

KORDISH & COMPANY, LLC
115 TECHNOLOGY DRIVE, SUITE A 305
TRUMBULL, CT 06611-6340

LARRABEE FUND ASSOCIATION
P.O. BOX 271724
WEST HARTFORD, CT 06127



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Tax Return Carryovers to 2014

NAME: LARRABEE FUND ASSOCIATION

ID Number: 06-6038638

Disallowing Form	Description	Originating Form	Entity/ Activity	St/ City	Amount
990-PF	EXCESS DISTRIBUTIONS	990-PF			733,889.

COPY

TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING

OCTOBER 31, 2014

Prepared for	LARRABEE FUND ASSOCIATION P.O. BOX 271724 WEST HARTFORD, CT 06127
Prepared by	KORDISH & COMPANY, LLC 115 TECHNOLOGY DRIVE, SUITE A 305 TRUMBULL, CT 06611-6340
Amount due or refund	BALANCE DUE OF \$316
Make check payable to	PAYMENTS SHOULD BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENT SYSTEM (EFTPS).
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	<p>THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US BY SEPTEMBER 15, 2015.</p> <p>PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$733,889. THIS MAY BE APPLIED TO TAX YEAR 2014 AND SUBSEQUENT YEARS.</p>

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2013, or fiscal year beginning NOV 1, 2013, and ending OCT 31, 2014

2013

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo**

Name of exempt organization

Employer identification number

LARRABEE FUND ASSOCIATION

06-6038638

Name and title of officer

**BARBARA MORTON
PRESIDENT**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	_____
2a	Form 990-EZ check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here	▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here	▶ <input checked="" type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	4,060.
5a	Form 8868 check here	▶ <input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **KORDISH & COMPANY, LLC** to enter my PIN **73691**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

06220744571
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ **07/30/15**

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2013 or tax year beginning **NOV 1, 2013**, and ending **OCT 31, 2014**

Name of foundation LARRABEE FUND ASSOCIATION		A Employer identification number 06-6038638
Number and street (or P.O. box number if mail is not delivered to street address) P.O. BOX 271724	Room/suite	B Telephone number 860-257-8443
City or town, state or province, country, and ZIP or foreign postal code WEST HARTFORD, CT 06127		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 5,590,589.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	267,903.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	10,382.	10,382.		STATEMENT 1
	4 Dividends and interest from securities	112,653.	112,653.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	108,800.			
	b Gross sales price for all assets on line 6a	554,703.			
	7 Capital gain net income (from Part IV, line 2)		108,800.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	329.	329.		STATEMENT 3	
12 Total. Add lines 1 through 11	500,067.	232,164.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees	6,571.	3,286.		3,285.
	b Accounting fees	12,675.	6,338.		6,337.
	c Other professional fees	35,597.	17,799.		17,798.
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses	3,476.	1,738.		1,738.
	24 Total operating and administrative expenses. Add lines 13 through 23	58,319.	29,161.		29,158.
	25 Contributions, gifts, grants paid	261,504.			261,504.
26 Total expenses and disbursements. Add lines 24 and 25	319,823.	29,161.		290,662.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	180,244.				
b Net investment income (if negative, enter -0-)		203,003.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash - non-interest-bearing	12,382.	11,109.	11,109.
	2	Savings and temporary cash investments	348,416.	329,775.	329,775.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations STMT 8	50,891.	50,891.	66,141.
	b	Investments - corporate stock STMT 9	2,077,753.	1,938,037.	3,355,956.
	c	Investments - corporate bonds STMT 10	1,452,106.	1,791,980.	1,827,608.
	11	Investments - land, buildings, and equipment: basis			
	Less: accumulated depreciation				
12	Investments - mortgage loans				
13	Investments - other				
14	Land, buildings, and equipment: basis				
	Less: accumulated depreciation				
15	Other assets (describe)				
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item 1)	3,941,548.	4,121,792.	5,590,589.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> X and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted	242,651.	313,766.	
	26	Permanently restricted	3,698,897.	3,808,026.	
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances	3,941,548.	4,121,792.		
31	Total liabilities and net assets/fund balances	3,941,548.	4,121,792.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,941,548.
2	Enter amount from Part I, line 27a	2	180,244.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	4,121,792.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,121,792.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES	P		
b CAPITAL GAINS DIVIDENDS			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 530,009.		445,903.	84,106.
b 24,694.			24,694.
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			84,106.
b			24,694.
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	108,800.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2012	748,716.	5,128,193.	.146000
2011	401,558.	5,015,040.	.080071
2010	267,458.	4,946,119.	.054074
2009	260,706.	4,592,680.	.056766
2008	340,309.	4,137,637.	.082247

2 Total of line 1, column (d)	2	.419158
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.083832
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	4	5,289,547.
5 Multiply line 4 by line 3	5	443,433.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,030.
7 Add lines 5 and 6	7	445,463.
8 Enter qualifying distributions from Part XII, line 4	8	290,662.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	4,060.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	4,060.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	4,060.
6 Credits/Payments:			
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a	3,750.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	3,750.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	6.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 11		9	316.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax Refunded		11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) CT		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.LARABEEFUND.ORG /WWW.HARTFORDLARRABEEFUND.ORG</u>	13	X	
14	The books are in care of ► <u>KORDISH & COMPANY, LLC</u> Telephone no. ► <u>203-268-1060</u> Located at ► <u>115 TECHNOLOGY DRIVE, SUITE A 305, TRUMBULL, CT</u> ZIP+4 ► <u>06611-6340</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year	15		N/A
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country	16		Yes No X

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

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

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here		N/A
1b			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?		X
1c			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		N/A
2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.)		N/A
3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
4a			
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?		X
4b			

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

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here **N/A**

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No **N/A**
 If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **N/A**

5b			
6b			X
7b			

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 **0**

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

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

Part X

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	5,001,731.
b	Average of monthly cash balances	1b	368,367.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,370,098.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,370,098.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	80,551.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,289,547.
6	Minimum investment return. Enter 5% of line 5	6	264,477.

Part XI

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

1	Minimum investment return from Part X, line 6	1	264,477.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	4,060.
b	Income tax for 2013. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	4,060.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	260,417.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	260,417.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	260,417.

Part XII

Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	290,662.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	290,662.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	290,662.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				260,417.
2 Undistributed income, if any, as of the end of 2013:				
a Enter amount for 2012 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008	136,317.			
b From 2009	33,223.			
c From 2010	22,859.			
d From 2011	152,956.			
e From 2012	494,606.			
f Total of lines 3a through e	839,961.			
4 Qualifying distributions for 2013 from Part XII, line 4: ▶ \$	290,662.			
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2013 distributable amount				260,417.
e Remaining amount distributed out of corpus	30,245.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	870,206.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7	136,317.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	733,889.			
10 Analysis of line 9:				
a Excess from 2009	33,223.			
b Excess from 2010	22,859.			
c Excess from 2011	152,956.			
d Excess from 2012	494,606.			
e Excess from 2013	30,245.			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 15

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
Name and address (home or business)					
a Paid during the year					
ALL AMOUNTS PAID TO OR ON BEHALF OF WOMEN IN NEED VARIOUS VARIOUS, CT 06127		NONE	N/A	TO PROVIDE ASSISTANCE TO WOMEN IN NEED	241,504.
HISPANIC HEALTH COUNCIL INC. 175 MAIN STREET HARTFORD, CT 06106		NONE	501(C)(3)	TO PROVIDE ASSISTANCE	20,000.
COPY					
Total					3a 261,504.
b Approved for future payment					
NONE					
Total					3b 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	10,382.	
4 Dividends and interest from securities			14	112,653.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			18	329.	
8 Gain or (loss) from sales of assets other than inventory			18	108,800.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)			0.	232,164.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13 232,164.	

(See worksheet in line 13 instructions to verify calculations.)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: _____ Date: _____ Title: **PRESIDENT**

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

Paid Preparer Use Only

Print/Type preparer's name DAVID J. KORDISH, CPA	Preparer's signature DAVID J. KORDISH,	Date 07/30/15	Check <input type="checkbox"/> if self-employed	PTIN P00236391
Firm's name ▶ KORDISH & COMPANY, LLC			Firm's EIN ▶ 06-1610348	
Firm's address ▶ 115 TECHNOLOGY DRIVE, SUITE A 305 TRUMBULL, CT 06611-6340			Phone no. 203-268-1060	

323622 10-10-13

Part XV | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - HISPANIC HEALTH COUNCIL INC.

TO PROVIDE ASSISTANCE TO WOMEN IN NEED

COPY

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

Department of the Treasury
Internal Revenue Service

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

2013

Name of the organization

Employer identification number

LARRABEE FUND ASSOCIATION

06-6038638

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not 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) (2013)

Name of organization LARRABEE FUND ASSOCIATION	Employer identification number 06-6038638
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>ESTATE OF CHARLES G. WOODWARD</u> <u>C/O THE CITY OF HARTFORD</u> <u>HARTFORD, CT 06115</u>	\$ <u>61,770.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>ESTATE OF WILLIE O. BURR</u> <u>C/O THE CITY OF HARTFORD</u> <u>HARTFORD, CT 06115</u>	\$ <u>166,761.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>THE LARRABEE FUND</u> <u>C/O THE CITY OF HARTFORD</u> <u>HARTFORD, CT 06115</u>	\$ <u>39,372.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

LARRABEE FUND ASSOCIATION

06-6038638

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization LARRABEE FUND ASSOCIATION	Employer identification number 06-6038638
---	--

Part III *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return.

FORM 990-PF

2013

▶ Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Name LARRABEE FUND ASSOCIATION	Employer identification number 06-6038638
--	---

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	4,060.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	4,060.
4 Enter the tax shown on the corporation's 2012 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	1,150.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	1,150.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty (see instructions).

6 The corporation is using the adjusted seasonal installment method.

7 The corporation is using the annualized income installment method.

8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment		(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	03/15/14	04/15/14	07/15/14	10/15/14
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column.	10	288.	287.	288.	287.
11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15	11	750.			
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12		462.	175.	
13 Add lines 11 and 12	13		462.	175.	
14 Add amounts on lines 16 and 17 of the preceding column	14				113.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	750.	462.	175.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17			113.	287.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	462.	175.		

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2013 and before 7/1/2013	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\%}{365}$	22	\$	\$	\$
23 Number of days on line 20 after 06/30/2013 and before 10/1/2013	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\%}{365}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2013 and before 1/1/2014	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\%}{365}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2013 and before 4/1/2014	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\%}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2014 and before 7/1/2014	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times 3\%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2014 and before 10/01/2014	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times 3\%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2014 and before 1/1/2015	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times 3\%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2014 and before 2/16/2015	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times 3\%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120; line 33; or the comparable line for other income tax returns	38	\$		6.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
U.S. TRUST	10,382.	10,382.	
TOTAL TO PART I, LINE 3	10,382.	10,382.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
U.S. TRUST	137,347.	24,694.	112,653.	112,653.	
TO PART I, LINE 4	137,347.	24,694.	112,653.	112,653.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME	329.	329.	
TOTAL TO FORM 990-PF, PART I, LINE 11	329.	329.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	6,571.	3,286.		3,285.
TO FM 990-PF, PG 1, LN 16A	6,571.	3,286.		3,285.

FORM 990-PF	ACCOUNTING FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
AUDIT FEES	12,675.	6,338.		6,337.	
TO FORM 990-PF, PG 1, LN 16B	12,675.	6,338.		6,337.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
AGENT FEES	35,597.	17,799.		17,798.	
TO FORM 990-PF, PG 1, LN 16C	35,597.	17,799.		17,798.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE	1,261.	630.		631.	
MISCELLANEOUS EXPENSE	2,215.	1,108.		1,107.	
TO FORM 990-PF, PG 1, LN 23	3,476.	1,738.		1,738.	

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS	STATEMENT	8
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DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
U.S. TREASURY NOTES AAA 6.250% DUE 08/15/23	X		50,891.	66,141.
TOTAL U.S. GOVERNMENT OBLIGATIONS			50,891.	66,141.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			50,891.	66,141.

FORM 990-PF	CORPORATE STOCK	STATEMENT	9
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
PEPSICO INC	6,821.	48,085.
PFIZER INC	8,630.	31,148.
PROCTER & GAMBLE CO	26,235.	52,362.
CISCO SYS INC	18,192.	29,364.
GENERAL ELECTRIC CO	25,007.	38,715.
WELLS FARGO & CO	12,722.	45,127.
AT&T INC	40,656.	55,744.
TARGET CORP	10,123.	30,910.
EXXON MOBIL CORP	19,499.	53,191.
JOHNSON & JOHNSON	22,860.	43,112.
MICROSOFT CORP	40,382.	76,059.
CONOCOPHILLIPS	9,875.	36,075.
UNITED TECHNOLOGIES CORP	23,146.	72,225.
3M CO	15,646.	38,443.
US BANCORP DEL	17,811.	38,340.
CONSOLIDATED EDISON INC	12,427.	19,008.
COLUMBIA SMALL CAP CORE FUND CL Z	32,274.	52,694.
COLUMBIA ACORN FUND CL Z	40,345.	80,558.
DOMINION RES INC VA	8,468.	21,390.
CVS CAREMARK CORP	15,841.	42,905.
AIR PROD & CHEMS INC	11,372.	33,665.
RIO TINTO PLC	3,872.	7,675.
OCCIDENTAL PETE CORP DEL	10,769.	40,019.
AMERICAN ELEC PWR INC	11,176.	20,419.
DTE ENERGY CO	9,175.	20,540.
COLUMBIA MID CAP GROWTH FD CL Z	47,896.	85,350.
COLGATE PALMOLIVE CO	25,278.	61,864.
MCDONALDS CORP	11,373.	31,868.
WASTE MGMT INC DEL	9,438.	16,623.
QUALCOMM INC	13,827.	31,404.

COCA COLA CO	25,256.	41,880.
SCHLUMBERGER LTD	17,716.	25,158.
COLUMBIA ACORN INTERNATIONAL FUND CLASS Z	31,000.	31,584.
AGILENT TECHNOLOGIES INC	20,516.	33,168.
AMAZON COM INC	16,517.	53,456.
CIGNA CORP	10,581.	24,892.
EXPRESS SCRIPTS HLDG CO	11,059.	30,728.
NEXTERA ENERGY INC	10,213.	20,044.
ILLINOIS TOOL WKS INC	11,845.	22,762.
MONSANTO CO NEW	8,832.	23,008.
VERIZON COMMUNICATIONS INC	27,653.	40,200.
VANGUARD FTSE EMERGING MKTS ETF	24,348.	25,584.
PRINCIPAL FINL GROUP INC	9,546.	17,806.
PARKER HANNIFIN CORP	14,135.	31,758.
AXIS CAP HLDGS LTD	12,870.	20,460.
THERMO FISHER SCIENTIFIC CORP	14,203.	35,271.
TEXAS INSTRS INC	23,565.	49,660.
PRUDENTIAL FINL INC	9,848.	17,708.
PNC FINL SVCS GROUP INC	15,556.	25,917.
MCKESSON CORP	18,232.	61,023.
LOWES COS INC	18,472.	51,480.
JP MORGAN CHASE & CO	22,138.	30,240.
HONEYWELL INTL INC	19,474.	48,060.
HESS CORP	14,847.	21,202.
GILEAD SCIENCES INC	13,150.	67,200.
FREEPORT-MCMORAN INC	14,977.	10,688.
EMC CORP	24,560.	40,222.
CORNING INC	12,580.	16,344.
CHEVRON CORP	26,204.	40,783.
APPLE INC	22,981.	80,460.
AMGEN INC	16,372.	48,654.
ABBOTT LABS	12,935.	19,615.
INTERNATIONAL BUSINESS MACHS	24,188.	32,880.
GENERAL DYNAMICS CORP	15,231.	34,940.
GENERAL MLS INC	15,770.	22,083.
PRICE T ROWE GROUP INC	20,750.	32,836.
CATERPILLAR INC	26,798.	30,423.
PHILLIPS 66	2,935.	19,625.
JOHN HANCOCK FDS II DISCIPLINED VALUE MID CAP FUND	57,600.	93,807.
JPMORGAN ALERIAN MLP INDEX ETN	30,089.	39,261.
ABBVIE INC	10,435.	22,211.
BROADCOM CORP CL A	16,137.	25,128.
CITIGROUP INC NEW COM	25,144.	26,765.
DOW CHEM CO	12,137.	17,290.
SELECT SECTOR SPDR TR FINANCIAL SHS BEN INT	49,130.	59,600.
VISA INC CL A COM	20,311.	24,143.
TERADATA CORP DELAWARE COM	19,214.	17,986.
ARTISAN INTERNATIONAL FUND	72,958.	83,078.
MFS SER TRI RESH INTL FD CL I	60,000.	58,378.
EGSHARES EMERGING MARKETS CONSUMER ETF	25,478.	27,430.
ISHARES MSCI EMERGING MARKETS ETF	25,791.	25,290.
VANGUARD GLOBAL EX-U S REAL ESTATE ETF	45,534.	48,900.
VANGUARD REIT ETF	46,051.	52,923.

CUMMINS INC	29,166.	29,236.
POWERSHARES QQQ TR UNIT SER 1	27,283.	30,420.
ISHARES RUSSELL MID-CAP ETF	15,699.	16,333.
ISHARES RUSSELL 2200 ETF	24,079.	23,312.
ISHARES MSCI EAFE ETF	67,430.	63,950.
CREDIT SUISSE COMMODITY-RETURN STRATEGY FUND CL I	39,382.	35,831.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,938,037.	3,355,956.

FORM 990-PF	CORPORATE BONDS	STATEMENT 10
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COLUMBIA INTERMEDIATE BOND FUND CLASS Z	615,281.	656,062.
ISHARES US PFD STK ETF	31,837.	31,800.
COLUMBIA INCOME OPPORTUNITIES FUND CL Z	50,000.	52,860.
MFS EMERGING MKTS DEBT FUND CL I	30,000.	31,240.
PRUDENTIAL SHORT-TERM CORPORATE BD FUND INC CL Z	526,000.	520,581.
SANOFI-AVENTIS SR UNSECD NT FRANCE	52,426.	51,405.
FIDELITY ADVISOR FLOATING RATE HIGH INCOME FUND INSTL	69,412.	68,565.
WELLS FARGO & CO 3.676%	52,759.	52,260.
JPMORGAN CHASE & CO NT 3.150%	103,795.	103,434.
GENERAL ELEC CAP CORP 3.350%	52,682.	52,372.
CISCO SYS INC 3.150%	52,795.	52,495.
DEERE JOHN CAP CORP 2.800%	52,305.	52,155.
HOME DEPOT INC 2.250%	51,190.	50,836.
HSBC USA INC NEW 2.625%	51,498.	51,543.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,791,980.	1,827,608.

FORM 990-PF	INTEREST AND PENALTIES	STATEMENT 11
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TAX DUE FROM FORM 990-PF, PART VI	310.
UNDERPAYMENT PENALTY	6.
LATE PAYMENT INTEREST	6.
LATE PAYMENT PENALTY	25.
TOTAL AMOUNT DUE	347.

FORM 990-PF LATE PAYMENT PENALTY STATEMENT 12

DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY
TAX DUE	03/15/15	3,310.	3,310.	1	17.
PAYMENT	03/20/15	-3,000.	310.	5	8.
DATE FILED	09/15/15		310.		
TOTAL LATE PAYMENT PENALTY					25.

FORM 990-PF LATE PAYMENT INTEREST STATEMENT 13

DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE	03/15/15	3,310.	3,310.	.0300	5	1.
PAYMENT	03/20/15	-3,000.	311.	.0300	179	5.
DATE FILED	09/15/15		316.			
TOTAL LATE PAYMENT INTEREST						6.

COPY

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE	
			BEN PLAN CONTRIB	EXPENSE ACCOUNT
BARBARA MORTON P.O. BOX 271724 WEST HARTFORD, CT 06127	PRESIDENT 2.00	0.	0.	0.
GIULIANA MUSILLI P.O. BOX 271724 WEST HARTFORD, CT 06127	FIRST VICE PRESIDENT 1.00	0.	0.	0.
FRANCES CALAFIORE P.O. BOX 271724 WEST HARTFORD, CT 06127	SECOND VICE PRESIDENT 1.00	0.	0.	0.
VICKI KONOVER P.O. BOX 271724 WEST HARTFORD, CT 06127	SECRETARY 1.00	0.	0.	0.
TINA MCCARY P.O. BOX 271724 WEST HARTFORD, CT 06127	ASSISTANT SECRETARY 1.00	0.	0.	0.
RUTH VAN WINKLE P.O. BOX 271724 WEST HARTFORD, CT 06127	TREASURER 1.00	0.	0.	0.
KATI BERMAN P.O. BOX 271724 WEST HARTFORD, CT 06127	ASSISTANT TREASURER 1.00	0.	0.	0.
CONNIE BAIN P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
ELENA DEVAUGHN P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
JOANN BITTNER P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
LISA CALAFIORE P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.

LINDA DUNAKIN P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
SUE DALRYMPLE P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
ABBEY KREINIK P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
CINDY LAWLER P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
SUZANNE PINKES P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
CHRIS SHANNON P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
MARGARET TAYLOR P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
SUSAN VICINO-MOSER P.O. BOX 271724 WEST HARTFORD, CT 06127	BOARD MEMBER 1.00	0.	0.	0.
DORIS JOHNSON P.O. BOX 370585 WEST HARTFORD, CT 06137	PRESIDENT 2.00	0.	0.	0.
BARBARA CLARK P.O. BOX 370585 WEST HARTFORD, CT 06137	FIRST VICE PRESIDENT 1.00	0.	0.	0.
MARY BALL P.O. BOX 370585 WEST HARTFORD, CT 06137	SECOND VICE PRESIDENT 1.00	0.	0.	0.
MARGARET LEWIS P.O. BOX 370585 WEST HARTFORD, CT 06137	TREASURER 1.00	0.	0.	0.
ROBERTA ROY P.O. BOX 370585 WEST HARTFORD, CT 06137	ASSISTANT TREASURER 1.00	0.	0.	0.

JUDY KULAK P.O. BOX 370585 WEST HARTFORD, CT 06137	SECRETARY 1.00	0.	0.	0.
REBECCA HENTON P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
NATALIE PHILLIPS P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
WINIFRED NELSON P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
OLIVETTE THOMAS P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
PATRICIA CAMP P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
NATALIE MENDES P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
YVONNE DANIELS P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
ELBA CRUZ SCHULMAN P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
MARYLOU ANDERSON WORD P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
BETH BUSH P.O. BOX 370585 WEST HARTFORD, CT 06137	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 15

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LARRABEE FUND OF GREATER HARTFORD
P.O. BOX 271724
WEST HARTFORD, CT 06127

TELEPHONE NUMBER

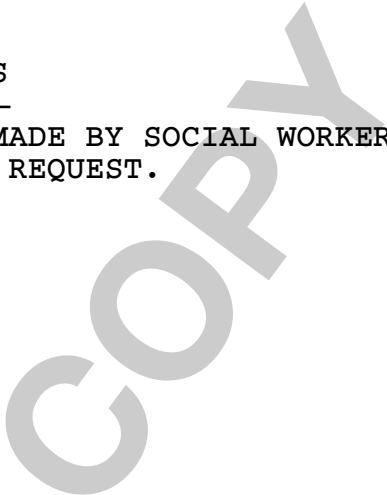
NAME OF GRANT PROGRAM

9999999999

GENERAL FINANCIAL ASSISTANCE TO NEEDY AND INDIGENT
WOMEN.

FORM AND CONTENT OF APPLICATIONS

REQUEST FOR ASSISTANCE MUST BE MADE BY SOCIAL WORKER OR CASE WORKER AND
APPLICATIONS ARE AVAILABLE UPON REQUEST.



ANY SUBMISSION DEADLINES

TWICE A MONTH, A WEEK BEFORE THE FIRST AND LAST THURSDAY OF THE MONTH.

RESTRICTIONS AND LIMITATIONS ON AWARDS

RECIPIENTS ARE PRIMARILY ELDERLY, SICK AND/OR INDIGENT WOMEN IN NEED.
RECIPIENTS MUST RESIDE IN BLOOMFIELD, EAST HARTFORD, SOUTH WINDSOR, WEST
HARTFORD, NEWINGTON, WETHERSFIELD OR WINDSOR CONNECTICUT. NEED MUST BE
DEMONSTRATED.

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

HARTFORD LARRABEE FUND
P.O BOX 370585
WEST HARTFORD, CT 06137

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

9999999999

GENERAL FINANCIAL ASSISTANCE TO NEEDY AND INDIGENT
WOMEN.

FORM AND CONTENT OF APPLICATIONS

REQUEST FOR ASSISTANCE CAN BE MADE THROUGH HARTFORD LARRABEE FUND
ASSOCIATION MEMBERS, CLERGY, HOSPITALS, INFOLINE 211 AND VARIOUS SOCIAL
SERVICE AGENCIES. APPLICATIONS ARE AVAILABLE UPON REQUEST.

ANY SUBMISSION DEADLINES

TEN DAYS PRIOR TO REGULAR SCHEDULED MEETINGS WHICH ARE MONTHLY ON THE LAST
TUESDAY OF THE MONTH.

RESTRICTIONS AND LIMITATIONS ON AWARDS

RECIPIENTS ARE PRIMARILY ELDERLY, SICK AND/OR INDIGENT WOMEN IN NEED.
RECIPIENTS MUST RESIDE IN HARTFORD, CONNECTICUT. NEED MUST BE DEMONSTRATED.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. LARRABEE FUND ASSOCIATION	Employer identification number (EIN) or 06-6038638
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 271724	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WEST HARTFORD, CT 06127	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

KORDISH & COMPANY, LLC - 115 TECHNOLOGY DRIVE, SUITE A

• The books are in the care of **305 - TRUMBULL, CT 06611-6340**
Telephone No. **203-268-1060** Fax No. **203-268-8210**

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **SEPTEMBER 15, 2015**.

5 For calendar year , or other tax year beginning **NOV 1, 2013**, and ending **OCT 31, 2014**.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO OBTAIN THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	3,750.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	3,750.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date