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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

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2019

OMB No 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2019, or tax year beginning 01-01-20)19 , a	nd ending 12-31					
Н	A VANC	undation E FOUNDATION INC IFER INVESTMENTS LTD		A Employer 1d 06-1355463	lentification numbe	r			
Num	ber and	d street (or PO box number if mail is not delivered to street address) Room/suite	P Tolombono ni	umbar (saa instrustia				
6!	5 LASAL	LLE ROAD		, i	B Telephone number (see instructions) (860) 761-1041				
City WES	or town T HART	n, state or province, country, and ZIP or foreign postal code FORD, CT 06107		C If exemption	application is pendin	g, check here			
G Ch	eck al	ll that apply 🔲 Initial return 🔲 Initial return of a	former public charity	D 1. Foreign or	ganızatıons, check he	ere . \square			
		☐ Final return ☐ Amended return			rganizations meeting ck here and attach co				
		✓ Address change □ Name change	£	E If private fo	undation status was i	terminated . \square			
		pe of organization Section 501(c)(3) exempt private 1 4947(a)(1) nonexempt charitable trust Other taxabl	roundation le private foundation	under section	on 507(b)(1)(A), chec	k here			
		ket value of all assets at end J Accounting method	Cash Accru	E If the found	ation is in a 60-mont	h tormination —			
of '	year (f	from Part II, col (c), ▶\$ 10,326,381 Other (specify) (Part I, column (d) must			on 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(-) P			(d) Disbursements			
		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	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach	182,378						
	2	schedule) Check ▶ ☐ If the foundation is not required to attach	182,378						
	2	Sch B							
e	3	Interest on savings and temporary cash investments							
	4	Dividends and interest from securities	275,172	275,172	!				
	5a	Gross rents							
	Ь	Net rental income or (loss)	42,123						
E	6a	Net gain or (loss) from sale of assets not on line 10							
Revenue	Б 7	Gross sales price for all assets on line 6a 1,215,007 Capital gain net income (from Part IV, line 2)	<u>′</u>	209,510	1				
	8	Net short-term capital gain							
	9	Income modifications							
	10a b	Gross sales less returns and allowances Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)	<u></u>						
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	499,673	484,682					
	13	Compensation of officers, directors, trustees, etc	54,000	C)	54,000			
	14	Other employee salaries and wages							
6S	15	Pension plans, employee benefits							
Sui	16a	Legal fees (attach schedule)							
χ	b	Accounting fees (attach schedule)	2,595	C		2,595			
e E	С	Other professional fees (attach schedule)	51,242	34,332	!	16,910			
ativ	17	Interest							
and Administrative Expenses	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	8,255	С		4,416			
重	20	Occupancy							
Ψ	21	Travel, conferences, and meetings	2,107	C		2,107			
anc	22	Printing and publications							
bu	23	Other expenses (attach schedule)	6,103	C	1	6,103			
Operating	24	Total operating and administrative expenses.							
be		Add lines 13 through 23	124,302	34,332		86,131			
0	25	Contributions, gifts, grants paid	375,000			375,000			
	26	Total expenses and disbursements. Add lines 24 and 25	499,302	34,332		461,131			
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and	371						
	ь	disbursements Net investment income (if negative, enter -0-)	3/1	450,350					
	С	Adjusted net income (if negative, enter -0-)		155,550					
For	L Paper	work Reduction Act Notice, see instructions.	1	Cat No 11289	X For	m 990-PF (2019)			

7,809,685

7,810,056

7,810,056

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11	Investments—land, buildings, and equipment basis ▶					ĺ
	Less accumulated depreciation (attach schedule) ▶	,				
12	Investments—mortgage loans					Ī
13	Investments—other (attach schedule)	394,377	₩		375,965	Γ
14	Land, buildings, and equipment basis ▶					Ī
	Less accumulated depreciation (attach schedule) ▶	,				ı
15	Other assets (describe					Ī
16	Total assets (to be completed by all filers—see the					Ī
	ınstructions Also, see page 1, item I)	7,809,685			7,810,056	
17	Accounts payable and accrued expenses					Ī
18	Grants payable					
19	Deferred revenue					ı
20	Loans from officers, directors, trustees, and other disqualified persons					
21	Mortgages and other notes payable (attach schedule)					
22	Other liabilities (describe					
23	Total liabilities(add lines 17 through 22)	0			0	
	Foundations that follow FASB ASC 958, check here ▶					
	and complete lines 24, 25, 29 and 30.					
24	Net assets without donor restrictions					
25	Net assets with donor restrictions					
	Foundations that do not follow FASB ASC 958, check here					
	and complete lines 26 through 30.	4 002 207				
26	Capital stock, trust principal, or current funds	1,983,307			1,983,307	ı
27	Paid-in or capital surplus, or land, bldg , and equipment fund	0				ı
28	Retained earnings, accumulated income, endowment, or other funds	5,826,378			5,826,749	l
29	Total net assets or fund balances (see instructions)	7,809,685			7,810,056	ı
30	Total liabilities and net assets/fund balances (see instructions) .	7,809,685			7,810,056	
<u>au</u>	- · · · · · · · · · · · · · · · · · · ·	30 (t			I	_
	tal net assets or fund balances at beginning of year—Part II, column (a), line i year figure reported on prior year's return)	29 (must agree with	ena-	1		
	ter amount from Part I, line 27a		. [2		
	ner increases not included in line 2 (itemize) >		[3		_
	d lines 1, 2, and 3		.	4		
	creases not included in line 2 (itemize)		-	5		_
То	tal net assets or fund balances at end of year (line 4 minus line 5)—Part II, co	olumn (b), line 29	•	6		

С 11

12 13

14

5

		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	7,809,685	7,810,056	10,326,381
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
틎	20	Loans from officers, directors, trustees, and other disqualified persons			
lat.	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	0	
Sè		Foundations that follow FASB ASC 958, check here			
2		and complete lines 24, 25, 29 and 30.			
ala	24	Net assets without donor restrictions			
80	25	Net assets with donor restrictions			
or Fund Balances		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds	1,983,307	1,983,307	
sets	27	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
As	28	Retained earnings, accumulated income, endowment, or other funds	5,826,378	5,826,749	
Net	29	Total net assets or fund balances (see instructions)	7,809,685	7,810,056	
Z	30	Total liabilities and net assets/fund balances (see instructions) .	7,809,685	7,810,056	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	al net assets or fund balances at beginning of year—Part II, column (a), line 29	(must agree with end-		

	pe the kınd(s) of property sold (e g , ı arehouse, or common stock, 200 shs	MLC Co) P	(b) ow acquired —Purchase —Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICALLY TRADED SE	CURITIES				
b PUBLICALLY TRADED SE	CURITIES				
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense		Gain o	h) r (loss)) minus (g)
a 7:	54,880		513,756		241,124
b 4	50,127		491,741		-31,614
С					
d					
e					
Complete only for asset	s showing gain in column (h) and owi	ned by the foundation on 12	2/31/69	(I)
(i) F M V as of 12/31/69	(j)	(k) Excess of co over col (j),	ol (ı)	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a		3//	,		241,124
b					-31,614
С					•
d					
e					
•	gain or (loss) as defined in sections 1 art I, line 8, column (c) (see instruction	. , . , .	}	3	
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net Inv	estment Inc	come	
	private foundations subject to the sec				
	eave this part blank ne section 4942 tax on the distributat ot qualify under section 4940(e) Do		ne base period ⁷	y .	es 🗸 No
1 Enter the appropriate a	mount in each column for each year,	see instructions before mak	ing any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use	e assets	(d) Distribution rati (col (b) divided by c	
2018	438,900	9,4	447,396		0 046457
2017	450,772	9,3	315,927		0 048387
2016	468,834	8,!	593,335		0 054558
2015	412,426	8,8	863,221		0 046532
2014	373,914	9,:	107,118		0 041057
2 Total of line 1, column ((d)		2		0 236991
number of years the fou	o for the 5-year base period—divide t ndation has been in existence if less t	than 5 years	<u>3</u>		0 047398
	oncharitable-use assets for 2019 from	·	4		9,572,482
5 Multiply line 4 by line 3	(40) (50) 7 07		5		453,717
	ent income (1% of Part I, line 27b)		6		4,504
			7		458,221
	cions from Part XII, line 4 , . eater than line 7, check the box in Pa		<u>8</u> that part usin	 g a 1% tax rate Se	461,131 e the Part VI

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Pai	t VIII-B Statements Regard	ing Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	ay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	•		☐ Yes ✓	No		
	(2) Influence the outcome of any sp	·	• • • • • • • • • • • • • • • • • • • •				
	on, directly or indirectly, any vot	-		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual i	• • • • • • • • • • • • • • • • • • • •		☐ Yes 🗹	No		
	(4) Provide a grant to an organization		· -				
	in section 4945(d)(4)(A)? See in (5) Provide for any purpose other th			·· ·	No		
	,, ,	• •	* * * * * * * * * * * * * * * * * * * *				
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$,	·		⊔ Yes 🖭	No		
b	Regulations section 53 4945 or in a c	•		•	5b		
	Organizations relying on a current no				35		
c	If the answer is "Yes" to question 5a						
Ĭ	tax because it maintained expenditure	• • •	•				
	If "Yes," attach the statement requir			' ' ∐ Yes ∐	No		
6a	Did the foundation, during the year,	· -		ıms on			
	a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,					
ь	Did the foundation, during the year,			⊔ Yes 🖭	No 6b		No
	If "Yes" to 6b, file Form 8870	. , , , ,	,, ,				
7a	At any time during the tax year, was	the foundation a party to a p	orohibited tax shelter trai	nsaction? Yes	No.		
b	If "Yes", did the foundation receive a	ny proceeds or have any net	income attributable to th	ne transaction?	7b		
8	Is the foundation subject to the section	on 4960 tax on payment(s)	of more than \$1,000,000	in remuneration or			
	excess parachute payment during th	e year [?]		· · 🔲 Yes 🗸	No L		
	Information About O	fficers, Directors, Trus	tees, Foundation Ma	nagers, Highly Paid En		,	
Ра	and Contractors						
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation	See instructions			
	(-) None and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to	(e) Expe	nse acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation	other a	llowan	ces
See /	Addıtıonal Data Table	'	,	'			
_2	Compensation of five highest-pai	d employees (other than t	hose included on line :		ne, enter "	NONE	."
(2)	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	CO 3000	ount
(a)	more than \$50,000	nours per week	(c) Compensation	plans and deferred	other al		
		devoted to position		compensation			
NON							
-							
Tota	I number of other employees paid ove						
	Hamber of other employees paid ove	. φου,ουσι ι ι ι ι	 		Form 99	O-DE	(2010

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2019)

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

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

3a 3h

4

5

461.131

4.504

456.627

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440.803

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0

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	Part XIII	U
--	-----------	---

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b Total for prior years

a From 2014. **b** From 2015. . . . c From 2016. . . **d** From 2017. . . . e From 2018.

D-PF (2	2019)
XIII	Un

P	art XIII Undistributed Income (see instruc	tions)
1	Distributable amount for 2019 from Part XI, line 7	
2	Undistributed income if any as of the and of 2010	

Distributable amount for 20		
	19 f	fro
Undistributed income, if any	, as	5 (
Enter amount for 2018 only		

f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part XII, line 4 🕨 \$ a Applied to 2018, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2019

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must

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

6 Enter the net total of each column as

be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . . **b** Excess from 2016. . c Excess from 2017. . . . d Excess from 2018. . . e Excess from 2019. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

om Part XI, line 7 of the end of 2019 Excess distributions carryover, if any, to 2019

(a)

Corpus

0

0

(b)

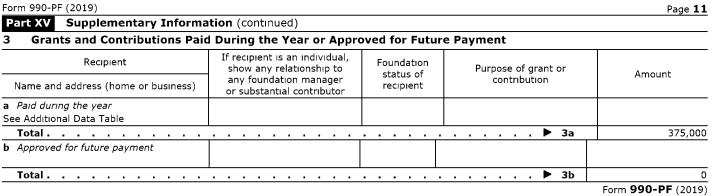
Years prior to 2018

(c)

2018

427,814

427,814



	amounts unless otherwise indicated		usiness income	Excluded by section		(e) Related or exempt
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
g Fees a	nd contracts from government agencies					
	ship dues and assessments on savings and temporary cash					
				1.4	275 172	
	ds and interest from securities			14	275,172	
	inanced property					
	bt-financed property.					
	al income or (loss) from personal property					
	vestment income.					
	(loss) from sales of assets other than			18	42,123	
9 Net inco	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
	evenue a					
	-					
.2 Subtota	Add columns (b), (d), and (e).		0		317,295	
3 Total A						
	add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu			13	3	317,293
(See wo	rksheet in line 13 instructions to verify calcu	lations)			3	317,293
(See wo Part XVI	rksheet in line 13 instructions to verify calcu	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	317,295
(See wo Part XVI Line No.	rksheet in line 13 instructions to verify calcu- B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	

orm 99	0-PF (2	.019)											Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransfers	To an	d Transact	tions	s and F	Relation	ships With	Nonchari	table		
		anization directly or in han section 501(c)(3)									section 501		Yes	No
a Tran	nsfers fr	om the reporting foun	dation to a n	oncharitabl	le exen	npt organizati	ion of	:						
(1)	Cash.											1a(1)		No
(2)	Other	assets										1a(2)		No
b Oth	er trans	actions												
(1)	Sales	of assets to a nonchar	ıtable exemp	t organızatı	ion							1b(1)		No
(2)	Purcha	ises of assets from a r	noncharitable	exempt or	ganızat	tion						1b(2)		No
(3)	Rental	of facilities, equipmen	nt, or other a	ssets								1b(3)		No
		ursement arrangemen										1b(4)		No
٠.		or loan guarantees.										1b(5)		No
٠, ,		nance of services or m	•		-							1b(6)		No
	-	^f acilities, equipment, r er to any of the above										1c		No
	ny trans	s, other assets, or ser saction or sharing arra (b) Amount involved	ngement, sh	ow in colum	nn (d)			oods, ot	her asset		received		ngemen	nts
	_						1							
	+						1							
3 T 11				1 11			٠.		1					
		dation directly or indire	•	•		•					п., г			
		n section 501(c) (other		n 501(c)(3))) or in	section 52/7					∐ Yes l	✓ No		
b It "Y	'es," co	mplete the following s (a) Name of organization		1	(b)	Type of organiz	zation	ı	l	(c) Doss	aption of relat	ionchin		
		(a) Name of organization) II		(0)	Type or organiz	ation			(C) Desci	iption of relat	ЮПЗПІР		
	of my	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, c											
Sign		****	-			2020 00 00		ų is	****			he IRS dı	scuss th	าเร
Here	\ ^	ar en ar en en			'	2020-09-09		\ ^	· · · · · · · · · · · · · · · · · · ·		retur with	n the prepa	rer show	_{wn}
	s	ignature of officer or t	rustee			ate		_ / _	itle		belov		_	
		Print/Type preparer's	s name	Preparer's	s Signa	ture		Date		Check if self-	PTIN			
		BRIAN KERRICAN								employed ▶ □]	P00028	3963	

Paid **Preparer Use Only**

BRIAN KERRIGAN

Firm's name ▶ WHITTLESEY PC

Firm's address ▶ 280 TRUMBULL ST 24TH FL

HARTFORD, CT 06103

Phone no	(860) 524-4471

Firm's EIN ▶06-0903326

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation H ALEX VANCE JR PRESIDENT 0 6 00 CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107 WILLIAM C VANCE VICE-PRESIDENT n 1 00 CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107 COLEMAN H CASEY ESO SECRETARY O n 1 00 CONIFER INV LTD 65 LASALLE ROAD CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CA 06107 PATRICIA D VANCE DIRECTOR 0 1 00 CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107 NANCY C RION DIRECTOR 0

WEST HARTFORD, CT 06107				
DAVID W PARMELEE	TREASURER	0	0	0
CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107	1 00			
ALISON V SCHERER	DIRECTOR	0	0	0

0

3 00

24 00

EXECUTIVE DIRECTOR

CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107

CONIFER INV LTD 65 LASALLE ROAD WEST HARTFORD, CT 06107

MARY S MARTIN

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ACHIEVE HARTFORD221 MAIN ST NA PC. 15,000 DATA REPORTING AND OPERATING EXPENSES HARTFORD, CT 06106

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

ACHIEVEMENT FIRST 370 JAMES STREET SUITE 404 NEW HAVEN, CT 06513	NA	PC	OPERATING EXPENSES OF ACHIEVEMENT FIRST HARTFORD HIGH SCHOOL	75,000
EDUCATORS 4 EXCELLENCE 153 EAST STREET SUITE 400 NEW HAVEN, CT 06511	NA	PC	OPERATING EXPENSES OF E4E CONNECTICUT CHAPTER	20,000

375,000

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

NEW HAVEN, CT 06513

Total .

recipient

HARTFORD

375,000

a Paid during the year				
HARTFORD PUBLIC SCHOOLS 960 MAIN STREET HARTFORD, CT 06103	NA	N/A	SUPPORT FOR DATA WISE IMPROVEMENT PROCESS INITIATIVE	50,000
OUR PIECE OF THE PIE 20/28 SARGEANT STREET	NA	PC	SUPPORT FOR DESIGN OF A COMMON INTAKE FORM ACROSS	50,000

OUR PIECE OF THE PIE 20/28 SARGEANT STREET HARTFORD, CT 06105	NA	PC	COMMON INTAKE FORM ACROSS OPP'S PROGRAMMING	50,000
TEACH FOR AMERICA 370 JAMES STREET SUITE 404	NA	GOV	OPERATING EXPENSES OF TEACH FOR AMERICA IN	50,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
THIRD SECTOR NEW ENGLAND 89 SOUTH STREET SUITE 700 BOSTON, MA 02111	NA	PC	OPERATING EXPENSES OF CONNECTICUT SCHOOL FINANCE PROJECT	60,000
URBAN EDUCATION INSTITUTE	NA	PC	SUPPORT FOR TO & THROUGH	10,000

URBAN EDUCATION INSTITUTE 1313 EAST 60TH STREET CHICAGO, IL 60637	NA	PC	SUPPORT FOR TO & THROUGH PROJECT
HARTFORD PROMISE750 MAIN STREET	NA	PC	OPERATING SUPPORT FOR

Total .

CHICAGO, IL 60637			PROJECT	
HARTFORD PROMISE750 MAIN STREET HARTFORD, CT 06103	NA	PC	OPERATING SUPPORT FOR HARTFORD PROMISE'S SCHOLAR AMBASSADOR PROGRAM	10,000

375,000

	CHICAGO, IL 60637				
-	HARTFORD PROMISE750 MAIN STREET HARTFORD, CT 06103	NA	PC	OPERATING SUPPORT FOR HARTFORD PROMISE'S SCHOLAR AMBASSADOR PROGRAM	10,00

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

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

or substantial contributor

a Paid during the year				
READYCT 350 CHURCH STREET THIRD FLOOR	NA	PC	OPERATING SUPPORT FOR READYCT'S COLLEGE	10,000

HARTFORD, CT 06103			READINESS WORK	
CT DATA COLLABORATIVE 10 CONSTITUTION PLAZA HARTFORD, CT 06103	NA	PC	OPERATING EXPENSES FOR HARTFORD DATA COLLABORITVE	25,000

CT DATA COLLABORATIVE 10 CONSTITUTION PLAZA HARTFORD, CT 06103	NA	PC	OPERATING EXPENSES FOR HARTFORD DATA COLLABORITVE	25,000
Total			▶ 3a	375,000

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -	D	LN: 93491253004020	
TY 2019 Accounting Fees Schedule						
	Name:	H A VANO	CE FOUNDATION IN	IC		
C/O CONIFER INVESTMENTS LTD						
	EIN:	06-1355	463			
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		2,595	0		2,595	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491253004020
TY 2019 Investments Corporat	e Bonds Sche	dule

Name: H A VANCE FOUNDATION INC

C/O CONIFER INVESTMENTS LTD

EIN: 06-1355463

Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value
BARCLAYS IG FLOAT RATE	200,933	201,282
LOOMIS SAYLES PLUS	183,584	186,596
SOUND POINT FLOAT	270,000	253,566
DESTRA PREFERRED INCOME	140,906	149,199
VNGD SHORT-TERM BOND	249,493	251,906

TY 2019 Investments Corporate Stock Schedule

Name: H A VANCE FOUNDATION INC

C/O CONIFER INVESTMENTS LTD

DLN: 93491253004020

EIN: 06-1355463

Investments Corporation Stock Schedule

Investments Corporation Stock Schedule Name of Stock	End of Year Book Value	End of Year Fair Market Value
AGILENT TECHNOLOGIES	19,596	119,434
ALPHABET INC- CLASS A	18,672	107,151
ALPHABET INC- CLASS C	18,562	106,962
AMGEM INC	80,848	108,481
APPLE INC	86,104	337,697
AT&T INC.	96,039	121,148
BANK OF AMERICA	45,752	110,062
BERKSHIRE HATHAWAY	13,857	113,250
BLACKROCK DYNAMIC	1,343,894	1,456,806
COLGATE-PALMOLIVE CO	31,008	72,282
CVS HEALTH	100,072	124,436
DISNEY WALT CO	24,384	101,241
EXXON MOBIL CORP	80,086	80,247
HUMANA INC	127,672	174,097
JOHNSON & JOHNSON	16,104	98,463
JPMORGAN CHASE & CO	15,334	125,460
KEYSIGHT TECHNOLOGIES	77,386	74,407
MERIDIAN SC GROWTH	148,139	189,170
MICROSOFT CORP	43,442	268,090
PARKER HANNIFIN	87,939	113,201
PEPSICO, INC	10,475	85,419
RAYTHEON CO	49,833	82,403
ROSS STORES INC	80,646	119,331
VERIZON COMM	47,301	98,547
WILLIAMS-SONOMA INC	67,680	91,800
ZIMMER BIOMET HLDGS	83,793	108,518
VNGD SMALL CAP	110,277	178,063
HARTFORD MIDCAP	220,000	221,770
VNGD TOTAL WORLD	1,749,455	2,178,631
GQG EMERGING MARKETS	125,000	129,272

Name of Stock
End of Year Book
Value
Market Value

256.575

390,667

719,754

281,925

454,196

Investments Corporation Stock Schedule

MFS INTL EQUITY

SPDR ACW I EXUS

SPDR EMERGING MKT

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TY 2019 Investments - Other	Schedule	
Name:	H A VANCE FOUNDATION INC	
	C/O CONIFER INVESTMENTS LTD	
EIN:	06-1355463	
Investments Other Schedule 2		

EIN: 00-1353403						
Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
PRINCIPAL DIV REAL ASSET	AT COST	189,731	202,560			
VANGUARD REIT	AT COST	186,234	231,975			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	I: 93491253004020				
TY 2019 Other Expenses Sche	TY 2019 Other Expenses Schedule							
Name:	H A VANCE FOL	INDATION INC						
	C/O CONIFER INVESTMENTS LTD							
EIN:	06-1355463							
Other Expenses Schedule								
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
ASSOCIATION MEMBERSHIPS	5,000	0		5,000				

1,103

OFFICE EXPENSE

efile GRAPHIC print - DO NOT PROC		ed Data -		DL	N: 93491253004020		
TY 2019 Other Professional Fees Schedule							
Name: H A VANCE FOUNDATION INC							
	C/O (ONIFER	INVESTMENTS L	.TD			
	EIN: 06-13	355463					
Category	Amou	nt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

34,332

16,910

INVESTMENT MANAGEMENT FEE

efile GRAPHIC print - DO NOT PR	OCESS As Filed Da	ta -	DL	N: 93491253004020
TY 2019 Taxes Schedule	е		<u> </u>	
	Name: H A VANC	E FOUNDATION INC		
	C/O CONTI	FER INVESTMENTS	LID	
	EIN: 06-135546	53		
Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable Purposes
PAYROLL TAXES	4,4:	.6 0		4,416
EXCISE TAX	3,83	9 0		0

efile GRAPHIC print - De	O NOT PROCESS	As Filed Data -				DLN: 93491253004020
Schedule B		Schedul	e of Contributors			OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	1		orm 990, 990-EZ, or 990-PF / <u>Form990</u> for the latest infor	mation		2019
Name of the organization H A VANCE FOUNDATION	INC				Employer id	lentification number
C/O CONIFER INVESTMENT	TS LTD				06-1355463	
Organization type (chec	ck one)					
Filers of:	Section:					
Form 990 or 990-EZ	or 990-EZ					
	☐ 4947(a)(1	1) nonexempt charita	ıble trust not treated as a p	orivate foundat	tion	
	☐ 527 politic	cal organization				
Form 990-PF	5 01(c)(3)	exempt private foun	dation			
	☐ 4947(a)(1	1) nonexempt charita	ıble trust treated as a prıva	te foundation		
	501(c)(3)	taxable private foun	dation			
			that received, during the ynplete Parts I and II. See in			
Special Rules						
under sections 50 received from any	09(a)(1) and 170(b)(y one contributor, di	(1)(A)(vi), that check	Form 990 or 990-EZ that m ed Schedule A (Form 990 contributions of the greater ete Parts I and II	or 990-EZ), Pa	art II, line 13,	16a, or 16b, and that
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
during the year, o If this box is chec purpose Don't co	contributions <i>exclusi</i> ked, enter here the emplete any of the p	<i>ively</i> for religious, ch total contributions th parts unless the Gen	r (10) filing Form 990 or 99 aritable, etc , purposes, bu nat were received during th eral Rule applies to this or more during the year	it no such con le year for an e ganization be	tributions tota e <i>xclusively</i> re cause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>
990-EZ, or 990-PF), but	t must answer "No	" on Part IV, line 2, o	and/or the Special Rules of if its Form 990, or check th the filing requirements of \$	e box on line l	H of its Form	
For Paperwork Reduction Action Form 990, 990-EZ, or 990		ructions	Cat No 30613X	Schedu	le B (Form 990	, 990-EZ, or 990-PF) (2019)

Name of organization **Employer identification number** H A VANCE FOUNDATION INC 06-1355463 C/O CONIFER INVESTMENTS LTD Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Contributors (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person H ALEX VANCE JR 1 CONIFER INV LTD 65 LASALLE ROAD Payroll \$ 59,550 Noncash WEST HARTFORD, CT 06107 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person H ALEX VANCE JR CONIFER INV LTD 65 LASALLE ROAD Payroll \$ 122,828 Noncash WEST HARTFORD, CT 06107 (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (a) (b) (C) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)		Page 3
Name of org		Employer identification n	umber
	FOUNDATION INC ER INVESTMENTS LTD	06-1355463	
Part II	Noncash Property		
(a) No. from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	GIFTS OF STOCK	\$ 59,550	2019-03-25
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	GIFTS OF STOCK	\$ 122,828	2019-11-13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
H A VANCE	rganization E FOUNDATION INC EER INVESTMENTS LTD			Employer identification number
Part III	Exclusively religious, charitable, etc., con than \$1,000 for the year from any one con	tributor. Complete co e total of exclusively to e instructions.) > \$	itions described i	n section 501(c)(7), (8), or (10) that total more
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-	Transferee's name, address, and ZIP 4		sfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and	` ,	sfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	e of gift	(d) Description of how gift is held
	Transferee's name, address, and		sfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and		sfer of gift Relatio	onship of transferor to transferee
			Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2019)