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DLN: 93491297010070

OMB No. 1545-0052

2019

Return of Private Foundation

Form 990-PF Department of the Treasury

Internal Revenue Service

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

or	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd ending 12-31-	2019	
		Indation		A Employer id	entification numbe	er
		SIONARY ASSOCIATION OF NEW HAVEN ALDIE RANDALL & MCNAB LLC		06-6032939		
		d street (or P.O. box number if mail is not delivered to street address) HINGTON AVENUE	Room/suite	B Telephone nu	ımber (see instructio	ns)
				(203) 239-4478	3	
		ı, state or province, country, and ZIP or foreign postal code EN, CT 064731187		C If exemption	application is pendin	g, check here
G Ch	neck al	l that apply:	former public charity	D 1. Foreign or	ganizations, check he	ere
		☐ Final return ☐ Amended return	,		rganizations meeting	
		Address change Name change		test, chec	k here and attach co	mputation 🕨 🔼
1 Ch	neck ty	rpe of organization: $\mathbf{\nabla}$ Section 501(c)(3) exempt private t	foundation		undation status was i on 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation			
of '	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 2,729,725 J Accounting method: □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		ation is in a 60-mont in 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(-) B	l .		(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 schedule)				
	2	Check ► ☑ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	6,907	6,907		
	4	Dividends and interest from securities	76,117	76,117		
	5a	Gross rents				
	b	Net rental income or (loss)				
KIE	6a	Net gain or (loss) from sale of assets not on line 10	101,767			
Revenue	b	Gross sales price for all assets on line 6a 327,942				
ă	7	Capital gain net income (from Part IV, line 2)		101,767		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	11	Other income (attach schedule)	% 4	4		
	12	Total. Add lines 1 through 11	184,795	184,795		
	13	Compensation of officers, directors, trustees, etc.	0	10 1,7 20		
	14	Other employee salaries and wages				
Ņ	15	Pension plans, employee benefits				
156	16a	Legal fees (attach schedule)				
<u>a</u>	b	Accounting fees (attach schedule)				
Operating and Administrative Expenses	c	Other professional fees (attach schedule)	20,646	20,646		(
£IKE	17	Interest				
<u> </u>	18	Taxes (attach schedule) (see instructions)	1,642	0		(
Ē	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
₹	21	Travel, conferences, and meetings				
ē	22	Printing and publications				
<u>5</u> :	23	Other expenses (attach schedule)				
rat Ta	24	Total operating and administrative expenses.				
<u>8</u>		Add lines 13 through 23	22,288	20,646		
ر	25	Contributions, gifts, grants paid	112,800			112,800
	26	Total expenses and disbursements. Add lines 24 and 25	135,088	20,646		112,800
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	49,707			
	b	Net investment income (if negative, enter -0-)	127.07	164,149		
	c	Adjusted net income (if negative, enter -0-)		,		
					i	i

Beginning of year

1,741,168

30,000

30,000

1,711,168

1,711,168

1,741,168

1,760,875

1,760,875

1,760,875

1,760,875

1,711,168 49,707

1,760,875

1,760,875 Form **990-PF** (2019)

1

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3

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6

Page 2

2,729,725

End of year

		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 ▶	'		
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges	5,519	3,878	3,878
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,182,992	1,236,681	2,188,040
	С	Investments—corporate bonds (attach schedule)	497,683	497,683	515,174
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			

Investments—other (attach schedule) Land, buildings, and equipment: basis ▶ _ Less: accumulated depreciation (attach schedule) ▶ ___

Attached schedules and amounts in the description column

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Balance Sheets

Other assets (describe > .

Other liabilities (describe ▶_

Grants payable

instructions. Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions .

Net assets with donor restrictions .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

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

Foundations that follow FASB ASC 958, check here

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions)

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

Part II

13

14

15

16

17

18

19

20 21

22

23

24 25

26

27

28

29

30

Part III

Liabilities

Fund Balances

Assets or

Net

2

3

Capital Gains	and Losses for Tax on Theest	inent Income			
	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Tab	le				
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	l h) r (loss)) minus (g)
a See Additional Data Tab		pids exp	chise of sale	(c) pius (i) IIIII (9)
b					
d					
			12/21/60		
Complete only for asset.	s showing gain in column (h) and ow	i			l) h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) l. (j), if any	col. (k), but not	less than -0-) or om col.(h))
a See Additional Data Tab	le				
b					
c					
d					
e					
		If gain, also enter in P	Part I. line 7		
i i	gain or (loss) as defined in sections 1 art I, line 8, column (c) (see instruction	. , , , ,)-	3	101,767
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net	Investment In	come	
	private foundations subject to the sec				
If section $4940(d)(2)$ applies,	·	ction 4540(a) tax on he	et investment incom	e. <i>)</i>	
	ne section 4942 tax on the distributab ot qualify under section 4940(e). Do			·	es 🗹 No
1 Enter the appropriate ar	nount in each column for each year;	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col. (b) divided by c	
2018	99,901		2,518,956		0.039660
2017	105,050		2,417,876		0.043447
2016	100,283		2,195,580		0.045675
2015	91,892		2,195,802		0.041849
2014	89,850		2,276,045		0.039476
2 Total of line 1, column (d)		2		0.210107
number of years the four	o for the 5-year base period—divide t ndation has been in existence if less t	than 5 years	3		0.042021
	oncharitable-use assets for 2019 from	•	4		2,543,889
5 Multiply line 4 by line 3	(40) (50 (7.1) (7.1)		5		106,897
	ent income (1% of Part I, line 27b)		6		1,641
			7		108,538
If line 8 is equal to or gr	ions from Part XII, line 4 , eater than line 7, check the box in Pa		<u>8</u> nplete that part usin	 g a 1% tax rate. Se	112,800 e the Part VI
instructions.				-	000 DE (2010)

	990-F1 (2019)		- 4-20.14	— • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes ि	✓ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	⊻ No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?					
b	If any answer is "Yes" to $5a(1)-(5)$,	•		Ceptions described in	⊻ No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes D	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	√ N° [
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIII and Contractors	, 2, 11	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l—see instructions). If ⊢	none, er	ter "l	NONE.	71
	, , ,			(d) Contributions to	1			
a)	Name and address of each employee [paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					\perp			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	Hamber of other employees paid over				Farr	~ QQ(0-PF (2010
					LOL	□ プラし	5-PF (Z019

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	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 produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	·	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

1.641

125,553

125.553

125.553

112,800

112,800

1.641

111.159

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Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

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b

Part XII

c Excess from 2017. d Excess from 2018. e Excess from 2019.

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Page **9**

		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	•			125,553
2	Undistributed income, if any, as of the end of 2019:				_
а	Enter amount for 2018 only			92,873	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$112,800				
а	Applied to 2018, but not more than line 2a			92,873	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				19,927
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				

D	(Election required—see instructions)		U	
С	Treated as distributions out of corpus (Election required—see instructions)	0		
d	Applied to 2019 distributable amount			19,927
е	Remaining amount distributed out of corpus	0		
5	Excess distributions carryover applied to 2019.	0		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0		
_				

	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				19,927
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019, Subtract		·		

d	Applied to 2019 distributable amount				19,927
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				105,626
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)	0			
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2015				
b	Excess from 2016				

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	Part XIV Private Operating Found	ations (see instru	ictions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organizati	on is a private opera	ating foundation desc	cribed in section \Box	4942(j)(3) or	4942(j)(5)
2a		Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) rotar
ь	85% of line 2a					
С	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					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
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					

(4) Gi	ross investment income					ı
Part XV	Supplementary Information	(Complete this	part only if the f	oundation had s	5,000 or more i	n
Part AV	assets at any time during th	e vear-see inst	ructions.)			

Information Regarding Foundation Managers: 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).) 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ightharpoons 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. to individuals or organizations under

other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

WILLIAM COLWELL PRESIDENT

PARRETT PORTO 2319 WHITNEY AVE

HAMDEN, CT 06514 (203) 281-2700

b The form in which applications should be submitted and information and materials they should include: LETTER DESCRIBING ORGANIZATION AND AMOUNT REQUESTED

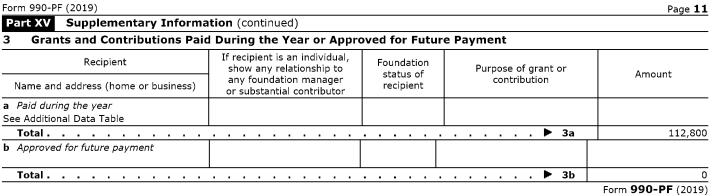
c Any submission deadlines: NOVEMBER 1

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

organizations as provided in section 4942(j)(3)(B)(iii). (3) Largest amount of support from an exempt organization

2

RELIGIOUS ORGANIZATIONS AND CHILD & YOUTH SERVICES IN GREATER NEW HAVEN AREA



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
c					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	6,907	
Dividends and interest from securities			14	76,117	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property Other investment income			14	4	
Gain or (loss) from sales of assets other than			17	4	
inventory			18	101,767	
Net income or (loss) from special events:				,	
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
c					
e		0		19/ 705	
e		0	13	184,795	
e	lations.)			184,795	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	184,795
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second se	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second se	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second seco	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the second s	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	ed importantly to	

orm 990-PF (2019)						
	Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able			
1		nization directly or indirectly engage in any of the following with any other organization described in section 501 an section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes		
-	Transfers from	m the reporting foundation to a noncharitable exempt organization of				

(c) (other	than section 501(c)(3)	organizations) or in section 5	527, relating to po	olitical orga	nization	s?		Yes	No
a Transfers f	from the reporting foun	dation to a no	oncharitable exe	empt organization	of:					
(1) Cash.								. 1a(:	L)	No
(2) Other	assets							1a(2)	No
b Other trans	sactions:									
(1) Sales	of assets to a nonchari	table exempt	organization.					1b(:	L)	No
(2) Purch	ases of assets from a n	oncharitable	exempt organiz	ation				1b(2)	No
(3) Renta	al of facilities, equipmen	nt, or other as	sets					1b(3)	No
(4) Reiml	bursement arrangemen	ts						. 1b(4	1)	No
(5) Loans	s or loan guarantees.							1b(!	5)	No
(6) Perfori	mance of services or m	embership or	fundraising sol	icitations				. 1b(e	5)	No
	facilities, equipment, n									No
of the good	ver to any of the above ds, other assets, or ser- nsaction or sharing arra	vices given by	the reporting t	foundation. If the	foundation	receive	d less than fair ma	arket value	•	
a) Line No.	(b) Amount involved	(c) Name of	noncharitable exer	mpt organization	(d) Descr	ription of	transfers, transaction	ns, and sharing a	rangemer	nts
2a Is the four	ndation directly or indire	ectly affiliated	with, or related	d to, one or more	tax-exemp	t organi	zations			
described i	in section 501(c) (other	than section	501(c)(3)) or i	n section 527? .			\square	Yes 🔽 No		
b If "Yes," co	omplete the following so	chedule.								
	(a) Name of organization	n	(t) Type of organizati	ion		(c) Description	on of relationship		
,										
	er penalties of perjury,									
	y knowledge and belief		rrect, and comp	olete. Declaration	of preparer	r (other	than taxpayer) is	based on all in	formatio	n of
Sign	h preparer has any kno	wieuge.		1				May the IRS	d: u	
- >	*****			2020-10-23	**	****		return	aiscuss ti	nis
lere					—) –			with the pre	parer sho	wn
	Signature of officer or to	rustee		Date	F ⊤it	tle		below	r	٦ ا
								(see instr.)	Yes L	→ No
	Print/Type preparer's	name	Preparer's Sign	nature	Date			PTIN		
	, . , po propulor s				Date		Check if self-		47000	
	DDIAN C DODGE						employed ▶ □	POOC	17928	
aid	BRIAN S BORGERS	NON			2020-1	10-23				
reparer		ALDIE DANG	ALL O MONAS	1.6						
Jse Only		ALDIE RAND	ALL & MCNAB L	LC				Firm's EIN ►	6-0415	530
Jae Olliy		5 WASHINGT	ON AVENUE							
		2 MADITING!	ON AVENUE					Dha	121 222	4470
	NC	ORTH HAVEN,	CT 064731187	7				Phone no. (2)	JS) 239-	44/8
								Form 9	90-PF	(2019)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 2019-02-04 ABBOTT LABS, 250.000 UNITS 1988-05-16 ALCON INC, 20.000 UNITS 2018-04-23 2019-06-03 ALPHABET INC, 25.000 UNITS 2017-06-15 2019-06-03 AT&T INC, 500.000 UNITS 1984-05-29 2019-12-27 BERKSHIRE HATHAWAY INC DEL, 50.000 UNITS 2003-11-17 2019-02-15 CHEVRON CORP, 100.000 UNITS 1996-09-20 2019-12-27 CORTEVA INC, 250.000 UNITS 1984-05-29 2019-12-27 2019-06-03 GENERAL MTRS CO, 1,000.000 UNITS 2017-03-07 INTERNATIONAL BUSINESS MACHS, 100.000 UNITS 2018-02-05 2019-12-27 2019-06-24 ISHARES CORE MSCI EAFE ETF, 1,000.000 UNITS 2018-11-16 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 18,107 627 17,480 1,173 949 224 25,908 23,462 2,446 19,620 1.860 17,760 10,229 2,690 7,539 8,967 12,087 3,120 7,293 760 6,533 33,664 37,725 -4,061 13,498 15,591 -2,093 58,957 61,221 2,264 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 17,480 224 2,446 17,760 7,539 8,967 6,533 -4,061 -2,093 2,264

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 2019-02-15 2019-06-24 ISHARES CORE MSCI EMERGING MKTS, 500.000 UNITS J P MORGAN CHASE & CO, 100.000 UNITS 2016-04-27 2019-02-15 JOHNSON & JOHNSON, 100.000 UNITS 2005-05-06 2019-02-15 KIMBERLY CLARK CORP, 50.000 UNITS 1991-02-14 2019-02-15 L3HARRIS TECHNOLOGIES INC, 60.000 UNITS 2010-10-08 2019-12-27 PEPSICO INC, 100.000 UNITS 1991-02-04 2019-12-27 PFIZER INC, 0.000 UNITS 2019-05-13 2019-05-13 2019-02-04 UNDISCOVERED MANAGERS FDS, 423.300 UNITS 2015-06-03 UNDISCOVERED MANAGERS FDS, 150.444 UNITS 2017-06-15 2019-02-04 2003-04-25 2019-02-15 UNITED TECHNOLOGIES CORP, 50.000 UNITS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 25.623 25.260 363 10,536 6,413 4,123 13,586 6,859 6,727 5,925 987 4,938 12,123 3,137 8,986 1,254 12,432 13,686 187 187 1,105 26,105 25,000 9,278 10,000 -722 6,378 4,854 1.524 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 363 4,123 6,727 4,938 8,986 12,432 187 1,105 -722 4,854

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D—Donation CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss)

	(f) (or allowable)	(g) plus expense of sale	(n) (e) plus (f) minus (g)					
1,715			1,715					
Form 990PF Part IV - Capital	Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I							
Complete only for assets show	Gains (Col. (h) gain minus							
(i) F.M.V. as of 12/31/69	Adjusted basis	Excess of col. (i)	col. (k), but not less than -0-) or Losses (from col.(h))					

(k) over col. (j), if any

1,715

(j) as of 12/31/69

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 Expense account, (d) not paid, enter Contributions to hours per week (e) other allowances (b) devoted to position employee benefit plans -0-) and deferred compensation NEWTON BORGERSON **TREASURER** 0 2.00 57 JERIMOTH DR BRANFORD, CT 06405 GEORGIA ERICKSON SECRETARY 1.00 108 ASHLAR VILLAGE WALLINGFORD, CT 06492 BRIAN BORGERSON DIRECTOR 1.00 605 WASHINGTON AVENUE NORTH HAVEN, CT 06473 SHARI MOON DIRECTOR 0 1.00 14 EDWARD ST EAST HAVEN, CT 06512 WILLIAM COLWELL PRESIDENT 2.00 2319 WHITNEY AVENUE HAMDEN, CT 06518 DIRECTOR REV SCOTT MORROW 1.00 34 BASSETT ROAD NORTH HAVEN, CT 06473 ALAN KENDRIX DIRECTOR 0 1.00 600 WASHINGTON AVENUE NORTH HAVEN, CT 06473 TIM DANN DIRECTOR O O 1.00 986 SOUTH AVENUE NEW CANAAN, CT 06840 JEFF BUELL DIRECTOR 1.00 634 TAMARACK ROAD CHESHIRE, CT 06410

DIRECTOR

1.00

KAREN MCCAUSLAND

192 SHACKBARK DRIVE DERBY, CT 06418

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ARTS FOR LEARNING 3074 WHITNEY AVENUE HAMDEN, CT 06518	NONE	PUBLIC	GENERAL OPERATING USES	2,500
CASA OTONAL148 SYLVAN AVE NEW HAVEN CT 06519	NONE	PUBLIC	GENERAL OPERATING USES	2,500

CASA OTONAL148 SYLVAN AVE NEW HAVEN, CT 06519	NONE	PUBLIC	GENERAL OPERATING USES	2,500
CHILDREN IN PLACEMENT CT 155 EAST ST STE 202	NONE	PUBLIC	GENERAL OPERATING USES	2,000

NEW HAVEN, CT 06519				
CHILDREN IN PLACEMENT CT 155 EAST ST STE 202 NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	2,000

Total .

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

Total .

a Paid during the year				
CHRISTIAN COMMUNITY ACTION 168 DAVENPORT AVE NEW HAVEN, CT 06519	NONE	PUBLIC	GENERAL OPERATING USES	5,000

5,000

		21121.10	05115041 005045711011050	
CLIFFORD BEERS CLINIC 5 SCIENCE PARK NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	
			· ·	
	l			

NEW HAVEN, CT 06511				
COLUMBUS HOUSE 200 COLUMBUS AVE PO BOX 7093	NONE	PUBLIC	GENERAL OPERATING USES	5,000

NEW HAVEN, CT 06511				
COLUMBUS HOUSE 200 COLUMBUS AVE PO BOX 7093 NEW HAVEN CT 06519	NONE	PUBLIC	GENERAL OPERATING USES	5,0

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

a Paid during the year				
COMMUNITY SOUP KITCHEN 84 BROADWAY PO BOX 205800 YALE STA NEW HAVEN CT	NONE	PUBLIC	GENERAL OPERATING USES	4,000

NEW HAVEN CT NEW HAVEN, CT 06511				
CONNECTICUT BURN CARE FOUNDATION 601 BOSTON POST ROAD MILFORD, CT 06460	NONE	PUBLIC	GENERAL OPERATING USES	5,000

FOUNDATION 601 BOSTON POST ROAD MILFORD, CT 06460	NONE	POBLIC	GENERAL OPERATING USES	5,000
CONNECTICUT YANKEE COUNCIL BSA 60 WELLINGTON RD	NONE	PUBLIC	GENERAL OPERATING USES	3,000

Total .

601 BOSTON POST ROAD MILFORD, CT 06460				
CONNECTICUT YANKEE COUNCIL BSA 60 WELLINGTON RD MILFORD, CT 06460	NONE	PUBLIC	GENERAL OPERATING USES	3,000

▶ 3a

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

Total .

a Paid during the year				
CT URBAN EDUCATION FUND	NONE	PUBLIC	GENERAL OPERATING USES	4,000

NEW HAVEN, CT 06519				
DEER LAKE WILDERNESS SCHOOL 101 PAPER MILL ROAD	NONE	PUBLIC	GENERAL OPERATING USES	3,300

	DEER LAKE WILDERNESS SCHOOL 101 PAPER MILL ROAD KILLINGWORTH, CT 06419	NONE	PUBLIC	GENERAL OPERATING USES	3,300
,	DOMESTIC VIOLENCE SERVICES	NONE	PUBLIC	GENERAL OPERATING USES	4,000

KILLINGWORTH, CT 06419				
DOMESTIC VIOLENCE SERVICES PO BOX 1329 NEW HAVEN, CT 06505	NONE	PUBLIC	GENERAL OPERATING USES	4,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

FAMILTY CENTERED SERVICES OF CT 131 DWIGHT STREET NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	3,000
FELLOWSHIP PLACE441 ELM ST	NONE	PUBLIC	GENERAL OPERATING USES	5,000

131 DWIGHT STREET NEW HAVEN, CT 06511	NONE	TOBLIC	GENERAL OF EIGHTING USES	3,000
FELLOWSHIP PLACE441 ELM ST NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	5,000
FISH OF GREATER NEW HAVEN PO BOX 8552	NONE	PUBLIC	GENERAL OPERATING USES	5,000

FELLOWSHIP PLACE441 ELM ST NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	5,000
FISH OF GREATER NEW HAVEN PO BOX 8552 NEW HAVEN, CT 06531	NONE	PUBLIC	GENERAL OPERATING USES	5,000

Total .

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

GIRL SCOUTS CT TRIALS 340 WASHINGTON AVENUE NORTH HAVEN, CT 06473	NONE	PUBLIC	GENERAL OPERATING USES	3,000
HABITAT OF HUMANITY OF GREATER	NONE	PUBLIC	GENERAL OPERATING USES	5,000

NORTH HAVEN, CT 06473				
HABITAT OF HUMANITY OF GREATER NEW HAVEN 37 UNION ST NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	5,000
INTERFAITH VOLUNTEER CAREGIVERS	NONE	PUBLIC	GENERAL OPERATING USES	5,000

37 UNION ST NEW HAVEN, CT 06511				
INTERFAITH VOLUNTEER CAREGIVERS 30 GILLIES RD HAMDEN.CT 06517	NONE	PUBLIC	GENERAL OPERATING USES	5,000

NEW HAVEN, CT 06511				
INTERFAITH VOLUNTEER CAREGIVERS 30 GILLIES RD HAMDEN, CT 06517	NONE	PUBLIC	GENERAL OPERATING USES	5,000
Total			▶ 3a	112,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

JUNITA FOR PROGRESSIVE ACTION

NONE

169 GRAND AVENUE NEW HAVEN, CT 06513	NONE	TODEIC	SEMERALE OF ENVIRONMENTS	1,300
LEAP31 JEFFERSON ST NEW HAVEN, CT 06513	NONE	PUBLIC	GENERAL OPERATING USES	4,000

PUBLIC

GENERAL OPERATING USES

4 500

NEW HAVEN, CT 06513				
LIBERTY COMMUNITY SERVICES 129 CHURCH STREET NEW HAVEN, CT 06510	NONE	PUBLIC	GENERAL OPERATING USES	5,000
Total			▶ 3a	112,800

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

LIFE HAVEN447 FERRY STREET NONE

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient recipient

Foundation status of recipient

Purpose of grant or contribution

Amount

Status of recipient

Foundation status of recipient

Foundation status of recipient

FOUNDATION OF PUBLIC GENERAL OPERATING USES

5,000

LIFE HAVEN447 FERRY STREET NEW HAVEN, CT 06513	NONE	PUBLIC	GENERAL OPERATING USES	5,000
LITERACY VOLUNTEERS 5 SCIENCE PARK 2ND FLOOR NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL OPERATING USES	3,000

NEW HAVEN BOYS AND GIRLS CLUBS 235 COLUMBUS AVE NEW HAVEN, CT 06519 NONE PUBLIC GENERAL OPERATING USES 3,000	5 SCIENCE PARK 2ND FLOOR NEW HAVEN, CT 06511	NONE	OBLIC	GENERAL OF EIGHTING OSES	3,000
	235 COLUMBUS AVE	NONE	PUBLIC	GENERAL OPERATING USES	3,000

Total . .

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

a Paid during the year				
NEW REACH INC153 EAST STREET	NONE	PUBLIC	GENERAL OPERATING USES	5,000

NEW HAVEN, CT 06511	NONE	TOBLIC	GENERAL OF ERATING 03E3	3,000
THE CONNECTION 100 ROSCOMMON DR STE 203	NONE	PUBLIC	GENERAL OPERATING USES	2,000

THE CONNECTION 100 ROSCOMMON DR STE 203 MIDDLETOWN, CT 06457	NONE	PUBLIC	GENERAL OPERATING USES	2,000
THE DIAPER BANKPO BOX 9017	NONE	PUBLIC	GENERAL OPERATING USES	2,000

 MIDDLETOWN, CT 06457				
THE DIAPER BANKPO BOX 9017 NEW HAVEN, CT 06532	NONE	PUBLIC	GENERAL OPERATING USES	2,000

THE DIAPER BANKPO BOX 9017 NEW HAVEN, CT 06532	NONE	PUBLIC	GENERAL OPERATING USES	2,0
Total			▶ 3a	112,800

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

	or substantial contributor			
a Paid during the year				
WHEAT INC674 WASHINGTON AVE WEST HAVEN, CT 06516	NONE	PUBLIC	GENERAL OPERATING USES	2,000

WEST HAVEN, CT 06516				
YALE NEW HAVEN CHAPLAINCY 20 YORK ST NEW HAVEN, CT 06504	NONE	PUBLIC	GENERAL OPERATING USES	2,000

20 YORK ST NEW HAVEN, CT 06504	NONE	PUBLIC	GENERAL OPERATING USES	2,000
YOUTH CONTINUUM141 VALLEY ST	NONE	PUBLIC	GENERAL OPERATING USES	4,000

NEW HAVEN, CT 06504				
YOUTH CONTINUUM141 VALLEY ST	NONE	PUBLIC	GENERAL OPERATING USES	4,000

INEW HAVEIN	, C1 00304				1
YOUTH CON'	TINUUM141 VALLEY ST , CT 06515	NONE	PUBLIC	GENERAL OPERATING USES	4,000

YOUTH CONTINUUM141 VALLEY ST NEW HAVEN, CT 06515	NONE	PUBLIC	GENERAL OPERATING USES	4,000
Total			▶ 3a	112,800

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491297010070 TY 2019 Explanation of Non-Filing with Attorney General Statement Name: CITY MISSIONARY ASSOCIATION OF NEW HAVEN C/O KIRCALDIE RANDALL & MCNAB LLC **EIN:** 06-6032939 Statement: NOT REQUIRED BY STATE OF CONNECTICUT BECAUSE FOUNDATION DOES NOT SOLICIT ANY FUNDS

TY 2019 Inve	stments Corporate	Bonds Sche	dule	

Name: CITY MISSIONARY ASSOCIATION OF NEW HAVEN

DLN: 93491297010070

109,540

111,071

C/O KIRCALDIE RANDALL & MCNAB LLC

EIN: 06-6032939

Torrest and a Committee Committee	 	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SPDR BLOOMBERG BARCLAYS HIGH YIELD BD ETF 1000 SHARES

investments corporate bonds schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value
COLUMBIA TOTAL RETURN BOND FUND, 43,994.974 SHARES	386,612	405,634

TY 2019 Investments Corporate Stock Schedule

Name: CITY MISSIONARY ASSOCIATION OF NEW HAVEN

C/O KIRCALDIE RANDALL & MCNAB LLC

EIN: 06-6032939

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
3M, 200 SHARES	18,815	35,284	
ABBOTT LABS, 1,000 SHARES	2,510	86,860	
ABBVIE, 750 SHARES	2,041	66,405	
ADOBE, 25 SHARES	8,319	8,245	
ALPHABET, 25 SHARES	21,819	33,426	
AMAZON, 100 SHARES	16,042	18,478	
APPLE, 400 SHARES	50,439	117,460	
APPLIED MATERIALS, 200 SHARES	8,038	12,208	
AT&T INC, 1,500 SHARES	5,527	58,620	
BERKSHIRE HATHAWAY INC DEL, 250 SHARES	13,450	56,625	
BOEING, 100 SHARES	14,804	32,576	
BROADCOM, 50 SHARES	11,678	15,801	
CHEVRON CORP, 300 SHARES	9,359	36,153	
CISCO, 1000 SHARES	28,794	47,960	
CITIGROUP 1000 SHARES	60,950	79,890	
DISNEY, 200 SHARES	20,373	28,926	
DOW, 250 SHARES	1,483	13,683	
DUPONTS, 250 SHARES	2,177	16,050	
EATON CORP, 500 SHARES	25,953	47,360	
EXXON MOBIL, 400 SHARES	0	27,912	
GOLDMAN SACHS, 50 SHARES	12,351	11,497	
HOME DEPOT, 50 SHARES	9,958	10,919	
INTEL, 300 SHARES	11,177	17,955	
IRON MOUNTAIN, 150 SHARES	5,018	4,781	
ISHARES CORES MSCI EAFE ETF, 2500 SHARES	147,392	163,100	
ISHARES CORES MSCI EMERGING MARKETS ETF, 2500 SHARES	122,638	134,400	
ISHARES CORE S&P MID CAP EFT, 1200 SHARES	238,723	257,275	
ISHARES CORE S&P SMALL CAP EFT, 2000 SHARES	149,018	167,700	
J P MORGAN CHASE, 700 SHARES	29,990	97,580	
JOHNSON & JOHNSON, 500 SHARES	27,460	72,935	

Name of Stock

VISA, 100 SHARES

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
KIMBERLY CLARK CORP, 450 SHARES	8,880	61,898
L-3HARRIS TECHNOLOGIES, 200 SHARES	10,458	39,574
MASTERCARD, 25 SHARES	7,498	7,465
MCDONALDS, 50 SHARES	9,896	9,881
MICROSOFT, 500 SHARES	32,201	78,850
MORGAN STANLEY, 350 SHARES	16,861	17,892
NIKE, 100 SHARES	7,820	10,131
NOVARTIS, 100 SHARES	6,819	9,469
PEPSICO INC, 400 SHARES	5,018	54,668
PHILLIPS 66, 200 SHARES	5,804	22,282
SALESFORCE.COM, 100 SHARES	12,155	16,264
TARGET, 150 SHARES	11,229	19,232
UNITED TECHNOLOGIES CORP, 250 SHARES	7,622	37,440
VERIZON COMMUNICATIONS, 100 SHARES	6,138	6,140

11,986

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TY 2019 Other Income Schedul	e	
Name: (CITY MISSIONAR	Y ASSOCIATION OF NEW HAVEN

	C/O KIRCALDIE RANDALL & MCNAB LLC
EIN:	06-6032939
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Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income

Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable								
Name: CITY MISSIONARY ASSOCIATION OF NEW HAVEN C/O KIRCALDIE RANDALL & MCNAB LLC								
TY 2019 Other Professional Fees Schedule								
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20,646

20,646

BANK OF AMERICA

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TY 2019 Taxes Schedule							
Name: CITY MISSIONARY ASSOCIATION OF NEW HAVEN C/O KIRCALDIE RANDALL & MCNAB LLC EIN: 06-6032939							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
IRS EXCISE TAXES 2018	1,641	0		0			
REAL ESTATE TAXES	1	0		0			