## 2949133501616

Form **990-PF** Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 15, 2018 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.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

For	caler	dar year 2017 or tax year beginning		, and ending		
Nai	ne of	foundation			A Employer identification	number
		IE A - BROWN FUND, INC			06-6032102	
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		BOX 1400 SMS			203-255-11	08
		own, state or province, country, and ZIP or foreign p RFIELD,CT 06825	postal code		C If exemption application is po	ending, check here
G	heck	all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2 Foreign organizations me	ating the 85% test
		Address change	Name change	n d	2 Foreign organizations me check here and attach co	mputation
H_(		type of organization: Section 501(c)(3) e			E If private foundation sta	
<u> </u>		ction 4947(a)(1) nonexempt charitable trust X  arket value of all assets at end of year J Account	ing method: X Cash	Accrual	under section 507(b)(1)	
		· I —	ther (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	. —
	\$	2,199,456. (Part I, colu		s.)	under section sor(b)(1)	(D), CHECK HOLE
	iřt*I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B				
<b>~</b>	3	Interest on savings and temporary cash investments	248.	248.		
2019	4	Dividends and interest from securities	45,490.	45,490.		
		Gross rents				
<b>8</b>		Net rental income or (loss)	123,448.			
41	Da h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 62 assets on line 62	123,440.			
	7	assets on line 6a TOZ, 507.  Capital gain net income (from Part IV, line 2)		123,448.		
_ ~	8	Net short-term capital gain				
<u>III</u>	9	Income modifications				
SCANNED	10a	Gross sales less returns and allowances	979070000000000000000000000000000000000		V2000 2000 2000 2000 2000 2000 2000 200	
5		Less Cost of goods sold		22 (100 200 200 100 100 100 100 100 100 100		***************************************
り		Gross profit or (loss)	30.	30.		STATEMENT 1
	12	Other income  Total Add lines 1 through 11	169,216.	169,216.		DIATEMENT.
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
es Ses	16a	Legal fees				,
ens	b	Accounting fees	10.700	2 2 2 2 2	· · · · · · · · · · · · · · · · · · ·	2 226
Ä	C	Other presspecifies ED STMT 2	18,793.	9,396.		9,396.
Administrative Expense	17	Paxes NOV 1 9 2018 CTMT 3	912.	912.		0.
stra	18 19		714.	712.		
Ë	20	Bepreciation and deptetion Congression Congression	· · · · · · · · · · · · · · · · · · ·			88*X*3665.8F9888079* 4C7386*46* 94*557*577
Adn	21	Trave One Dee Nandmeetings		-, <u>-1817-7-7-7</u>		
and,	22 L	Printing and publications				
a a	23	Other expenses STMT 4	677.	0.		0.
ratir	24	Total operating and administrative				
Operating		expenses. Add lines 13 through 23	20,382.	10,308.	19998. 1998. 4-2-5080 testocolorium (1884 test	9,396.
J	23	Contributions, gifts, grants paid	86,000.			86,000.
	26	Total expenses and disbursements	106,382.	10,308.		95,396.
_	97	Add lines 24 and 25 Subtract line 26 from line 12:	100,302.	10,300.		73,390
		Excess of revenue over expenses and disbursements	62,834.		ACO. 9 00000000000000000000000000000000000	A STATE OF THE STA
		Net investment income (if negative, enter -0-)		158,908.		
		Adjusted net income (if negative, enter -0-)			N/A ·	

4

βĞ	art.	Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_			13,259.	10,717.	10,717.
	ı	Cash - non-interest-bearing	13,239.	10,717.	10,717.
		Savings and temporary cash investments	NAME OF THE OWNER O	\$2.5550000 \$2000 \$2.500 \$2.500 \$2.500	
	3	Accounts receivable -	73.746.8545.37.78.08/498/438		
		Less: allowance for doubtful accounts	\$1797774351427734783454545454545555	850. 6200164005F120215F1, 9206F170514 C	9:29:488:382:3883:000.00382.36888844/
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	1	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	southern controles of president states of the second states of the secon	273.473.46327 v. senso27:000000000000000000000000000000000000	V 0000000 (0000 100 100 100 100 100 100 1
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ş	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 5	770,707. 553,520.	853,973.	1,548,708.
	C	Investments - corporate bonds STMT 6	553,520.	605,520.	614,855.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	94,664.	25,143.	25,176.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,432,150.	1,495,353.	2,199,456.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable	•		
	22	Other liabilities (describe )			
				_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
	1	Unrestricted			
<u>a</u>	25	Temporarily restricted			
<b>Assets or Fund Balanc</b>	26	Permanently restricted			
믿		Foundations that do not follow SFAS 117, check here			
丘		and complete lines 27 through 31	i		
S S		Capital stock, trust principal, or current funds	1,432,150.	1,495,353.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Net	30	Total net assets or fund balances	1,432,150.	1,495,353.	
	31	Total liabilities and net assets/fund balances	1,432,150.	1,495,353.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_					· · · · · · · · · · · · · · · · · · ·
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		1 420 150
	•	t agree with end-of-year figure reported on prior year's return)		1	1,432,150.
		amount from Part I, line 27a		2	62,834.
		increases not included in line 2 (itemize) NON TAXABLE	DISTRIBUTIONS		369.
		ines 1, 2, and 3		4	1,495,353.
		eases not included in line 2 (itemize)			0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	1,495,353.
					Form <b>990-PF</b> (2017)

Form 990-PF (2017) ELSI Part IV Capital Gains a	E A. BROWN FUNI	), INC	Income			06-603	32102 Page
	he kınd(s) of property sold (for ex ehouse; or common stock, 200 sh		ate,	( <b>b)</b> How a P - Puro D - Don	cquired chase ation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAINS					P		
b SEE ATTACHED					P		12/31/17
С					P		
d							
_e						<del></del> .	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (los ((e) plus (f) minus	s (g))
a 15,523.							15,523
b 157,998.			56,923				101,075
c 9,386.			2,536				6,850
d							
e		<u> </u>					
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.	_		(I) Gains (Col. (h) gai	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) col. (1), if any		C	ol. (k), but not less th Losses (from col.	an -0-) <b>or</b> (h))
	as 01 12/01/05	OVEI	COI. (j), it ally	+			15,523
<u>a</u>	<del></del>						101,075
<u>b</u>		<del> </del>		+			6,850
<u>c</u>				+			0,030
d				<del></del>	<del> </del>	<del> </del>	
e	C.,			$\overline{}$	Γ		
2 Capital gain net income or (net cap	ital loss) $ \begin{cases} & \text{if gain, also entity} \\ & \text{if (loss), enter} \end{cases} $	er in Part I, line 0- in Part I, line	: / e 7	<b>}</b>			123,448
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, of (loss), enter -0- in Part I, line 8		and (6):		}	!	N/2	A
Part V   Qualification Un	der Section 4940(e) for	r Reduced	Tax on Net In	vestm	ent Inc		<u> </u>
(For optional use by domestic private of the section 4940(d)(2) applies, leave the	foundations subject to the section						
Was the foundation liable for the section of "Yes," the foundation doesn't qualify			*	d?			Yes X No
1 Enter the appropriate amount in ea	ich column for each year; see the	instructions bef	fore making any entr	ies.			
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying di	stributions	Net value of nonc	(c) charitable	use assets	Distr s (col. (b) d	(d) ibution ratio ivided by col. (c))
2016	10	01,373.		1,95	3,525		.05189
2015	10	02,942.		2,01	2,891	L.	.05114
2014		93,894.			5,572		.04590
2013		99,913.			4,635		.05137
2012	1	04,088.	l	1,89	1,36	7.	.05503
2 Total of line 1, column (d)						2	.25534
0 - 4	المقمة مطاة ماليان البراء المستنصف ممسط بالمستار	Landina Obit Ci	O b., theben	-4		1 1	

	Calendar year (or tax year beginning in)	ndar year (or tax year beginning in)  Adjusted qualifying distributions  Net value of noncharitable-use assets			(col. (b) divided by col. (c))
	2016	101,373.	1,953,525.		.051892
	2015	102,942.	2,012,891.		.051141
	2014	93,894.	2,045,572.		.045901
	2013	99,913.	1,944,635.		.051379
	2012	104,088.	1,891,367.		.055033
2	, , ,			2	.255346
3	Average distribution ratio for the 5-year bathe foundation has been in existence if less	•	0, or by the number of years	3	.051069
4	Enter the net value of noncharitable-use as		4	2,092,538.	
5	Multiply line 4 by line 3			5	106,864.
6	Enter 1% of net investment income (1% of	Part I, line 27b)	•	6	1,589.
7	Add lines 5 and 6			7	108,453.
8	Enter qualifying distributions from Part XII,	, line 4		8	95,396.
	If line 8 is equal to or greater than line 7, cl See the Part VI instructions.	heck the box in Part VI, line 1b, and comp	olete that part using a 1% tax rate.	-	000 DE

Part Mil Excise Tax Based on Investment Income (Section 49)	940(a) 4940(b) 4940(e) or		e instructions)
14-0 1445/4 X 8474		- Texas	* moti dotions/
1a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter:(attach copy of letter if		1	3,178.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	3,170.		
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter		3333333 377	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	, others, enter -u-)	2	3,178.
3 Add lines 1 and 2	4 4th 0 \	3	3,178.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y, others, enter -o-)	4	3,178.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5 .	3,170.
6 Credits/Payments:	6a   744		
a 2017 estimated tax payments and 2016 overpayment credited to 2017			
b Exempt foreign organizations - tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)		370000000000000000000000000000000000000	
d Backup withholding erroneously withheld	_6d O	M-0 (0) 1/2 0/	744.
7 Total credits and payments. Add lines 6a through 6d		7	8.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	атаспео	8	2,442.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	2,442.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpain	ı	10	•
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded >	11	
Rant VII A Statements Regarding Activities			Yes No
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egisiation or did it participate or interve	ie in •	NAPALE ST
any political campaign?	0.0		1a X 1b X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pure		inition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	es of any materials published or		
distributed by the foundation in connection with the activities.			
c Did the foundation file Form 1120-POL for this year?			1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	_		
(1) On the foundation. > \$ 0 . (2) On foundation manage		<u>•</u>	
e Enter the reimbursement (if any) paid by the foundation during the year for political experimentagers. > \$ 0.	enditure tax imposed on foundation	•	
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?		2 X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	ng instrument, articles of incorporation,	or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	vear?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	N/A	<del></del>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ar?		5 X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either:		
By language in the governing instrument, or		•	
By state legislation that effectively amends the governing instrument so that no manda	story directions that conflict with the sta	te law	
remain in the governing instrument?	and the common than the common than the ca	10 1017	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part II col (c) and Part XV		7 X
γ Dia the foundation have at least φ0,000 in assets at any time during the year. If 100, oc	implete rate is, con (o), and rate xv		
8a Enter the states to which the foundation reports or with which it is registered. See instru	ctions. NONE		
Sa Citto and States to Millor the regulation reports of With Millor it is registered. Occ motiful			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	ie Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation	SEE STATE	MENT 8	8 8b X
			200 220 2
9 Is the foundation claiming status as a private operating foundation within the meaning of year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," or		ici iuai	9 x 2
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a set			10 X
The any persons become substantial contributors during the tax year. If Yes, attach a scr	require asting their names and addresses		Form <b>990-PF</b> (2017)

Pe	Interview Statements Regarding Activities (continued)		
		Ye	s No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		İ
	If "Yes," attach statement. See instructions	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13 X	
	Website address ► N/A		
14	The books are in care of ▶ THOMAS HARDING Telephone no. ▶ 203-2		8
	Located at ►PO BOX *1400, FAIRFIELD, CT ZIP+4 ►0	<u>6825                                    </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the year	N/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	Ye	
	securities, or other financial account in a foreign country?	16	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		
	foreign country		
ŖŖ	Int 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.	₩₩ Ye	s No
1a	During the year, did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person?		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
	(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)?		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		
	If the foundation agreed to make a grant to or to employ the official for a period after		
	termination of government service, if terminating within 90 days.)		
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b	37 ( 2007 221
	Organizations relying on a current notice regarding disaster assistance, check here	<b>***</b>	
r	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 2017?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<b>202 30</b>	
-	defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		
_	before 2017? Yes X No		
	If 'Yes,' list the years ,,		
h	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 all years listed, answer "No" and attach		
	statement - see instructions.)  N/A	2b	W. MOXXX
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<b>X X X X X</b>
٠	the provisions of section 4542(a)(2) are being applied to any of the years hated in 2a, list the years here.		
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
Ja	during the year?  Yes X No		
	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after		
J	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,		<b>3  </b>
	Form 4720, to determine if the foundation had excess business holdings in 2017.)  N/A	3b	nes (786858728)
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	7 <b>a</b>	
U	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	X
		orm <b>990-P</b>	
	•	U, III	- (/

orm 990-PF (2017) ELSIE A. BROWN FUND, INC			06-60321	02	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:			a di di	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No 🖁		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	88		
any voter registration drive?		Yo	es 🗓 No 🖔		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗓 No 📗		
(4) Provide a grant to an organization other than a charitable, etc., organization			l 🖔		
4945(d)(4)(A)? See instructions		Ye	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fe	or	3		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations	\$ \$		
section 53.4945 or in a current notice regarding disaster assistance? See instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h		•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?		I/A 🗀 Ye	es 🔲 No 🤻		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		8		
a personal benefit contract?			es 🗶 No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			<u> </u>		<b>****</b>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es 🗶 No 🌡		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Rant VIII Information About Officers, Directors, Truste		nagers, Highly			
Paid Employees, and Contractors		0 , 0 ,			
List all officers, directors, trustees, and foundation managers and the	neir compensation.		-		
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and delerred	(e) Exp	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account allowa	
UDITH HAMBLEN	PRESIDENT				
1 HUNTINGTON LANE	1				
ORWICH, CT 06360	1.00	0.	0.		0.
	SECRETARY				
25 GRAFTON ST.	1	,			
CHEVY CHASE, MD 20815	1.00	0.	0.		0.
	TREASURER				
PO BOX 1400 SMS					
AIRFIELD, CT 06825	1.00	0.	0.		0.
	1				
,	1				
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."			
( ) I I I I I I I I I I I I I I I I I I	(b) Title, and average		(d) Contributions to employee benefit plans	( <b>e</b> ) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account allowa	
NONE					
	1				
		•	<del></del>		
	1				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<del> </del>			
	1				
		<u> </u>		···	
	1				
				-	
	1				

Total number of other employees paid over \$50,000

Form 990-PF (2017) ELSIE A. BROWN FUND, INC	06-60.	32102 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	ヿ	
	7	
	7	
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 statis	itical information such as the	Cynonogo
number of organizations and other beneficiaries served, conferences convened, research papers produced	uced, etc	Expenses
1 N/A		
2		
•		
3	<del> </del>	
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1N/A		
	<del></del>	
2		
	<del></del>	
All the second of the second o		
All other program-related investments. See instructions.		
3		
	<del></del>	
Total. Add lines 1 through 3		0.
TOME FOR BITCH THE PROPERTY OF		

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Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations, :	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	2,085,246.
	Average of monthly cash balances	1b	39,158.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	2,124,404.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,124,404.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,866.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,092,538.
6	Minimum investment return. Enter 5% of line 5	6	104,627.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here   in and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	104,627.
2a	Tax on investment income for 2017 from Part VI, line 5	-	
b	Income tax for 2017. (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	3,178.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	101,449.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	101,449.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	101,449.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	95,396.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	95,396.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	95,396.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d</b> ) 2017
1 Distributable amount for 2017 from Part XI,		· · · · · · · · · · · · · · · · · · ·		
line 7		!		101,449.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only	•		0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 1,420. b From 2013 3,205.			•	
c From 2014			,	
d From 2015 3,143.				
e From 2016 5, 181.				
f Total of lines 3a through e	12,949.			
4 Qualifying distributions for 2017 from	23/3230			
Part XII, line 4: ► \$ 95, 396.				
a Applied to 2016, but not more than line 2a			0.	
· · · · · · · · · · · · · · · · · · ·				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>			05 206
d Applied to 2017 distributable amount				95,396.
e Remaining amount distributed out of corpus	0.			C 053
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	6,053.			6,053.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,896.			
b Prior years' undistributed income. Subtract				•
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously			•	
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must	!			
be distributed in 2018	i			0.
7 Amounts treated as distributions out of		,		<u> </u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
· · · · · · · · · · · · · · · · · · ·				
8 Excess distributions carryover from 2012	0.			
not applied on line 5 or line 7	U •	··· · ·		
9 Excess distributions carryover to 2018	c 00c			
Subtract lines 7 and 8 from line 6a	6,896.	·····	<del></del>	
Analysis of line 9.				•
a Excess from 2013				
b Excess from 2014	•		•	
c Excess from 2015 1,715.				
d Excess from 2016 5,181.				
e Excess from 2017				

	. BROWN FUN				032102 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2017, enter the date of t	the ruling	▶ ∟		
b Check box to indicate whether the found	dation is a private operation	ng foundation described is		4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		/
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	/ (e) Total
investment return from Part X for					
each year listed		ĺ			√
b 85% of line 2a					
c Qualifying distributions from Part XII,				/ /	
line 4 for each year listed					
d Amounts included in line 2c not				/	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly				/	
for active conduct of exempt activities.			/	<b>'</b>	
•					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			/	<u> </u>	+
alternative test relied upon:				İ	
a "Assets" alternative test - enter:			/		
(1) Value of all assets			<del>                                     </del>	<del>-</del>	
(2) Value of assets qualifying			/		
under section 4942(j)(3)(B)(i)			/		
b "Endowment" alternative test - enter	]	/			
2/3 of minimum investment return shown in Part X, line 6 for each year	]				
- listed					<u> </u>
c "Support" alternative test - enter:					+
(1) Total support other than gross					
investment income (interest,	•				
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>				<u> </u>
Part XV Supplementary Info	rmation (Complet	te this part only i	the foundation	had \$5.000 or mo	re in assets
at any time during t				<b></b>	
<ul> <li>Information Regarding Foundation</li> <li>List any managers of the foundation wh</li> </ul>	_	than 20/ of the total contr	hutions recoved by the	foundation before the elec	co of any tay
year (but only if they have contributed n			ibutions received by the	Touridation before the cio	SE OI ally tax
	40,000). (000 0	00			
NONE	100/ 14b			an of the supership of an	
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large portion	on of the ownership of a p	arthership or
• ,	Bu 1070 or grouter interes	,			
NONE					
2 Information Regarding Contributi		• • • •	-		
Check here I if the foundation of	•	•		·	rests for funds. If
the foundation makes gifts, grants, etc.,			<del></del>	<del> </del>	<u> </u>
a The name, address, and telephone num			ations should be address	sed:	
ELSIE A BROWN FUND,		L			
PO BOX 909, NORWICH,	CT 06360				
<b>b</b> The form in which applications should be		-	ould include:		
FURNISHED UPON REQUE	ST. SCHOLARS	SHIPS ONLY.		· · -, - · · · · · · · · · · · · · ·	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on award				other factors:	
NEW LONDON COUNTY RE	SIDENCY FOR	SCHOLARSHIE	PS		

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		y section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	, unounc	1411011011110
a			<u> </u>		
b	-				
C					
d	-		$\vdash$		<del></del>
e	-		$\vdash$		
f	-		-		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				0.40	
investments	<b></b>		14	248.	
4 Dividends and interest from securities	- 2	<del></del>	14	45,490.	
5 Net rental income or (loss) from real estate:	, "		ľ		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					<del></del>
7 Other investment income			14		
8 Gain or (loss) from sales of assets other					
than inventory			18	123,448.	
9 Net income or (loss) from special events			<b></b>		
10 Gross profit or (loss) from sales of inventory			<b> </b>		
11 Other revenue:					
a	_	30.	14		
b					
C					
d			L		· · · · · · · · · · · · · · · · · · ·
e					
12 Subtotal. Add columns (b), (d), and (e)		30.		169,186.	0.
13 Total Add line 12, columns (b), (d), and (e)		•		13	169,216.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nlishment of Exe	emnt Pu	rnoses	
Telationomp of Activities				. p	
Line No. Explain below how each activity for which inc	ome is reported in	column (e) of Part XVI-A	contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other than	by providing fund	s for such purposes)			· · · · · · · · · · · · · · · · · · ·
				·	

Firm's address ▶ 6 EXECUTIVE DRIVE, SUITE 111 FARMINGTON, CT 06032

Part	XVII	Information Re Exempt Organ	-	sfers to a	nd Transacti	ons and	d Relationsh	ips With Non	charitable		
<b>1</b> Did	the or	<del>_</del>		of the following	on with any other o	nanization	described in sect	uon 501(c)		Yes	No
	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								1		
•			•			Lutiono				1 :	
	<ul> <li>a Transfers from the reporting foundation to a noncharitable exempt organization of:</li> <li>(1) Cash</li> </ul>							1a(1)	<b>-</b>	Х	
٠.	Other	accate							1a(2)		X
٠.		assets sactions:							14(2)		<u> </u>
		of assets to a noncharital	ble avernet organiza	tion					1b(1)	<del> </del>	Х
٠,			· -						1b(2)		X
٠,		lases of assets from a noi	•	organization							X
٠,		l of facilities, equipment,	or other assets						1b(3)	├──	X
		oursement arrangements							1b(4)		X
		or loan guarantees						•	1b(5)		X
٠.		rmance of services or me	•	-					1b(6)		X
	-	facilities, equipment, ma	•						<u>1c</u>	<u>.                                    </u>	
		ver to any of the above is								sets,	
		s given by the reporting fo			ed less than fair ma	irket value	in any transaction	or sharing arrangei	ment, show in		
		) the value of the goods,				<del> </del>	1 75				
(a) Line n	10	(b) Amount involved	(c) Name o		e exempt organizati	on	(d) Description	n of transfers, transaction	ons, and sharing arr	angemer	its
				N/A		<del></del>	ļ				
					<del> </del>		ļ	<del></del>			
					1						
											_
		· -									
							;				
		idation directly or indirect 501(c) (other than section			or more tax-exem	ot organiza	tions described		Yes	X	] No
b If"	Yes," co	mplete the following sch	edule.								
		(a) Name of org			(b) Type of organ	nization		(c) Description of re	elationship		
		N/A									
		<u> </u>									
•											
						ĺ					
		penalties of perjury, I declare t							May the IRS	diecues t	nie
Sign	and be	lief, it is true, correct, and com	plete Declaration of pre	eparer (other than	taxpayer) is based on	all informatio	n of which preparer h	as any knowledge	return with the	e prepare	# **
Here	Thomas & Marchine 111.9.18					TREAS	JRER	X Yes		No	
	Sign	ature of officer or trustee	· KYWVII	ang	Date	* V	Title	· · · · · · · · · · · · · · · · · · ·			
	1	Print/Type preparer's na	ıme	Preparer's s		ا م	Date	Check If	PTIN		
		- 31 EE.		'=127				self- employed			
Paid		JOHN SALEM	I	<b>ЈОНИ</b>	ALEM T	_   <sub>1</sub>	1/02/18	,	P00576	616	
Prep	arer	Firm's name ► UHY			LAR		,,,	Firm's EIN ► 3	6 - 43825	62	
Use Only		THIN SHAINE POIL		~				Thin 3 Line 5	- 15025	~ <b>-</b>	

Phone no. 860-676-9020

FORM 990-PF	OTHER I	NCOME		STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
		30.	30.	
TOTAL TO FORM 990-PF, PART I,	LINE 11 ==	30.	30.	
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT 2
DESCRIPTION			(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
	18,793.	9,396	•	9,396.
TO FORM 990-PF, PG 1, LN 16C	18,793.	9,396	•	9,396.
FORM 990-PF	TAX (A) EXPENSES	ES (B) NET INVEST-	(C)	STATEMENT 3  (D)  CHARITABLE
DESCRIPTION	PER BOOKS			PURPOSES
FOREIGN TAXES FEDERAL TAXES DE TAX	208. 642. 62.	642	•	0 . 0 . 0 .
TO FORM 990-PF, PG 1, LN 18	912.	912	•	0
FORM 990-PF	OTHER E	XPENSES	2	STATEMENT 4
	(A) EXPENSES		(C) ADJUSTED NET INCOME	(D) CHARITABLE
DESCRIPTION	PER BOOKS	MENT INCOME	MB1 INCOME	PURPOSES
DESCRIPTION OFFICE EXPENSES ANNUAL REPORT	PER BOOKS 236. 441.	, O.	·	PURPOSES  0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS - STOCK		853,973.	1,548,708.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	853,973.	1,548,708.
FORM 990-PF	CORPORATE BONDS		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS - BONDS		605,520.	614,855
TOTAL TO FORM 990-PF, PART	II, LINE 10C	605,520.	614,855.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CASH EQUIVALENTS	COST	25,143.	25,176
TOTAL TO FORM 990-PF, PART	II, LINE 13	25,143.	25,176

			·	
FORM 990-PF	EXPLANATION CONCERNING	PART VII-A,	LINE 8B	STATEMENT 8

## EXPLANATION

CT DOES NOT REQUIRE FILING OF 990-PF IF THERE IS NO SOLICITATION OF THE PUBLIC FOR DONATIONS; NOR DOES DE REQUIRE FILING 990-PF.

Elsie A.	Brown	Fund	Inc.
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#06-6032102

2017 Form 990 PF

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Elsie A. Brown Fund, Inc. 2017 Form 990 PF

## #06-6032102

Contributions

Part 1, Line 25, Contributions and Part XV, Supplementary Information

Page 1 of 2

Academy of the Holy Family	Baltic, CT	\$2,000	Educational
All Hallows Guild	Washington, DC	· \$1,000	Charitable
Alzheimer's Association	Washington, DC	1000	Charitable
American Lung Association	East Hartford, Ct	500	Charitable
American Red Cross	Farmington, CT	2500	Charitable
ARC of New London County	Norwich, CT	10000	Charitable
Backus Hospital Auxiliary	Norwich, CT	500	Charitable
CT Food Bank	New Haven, CT	1000	Charitable
Currier Museum of Art	Manchester, NH	\$750	Charitable
Dana Farber Cancer Institute Jimmy Fund	Brookline, MA	\$1,000	Charitable
Haitian Health Foundation	Norwich, CT	\$1,000	Charitable
Historic New England	Boston, MA	750	Charitable
John Kelley Memorial Fund	Groton, CT	4000	Educational
Leukemia and Lymphoma Society	Stamford, CT	3500	Charitable
Lyme Ambulance	Lyme, CT	1000	Charitable
Lyme Congregational Church	Lyme, CT	1000	Charitable
Mystic Seaport	Mystic, CT	500	Charitable
Martin House	Norwich, CT	1000	Charitable
Michael J Fox Foundation	New York, NY	2000	Charitable
Multiple Myeloma Research Foundation	Norwalk, CT	1000	Charitable
North Andover Historical Society	North Andover, MA	2000	Charitable

•			
NFA Eleanor B Conary Endowed Scholarship	Norwich, CT	20000	Educational
Norwich Free Academy Endowed Scholarship	Norwich, CT	5000	Educational
Norwich Free Academy Endowed Scholarship	Norwich, CT	5000	Educational
Norwich Historical Society	Norwich, CT	4500	Charitable
Norwich Heritage Trust	Norwich, CT	2000	Charitable -
Norwich Regional Technical School	Norwich, CT	4000	Educational
Otis Library	Norwich, CT	1500	Charitable
Park Congregational Church	Norwich, CT	1000	Religious
Park Nursery School	Norwich, CT	500	Educational
Special Olympics	Hamden, CT	1000	Charitable
St. Joseph School	Baltic, CT	1000	Educational
St. Jude Childrens' Research Hospital	Memphis, TN	1000	Charitable
Thames River Family Program	Norwich, CT	1000	Charitable.
Yantic Volunteer Fire Department	Yantic, CT	500	Charitable

Total

#06-6032102

2017 Form 990 PF

\$86,000

Elsie A. Brown Fund, Inc.

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