

For calendar year 2016, or tax year beginning 10-01-2016, and ending 09-30-2017

Name of foundation CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC		A Employer identification number 06-1562154	
Number and street (or P.O. box number if mail is not delivered to street address) CHASE ENTERPRISES225 ASYLUM STFL 29		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code HARTFORD, CT 06103		B Telephone number (see instructions) (860) 549-1674	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
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		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,609,162	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

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)	1,013,732			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	2	2		
	4 Dividends and interest from securities . . . . .	95,049	95,049		
	5a 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 _____				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	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 . . . . .	1,108,783	95,051		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	8,450	7,605		830
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .	13,732	0		0
	18 Taxes (attach schedule) (see instructions) . . . . .	15,000	0		0
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	300	300		0
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	37,482	7,905		830
	25 Contributions, gifts, grants paid . . . . .	297,671			297,671
	26 Total expenses and disbursements. Add lines 24 and 25	335,153	7,905		298,501
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	773,630			
	b Net investment income (if negative, enter -0-)		87,146		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	16,050	378	378
	2	Savings and temporary cash investments . . . . .	48,932	684	684
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	1,319,310	1,319,310	2,608,100
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,384,292	1,320,372	2,609,162	
Liabilities	17	Accounts payable and accrued expenses . . . . .	8,300	8,450	
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons	1,243,140	405,440	
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	1,251,440	413,890	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .	132,852	906,482	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	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	<b>Total net assets or fund balances</b> (see instructions) . . . . .	132,852	906,482	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	1,384,292	1,320,372		

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	132,852
2	Enter amount from Part I, line 27a . . . . .	2	773,630
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	906,482
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	906,482

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

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

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

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

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">           { If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	676,944	2,617,068	0 258665
2014	354,119	2,544,274	0 139183
2013	300,003	2,036,541	0 147310
2012	533,593	2,073,240	0 257372
2011	326,743	1,903,283	0 171673
<b>2 Total</b> of line 1, column (d)			<b>2</b> 0 974203
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 194841
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			<b>4</b> 2,342,331
<b>5</b> Multiply line 4 by line 3			<b>5</b> 456,382
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 871
<b>7</b> Add lines 5 and 6			<b>7</b> 457,253
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 298,501

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)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,743
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,743
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,743
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	10,551
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	10,551
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	8,808
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> 8,808 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> 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 . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CT		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>	No

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

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>JOHN P REDDING</b> Telephone no <b>(860) 549-1674</b>			

Located at **GOODWIN SQ 225 ASYLUM ST 29TH FL HARTFORD CT** ZIP+4 **06103**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

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

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 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 2016). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

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

<b>5a</b> During the year did the foundation pay or incur any amount to <ul style="list-style-type: none"> <li><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></li> <li><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></li> <li><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></li> <li><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></li> <li><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span></li> </ul> <b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>5b</b>		
<b>c</b> 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? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> If "Yes," attach the statement required by Regulations section 53.4945–5(d)			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes" to 6b, file Form 8870	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHERYL A CHASE C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	PRESIDENT/DIRECTOR 5 00	0	0	0
JOHN P REDDING C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	SECRETARY/DIRECTOR 1 00	0	0	0
DARA CHASE DYER C/O CHASE ENT 225 ASYLUM ST29TH FL HARTFORD, CT 06103	DIRECTOR 1 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				0

**Part VIII**

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services.		0

**Part IX-A**
**Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	0
<b>Total.</b> Add lines 1 through 3	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	2,353,358
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	24,643
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	2,378,001
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	2,378,001
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	35,670
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	2,342,331
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	117,117

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	117,117
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	1,743
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	1,743
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	115,374
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	115,374
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	115,374

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	298,501
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	298,501
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	298,501

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



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

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				115,374
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . . 233,333				
<b>b</b> From 2012. . . . . 431,673				
<b>c</b> From 2013. . . . . 199,922				
<b>d</b> From 2014. . . . . 228,651				
<b>e</b> From 2015. . . . . 559,389				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	1,652,968			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 298,501				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				115,374
<b>e</b> Remaining amount distributed out of corpus	183,127			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,836,095			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	233,333			
<b>9</b> <b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	1,602,762			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . . 431,673				
<b>b</b> Excess from 2013. . . . . 199,922				
<b>c</b> Excess from 2014. . . . . 228,651				
<b>d</b> Excess from 2015. . . . . 559,389				
<b>e</b> Excess from 2016. . . . . 183,127				

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

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a)</b> 2016	<b>(b)</b> 2015	<b>(c)</b> 2014	<b>(d)</b> 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) ) CHERYL A CHASE	
<b>b</b> List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed JOHN P REDDING CO CHASE ENTERPRISES GOODWIN SQ 225 ASYLUM ST HARTFORD, CT 06103 (860) 549-1674	
<b>b</b> The form in which applications should be submitted and information and materials they should include NO SPECIFIC FORM	
<b>c</b> Any submission deadlines NONE	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE	

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	297,671
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	2	
<b>4</b> Dividends and interest from securities. . . .			14	95,049	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .		0		95,051	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		95,051

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

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

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ <input type="checkbox"/>	PTIN
Firm's name ▶				Firm's EIN ▶
Firm's address ▶				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, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 752315129	N/A	PUBLIC CHARITY	GREATER HARTFORD GALA	3,000
AMERICAN LIVER FOUNDATION 127 WASHINGTON AVENUE NORTH HAVEN, CT 064731715	N/A	PUBLIC CHARITY	2017 LIVER LIFE WALKS	1,500
AURORA FOUNDATION 80 SOUTH MAIN STREET WEST HARTFORD, CT 061072408	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
BROADWAY CARES 165 WEST 46TH STREET SUITE 1300 NEW YORK, NY 100143807	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	150
BROOKLYN MUSEUM 200 EASTERN PARKWAY BROOKLYN, NY 112386052	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	125
<b>Total . . . . .</b> ► <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BUSHNELL 166 CAPITOL AVENUE HARTFORD, CT 061061621	N/A	PUBLIC CHARITY	2016-2017 ANNUAL FUND	15,000
CATHOLIC CHARITIES BROOKLYN & QUEENS 191 JORALEMON STREET BROOKLYN, NY 112014351	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
CHOATE ROSEMARY HALL 333 CHRISTIAN STREET WALLINGFORD, CT 064923818	N/A	PUBLIC CHARITY	PARENTS AND GRANDPARENTS GIVING	1,000
CLARK 225 SOUTH SOUTH ST WILLIAMSTOWN, MA 012672878	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191799	N/A	PUBLIC CHARITY	RABBI SILVER COURTYARD FUND	500
<b>Total . . . . .</b> ► <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191799	N/A	PUBLIC CHARITY	MISHKAN HANEFESH PRAYER BOOK FUND	80
CONGREGATION BETH ISRAEL 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191799	N/A	PUBLIC CHARITY	HIGH HOLY DAYS APPEAL	1,800
CONGREGATION BETH ISRAEL- SISTERHOOD 701 FARMINGTON AVENUE WEST HARTFORD, CT 061191799	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	54
CONNECTICUT BAR FOUNDATION 31 PRATT STREET HARTFORD, CT 061031631	N/A	PUBLIC CHARITY	2017 SUSTAINING LIFE FELLOW	250
CONNECTICUT CHILDREN'S MEDICAL CENTER 282 WASHINGTON STREET HARTFORD, CT 061063322	N/A	PUBLIC CHARITY	ACES FOR KIDS	500
<b>Total . . . . . ▶</b> <b>3a</b>				297,671



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD, CT 061032802	N/A	PUBLIC CHARITY	GENERAL SUPPORT	15,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD, CT 061032802	N/A	PUBLIC CHARITY	GALA TABLE AND TICKETS	3,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD, CT 061032802	N/A	PUBLIC CHARITY	GREEN GALA CHALLENGE	10,000
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD, CT 061032802	N/A	PUBLIC CHARITY	FUND A VISIT DONATION	270
CONNECTICUT SCIENCE CENTER 250 COLUMBUS BOULEVARD HARTFORD, CT 061032802	N/A	PUBLIC CHARITY	GREEN GALA SPONSORSHIP	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				297,671

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONNECTICUT WOMEN'S EDUCATION AND LEGAL FUND ONE HARTFORD SQUARE WEST SUITE 1-300 HARTFORD, CT 061061953	N/A	PUBLIC CHARITY	ONE WOMAN MAKES A DIFFERENCE ANNUAL AWARDS DINNER	425
CONNECTICUT WOMEN'S HALL OF FAME 320 FITCH STREET NEW HAVEN, CT 065151306	N/A	PUBLIC CHARITY	ANNUAL FUND	500
FIDELCO GUIDE DOG FOUNDATION INC 103 VISION WAY BLOOMFIELD, CT 060025322	N/A	PUBLIC CHARITY	KAZZI FUND FOR PUPPY CARE	100
FLORENCE GRISWOLD MUSEUM 96 LYME STREET OLD LYME, CT 063711426	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
FOODSHARE 450 WOODLAND AVENUE BLOOMFIELD, CT 060021342	N/A	PUBLIC CHARITY	ANNUAL FOOD DRIVE	1,000
<b>Total . . . . .</b> ► <b>3a</b>				297,671


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GAYLORD HOSPITAL PO BOX 400 WALLINGFORD, CT 064927048	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	200
GRACE ACADEMY 277 MAIN STREET HARTFORD, CT 061061818	N/A	PUBLIC CHARITY	SUMMER EXTENSION PROGRAM	350
GREATER HARTFORD ARTS COUNCIL 100 PEARL STREET HARTFORD, CT 061034509	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	2,500
HARTFORD PUBLIC LIBRARY 500 MAIN STREET HARTFORD, CT 061033075	N/A	PUBLIC CHARITY	BEYOND WORDS EVENT	500
HARTFORD STAGE 50 CHURCH STREET HARTFORD, CT 061031201	N/A	PUBLIC CHARITY	PRODUCTION SPONSORSHIP OF THE COMEDY OF ERRORS	35,000
<b>Total . . . . .</b> <b>3a</b>				297,671

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HARTFORD STAGE 50 CHURCH STREET HARTFORD, CT 061031201	N/A	PUBLIC CHARITY	SUPPORT FOR THE 2017 GALA	1,500
HARTFORD SYMPHONY ORCHESTRA 166 CAPITOL AVENUE HARTFORD, CT 061061629	N/A	PUBLIC CHARITY	ANNUAL FUND	5,000
HOLE IN THE WALL GANG CAMP 555 LONG WHARF DRIVE NEW HAVEN, CT 065116107	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
HOUSE OF BREAD 1453 MAIN STREET HARTFORD, CT 061202726	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
JEWISH FAMILY SERVICES 333 BLOOMFIELD AVENUE SUITE A WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	ANNUAL FRIENDS CAMPAIGN	2,500
<b>Total . . . . .</b> ► <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEWISH FEDERATION OF GREATER HARTFORD 333 BLOOMFIELD AVENUE SUITE C WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	5,000
JEWISH MUSEUM 1109 FIFTH AVENUE NEW YORK, NY 101280118	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	1,000
JUNIOR ACHIEVEMENT OF SOUTHWEST NEW ENGLAND INC 70 FARMINGTON AVENUE HARTFORD, CT 061051538	N/A	PUBLIC CHARITY	HARTFORD HALL OF FAME SPONSORSHIP	1,500
JUVENILE DIABETES RESEARCH FOUNDATION 20 BATTERSON PARK ROAD FARMINGTON, CT 060324502	N/A	PUBLIC CHARITY	NON EVENT NIGHT FUND A CURE	3,334
KINGSWOOD OXFORD 170 KINGSWOOD ROAD WEST HARTFORD, CT 061191430	N/A	PUBLIC CHARITY	KO ANNUAL FUND	5,000
<b>Total . . . . .</b> ► <b>3a</b>				297,671

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LITERACY VOLUNTEERS OF GREATER HARTFORD 30 ARBOR STREET HARTFORD, CT 061061374	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
LOAVES AND FISHES MINISTRIES INC 649 PROSPECT AVENUE HARTFORD, CT 061051230	N/A	PUBLIC CHARITY	ROSOFF MEMORIAL HANUKKAH CERTIFICATE	100
MAKE A WISH FOUNDATION PO BOX 97104 WASHINGTON, DC 200907104	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	50
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	JONATHAN'S DREAM	25,000
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	18TH ANNUAL MANDELL JCC SCHOLARSHIP TOURNAMENT	1,000
<b>Total</b> . . . . . 				297,671
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MANDELL JEWISH COMMUNITY CENTER 335 BLOOMFIELD AVENUE WEST HARTFORD, CT 061171500	N/A	PUBLIC CHARITY	PILLARS SOCIETY	10,000
MARK TWAIN HOUSE & MUSEUM 351 FARMINGTON AVENUE HARTFORD, CT 061051230	N/A	PUBLIC CHARITY	ANNUAL FUND	1,000
MENDED HEARTS INC 501 DZEN WAY SOUTH WINDSOR, CT 060742087	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	150
MERCY HOUSING AND SHELTER CORPORATION 211 WETHERSFIELD AVENUE HARTFORD, CT 061141148	N/A	PUBLIC CHARITY	2017 DREAMS CAN COME TRUE HOMECOMING CELEBRATION	3,500
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 100280198	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
<b>Total . . . . . ▶</b> <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MUSEUM OF FINE ARTS BOSTON 465 HUNTINGTON AVENUE BOSTON, MA 021155523	N/A	PUBLIC CHARITY	PATRON PROGRAM	3,000
MUSEUM OF MODERN ART 11 WEST 53 STREET NEW YORK, NY 100195401	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
MY SISTERS PLACE 237 HAMILTON STREET SUITE 203 HARTFORD, CT 061062983	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
NATIONAL CONFERENCE FOR COMMUNITY AND JUSTICE 820A PROSPECT HILL ROAD WINDSOR, CT 060951559	N/A	PUBLIC CHARITY	ANNUAL HUMAN RELATIONS AWARD BANQUET	1,666
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON STREET NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
<b>Total . . . . .</b> ► <b>3a</b>				297,671



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW BRITAIN MUSEUM OF AMERICAN ART 56 LEXINGTON STREET NEW BRITAIN, CT 060521412	N/A	PUBLIC CHARITY	GALA	3,333
PARKINSON'S DISEASE FOUNDATION 1359 BROADWAY SUITE 1509 NEW YORK, NY 100187867	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
PEABODY ESSEX MUSEUM 161 ESSEX STREET SALEM, MA 019703726	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	400
PETIT FAMILY FOUNDATION 32 WHITING STREET PLAINVILLE, CT 060622219	N/A	PUBLIC CHARITY	2017 ALBANO BALLET BENEFIT FOR PFF	600
RONALD MCDONALD HOUSE OF SPRINGFIELD 34 CHAPIN TERRACE SPRINGFIELD, MA 011071704	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
<b>Total . . . . .</b> ► <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SIMON WIESENTHAL CENTER 1399 SOUTH ROXBURY DRIVE LOS ANGELES, CA 900354709	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	600
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 381051905	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	500
ST MARTHA'S CHURCH 214 BRAINARD RD ENFIELD, CT 060822609	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	200
TUFTS UNIVERSITY 80 GEORGE STREET MEDFORD, MA 021555519	N/A	PUBLIC CHARITY	FUND FOR ARTS & SCIENCES	25,000
UCONN FOUNDATION 2390 ALUMNI DRIVE UNIT 3206 STORRS, CT 062693206	N/A	PUBLIC CHARITY	ANNUAL WHITE COAT GALA	1,667
<b>Total . . . . . ▶</b> <b>3a</b>				297,671

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UCONN FOUNDATION 2390 ALUMNI DRIVE UNIT 3206 STORRS, CT 062693206	N/A	PUBLIC CHARITY	LAURA Z AND MARK C YELLIN CANCER RESEARCH FUND	500
UCONN LAW SCHOOL FOUNDATION 45 ELIZABETH STREET HARTFORD, CT 061052213	N/A	PUBLIC CHARITY	LAW SCHOOL ANNUAL FUND	5,000
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 061061374	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	10,000
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN STREET HARTFORD, CT 061032990	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	50,000
<b>Total . . . . .</b> ► <b>3a</b>				297,671

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN STREET HARTFORD, CT 061032990	N/A	PUBLIC CHARITY	ANNUAL FUND IN HONOR OF DUFF ASHMEAD AND ERIC ORT	500
WADSWORTH ATHENEUM MUSEUM OF ART 600 MAIN STREET HARTFORD, CT 061032990	N/A	PUBLIC CHARITY	10TH ANNIVERSARY OF SLENDOR	5,000
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 100142790	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
WOUNDED WARRIOR PROJECT PO BOX 758540 TOPEKA, KS 666758540	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	100
YWCA HARTFORD REGION 135 BROAD STREET HARTFORD, CT 061051230	N/A	PUBLIC CHARITY	UNRESTRICTED PURPOSE	250
<b>Total . . . . .</b> <b>3a</b>				297,671

**TY 2016 Accounting Fees Schedule**

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

**EIN:** 06-1562154

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RETURN PREPARATION FEE	8,450	7,605		830

**TY 2016 All Other Program Related Investments Schedule**

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

Category	Amount
N/A	0

**TY 2016 Investments Corporate Stock Schedule**

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

**EIN:** 06-1562154

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AVANGRID, INC.	1,319,310	2,608,100

**TY 2016 Loans from Officers Schedule**

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

**EIN:** 06-1562154

<b>Item No.</b>	<b>1</b>
<b>Lender's Name</b>	CHERYL A CHASE
<b>Lender's Title</b>	OFFICER
<b>Original Amount of Loan</b>	405440
<b>Balance Due</b>	405440
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	DEMAND
<b>Interest Rate</b>	0.000000000000
<b>Security Provided by Borrower</b>	NONE
<b>Purpose of Loan</b>	TO FUND CHARITABLE EXPENDITURES
<b>Description of Lender Consideration</b>	CASH
<b>Consideration FMV</b>	



**TY 2016 Other Expenses Schedule**

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

**EIN:** 06-1562154

**Other Expenses Schedule**

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

**TY 2016 Taxes Schedule**

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

**EIN:** 06-1562154

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	15,000	0		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC	<b>Employer identification number</b> 06-1562154

Organization type (check one)

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

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

General Rule

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

Special Rules

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

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

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

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

<b>Name of organization</b> CHERYL CHASE & STUART BEAR FAMILY FOUNDATION INC	<b>Employer identification number</b> 06-1562154
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<b>Part I</b> <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHERYL ANNE CHASE C/O CHASE ENTERPRISES GOODWIN SQ 22 HARTFORD, CT06103	\$ 1,013,732	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Employer identification number

06-1562154

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

**Name of organization**CHERYL CHASE & STUART BEAR FAMILY  
FOUNDATION INC**Employer identification number**

06-1562154

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

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee