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2016

OMB No 1545-0052

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 instructions is at www.irs.gov/form990pf.

Open to Public Inspection

G C If exemption application is pending, che D 1. Foreign organizations, check here 2. Foreign organizations check here 3. Foreign organizations check here 4. If the foundation is net extend that the condition of the	sion
Number and street (or PO box number if mail is not delivered to street address) Room/suite	ination Disbursements for charitable purposes
CHYSC ENTERPRISES225 ASYLUM STFL 29 City or town, state or province, country, and ZIP or foreign postal code HARTFORD, CT 06103 G Check all that apply	ination Disbursements for charitable purposes
City or town, state or province, country, and ZIP or foreign postal code G Check all that apply	ination Disbursements for charitable purposes
G C If exemption application is pending, che D 1. Foreign organizations, check here 2. Foreign organizations check here 3. Foreign organizations check here 4. If the foundation is net extend that the condition of the	ination Disbursements for charitable purposes
Final return Address change Name change Check type of organization Section 501c()(3) exempt private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Fair market value of all assets at end of year (from Part II, col (c), Other (specify) (Part I, column (d) must be on cash basis) Fairt 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) 1	ated anation Disbursements for charitable purposes
Address change	ated anation Disbursements for charitable purposes
Address change	ination Disbursements for charitable purposes
Check	Disbursements for charitable purposes
Section 4947(a)(1) nonexempt charitable trust	Disbursements for charitable purposes
of year (from Part II, col (c), Other (specify) Other (specify)	Disbursements for charitable purposes
Other (specify) 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) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check 1 The foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 1 1 The foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 1 1 The foundation is not required to attach Sch B The foundation is not requir	Disbursements for charitable purposes
of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) 1 Contributions, gifts, grants, etc , received (attach schedule) 2 Check if the foundation is not required to attach Sch B	for charitable purposes
of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) 1 Contributions, gifts, grants, etc, received (attach schedule) 2 Check if the foundation is not required to attach Sch B	for charitable purposes
1 Contributions, gifts, grants, etc , received (attach schedule) 2 Check	ash basis only)
Schedule) 2 Check if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Gross rents 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 5 Gross sales price for all assets on line 6a 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 5 Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 1 Sequence Se	
Sch B	
The rest on savings and temporary cash investments I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Sa Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1 7 Capital gain net income (from Part IV, line 2) 1 8 Net short-term capital gain	
b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 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) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 1	
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain	
8 Net short-term capital gain	
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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) 12 Total. Add lines 1 through 11	
b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11	
c Gross profit or (loss) (attach schedule)	
11 Other income (attach schedule)	
12 Total. Add lines 1 through 1184,90576,60513 Compensation of officers, directors, trustees, etc0014 Other employee salaries and wages	
13 Compensation of officers, directors, trustees, etc 0 0 14 Other employee salaries and wages	
14 Other employee salaries and wages	0
16a Legal fees (attach schedule)	
b Accounting fees (attach schedule)	
c Other professional fees (attach schedule)	830
17 Interest	
18 Taxes (attach schedule) (see instructions) 13,000 0 19 Depreciation (attach schedule) and depletion	
19 Depreciation (attach schedule) and depletion	0
Ē 1.2 0 0 0 0 0 0 0 0 0	
돌 20 Occupancy	
21 Travel, conferences, and meetings	
22 Printing and publications	
23 Other expenses (attach schedule)	0
23 Other expenses (attach schedule)	
Add lines 13 through 23	830
Contributions, gifts, grants paid	207,150
26 Total expenses and disbursements. Add lines 24 and 25 228,885 7,890	207,980
27 Subtract line 26 from line 12	207,300
a Excess of revenue over expenses and -143,980	
disbursements	
b Net investment income (if negative, enter -0-) 68,715	
c Adjusted net income(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form 99	

1,062,015

1,251,393

8,300

8,300

1,243,093

1,243,093

1,251,393

1,062,015

1,107,563

8,450

8,450

1,099,113

1,099,113 1,107,563

2

3

4

5

6

1,243,093

-143,980

1,099,113

1.099.113 Form **990-PF** (2016)

0

0

2,094,352

2,139,900

Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Investments—land, buildings, and equipment basis ▶ _

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Less accumulated depreciation (attach schedule) ▶

10a

b

C

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29 Net 30

31

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27 (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 Yes
 ✓ No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? 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 (b) (a) Base period years Calendar Distribution ratio Adjusted qualifying distributions Net value of noncharitable-use assets (col (b) divided by col (c)) year (or tax year beginning in) 2015 354,783 2,095,639 0 169296 2014 234,771 0 114994 2,041,588 2013 181,371 1,630,819 0 111215 2012 313,620 1,666,768 0 188161 2011 119,378 1,533,020 0 077871 2 Total of line 1, column (d) 2 0 661537 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the 0 132307 number of years the foundation has been in existence if less than 5 years

4 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 1,967,417 5 260,303 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) . 6 687 7 **7** Add lines 5 and 6 260,990 8 Enter qualifying distributions from Part XII, line 4 207,980 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 Form 990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N	ONE".
(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	
Total. Add lines 1 through 3	D
Iotal. Add lines 1 through 3	Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

3

4

5

2

3a 3h

4

5

207.980

207.980

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(d)

2016

Page 9

96,997

96.997

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0

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Pa	rt XIII	

90-PF	(20)	1	6)	
VIII	7						

b Total for prior years

From 2011.

b From 2012. . . . c From 2013. . .

d From 2014.

e From 2015.

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t XIII	Undistributed Income	(see instructions)	

0-PF (2	016)
XIII	Un

Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016

44.106 231,658

101 202

134.064 260,649

231.658 101,202

134.064

260.649

110.983

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

b Excess from 2013. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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 e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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 2011 not

indicated below:

4 Qualifying distributions for 2016 from Part XII, line 4 🕨 \$ a Applied to 2015, 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 (a)

Corpus

771.679

110.983

882,662

44.106

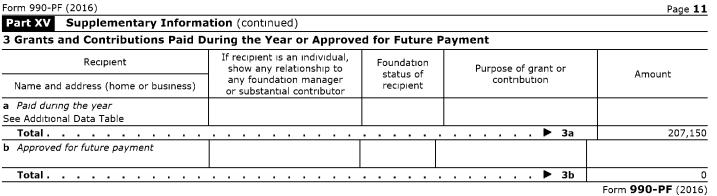
838,556

(b)

Years prior to 2015

(c)

2015



ter gross a	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section		(e) Related or exempt
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
						
	nd contracts from government agencies					
_	ship dues and assessments.					
	t on savings and temporary cash					
	nents			14	76.602	
	s and interest from securities al income or (loss) from real estate			14	76,603	
	nanced property.					
	bt-financed property.					
	tal income or (loss) from personal property					
Other in	vestment income					
	(loss) from sales of assets other than					
	ry			18	1	
	me or (loss) from special events					
	ofit or (loss) from sales of inventory venue a					
b	venue a					
d						
e Subtotal	Add columns (b), (d), and (e).		0		76,605	
e Subtotal Total. A	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)		0	13	76,605 3	
e Subtotal Total. A e workshe	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	ns)		13	· · · · · · · · · · · · · · · · · · ·	
e Subtotal Total. A e workshe art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculatio Relationship of Activities to th	^{ns}) e Accomplish	ment of Exem	ot Purposes	3	76,605
e Subtotal Total. A e workshe	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	ns) e Accomplish Income is reporte	ment of Exempled in column (e) of	13 ot Purposes Part XVI-A contribu	ted importantly to	
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Form 990-P	PF (2	016)								Pa	ge 13
Part XV	411	Information Re Exempt Organi		ransfers To a	and Transaction	ns and	Relatio	nships With Nonch	aritable		
		anization directly or in ode (other than sectio						n described in section ! organizations?	501	Yes	No
a Transfe	rs fr	om the reporting foun	dation to a n	oncharitable ex	empt organization	of					
(1) Ca	sh.								1a(1)		No
(2) Ot	her	assets							1a(2)		No
b Other to	rans	actions									
		of assets to a nonchari	•	_					1b(1)		No
		ses of assets from a n							. 1b(2)		No
(3) Re	ental	of facilities, equipmer	nt, or other a	ssets					. 1b(3)		No
		ursement arrangemen							1b(4)		No
		or loan guarantees.							1b(5)		No
` '		ance of services or m	•	-					1b(6)		No
-		acılıtıes, equipment, n		•				· · · · · · · · · vays show the fair mar	1c		No
(a) Line No		(b) Amount involved		noncharitable exe				ts, or services received	l sharıng arra	ingemer	nts
	1										
	1										
describ	ed ir	lation directly or indire isection 501(c) of the inplete the following so (a) Name of organization	Code (other chedule	than section 50	•	ion 527?		zations		✓ N	lo
				·							
Sign w	f my hich	knowledge and belief preparer has any kno	, it is true, co		plete Declaration o			ng schedules and state than taxpayer) is based	l on all info	rmatioi	n of
Here		****			2018-08-14	<u> </u>	~ ~ ~ ~ * *	with	the IRS discu the preparer	shown b	pelow
	Sı	gnature of officer or ti	rustee		Date	7 7	Title	(see	ınstr)? 🔲 🕻	Yes 🗆 N	No
Paid		Print/Type preparer's	s name	Preparer's Sigi	nature	Date		Check if self- employed ▶ □	N.		
Prepare Use On		Firm's name ►		l		1		Firn	n's EIN ▶		

Fırm's address ▶

e no Form **990-PF** (2016)

Phone no

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN LIVER FOUNDATION N/A **PUBLIC** 2017 LIVER LIFE WALK 1,500

127 WASHINGTON AVENUE NORTH HAVEN, CT 064731715		CHARITY		
AMY'S ANGELS 90 HOPMEADOW STREET SIMSBURY, CT 060891800	N/A	PUBLIC CHARITY	JACK CASEY CAMPAIGN	1,000

MSBURY, CT 060891800		CHARITY		
RC CONNECTICUT 00 RESEARCH PARKWAY ERIDEN, CT 064507171	N/A		2017 HARVEST OF HOPE COCKTAIL PARTY AND SILENT AUCTION	2,5

200 RESEARCH PARKWAY MERIDEN, CT 064507171	N/A	CHARITY	COCKTAIL PARTY AND SILENT AUCTION	2,500
AURORA FOUNDATION PO BOX 271035 WEST HARTFORD, CT 061271035	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
		1		-

AURORA FOUNDATION PO BOX 271035 WEST HARTFORD, CT 061271035	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
AUTISM FAMILIES CONNECTICUT PO BOX 370162 WEST HARTFORD, CT 061370162	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000

VEST HARTFORD, CT 0012/1035		CHARITT		
UTISM FAMILIES CONNECTICUT O BOX 370162 VEST HARTFORD, CT 061370162	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,

AUTISM FAMILIES CONNECTICUT PO BOX 370162 WEST HARTFORD, CT 061370162	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5
Total				207,150

3a

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BARTON CENTER FOR DIABETES EDUCATION INC 30 ENNIS ROAD NORTH OXFORD, MA 015370356	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
BEN BRONZ FOUNDATION INC 141 NORTH MAIN STREET WEST HARTFORD, CT 061071239	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
BOYS AND GIRLS CLUB OF HARTFORD INC 170 SIGOURNEY STREET HARTFORD, CT 061051908	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	150
BRIDGE FAMILY CENTER 1022 FARMINGTON AVENUE WEST HARTFORD, CT 061072105	N/A	PUBLIC CHARITY	CHILDREN'S CHARITY BALL	1,500
CHARTER OAK CULTURAL CENTER	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500

CHARITY

21 CHARTER OAK AVENUE HARTFORD, CT 061061801

207,150 Total .

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CHILD FUND INTERNATIONAL PO BOX 26507 RICHMOND, VA 232616507	N/A	PUBLIC CHARITY	SPONSOR CHILDREN	1,400
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	RABBI SILVER COURTYARD FUND	5,000
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	RABBI PINCUS DISCRETIONARY FUND OF CONGREGATION BETH ISRAEL	200
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	SISTERHOOD FLOWER FUND	100
CONGREGATION BETH ISRAEL	N/A	PUBLIC CHARITY	SISTERHOOD FLOWER FUND	100

CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	RABBI PINCUS DISCRETIONARY FUND OF CONGREGATION BETH ISRAEL	20
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTEORD, CT. 061191724	N/A	PUBLIC CHARITY	SISTERHOOD FLOWER FUND	10

CHARITY

WEST HARTFORD, CT 061191724

207,150 Total . . За

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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	SPONSORSHIP OF THE ANNUAL GOLF CLASSIC	1,515	
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	RABBI PINCUS DISCRETIONARY FUND	200	
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	SISTERHOOD OF CONGREGATION BETH ISRAEL	1,200	
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	YIZKOR BOOK OF LIFE FUND	1,080	
CONNECTICUT COUNCIL FOR INTERRELIGIOUS UNDERSTANDING INC	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000	

701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724		CHARITY	CONGREGATION BETH ISRAEL	
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191724	N/A	PUBLIC CHARITY	YIZKOR BOOK OF LIFE FUND	1,080
CONNECTICUT COUNCIL FOR INTERRELIGIOUS UNDERSTANDING INC 77 SHERMAN STREET	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000

HARTFORD, CT 061056203

207,150 За

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 064921929	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
CONNECTICUT HISTORICAL SOCIETY MUSEUM & LIBRARY ONE ELIZABETH STREET HARTFORD, CT 061052292	N/A	PUBLIC CHARITY	ANNUAL FUND	500
DEEDS FOR NEEDS INC PO BOX 370393 WEST HARTFORD, CT 061370393	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
DRESS FOR SUCCESS HARTFORD PO BOX 2343 HARTFORD, CT 061462343	N/A	PUBLIC CHARITY	12TH ANNUAL CAPITAL CATWALK FUNDRAISER	1,500
EMANUEL CYNACOCUE	NI/A	DUDLIC	HERREDT AND THRY CTIVER	300

DRESS FOR SUCCESS HARTFORD PO BOX 2343 HARTFORD, CT 061462343	N/A	PUBLIC CHARITY	12TH ANNUAL CAPITAL CATWALK FUNDRAISER	1,
EMANUEL SYNAGOGUE	N/A	PUBLIC	HERBERT AND JUDY SILVER	

PO BOX 2343 HARTFORD, CT 061462343		CHARITY	CATWALK FUNDRAISER	
EMANUEL SYNAGOGUE 160 MOHEGAN DRIVE WEST HARTFORD, CT, 061171421	N/A	PUBLIC CHARITY	HERBERT AND JUDY SILVER FOUNDATION FUND	200

TIAKTI OKD, CT 001402545				
EMANUEL SYNAGOGUE 160 MOHEGAN DRIVE WEST HARTFORD, CT 061171421	N/A	PUBLIC CHARITY	HERBERT AND JUDY SILVER FOUNDATION FUND	

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FAMILIES IN CRISIS INC 60 POPIELUSZKO COURT HARTFORD, CT 061065112	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
FENWICK IMPROVEMENT FUND INC 5 NIBANG AVENUE OLD SAYBROOK, CT 064753109	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,500
FOCUS CENTER FOR AUTISM - FRESH START SCHOOL 126 DOWD AVENUE CANTON, CT 060192410	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
FOODSHARE 450 WOODLAND AVENUE BLOOMFIELD, CT 060021342	N/A	PUBLIC CHARITY	34TH ANNUAL FOODSHARE WALK AGAINST HUNGER	500
GOVERNOR SAMUEL HUNTINGTON TRUST INC PO BOX 231 SCOTLAND, CT 062640231	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,500

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GRANT SHEELY MEMORIAL GOLF CLASSIC 22 BUTTERNUT DRIVE UNIONVILLE, CT 060851546	N/A	PUBLIC CHARITY	1ST ANNUAL GRANT SHEELY MEMORIAL GOLF CLASSIC	1,500
HADASSAH-THE WOMEN'S ZIONIST ORGANIZATION OF AMERICA INC 40 WALL STREET NEW YORK, NY 100051304	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
HARTFORD ART SCHOOL ENDOWMENT INC 200 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171545	N/A	PUBLIC CHARITY	HAS DOWN AND DIRTY PROCEEDS EVENT FUND	500
HARTFORD CITY MISSION 280 VINE STREET HARTFORD, CT 061122027	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
HARTFORD CITY MISSION 280 VINE STREET HARTFORD, CT 061122027	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,500

Total . 3a 207,150

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HARTFORD STAGE 50 CHURCH STREET HARTFORD, CT 061031201	N/A	PUBLIC CHARITY	2016/2017 ANNUAL FUND AT HARTFORD STAGE	1,500
HARTFORD SYMPHONY ORCHESTRA 166 CAPITAL AVENUE HARTFORD, CT 061061621	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
HARTFORD SYMPHONY ORCHESTRA 166 CAPITAL AVENUE HARTFORD, CT 061061621	N/A	PUBLIC CHARITY	ANNUAL GALA CELEBRATION, BRAVO!	1,500
HARTFORD'S CAMP COURANT 285 BROAD STREET HARTFORD, CT 061153719	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,600
HOSPICE FOR SPECIAL CARE FOUNDATION	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500

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HARTFORD SYMPHONY ORCHESTRA 166 CAPITAL AVENUE HARTFORD, CT 061061621	N/A	PUBLIC CHARITY	ANNUAL GALA CELEBRATION, BRAVO!	1,50
HARTFORD'S CAMP COURANT 285 BROAD STREET HARTFORD, CT 061153719	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,60

2150 CORBIN AVENUE NEW BRITAIN, CT 060532266

Total . . .

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JEWISH COMMUNITY FOUNDATION 333 BLOOMFIELD AVENUE SUITE D WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	AIM CHAI ENDOWMENT CAMPAIGN	1,000
JEWISH FAMILY SERVICES 333 BLOOMFIELD AVENUE SUITE A WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	ANNUAL FRIENDS CAMPAIGN TO EMBRACE A FAMILY	1,800
JEWISH FAMILY SERVICES 333 BLOOMFIELD AVENUE SUITE A WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	EMBRACE-A-FAMILY DONOR RECOGNITION EVENT	4,739
JEWISH FEDERATION OF GREATER HARTFORD 333 BLOOMFIELD AVENUE SUITE C WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	ANNUAL CAMPAIGN-2017 FUND	5,000
JUVENILE DIABETES RESEARCH FOUNDATION 20 BATTERSON PARK ROAD FARMINGTON. CT 060325402	N/A	PUBLIC CHARITY	NON EVENT NIGHT FUND A CURE	3,333

Total . 3a 207,150

Form 990PF Part XV Line 3 - Gran	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	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY 14TH FLOOR NEW YORK, NY 100041703	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500	
KATHARINE HEPBURN CULTURAL ARTS CENTER 300 MAIN STREET OLD SAYBROOK, CT 064752395	N/A	PUBLIC CHARITY	SUMMER GALA	10,000	
KATHARINE HEPBURN CULTURAL ARTS CENTER 300 MAIN STREET OLD SAYBROOK, CT 064752395	N/A	PUBLIC CHARITY	2016-2017 MEMBERSHIP CAMPAIGN	2,500	
KINGSWOOD OXFORD SCHOOL 170 KINGSWOOD ROAD WEST HARTFORD, CT 061191430	N/A	PUBLIC CHARITY	KO ANNUAL FUND	2,000	
KINGSWOOD OXFORD SCHOOL	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	300	

CHARITY

170 KINGSWOOD ROAD WEST HARTFORD, CT 061191430

207,150

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LITERACY VOLUNTEERS OF GREATER HARTFORD 30 ARBOR STREET HARTFORD, CT 061061215	N/A	PUBLIC CHARITY	8TH ANNUAL GALA	5,000
LITERACY VOLUNTEERS OF GREATER HARTFORD 30 ARBOR STREET HARTFORD, CT 061061215	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,000
MALTA HOUSE OF CARE FOUNDATION INC 19 WOODLAND STREET SUITE 21 HARTFORD, CT 061052372	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	11,500
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171543	N/A	PUBLIC CHARITY	ADULT SPECIAL NEEDS PROGRAMS	1,500
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171543	N/A	PUBLIC CHARITY	FRANK'S RETIREMENT CELEBRATION	500

Total . . 3a 207,150

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171543	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171543	N/A	PUBLIC CHARITY	ILENE SCHLOSS FUND FOR SPECIAL NEEDS	1,500
MAYOR'S CHARITY BALL PO BOX 270788 WEST HARTFORD, CT 061270477	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
MEMORIAL UNITED METHODIST CHURCH 867 WEST AVON ROAD AVON, CT 060012972	N/A	PUBLIC CHARITY	MEMORIALS BOOTH FUND	250
NATIONAL CONFERENCE FOR COMMUNITY AND JUSTICE 820A PROSPECT HILL ROAD WINDSOR, CT 060951559	N/A	PUBLIC CHARITY	ANNUAL HUMAN RELATIONS AWARD BANQUET	1,667

Total . 3a

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NATIONAL MULTIPLE SCLEROSIS SOCIETY 900 S BROADWAY SUITE 200 DENVER, CO 802094277	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON STREET NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	THESING TECHNOLOGY FUND	500
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON STREET NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	JOHN BUTLER TALCOTT SOCIETY	5,000
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON STREET NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	THE ART PARTY OF THE YEAR	3,333
NEW YORK-PRESBYTERIAN OFFICE OF DEVELOPMENT 654 WEST 170TH STREET NEW YORK, NY 100323501	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100

Total . .

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paic	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NOAH WEBSTER HOUSE & WEST HARTFORD HISTORICAL SOCIETY 227 SOUTH MAIN STREET WEST HARTFORD, CT 061073453	N/A	PUBLIC CHARITY	2016 ANNUAL APPEAL	500
NOAH WEBSTER HOUSE & WEST HARTFORD HISTORICAL SOCIETY 227 SOUTH MAIN STREET WEST HARTFORD, CT 061073453	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
OLD SAYBROOK AMBULANCE ASSOCIATION INC 316 MAIN STREET OLD SAYBROOK, CT 064752350	N/A	PUBLIC CHARITY	ANNUAL FUND DRIVE	250
OPERATION FUEL INC 75 CHARTER OAK AVENUE SUITE 2-240 HARTFORD, CT 061061903	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,500
RON FOLEY FOUNDATION 1000 FARMINGTON AVENUE SUITE 108A	N/A	PUBLIC CHARITY	RON'S RUN FOR THE ROSES 2017	1,200

WEST HARTFORD, CT 061072138 207,150

Total . .

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Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SALVATION ARMY-SOUTHERN NEW ENGLAND DIVISION 855 ASYLUM AVENUE HARTFORD, CT 061052801	N/A	PUBLIC CHARITY	OVERNIGHT CAMPING EXPERIENCE TO CHILDREN	1,200
SHORELINE SOUP KITCHENS & PANTRIES PO BOX 804 ESSEX, CT 064260804	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 100102325	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
SMITH-MAGENIS SYNDROME RESEARCH FOUNDATION 18620 SW 39TH ST MIRAMAR, FL 330292708	N/A	PUBLIC CHARITY	CT HOPS FOR HOPE	5,500

SMITH-MAGENIS SYNDROME RESEARCH FOUNDATION 18620 SW 39TH ST MIRAMAR, FL 330292708	N/A	PUBLIC CHARITY	CT HOPS FOR HOPE	5
SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 100102325	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	

NEW YORK, NY 100102325				
SMITH-MAGENIS SYNDROME RESEARCH FOUNDATION 18620 SW 39TH ST MIRAMAR, FL 330292708	N/A	PUBLIC CHARITY	CT HOPS FOR HOPE	5,500
SOUTH PARK INN 75 MAIN STREET	N/A	PUBLIC	UNRESTRICTED PURPOSE	500

| PUBLIC | CHARITY N/A

SOUTH PARK INN 75 MAIN STREET HARTFORD, CT 061061806 Total . 207,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOUTH PARK INN 75 MAIN STREET N/A PUBLIC UNRESTRICTED PURPOSE 500 HARTFORD, CT 061061806 CHARITY ST JUDE CHILDREN'S RESEARCH N/A PUBLIC UNRESTRICTED PURPOSE 200 HOSPITAL CHARITY 200 าดก

MEMPHIS, TN 381051905				
ST MARY HOME 2021 ALBANY AVENUE WEST HARTFORD, CT 061172789	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	20
TALCOTT MOUNTAIN SCIENCE CENTER & ACADEMY 324 MONTEVIDEO ROAD AVON. CT. 060013946	N/A	PUBLIC CHARITY	SCIENCE AND TECHNOLOGY EQUIPMENT	20,00

UCONN FOUNDATION N/A PUBLIC ANNUAL WHITE COAT GALA 1,666

2390 ALUMNI DRIVE UNIT 3206 CHARITY

STORRS, CT 062693206 Total . 207,150

3a

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIFIED THEATER PO BOX 271760 WEST HARTFORD, CT 061271760	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE SW WASHINGTON, DC 200242126	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,667
UNITED WAY OF CENTRAL AND NORTHEASTERN CONNECTICUT 30 LAUREL STREET HARTFORD, CT 061061361	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171545	N/A	PUBLIC CHARITY	ANCHOR FUND - 1500A	3,000
VILLAGE FOR FAMILIES & CHILDREN	N/A	PUBLIC	UNIFORM DRIVE	2,000

30 LAUREL STREET HARTFORD, CT 061061361				
UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171545	N/A	PUBLIC CHARITY	ANCHOR FUND - 1500A	3,000
VILLAGE FOR FAMILIES & CHILDREN	N/A	PUBLIC	UNIFORM DRIVE	2,000

UNIVERSITY OF HARTFORD 200 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171545	N/A	PUBLIC CHARITY	ANCHOR FUND - 1500A	3,0
VILLAGE FOR FAMILIES & CHILDREN 1680 ALBANY AVENUE	N/A	PUBLIC CHARITY	UNIFORM DRIVE	2,0

HARTFORD, CT 061051001

207,150 За

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Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN STREET HARTFORD, CT 061032990	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
WEST HARTFORD ART LEAGUE 37 BUENA VISTA ROAD WEST HARTFORD, CT 061073203	N/A	PUBLIC CHARITY	SPONSORSHIP DONATION	2,500
WEST HARTFORD ART LEAGUE 37 BUENA VISTA ROAD WEST HARTFORD, CT 061073203	N/A	PUBLIC CHARITY	ART LEAGUE'S SANDRA CHASE SCHOLARSHIP AWARD	2,500
WEST HARTFORD ART LEAGUE 37 BUENA VISTA ROAD WEST HARTFORD, CT 061073203	N/A	PUBLIC CHARITY	SIDEWALK REPAIR FOR THE ART LEAGUE	1,500
WEST HARTFORD ART LEAGUE 37 BUENA VISTA ROAD WEST HARTFORD, CT 061073203	N/A	PUBLIC CHARITY	ART LEAGUE'S PARTY IN THE PARK SPONSORSHIP	5,000

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207,150

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution

Name and address (home or business)

Amount contribution

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

or substantial contributor

3a

a Paid during the year				
WEST HARTFORD SYMPHONY ORCHESTRA PO BOX 370036	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000

PO BOX 370036 WEST HARTFORD, CT 061370036		
Total	 	 207.150

efile GRAPHIC print - DO NOT PR	OCESS	As Filed Da	ta -	D	LN: 93491226004108		
TY 2016 Accounting Fee	TY 2016 Accounting Fees Schedule						
	Name:	SANDRA 8	k ARNOLD CHASE	FAMILY			
		FOUNDAT	ION INC				
	EIN:	06-15621	52				
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

7,605

830

RETURN PREPARATION FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491226004108
TY 2016 Investments Corpora	ite Stock Sche	dule	
·			
Name:	SANDRA & ARNOL	D CHASE FAMILY	
	FOUNDATION INC		
EIN:	06-1562152		

	EIN: 06-1562152		
Name	of Stock	End of Year Book Value	End of Year Fair Market Value
AVANGRID, INC.		1,062,015	2,094,352

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491226004108		
TY 2016 Other Expenses Sche	dule					
Name:	SANDRA & ARN	OLD CHASE FAM:	II V			
Name.						
	FOUNDATION I	NC				
EIN:	06-1562152					
Other Expenses Schedule						
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

INVESTMENT RELATED FEES

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491226004108
TY 2016 Taxes Schedule				
Name: SANDRA & ARNOLD CHASE FAMILY FOUNDATION INC EIN: 06-1562152				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	13,000	0		0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491226004108					
Schedule B (Form 990, 990-EZ,	Schedule of Contri	Schedule of Contributors			
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, ► Information about Schedule B (Form 990, 990-EZ, o www irs gov/form990	r 990-PF) and its instructions	2016		
Name of the organizat SANDRA & ARNOLD CHA		Eı	mployer identification number		
FOUNDATION INC		06	6-1562152		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not tre	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
501(c)(3) taxable private foundation					
	ation filing Form 990, 990-EZ, or 990-PF that received, or property) from any one contributor. Complete Parts I ar				
Special Rules					
under sections : received from a	tion described in section 501(c)(3) filing Form 990 or 990 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A may one contributor, during the year, total contributions of the 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	(Form 990 or 990-EZ), Part the greater of (1) \$5,000 or	II, line 13, 16a, or 16b, and that		
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					
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form contributions exclusively for religious, charitable, etc., pucked, enter here the total contributions that were receive complete any of the parts unless the General Rule appliable, etc., contributions totaling \$5,000 or more during the	urposes, but no such contrib ed during the year for an exc lies to this organization beca	outions totaled more than \$1,000 clusively religious, charitable, etc., ause it received nonexclusively		
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special must answer "No" on Part IV, line 2, of its Form 990, of form 990PF, Part I, line 2, to certify that it does not meet	or check the box on line H o	of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions Cat No 306 0-PF	13X Schedule F	B (Form 990, 990-EZ, or 990-PF) (2016)		

lame of organization ANDRA & ARNOLD CHASE FAMILY OUNDATION INC		Employer identification 06-1562152	Employer identification number 06-1562152			
Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ARNOLD L CHASE		Person 🗸			
	C/O CHASE ENTERPRISES GOODWIN SQ225	\$ 8,300	Noncash			
	HARTFORD, CT06103		(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-			Person Payroll			
		<u>\$</u>	Noncash			
			(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll			
		\$	Noncash			
			(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person			
•			Payroll			
		\$	Noncash			
			(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll			
		\$	Noncash			
			(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
_			Person			
=	-	•	Payroll			
		\$	Noncash			
		0-11	(Complete Part II for noncash contributions)			

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization SANDRA & ARNOLD CH	n IASE FAMILY		ification number
FOUNDATION INC		06-15	562152
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (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
	-	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat SANDRA & ARNOLD FOUNDATION INC			Employer identification number 06-1562152
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) through exclusively religious, charictions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a)	/h) Dumage of sift	(a) Hop of wife	(d) Decembring of how wife in hold
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	: 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
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)