EXTENDED TO AUGUST 15, 2018

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u> </u>	or the	2016 calendar year, or tax year beginning OCT 1, 2016 and el	naing 5	EP 30, 2011	
Вс	heck if pplicable			D Employer identific	cation number
	Addres change Name				++0405
<u> </u>	change Initial				**0195
E	return Finat return/	OUU CHADEL CMDEEM	loom/suite	E Telephone number 203-	787-0646
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,344,167.
	Ameno			H(a) Is this a group re	
\vdash	⊒retum ∏Applic			rita) is this a group re	? Yes X No
_	Ution pendin	SAME AS C ABOVE			
_			1 1	H(b) Are all subordinates in	
		empt status: X 501(c)(3)	r 527	1	list. (see instructions)
		e: WWW.CTENVIRONMENT.ORG		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year	of formation: 1978 N	State of legal domicile: CT
Pε		Summary			
Activities & Governance		Briefly describe the organization's mission or most significant activities: ${f TO}$ ${f PR}$ ${f AIR}$ ${f AND}$ ${f WATER}$.	OTECT	AND IMPROV	E THE LAND,
		Check this box Lift the organization discontinued its operations or dispose	od of more	than 2504 of its not as	rente
Ver					19
B	3	Number of voting members of the governing body (Part VI, line 1a)		3	19
•6		Number of independent voting members of the governing body (Part VI, line 1b)			
ies		Total number of individuals employed in calendar year 2016 (Part V, line 2a)			42
₹	6	Total number of volunteers (estimate if necessary)		6	1725
Ą		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	Ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)		4,475,721.	4,538,048.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		175,408.	610,760.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,651,129.	5,148,808.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Paralle and the second and the secon		0.	0.
40		Salaries, other compensation, employee benefits (Part IX, column (A), line 4)		2,434,242.	2,553,933.
Se				0.	0.
듄	loa	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 584,53	:::····	<u> </u>	0.
Expenses				2,684,264.	1 100 472
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,118,506.	
. 40	19	Revenue less expenses. Subtract line 18 from line 12		-467,377.	
ts or			Be	ginning of Current Year	End of Year
Net Asset Fund Batan	20	Total assets (Part X, line 16)		7,616,368.	9,111,961.
\$₹	21	Total liabilities (Part X, line 26)		216,363.	338,106.
		Net assets or fund balances. Subtract line 21 from line 20		7,400,005.	8,773,855.
_	art II				
Und	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	y knowledge and belief, it is
true	, correc	at, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich prepare:	has any knowledge.	
		Amala Robinsia		8/5	118
Sig	п	Signature of officer		Date	
Her		AMADO RODRIGUEZ, CHIEF FINANCIAL OFFIC	CER		
	_	Type or print name and title			
_		Print/Type preparer's name Preparer's signature	Т	Date Check	I PTIN
Paid	d	LISA WILLS		il i	
	parer	Firm's name WHITTLESEY PC		self-empter	**-***3326
	Only	Firm's address 280 TRUMBULL STREET, 24TH FLOOR		FILLI S CIM	
540	Jany	HARTFORD, CT 06103		D 0 6	0.522.3111
_	. 11			j Phone no. 6 6	
<u>Ma</u>	y tne li	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 990 (2016) CONNECTICUT Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors	1 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If *Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		V	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	Towns of the
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
_	as applicable.		11.02	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			\vdash
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	115		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	40-	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	<u> </u>	
Ų	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	176		-
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

Form 990 (2016) CONNECTICUT FUND F
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		i	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			₹.
	Schedule L, Part I	25b		<u>X</u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	00		x
07	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21	No.	
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-37 /f "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X_
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	3.5
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	_	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note. All Form 990 filers are required to complete Schedule O	38	X	(05 4 6)
		rom	1 520	(2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Second S		Check if Schedule O contains a response or note to any line in this Part V					
b Enter the number of Forms W2G included in line 1s. Enter-0-lined applicable Did the organization comply with backey withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 22 Enter the number of employees reported on Form W3, Transmittat of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 25 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 26 X 27 X 28 If If least one is reported on line 2a, did the organization file all required federal employment tax returns? 28 Did the organization bar van unrelated business gross income of \$1,000 or more during the year? 29 Septiment of the organization in Schedule O 40 A rary time during the calendar year, did the organization for schedule O 41 A rary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42 A rary time during the calendar year, did the organization, securities account, or other financial account; 43 If Yes, the name of the foreign country. 44 Septiment of the foreign country (such as a bank account, securities account, or other financial account)? 55 Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 56 Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 56 Was the organization in security of the organization that it was or is a party to a prohibited tax shelter transaction or the party of the						Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) withings to picts withins without similar to the provided of the calculation of the provided	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	19		-	
gambing) winnings to prize winners? Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Filed for the calendar year ending with or within the year covered by this return Filed for the calendar year ending with or within the year covered by this return Filed for the calendar year ending with or within the year covered by this return Filed for the calendar year ending with or within the year covered by this return Filed for the calendar year did the organization file all required federal employment tax returns? Filed for the calendar year, did the organization file all required federal employment tax returns? Filed for the calendar year, did the organization file all required federal employment tax returns? Filed for the calendar year, did the organization file and interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Filed F	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
22 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 1 at least one is reported on line 2a, did the organization file all required federal employment tax returns? 25 X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 30 bit the organization have unrelated business gross income 61 folloon or more during the year? 3a X 3b If "Yes," has if filed a Form 890-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b If "Yes," and the name of the foreign country? 3c A An yit me the name of the foreign country? 3b If "Yes," and the name of the foreign country? 3c If "Yes," and the name of the foreign country? 3c If "Yes," to line in a party to a prohibited tax shelter transaction at any time during the tax year? 3c If "Yes," to line 5a or 5b, did the organization file form 8886-17 3c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 3c If "Yes," did the organization have that war or is a party to a prohibited tax shelter transaction? 3c If "Yes," did the organization in kind the wery solicitation an express statement that such contributions or gifts were not tax deductible? 3c If "Yes," did the organization inked with every solicitation an express statement that such contributions or gifts were not tax deductible? 3c If "Yes," did the organization incide a payment in excess of 5f made party bar so prohibited than that such contributions or gifts were not tax deductible? 3c If "Yes," did the organization incides a payment in excess of 5f made party bar so contribution and party for goods and services provided to the payor? 3c If Yes," did the organization incides a payment in excess of 5f made party bar so contribution and party for goods and services provided to the payor? 3c If If Yes, "If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
filled for the calendar year ending with or within the year covered by this return 2a		(gambling) winnings to prize winners?			10	X	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 30 Did the organization have unrelated business gross income of \$1,000 or more during the year? 31 Did the organization have unrelated business gross income of \$1,000 or more during the year? 32 A any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 32 A as a time the name of the foreign country: № 33	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				other -	
Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 41. All any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly? 42. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 43. A transfer the name of the foreign country. 44. X 45. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 55. Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 56. X 57. If "Yes," the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles as charitable contributions? 66. We remote that deductible as charitable contributions? 67. Organization that may receive deductible contributions under section 170(c). 68. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible scharible contributions? 68. Y 69. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 69. If "Yes," did the organization include with every solicitation and partly for goods and services provided to the payor? 70. If "Yes," did the organization include deductible contributions under section 170(c). 71. If "Yes," did the organization on only the donor of the value of the goods or services provided? 72. The first organization organization only the donor of the value of the goods or services provided? 73. If "Yes," indicate the		filed for the calendar year ending with or within the year covered by this return	2a	42			12.0
3a bit the organization have unrelated business gross income of \$1,000 or more during the year? 4b if "Yes," has it filed a Form 990-f for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 5b If "Yes," after the name of the foreign country: Such as a bank account, securities account, or other financial accounts (FBAR). 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," did the organization involve with every solicitation an express statement that such contributions or gifts were not tax deductibles as charitable contributions? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization netween yargment in excess of 55 made party as a contribution and party for goods and services provided to the payer? 8d If "Yes," did the organization netween yargment in excess of 55 made party as a contribution of 170(c). 9d If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If If Yes, indicate the number of Forms 8282 fled during the year 9d If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e If If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099 C? 8d Spo	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b		X
b if "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0 4a At any time during the celendar year, did the organization have an interest in, or a signature or other authority over, a financial account is foreign country (and the organization neare an interest in, or a signature or other authority over, a financial account in a foreign country. 4a X b If "Yes," enter the name of the foreign country. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c Were, or tax deductible? 7c Organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c Were not tax deductible? 7c Organizations that many receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that many receive a payment in excess of \$76 made party as contribution and partly for goods and services provided to the payor? 7a X 8d If "Yes," indicate the number of Forms 8282 filed during the year 8 bid the organization sel, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year 9 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7a X 7b X 7c X 7c X 7c X 7d C 8 Sponsorring organization make a distribution of qualified intellectual property, did the organization file Form 8899 as required? 10 If the o							
4a Al any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, so count, or other financial account)? See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). So Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b If Yes, "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b If Yes, "to line 5a or 5b, did the organization file Form 8886-T7 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X 5b If Yes," tid life the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 6c Did the organization receive a pyment in excess of \$75 made party as a contribution and party for poods and services provided the payor? 7b If Yes," did the organization notify the donor of the value of the goods or services provided? 7c Did the organization received a pyment in excess of \$75 made party as a contribution of prometry for which it was required to file Form 8282? 8d If Yes," indicate the number of Forms 8282 filed during the year 6 Did the organization received a contribution of qualified intellectual property, did the organization flee organization flee organization received a contribution of qualified intellectual property, did the organization file organization make entry taxable distributions under section 49687 8 Sponsoring organizations make a distribution to a donor advised fund maintained by the sponsoring organizatio					3a		X
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11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b							8
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	а		11a				3/
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b					201	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b 15 Yes, "has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		amounts due or received from them.)	11b		II de		
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization receive any payments? If "No," provide an explanation in Schedule O. 14b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b 17ex year? 18a 18b 18b 19b 19b 19c 19c 19c 19c 19c 19	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		Note. See the instructions for additional information the organization must report on Schedule O.				12	
c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b					4 3	
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			13b			1	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	C		13c	i)		122	1000
		T V (0) IN MARKET			$\overline{}$		<u>X</u>
	<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ie O			- 000	100.45

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X	
Sec	tion A. Governing Body and Management				
			Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year1a 19				
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		"MI		
b	Enter the number of voting members included in line 1a, above, who are independent1b19			1 3	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?	2	2000	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X	
5	9				
6	Did the organization have members or stockholders?	6	X		
7a	Francisco		l <u></u>		
	more members of the governing body?	7a	X	_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
_	persons other than the governing body?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
	The governing body?	8a	X		
b	Each committee with authority to act on behalf of the governing body?	8b	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			١.,	
600	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				
40-	Pid the annual state to the land at the state of the stat		Yes	No	
	Did the organization have local chapters, branches, or affiliates?	10a			
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401			
444	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Α.		
b 12a		40-	X	1	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	-	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	-		
		12c	x		
13	in Schedule O how this was done Did the organization have a written whistleblower policy?	13	X		
14	Did the organization have a written document retention and destruction policy?	14	X		
15	Did the process for determining compensation of the following persons include a review and approval by independent	1-4		0 111	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO Evecutive Director, or ton management official	15a	Х	-	
	Other officers or key employees of the organization	15b	X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		100		
	taxable entity during the year?	16a		X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		3		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	:	1		
	exempt status with respect to such arrangements?	16b	-		
Sec	tion C. Disclosure	, , , ,			
17	List the states with which a copy of this Form 990 is required to be filed ▶CT, NY				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availal	ole		
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website X Upon request Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial		
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's books and records.				
	AMADO RODRIGUEZ - 203-787-0646				
	900 CHAPEL STREET; SUITE 2202, NEW HAVEN, CT 06510				
63200	3 11-11-18	Forr	n 990	(2016	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter :0. in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box if fleather the organization	THU ALLY TOTALEU	rige	11 1146			HPE	nadt		inector, or trustee.	
(A)	(B)			_ {C				(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi	ition more	than	DDe	Reportable	Reportable	Estimated
	hours per	box,	, unle	sa per	rzon	is bot	h an	compensation	compensation	amount of
	week	\vdash	ser an	nd a di	irecto	W/UUS	(100)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for	충	9,3			ited		organization	(W-2/1099-MISC)	from the
	related	Ste	nste			bens		(W-2/1099-MISC)		organization
	organizations	量	120		96.96	8 8	- 1			and related
	below	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) LESLIE LEE	line) 4 . 0 0	ij	Ĕ	8	3	美品	2	_		
CHAIR	4.00	$ \mathbf{x} $		x		1		0.	0.	0.
(2) JOHAN VAREKAMP PH.D.	2.00	₽	₩	Ĥ	⊢	\vdash		- 0.	· ·	<u> </u>
VICE CHAIR	2.00	$ \mathbf{x} $		$ \mathbf{x} $				0.	0.	0.
(3) DIANE B. STONER	2.00	A	H	A	⊢	\vdash	\vdash	0.	0.	0.
TREASURER	2.00	$ \mathbf{x} $		$ \mathbf{x} $				0.	0.	0.
(4) MARJAN MASHHADI	2.00	A	\vdash		\vdash			0.	0.	- 0.
SECRETARY	2.00	x		$ \mathbf{x} $		ı		0.	0.	0.
(5) ELIZABETH C. ALEXANDER	0.50	 	\vdash		\vdash	┢	\vdash	0.	0.	
DIRECTOR	0.50	\mathbf{x}						0.	0.	0.
(6) DON ELLIOTT	0.50	H	\vdash	\vdash	\vdash	\vdash	\vdash			
DIRECTOR		x						0.	_ 0.	0.
(7) BLANDINA W. BREWSTER	0.50	1	\vdash	一	一	\vdash			•	
DIRECTOR		x						0.	0.	0.
(8) BARBARA DAVID	0.50	╀	\vdash	\vdash	\vdash					
DIRECTOR		\mathbf{x}						0.	0.	0.
(9) RAPHAEL ELKIND	0.50			Г	Т					
DIRECTOR		X				П		0.	0.	0.
(10) ELIZABETH GILSON, ESQ.	0.50	\vdash		\Box		1		ĺ		_
DIRECTOR		X						0.	0.	0.
(11) EVAN HELLER	0.50	Т		П	П					
DIRECTOR		X						0.	0.	0.
(12) THOMAS F. HOLLOWAY	0.50	Т	П		П	П				_
DIRECTOR		X				ı		0.	0.	0.
(13) W. CAMPBELL HUDSON III, ESQ.	0.50	П	П	П	П	П	П			_
DIRECTOR		X				1		0.	0.	0.
(14) TODD CORT	0.50		П	П	П	Т				
DIRECTOR		X						0.	0.	0.
(15) KATHERINE KENNEDY, M.D.	0.50		П		Г		-			
DIRECTOR		X						0.	0.	== 0.
(16) CHRISTINE LODEWICK	0.50									
DIRECTOR		X	L			L		0.	0.	0.
(17) ANNE LACOUTURE PENNIMAN	0.50									
DIRECTOR		\mathbf{x}						0.	0.	0.

632007 11-11-16

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Page 8

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (D) Revenue excluded from tax under Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues 16 c Fundraising events d Related organizations 1d 548,643 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 3,989,405, g Noncash contributions included in lines 1a-1f: \$ 4,538,048. h Total. Add lines 1a-1f . Business Code Program Service Revenue All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 70,871 70,871. Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) ... (i) Securities 7 a Gross amount from sales of (ii) Other 3,735,248. assets other than inventory b Less: cost or other basis and sales expenses 3,195,359. c Gain or (loss) 539,889 539,889. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from garning activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a b d All other revenue e Total. Add lines 11a-11d 5,148,808. 0. 610,760. Total revenue. See instructions. Form 990 (2016)

ecti	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respons			(6)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				Six III'' S
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	1			
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	123,577.	79,685.	22,787.	21,105
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.000	4 000 554	260 010	240 600
7	Other salaries and wages	2,006,089.	1,293,574.	369,913.	342,602
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	424,267.	289,797.	70,294.	64,176
0	Payroll taxes				
1	Fees for services (non-employees):				
а	Management				
b	Legal	17,043.	8,174.	7,933.	936
C	Accounting	52,450.	25,152.	24,414.	2,884
d	Lobbying	49,523.	35,722.	2,951.	10,850
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	23,319.		23,319.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	223,585.	207,060.	269.	16,256
2	Advertising and promotion	4,693.	4,693.		
13	Office expenses	141,055.	63,075.	13,944.	64,036
14	Information technology	85,905.	57,796.	15,352.	12,757
15	Royalties				
16	Occupancy	149,194.	103,669.	26,319.	19,206
17	Travel	70,834.	68,713.	378.	1,743
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,521.	2,846.	1,675.	
20	Interest				
21	Payments to affiliates	W			
22	Depreciation, depletion, and amortization	13,242.	3,115.	9,836.	291
23	Insurance	34,601.	27,734.	3,234.	3,633
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PNOTNERDS AND CONSERDIGE [126,922.	126,922.		
h	WAMPRIAL C AND DROCKAM	102,165.	75,941.	10,785.	15,439
C	MEMBERGUID ACQUITETMICAL	10,421.	1,805.		8,616
d			2,000		0,010
	All other expenses			G+S	
	Total functional expenses. Add lines 1 through 24e	3,663,406.	2,475,473.	603,403.	584,530
25_ 26	Joint costs. Complete this line only if the organization	5,505,2001	5121312131	503/4031	502,550
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	educational campaign and fundraising solicitation.		iii		

Part	X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			361,327.	1	731,054.
	2	Savings and temporary cash investments	0 4			2	
	3	Pledges and grants receivable, net		621,980.	3	707,232.	
	4	Accounts receivable, net	************		162,610.	4	166,350.
		Loans and other receivables from current and for				331 f	
		trustees, key employees, and highest compensation		(2)			
		Part II of Schedule L	•			5	
	6	Loans and other receivables from other disquali					
	_	section 4958(f)(1)), persons described in section		60		100	
		employers and sponsoring organizations of seci					
y,		employees' beneficiary organizations (see instr).	-			6	
Assets	7	Notes and loans receivable, net				7	
AS	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	***********		40,237.	9	76,425.
١.		Land, buildings, and equipment: cost or other	ī ī				www.ll
		basis. Complete Part VI of Schedule D	10a	266,612.			
	h	Less: accumulated depreciation	10h	191,894.	85,819.	10c	74,718.
.	11	Investments · publicly traded securities	100	<u> </u>	3,551,965.	11	4,451,443.
- 1	12	Investments - other securities. See Part IV, line			-,,	12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		2,792,430.	15	2,904,739	
	16	Total assets. Add lines 1 through 15 (must equ			7,616,368.		9,111,961
\rightarrow	17	Accounts payable and accrued expenses			216,363.		188,106
- 1	18	Grants payable			220,0001	18	100,100.
	19					19	
- 1	20	Deferred revenue		***************************************		20	
- 1	21	Tax-exempt bond liabilities	Part IV of	Schodula D		21	
- 1	22	Loans and other payables to current and former				21	
` ë	~~	key employees, highest compensated employee	100			45	
Liabilities		Complete Part II of Schedule L				22	
열 .	23	Secured mortgages and notes payable to unreli				23	-
- 1	24	Unsecured notes and loans payable to unrelate				24	
- 1	25	Other liabilities (including federal income tax, pa			·	24	
'	25	parties, and other liabilities not included on lines	•				
		• = = •	* 80	'	0.	25	150,000.
١,	26	Schedule D Total liabilities. Add lines 17 through 25			216,363.		338,106.
- 1	20	Organizations that follow SFAS 117 (ASC 958	1) chack	here X and	220,000.	20	330,200.
co l		complete lines 27 through 29, and lines 33 ar		Hele P Last Bild			
ë .	27	Unrestricted net assets		1	1,672,281.	27	1,754,738.
<u> </u>	28	Temporarily restricted net assets			3,448,125.	28	3,789,084
<u>.</u>	29 29				2,279,599.		3,230,033
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (A	_,_,,,,,,,,,,	20	0,20,000		
ᄕ		and complete lines 30 through 34.	المدد محا	Oliscy liels			
S.	20					30	
SSe	30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund					31	
₹ :	31 32	Retained earnings, endowment, accumulated in				32	
Ž I	32 33				7,400,005.		8,773,855.
- 1	34	Total net assets or fund balances Total liabilities and net assets/fund balances .			7,616,368.		9,111,961.
		Total liabilities and fiet assets/fulfu Dalarices .			.,010,000	34	Form 990 (2016

Form 990 (2016)

	990 (2016) CONNECTICUT FUND FOR THE ENVIRONMENT	**-***	195	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
			ar of Cadanasa (A.)	0.011	
1	Total revenue (must equal Part VIII, column (A), line 12)		5,148		
2	Total expenses (must equal Part IX, column (A), line 25)		3,663	•	
3	Revenue less expenses. Subtract line 2 from line 1		1,485		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,400		
5	Net unrealized gains (losses) on investments	5	-225	5,9	11.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	114	1,3	59.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10 8	8,773	3,8	55.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			200	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accruat Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			3
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed			W 85	
	separate basis, consolidated basis, or both:				12011
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			1
	consolidated basis, or both:		2=		
	X Separate basis Consolidated basis Both consolidated and separate basis				0.8
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		2300		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	.35		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Name of the organization **Employer identification number** **-***0195 CONNECTICUT FUND FOR THE ENVIRONMENT Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii), Enter the hospital's name. city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 support (see instructions) organization support (see instructions) Yes above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sar	tion A. Public Support	Dolott, pica	oo oonplote i diti	,			
		(=) 0040	(1-) 0040	(a) 004 ((4) 5545	(-) 0040	40 T-4: *
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "upusual grants.")	2,377,689.	2,277,368.	4,629,339.	4 473 206	4 539 049	10 205 650
_	include any "unusual grants.") Tax revenues levied for the organ-	2,377,003.	2,277,300.	4,023,333.	4,473,206.	4,538,048.	18,295,650.
~	ization's benefit and either paid to	į					
	or expended on its behalf						
2	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,377,689.	2,277,368.	4,629,339.	4,473,206.	4,538,048.	18,295,650.
	The portion of total contributions						,,
-	by each person (other than a		1,3 33 10				
	governmental unit or publicly					20 T	
	supported organization) included					110 32 70	
	on line 1 that exceeds 2% of the					A TEE VAL	
	amount shown on line 11,						
	column (f)						1,657,528.
6	Public support. Subtract line 5 from line 4		Section 1 Section 1	FCN-SE-IS-IS			16,638,122.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	2,377,689.	2,277,368.	4,629,339.	4,473,206.	4,538,048.	18,295,650.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	122,727.	142,961.	214,842.	175,408.	610,760.	1,266,698.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain			_			
	or loss from the sale of capital						
	assets (Explain in Part VI.)	23,458.	49,281.	55,470.			128,209.
11	Total support. Add lines 7 through 10						19,690,557.
	Gross receipts from related activities,	etc. (see instruction	วกร)			12	
	First five years. If the Form 990 is for	•				n 501(c)(3)	
	organization, check this box and stor	o here					
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (line 6, column (f) di	vided by line 11, o	olumn (f))		14	84.50 %
15	Public support percentage from 2015	Schedule A, Part	II, line 14		111111111111111111111111111111111111111	15	89.23 %
16a	33 1/3% support test - 2016. If the						
	stop here. The organization qualifies						
Ŀ	33 1/3% support test - 2015. If the	organization did no	t check a box on l	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
172	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not d	check a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check tl	his box and stop h	ere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		
ŧ	10% -facts-and-circumstances tes						
	more, and if the organization meets to						
	organization meets the "facts-and-cire						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l	o, check this box a	and see instruction	ıs
					Scho	edule A (Form 990	or 990-EZ) 2016

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support		2	· · · · · · · · · · · · · · · · · · ·			
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	6 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		1				
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						1
3	Gross receipts from activities that					1	
•	are not an unrelated trade or bus-						
	iness under section 513						
A	Tax revenues levied for the organ-					 	
*	_						
	ization's benefit and either paid to						
_	or expended on its behalf				<u> </u>		
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5			N.			
7:	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
- 1	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		·		1		
	amount on line 13 for the year						
	Add lines 7a and 7b	January January	20 20 20				
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	6 (f) Total
9	Amounts from line 6						
	a Gross income from interest,						
	dividends, payments received on	1		ĺ			
	securities loans, rents, royalties and income from similar sources					1	
- 1	Unrelated business taxable income		i			 	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			1			
	Add lines 10a and 10b					 	
	Net income from unrelated business	-					
	activities not included in line 10b,					1	
	whether or not the business is					1	i
12	regularly carried on Other income. Do not include gain					-	
12	or loss from the sale of capital				1		
	assets (Explain in Part VI.)					-	
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	_					rganization,
<u>-2</u>	check this box and stop here	l'a Commant Da					PL
_	ction C. Computation of Pub					1 1	
	Public support percentage for 2016					15	96
	Public support percentage from 201:				<u> </u>	16	96
	ction D. Computation of Inve					Lan	
	Investment income percentage for 2					17	%
	Investment income percentage from					18	96
19	a 33 1/3% support tests - 2016. If the	_					
	more than 33 1/3%, check this box a						
	b 33 1/3% support tests - 2015. If the	_					
	line 18 is not more than 33 1/3%, ch					_	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	.

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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10b	90-E7	1 2016

Part	t V	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations
	1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instruct

other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 4 Add lines 1 through 3 4 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 10 d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Lickeck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

-*0195 Page 7 Schedule A (Form 990 or 990-EZ) 2016 CONNECTICUT FUND FOR THE ENVIRONMENT Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions 9 Distributable amount for 2016 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (i) (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2016 Amount for 2016 1 Distributable amount for 2016 from Section C, line 6 2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions Excess distributions carryover, if any, to 2016: a ь c From 2013 d From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount Carryover from 2011 not applied (see instructions) Remainder, Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2016 from Section D. line 7: a Applied to underdistributions of prior years b Applied to 2016 distributable amount c Remainder. Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions Excess distributions carryover to 2017. Add lines 3j 8 Breakdown of line 7: b Excess from 2013 c Excess from 2014 d Excess from 2015

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

chedule A	(Form 990 or 990-E	Z) 2016 CONNECTI	CUT FUND	FOR THE	ENVIRONMENT	**-***0195 Pag
Part VI	Supplementa Part IV, Section A line 1; Part IV, Sec Section D, lines 5.	I Information. Provide, lines 1, 2, 3b, 3c, 4b, 4c, ation D, lines 2 and 3; Part. 6, and 8; and Part V. Se.	e the explanation , 5a, 6, 9a, 9b, 9 t IV. Section E. li	ns required by Pa c, 11a, 11b, and nes 1c, 2a, 2b, 3	ut II, line 10; Part II, line 17a 11c; Part IV, Section B, line a, and 3b; Part V, line 1; Par nplete this part for any addi	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, t V. Section B. line 1e: Part V.
	(See instructions.))				
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Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Employer identification number

CONNECTICUT FUND FOR THE ENVIRONMENT **-***0195 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. J For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016
Open to Public

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• ;	Section 501(c)(4), (5), or (6) organizar	tions: Complete Part III.			
Narr	ne of organization			Emp	oyer identification number
		ICUT FUND FOR TH			**-***0195
Pa	rt I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	tures			
Pa	rt I-B Complete if the org	ganization is exempt und	der section 501(c)(3).	
	Enter the amount of any excise tax	·			
	Enter the amount of any excise tax			5 > \$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
	Was a correction made?				Yes No
	olf "Yes," describe in Part IV. art I-C Complete if the org	anization is exempt und	der section 501(c	except section 501	(c)(3).
	Enter the amount directly expende	<u> </u>		•	
	Enter the amount of the filing organ				
	exempt function activities			▶ 5	S
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	line 17b				
4	3 - 3				
5	made payments. For each organiza	ation listed, enter the amount pa	id from the filing organ	ization's funds. Also enter t	he amount of political
	contributions received that were propolitical action committee (PAC). If				ate segregated lund or a
					(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
	10				
			F E		
		9			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 C	ONNECTICUT	FUND FOR TH	E ENVIRONM	ENT **-*	**0195 Page 2
Part II-A Complete if the orga section 501(h)).	nization is exem	pt under section	501(c)(3) and file	ed Form 5768 (el	ection under
A Check Lift the filing organization	on belongs to an affilia	ited group (and list in l	Part IV each affiliated	group member's nam	e, address, EIN,
	of excess lobbying ex	•			
B Check L if the filing organization	on checked box A and	l "limited control" prov	isions apply.		
	on Lobbying Expend tures" means amoun			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public oninion (a)	rass roots lobbying)		2,712.	
b Total lobbying expenditures to influe				43,252.	
c Total lobbying expenditures (add line				45,964.	
d Other exempt purpose expenditures		***************************************	Proceedings of the process of the contract of	3,617,442.	
e Total exempt purpose expenditures				3,663,406.	
f Lobbying nontaxable amount. Enter				333,170.	
If the amount on line 1e, column (a) or		ying nontaxable amo	- 77		
Not over \$500,000	The state of the s	e amount on line 1e.			
Over \$500,000 but not over \$1,000,0	000,000	plus 15% of the exce	ss over \$500,000.		
Over \$1,000,000 but not over \$1,500	0,000 \$175,000	plus 10% of the exce	ss over \$1,000,000		S. Vincial
Over \$1,500,000 but not over \$17,00	00,000 \$225,000	plus 5% of the exces	s over \$1,500,000.		
Over \$17,000,000	\$1,000,00	00.			
g Grassroots nontaxable amount (ente	er 25% of line 1f)		***************************************	83,293.	
h Subtract line 1g from line 1a. If zero	or less, enter -0-			0.	
i Subtract line 1f from line 1c, If zero of				0.	
j If there is an amount other than zero reporting section 4911 tax for this ye		ne 1i, did the organizat			Yes No
(Some organizations that	t made a section 50	aging Period Under s 1(h) election do not h te instructions for line	ave to complete all	of the five columns b	elow.
	Lobbying Expend	ditures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	318,927.	334,911.	406,649.	333,170.	1,393,657
b Lobbying ceiling amount (150% of line 2a, column(e))					2,090,486
c Total lobbying expenditures	94,764.	94,312.	45,809.	45,964.	280,849
d Grassroots nontaxable amount	79,732.	83,728.	101,662.	83,293.	348,415
e Grassroots ceiling amount (150% of line 2d, column (e))					522,623
4. Conservate labbuing evanditures	10.045	2 639	2 992	2 712.	18 388

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 CONNECTICUT FUND FOR THE ENVIRONMENT **-***019 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public?	Yes)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public?		No	Amo	unt
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public?				
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public?		474.00		
c Media advertisements? d Mailings to members, legislators, or the public?				
d Mailings to members, legislators, or the public?				
a Chibliantiana ay ay bishad ay basadanat atatawanta?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?			_	
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?		-		
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			-33.53	-
b If "Yes," enter the amount of any tax incurred under section 4912		TIE		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section	m E04/s\4	(F) ====	etier	
	n sur(c)	oj, or se	ction	
501(c)(6).			Voc	Ma
A 184			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
Dues, assessments and similar amounts from members		. 1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic		***		
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year				
c Total				
		3		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		15.50		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc 		2 4 7 7 7		
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the organization agree to carryover. 	olitical	4		
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds 	olitical	4		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization **Employer identification number** **-***0195 CONNECTICUT FUND FOR THE ENVIRONMENT Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

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		ICUT FUND			•	**_**	*0195	Page 2
	t III Organizations Maintaining C							
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant	use of its	collection	items
	(check all that apply):		-					
а	Public exhibition	d		hange programs				
b	Scholarly research	e	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co			-		ose in Pari	t XIII.	
5	During the year, did the organization solicit of			10.5			-1	
-	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?		<u>L</u>	Yes	No_
Par	TIV Escrow and Custodial Arran		te if the organization	n answered "Yes" o	n Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi		-				٦ .	
	on Form 990, Part X?	********					」 Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:					
							Amount	
	Beginning balance							
a	Additions during the year				1d			
	Distributions during the year				1e			
f	Ending balance	000 D-4 V E	04 (1f		I.v.	1 1.
							J Yes	⊢ No
_	If "Yes," explain the arrangement in Part XIII. To Endowment Funds. Complete in							
1 64	Lita William Complete	(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	oare back	(a) Four	ears back
1a	Beginning of year balance	3,551,965.	3,271,223.	3,301,376,		53,270.		377,369.
	Contributions	925,219.	0,012,2401	27,149.	3,0	33,270.	,	377,305.
	Net investment earnings, gains, and losses	361,530.	343,833,	9,976.	2	90,136.		330,865.
	Grants or scholarships	302,330.	343,003.	3,570.	-	.50,130.		330,003.
	Other expenditures for facilities		-					
	and programs	387,271.	63,091.	67,278.		42,030.	1	654,964.
f	Administrative expenses		,			12,030.		331,301,
	End of year balance	4,451,443.	3,551,965.	3,271,223.	3 3	01,376.	3	053,270.
2	Provide the estimated percentage of the curr				-,-		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Board designated or quasi-endowment	33.00	%	,,, 11010 00				
	Permanent endowment ▶ 51.00	96						
	Temporarily restricted endowment ▶ 1							
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	•	ation that are held a	nd administered for	the organiz	zation		
	by:	-			3		[·	Yes No
	(i) unrelated organizations	6500 0.000 00	156,000,000,000,000,000					X
	(ii) related organizations	54 2565 285					3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?				3b	\neg
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line 11a. S	See Form 990, Part >	, line 10.			
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	ccumulate	ed	(d) Book	value
		basis (investr	nent) basis	(other) de	preciation			
1a	Land			English				
	Buildings							
	Leasehold improvements		-					
d	Equipment		26	6,612.	191,8	94.	74	,718.
	Other					_		
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. column (B), line 1	(Oc.)			74	,718.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2016

(8)

150,000.

Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Name of the organization

Employer identification number **-***0195

CONNECTICUT FUND FOR THE ENVIRONMENT FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PROGRAMS DESIGNED TO HELP PROTECT AND IMPROVE THE LAND, AIR AND WATER OF CONNECTICUT AND LONG ISLAND SOUND. EXPENSES \$ 855,019. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION'S BY-LAWS ESTABLISH ONE CLASS OF MEMBER. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ARE ENTITLED TO VOTE ON THE ELECTION OF DIRECTORS TO FILL VACANCIES AT THE ANNUAL MEETING. FORM 990, PART VI, SECTION B, LINE 11B: THE 990 IS PRESENTED AT A MEETING OF THE BOARD OR TO THE APPROPRIATE COMMITTEE WHICH WILL REPORT TO THE FULL BOARD. FORM 990, PART VI, SECTION B, LINE 12C: ANNUAL REVIEW OF THE CONFLICT OF INTEREST POLICY WITH REQUEST FOR DISCLOSURE. THE CONFLICT OF INTEREST POLICY IS UPDATED AND SIGNED ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: PRESIDENT'S SALARY IS REVIEWED BY THE BOARD AND COMPARED TO COMPARABLE NONPROFIT SALARIES. ALL OTHER SALARIES ARE REVIEWED ANNUALLY BY THE PRESIDENT.

FORM 990, PART VI, SECTION C, LINE 19:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016)		Page 2
Name of the organization CONNECTICUT FUND FOR THE ENVIRONMENT	Employer identif	fication number 0195
THE ORGANIZATION'S FINANCIAL STATEMENTS ARE INCLUDED IN T	THE ANNUAL	REPORT
AVAILABLE ON THE ORGANIZATION'S WEBSITE. OTHER GOVERNING	DOCUMENTS	ARE
AVAILABLE UPON REQUEST.		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
CHANGES IN TRUSTS		114,359.
	100000000000000000000000000000000000000	
		38

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

2016

OMB No. 1545-0047

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ► Attach to Form 990.

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

CONNECTICUT FUND FOR THE ENVIRONMENT

Employer identification number **_ ** 0195 Open to Public Inspection

(g) Section 512(b)(13) Ž controlled entity? 30,521, THE ENVIRONMENT, INC. CONNECTICUT FUND FOR Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity Ξ End-of-year assets • Public charity status (if section 501(c)(3)) ö Total income Exempt Code 9 section Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) DELAWARE PROTECT LONG ISLAND SOUND Primary activity Primary activity Name, address, and EtN (if applicable) Name, address, and EIN of related organization of disregarded entity 900 CHAPEL STREET, SUITE 2202 NEW HAVEN, CT 06510 SOUND PROTECTOR, LLC Part Part II

35

Schedule R (Form 990) 2016

or Paperwork Reduction Act Notice, see the instructions for Form 990.

Page 2 **-***0195

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Schedule R (Form 990) 2016 CONNECTICUT FUND FOR THE ENVIRONMENT

(I) (k) General or Percentage managing ownership	.									e related	8	Section 512(b)(13)	controlled entity?	Yes No		+		+		-			Schedule R (Form 990) 2016
(I) General or P managing	Yes No									ne or mor	Ξ	Percentage	idiya			†		1					R (Form
(i) Code V-UBI amount in box	20 of Schedule K-1 (Form 1065)									because it had or	(6)		_										Schedule
273	Yes No					_				IV, line 34	H				 	-		+		+			
	1									n 990, Part	9	Share of total	income										
(g) Share of end-of-vear	assets		nij							es" on For	(0)	f entity	(C corp, S corp,	(10)		1		1					
(f) Share of total income										swered *Y				5				1					
				 	-			-		ization an	Ð	Direct controlling	entity										
(e) Predominant income (related, unrelated,	excluded from tax under sections 512-514)									f the organ						1		4				_	36
	excluded sectio			 						omplete i	(0)	Legal domici	(state or foreign	country)									(C)
(d) Direct controlling										oration or Trust. C	(g)	ctivity											
(C) Legal domicile	(state or foreign country)									as a Corpo		Prim											
(b) Primary activity										janizations Taxable								1					
(a) Name, address, and EIN	of Eddieu organization						17			Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related	(6)	(a) Name southe emeN	of related organization										632162 09-06-16

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Giff, grant, or capital contribution to related organization(s)	s with one or more re	ated organizations listed in	Parts II-IV?	
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a Gift, grant, or capital contribution to related organization(s)				
				1 a
				đ
c. Gift grant or capital contribution from related organization(s)				Ų
				1d
				-te
f Dividends from related organization(s)				14
g Sale of assets to related organization(s)				19
h Purchase of assets from related organization(s)				#
				=
J Lease of facilities, equipment, or other assets to related organization(s)				1)
k Lease of facilities, equipment, or other assets from related organization(s)				*
Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			=
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			1n
o Sharing of paid employees with related organization(s)		**********************************		9
				1
	***************************************			<u></u>
q heimbursement pard by related organization(s) for expenses				2
r Other transfer of cash or property to related organization(s)				÷
				1s
If the answer to any of the above is "Yes," see the instructions for	ho must complete th	is line, including covered rek	information on who must complete this line, including covered relationships and transaction thresholds.	
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	olved
(1)				
(2)				
(3)				
(4)				į
(5)				
(9)				
632163 09-06-18	37	38	Schedule R (Form 990) 2016	(Form 990

Page 4

-*0195

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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3	ercenta wnersh																								90) 20 300) 20
_	one O	2			\dashv		\dashv						\dashv			\dashv		\dashv			\dashv			┪	EJO
	Gene Trans	Yes]]	₽. F.
8	amount in box 20 managing ownership	(Form 1065)								ļ															Schedule R (Form 990) 2016
<u>£</u>		Yes No																4			4			7	
\vdash	3 5	ž			╣						_		\dashv			\dashv		\dashv	_		\dashv			┨	
(6)	Share of end-of-year	assets					:																	:	
ε	Share of total	income							5															i	
(a)	Are all partmers sec. 501(c)(3)	Yes No										 		_			 							╛	
F	2 E S		L		4		\dashv				L		_			\dashv	 	\dashv			\dashv	_		4	
9	Predominant income (related, unrelated,	sections 512-514)																							
(0)	nicile	country)																	-			36			
			\vdash		┪						H					\exists	_	\dashv						┪	
(q)	Primary activity							į													:				
(a) (b) (c) (d)	Name, address, and EIN of entity																								

<u>Schedule F</u>	R (Form 990) 2016	CONNECTICUT	FUND FOR	THE ENVIRON	MENT.	**-***0195	Page 5
Part VII	R (Form 990) 2016 Supplemental Info	rmation.			•		
_	Provide additional inform	nation for responses to qu	iostione on Cohod	ula B: Caa instructions			
	Provide additional inform	nation for responses to qu	Jestions on Sched	ule n. See instructions.			
					U		
				AT-IX			
	77 - 27 - 73 - 73 - 73 - 73 - 73 - 73 -						
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(Alteriation			100				
		*					
		11/					-
				- 6000 00	120		
	N.					Fig. 17%	
-							
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