US\$ 464287226 ISHARES CORE US AGGR 922042858 VANGUARD FTSE EMERGI 922908363 VANGUARD S&P 500 ETF	TOTALS	32,001. 19,226. 29,844. 48,797. 33,546. 198,276. 20,931. 22,931. 22,604. 21,956. 96,465. 37,613. 82,116. 79,737. 31,341. 54,142. 75,593. 55,675. 57,700.	25, 197. 19, 226. 42, 330. 46, 363. 10, 510. 10, 510. 10, 366. 115, 737. 10, 366. 115, 737. 10, 366. 115, 737. 114, 229. 70, 273. 70, 273. 70, 273. 71, 691. 30, 459. 97, 024. 36, 455.	31,521. 22,536. 40,523. 58,966. 21,157. 11,033. 52,117. 14,729. 14,729. 16,235. 73,901. 86,248. 21,920. 55,650. 55,650. 33,011. 104,941. 38,090.
			11 1	

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FORM	990PF,	PART	III	-	OTHER	INCREASES	IN	NET	WORTH	OR	FUND	BALANCES	
=====		=====	====	==		========	===	====	======	===	=====		

DESCRIPTION AMOUNT PARTNERSHIP ADJUSTMENT 5,910. SALES ADJUSTMENT 884. ROUNDING TOTAL 6,796. ============

FORM 990P	F, PART	III -	OTHER	DECREASES	IN NET	WORTH	OR	FUND 1	BALANCES
=======	======	=====	======	========		======	===	=====	=======

DESCRIPTION

AMOUNT

CTF COST ADJUSTMENT
ADJUSTMENTS TO CARRYING VALUE

13,038.

663.

TOTAL

13,701.

23-7258527

GREATER BRIDGEPORT RETIRED TEACHERS FUND INC. Schedule D Detail of Long-term Capital Gains and Losses

	Date	Date	soleS same	Cost or Other	Long-torm
Description	Acquired	Sold	Price	Basis	Gain/Loss
OTHER GAINS AND LOSSES					
604.837 AGGREGATE BOND CTF	06/07/2013	01/08/2016	10.160.00	10,128,00	32.00
547 SMALL CAP GROWTH LEADERS	/07/201	8	207.	150.	·
777	06/07/2013	/31/	i—-	,405.	١.
592 MID CAP VALUE CTF	06/07/2013	01/08/2016	5,525.00	,414.	١.
332.261 SMALL CAP VALUE CTF	06/07/2013	/80/		7,712.00	١.
204.712 SMALL CAP VALUE CTF	06/07/2013	05/31/2016	5,058.00	4,716.00	342.00
242.916 MID CAP GROWTH CTF	06/07/2013	01/08/2016	6,401.00	7,236.00	-835.00
O	06/07/2013	01/08/2016	10,631.00	11,133.00	-502.00
400. POWERSHARES DB COMMODITY INDEX	04/22/2013	01/08/2016	5,109.00	10,318.00	-5,209.00
1269.672 HIGH OUALITY CORE COMMON					
TRUST FUND	06/07/2013	01/08/2016	16,156.00	16,082.00	74.00
415.337 HIGH QUALITY CORE COMMON TRUST					
	06/07/2013	05/31/2016	5,740.00	5,374.00	366.00
261.775 HIGH QUALITY CORE COMMON TRUST					
FUND	08/24/2012	05/31/2016	3,618.00	3,078.00	540.00
FOCUSED	03/31/2015	05/31/2016	3,132.00	3,475.00	-343.00
682.929 INTERNATIONAL FOCUSED EQUITY	11/30/2013	05/31/2016	7,588.00	7,835.00	-247.00
SASSOI GME SMIKE GENEO IKTOH			- -	7	
TOTAL CINER CALNS AND LUSSES			70,100	00.950,501	-6,889.00
Totale			00 157 00	7 20 20 1	
Totals			NO. / OT / OC	702,020.00	-6,889.00

JSA 5F0970 1 000

δ

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-7,048.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-7,048.00 ========

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S_CORPORATIONS——AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

20,698.00

PARTNERSHIPS, TRUSTS, S CORPORATIONS

-5,910.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

14,788.00

GREATER BRIDGEPORT RETIRED TEACHERS FUND INC.

23-7258527

8,375.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

BANK OF AMERICA

ADDRESS:

99 FOUNDERS PLAZA

EAST HARTFORD, CT 06108-3208

TITLE:

AGENT FOR FIDUCIARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

COMPENSATION

OFFICER NAME:

JO-ANN OLSEN

ADDRESS:

1127 BROOKLAWN AVE

FAIRFIELD, CT 06825

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

OFFICER NAME:

MARY MCINTYRE

ADDRESS:

40 NORTHFIELD STREET

BRIDGEPORT, CT 06606

TITLE:

RECORDING SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

WALTER DROZECK

ADDRESS:

12 WILSON LANE

SHELTON, CT 06484

TITLE:

2ND VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

GREATER BRIDGEPORT RETIRED TEACHERS FUND INC.

23-7258527

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

LYNN CORRA

ADDRESS:

40 EAST PASADENA PLACE

BRIDGEPORT, CT 06610

TITLE:

1ST VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

DEBORAH BROCCOLI

ADDRESS:

40 COL ONIAL DRIVE

TRUMBULL, CT 06611

TITLE:

CORRESPONDING SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

ANDREW FIGLAR

ADDRESS:

335 NAVAJO LOOP

SHELTON, CT 06484-2852

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

TOTAL COMPENSATION:

8,375.

RECIPIENT NAME:
WALTER DROZECK
ADDRESS:
12 WILSON LANE
SHELTON, CT 06484
FORM, INFORMATION AND MATERIALS:
SEE ATTACHED
SUBMISSION DEADLINES:
SEE ATTACHED
RESTRICTIONS OR LIMITATIONS ON AWARDS:
SEE ATTACHED

Ε

Postuno Date	Amount Distribution	Relationship to substantial contributor	Pirrose	Coundation Status of Becomes	200
07/01/2015	.750 00 TREASURER CITY OF MILFORD	N/A	NCE PREMIUM RE R CHIKLA		
07/01/2015	-750 00 BRIDGEPORT BOARD OF EDUCATION	N/A	OTRLY INSURANCE PREMIUM FOR L SIMS	ည	
07/01/2015	-750 00 BRIDGEPORT BOARD OF EDUCATION	A/N	INSURANCE PREMIUM FOR G CABASSA	요.	7
07/01/2015	-750 00 BRIDGEPORT BOARD OF EDUCATION	NA	INSURANCE PREMIUM FOR L DEMONTE	요.	
07/01/2015	-609 15 BRIDGEPORT BOARD OF EDUCATION	N/A	QUARTERLY INSURANCE PREMIUM FOR R LOPEZ	2	-
07/01/2015	-140 00 MONTHLY INS PREMIUM	AIN	MONTHLY INS PREMIUM FOR R LEONARDI	Š.	_
07/01/2015	-140 00 MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM E ZIMA	Ö.	
07/01/2015	-750 00 MILFORD BOARD OF EDUCATION	A/N	OTRLY INSURANCE PREMIUM FOR N WOLF	<u>ج</u>	
07/01/2015	750 00 BEACON RETIREE BENEFITS GROUP	A/Z	QUARTERLY INSURANCE PREMIUM FOR D GINTY	٦.	
08/03/2015	8	₹ Z	SERVICES FOR C ZORZY	8-	
08/03/2015	98 57 LIFEBRIDGE COMMUNITY SERVICES 1	N/A	CONSULTING SERVICES FOR C ZORZY	£-	7
08/03/2015	140 00 MONTHLY INS PREMIUM	Ψ/Z	MONTHLY INS PREMIUM FOR R LEONARDI	ပ္-	_
08/03/2015	٤.	₹ :	MONTHLY INSURANCE PREMIUM E ZIMA	ပ္ရ	
08/24/2015	HOME	. A	SERVICES FOR C ZORZY	g-¦	
08/26/2015	460 00 HOME INSTEAD SENIOR CARE	Y.X	SERVICES FOR C ZORZY	ပ္ရ.	
09/01/2015	140 00 MONTHLY INS PREMIUM	Y/N	MONTHLY INS PREMIUM FOR R LEONARDI	ည	
09/01/2015	Š,	Ą.	MONTHLY INSURANCE PREMIUM E ZIMA	ပ္ရ	,
09/01/2015	30 00 HOME INSTEAD SENIOR CARE	N/A	ADMINISTRATIVE EXPENSES	ည့ <u>်</u>	,
09/09/2015	TOME INS	N/A	SERVICES FOR C 20RZY	ပ္ရ.	
09/24/2015		N/A	CONSULTING SERVICES G STANFORD	ບູ	•
10/01/2015	-750 00 TREASURER CITY OF MILFORD	ΝΑ	INSURANCE PREMIUM RE R CHIKLA	D.	
10/01/2015	-750 00 BRIDGEPORT BOARD OF EDUCATION	N/A	INSURANCE PREMIUM FOR L DEMONTE	ည <u>်</u>	
10/01/2015	-609 15, BRIDGEPORT BOARD OF EDUCATION	NA	QUARTERLY INSURANCE PREMIUM FOR R LOPEZ	ည့ _်	
10/01/2015	750 00 BRIDGEPORT BOARD OF EDUCATION	ΝΆ	OTRLY INSURANCE PREMIUM FOR L SIMS	ပ္ရ-	_
10/01/2015	S S	- YN	INSURANCE PREMIUM FOR G C RIVERA	ည-	_
10/01/2015	140 00 MONTHLY INS PREMIUM	Y. Y	MONTHLY INS PREMIUM FOR R LEONARDI	ე გ.¦	,
5102/1001	140 00 MONTHLY INS PREMIUM		NSUKANCE PREMIUM E Z	D:	
510201001	-750 00 MILFORD BOARD OF EDUCATION	¥Z.	OTELY INSURANCE PREMIUM FOR N WOLF	2 :	,
5102/10/01	SO SO LOSS MICE BENEFILS GROUP	V.	DUAR IERLY INSURANCE PREMIUM FOR DIGINIY	5 5	
000000	204 OO HOWE INSTEAD SENIOR CARE	, VIX	טוע	2.g	
C102/2001	391 00 HOME INSTEAD SENIOR CARE	W.V.	اابد	0 1	
11/02/2015		Y ?		o b	•
11/02/2015	-121 06 LIFEBRIDGE COMMUNITY SERVICES	Ϋ́N	HOME VISIT M MAHONEY	DG ,	
11/02/2015	MONTHL	N/A	MONTHLY INS PREMIUM FOR R LEONARDI	် မျှ	
11/02/2015	-140 00 MONTHLY INS PREMIUM	N.A.	뒭	5 	,
11/20/2015	552 00 HOME INSTEAD SENIOR CARE	Y.A	SERVICES FOR C 20RZY	SC PC	,
11/20/2015	-506 00 HOME INSTEAD SENIOR CARE	N/A	SERVICES FOR C ZORZY	5 2	
11/20/2015	-320 00 HOME INSTEAD SENIOR CARE	N/A	SERVICES FOR M MAHONEY	ည က	,
51027/2711	- LOU DO HOME INSTEAD SENIOR CARE	Y Y	SERVICES FOR M MAHONEY	χ.	_
5102/10/21	140 UO MONTHLY INS PREMIUM	NA A	MONTHLY INS PREMIUM FOR R LEGNARUI	۲ و د	_
5107/10/21	140 CO MONTHLY INS PREMIUM	YN .	MONTHLY INSURANCE PREMIUM E ZIMA	21.5	,
5102/10/21	190 00 IRUMBULL BOARD OF EDUCATION	- VA	DOAK IERLY INSURANCE PAYMENT FOR K DOMINIK) 2:	
5102/10/21	250 to BRIDGEFOR! BOARD OF EDUCATION	d i	INSURANCE PAYMENT FOR I CURBELO	ည	
9102/50/10	TO SO SOUTHLY INS PREMIUM	- WA	MONTHLY INS PREMIUM R LECNARDI	ا ا ا	
01/04/2016	750 00 BRIDGEPORT BOARD OF EDUCATION		INSURANCE PREMIUM FOR L DEMONTE	1100	1
01/04/2016	-140 UG MONIHLY INS PREMIUM	YAY	MONIHLY INSURANCE PREMIUM E ZIMA	S-1	
01/04/2016	-809 15 BRIDGEPORT BOARD OF EDUCATION	YZ.	DUARTERLY INSURANCE PREMIUM FOR R LOPEZ	Su 	1
01/04/2016	750 00 BRIDGEPORT BOARD OF EDUCATION	Ψ'.	OTRLY INSURANCE PREMIUM FOR L SIMS	မှု ရ	
0102/2010	750 00 BEINGEBORT BOARD OF FULL ATION	1 4 X	INCLIDANCE DEEMINATOR OF DIVERS	; کړو ر	
01040016	750 OO BEACON DETIDER BENEFITS COOLID		OLIVETEDI VINICIDANICE DOCUMENTA CODO DINTO	י	
01/04/2010	750 ON BRIDGEPORT BOARD OF FOLICATION	(A N	OLIABTED V NOTIDANCE PREMIUM FOR LONGE OF THE)_()	
01/04/2016	-750 00 TREASURER CITY OF MILFORD	A/N	INSURANCE PREMITIM RE R CHIKLA) C	
01/29/2016	-345 00 HOME INSTEAD SENIOR CARE	Y W	SERVICES FOR M PSARRAS	, -ပူ	
01/29/2018	95 34 LIFEBRIDGE COMMUNITY SERVICES	N/A	CONSULTING SERFVICES FOR M PSARRAS	٠ 2	-
02/01/2016	-140 00 MONTHLY INS PREMIUM	NIA	MONTHLY INS PREMIUM FOR R LEONARDI	-알 I	
9102/10/20	140 00 MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM E ZIMA	-ပူ (
02/09/2016	-414 00 HOME INSTEAD SENIOR CARE	A/N	SERVICES FOR M PSARRAS	် ပ	
02/26/2016	115 00 HOME INSTEAD SENIOR CARE	N/A	CONSULTING SERFVICES FOR M PSARRAS	۵. :	1
02/26/2016	260 00 HOME INSTEAD SENIOR CARE	N/A	SERVICES FOR M MAHONEY	2	
03/01/2016	MONTH	NA	MONTHLY INSURANCE PREMIUM FOR T CONNELLY	ပ္ထု (_
03/01/2016	250 00 BRIDGEPORT BOARD OF EDUCATION	WW.	INSURANCE PREMIUM FOR R MCLAREN	باي ا	
030172016	140 00 MONTHLY INS PREMIUM	Y.	MONTHLY INS PREMIUM FOR R LEONARDI	B 6	;
03/07/060		- VN	MONINET INSURANCE PREMIUM E ZIMA	- - - - - - - - - - - - - - - - - - -	1
03001000	150 OU INCIMENTE DO SENIOR CARE	Z Z	COAKTERLY INSURANCE PAYMENT FOR K DOMINIK		
010202010		4/2	1000	ا د ا	,
03/23/2016	ONTH	, AZ	1 4	276 1	
03/23/2016	MONTH	d'X	MONTHLY INSURANCE PREMIUM F ZIMA	2:6	1
04/01/2016	MONTHLY	N.A.		5 0	,
04/01/2016	750 00 BRIDGEPORT BOARD OF EDUCATION	N.V.	INSURANCE PREMIUM FOR L DEMONTE	, , ,	!
04/01/2016	-140 00 MONTHLY INS PREMIUM	W.Z.	MONTHLY INSURANCE PREMIUM E ZIMA	່ວ	,
04/01/2016	609 15 BRIDGEPORT BOARD OF EDUCATION	N/A	QUARTERLY INSURANCE PREMIUM FOR R LOPEZ	2	

04/01/2016	750 00 BRIDGEPORT BOARD OF EDUCATION	A/A	OTRLY INSURANCE PREMIUM FOR L SIMS	ည
04/01/2016	-750 00 MILFORD BOARD OF EDUCATION	ΝA	OTRLY INSURANCE PREMIUM FOR N WOLF	ပ္
04/01/2016	750 00 BEACON RETIREE BENEFITS GROUP	N/A	QUARTERLY INSURANCE PREMIUM FOR D GINTY	<u>م</u>
04/01/2016	-750 00 BRIDGEPORT BOARD OF EDUCATION	N/A	OUARTERLY INSURANCE PAYMENT FOR I CURBELO	ည
04/01/2016	-148 00 MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM FOR T CONNELLY	ည
04/01/2016	-750 00 BRIDGEPORT BOARD OF EDUCATION	N/A	QUARTERLY INSURANCE PAYMENT FOR R MCLAREN	<u>,</u>
04/01/2016	-750 00 TREASURER CITY OF MILFORD	N/A	INSURANCE PREMIUM RE R CHIKLA	ည
04/14/2016	-300 00 HOME INSTEAD SENIOR CARE	NA A	SERVICES FOR J OCONNELL	ည
04/20/2016	92 90 LIFEBRIDGE COMMUNITY SERVICES 1	N/A	HOME VISIT J OCONNELL	ပ္
04/25/2016	-300 00 HOME INSTEAD SENIOR CARE	NA	SERVICES FOR J OCONNELL	ည
05/02/2016	140 00 MONTHLY INS PREMIUM	N/A	MONTHLY INS PREMIUM R LEONARDI	2
05/02/2016	140 DO MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM E ZIMA	ည
05/02/2016	-148 00 MONTHLY INS PREMIUM	NA	MONTHLY INSURANCE PREMIUM FOR T CONNELLY	ည
05/09/2016	-150 00 HOME INSTEAD SENIOR CARE	N/A	SERVICES FOR J O CONNELL	ွ
05/25/2016	150 00 HOME INSTEAD SENIOR CARE	ΝΑ	SERVICES FOR J OCONNELL	ပ္ရ
05/26/2016	16 00 MONTHLY INS PREMIUM	N/A	MAKEUP PAYMENT FOR APRIL & MAY R LEONARDI	ည
05/26/2016	16 00 MONTHLY INS PREMIUM	N/A	MAKEUP PAYMENT FOR APRIL & MAY E ZIMA	ည
06/01/2016	-148 00 MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM E ZIMA	Š.
06/01/2016	-148 00 MONTHLY INS PREMIUM	N/A	MONTHLY INSURANCE PREMIUM FOR T CONNELLY	<u>်</u> ပူ
06/01/2016	-148 00 MONTHLY INS PREMIUM	N/A	MONTHLY INS PREMIUM R LEONARDI	ပူ
06/01/2016	-750 00 TRUMBULL BOARD OF EDUCATION	NA NA	QUARTERLY INSURANCE PAYMENT FOR K DOMINIK	ည
06/29/2016	-373 75 HOME INSTEAD SENIOR CARE	N/A	SERVICES FOR K DOMINIK	S
		,	:	

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