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Form **990-PF** Department of the Treasury Internal Revenue Service

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. pen to Public Inspection

For	alen	dar year 2013 or tax year beginning		, and ending		
		foundation			A Employer identificatio	n number
		SETT FOUNDATION	TNC		04-3535723	2
		FOUGERE & ASSOCIATES, nd street (or P O box number if mail is not delivered to stre		Room/suite	B Telephone number	
		CHURCH STREET	or 22-1,000)	11001110	781-729-49	0.4.0
		own, state or province, country, and ZIP or foreign	nostal code		C if exemption application is	
_		CHESTER, MA 01890	postar dodo		o ir exemption application is	periority, crieck riele
		all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s. check here
•		Final return	Amended return			
		Address change	Name change		Foreign organizations macheck here and attach or	eeting the 85% test, omputation
H (heck	type of organization: X Section 501(c)(3)	exempt private foundation		E If private foundation st	•
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1	
l Fa	ır ma	rket value of all assets at end of year J Accour	ting method: X Cash	Accrual	F If the foundation is in a	
(fi	om I	Part II, col. (c), line 16)	Other (specify)		under section 507(b)(1	
	\$	5,484,761. (Part I, co.	umn (d) must be on cash l	basis.)		· ·
Pa	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	806,446.		N/A	· · · · · · · · · · · · · · · · · · ·
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	3,317.	3,317.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
ō	6a	Net gain or (loss) from sale of assets not on line 10	-5,441.			
euc	b	Gross sales price for all assets on line 8a 244,559.				
Revenue	7	Capital gain net income (from Part IV, line 2)		ECENTED.		<u> </u>
_	8	Net short-term capital gain	181	FALINED		
	9	Income modifications Gross sales less returns		MAY 1 9 2014	5 	
	10a	and allowances	14	7114	₽/	
	b	Less Cost of goods sold Gross profit or (loss)	1 0	GDEN LE	? !	
	11	Other income	13,461.	DEIV, UT O	 	STATEMENT 2
	12	Total. Add lines 1 through 11	817,783.	3,317.		
	13	Compensation of officers, directors, trustees, etc	0.	0.	 	0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
ses	16a	Legal fees				
oen Oen	b	Accounting fees STMT 3	3,500.	0.		0.
ă	C	Other professional fees				
iive	17	Interest				<u> </u>
and Administrative Expens	18	Taxes		<u> </u>		
iris	19	Depreciation and depletion			 	
ᄩ	20	Occupancy			 	
Ā	21	Travel, conferences, and meetings		·	 	
	22	Printing and publications Other expenses STMT 4	1,300.	1,300.		
Operating	23 24	Other expenses STMT 4 Total operating and administrative	1,300.	1,300.		0.
ē s	24	expenses. Add lines 13 through 23	4,800.	1,300.		0.
SCANNEL	25	Contributions, gifts, grants paid	114,500.	1,500		114,500.
2	26	Total expenses and disbursements.			<u> </u>	
4		Add lines 24 and 25	119,300.	1,300.		114,500.
نق	27	Subtract line 26 from line 12:				
(I)	a	Excess of revenue over expenses and disbursements	698,483.			
	Ь	Net investment income (if negative, enter -0-)		2,017.		
		Adjusted net income (if negative, enter -0-)			N/A	
3235 10-1	U1)-13	LHA For Paperwork Reduction Act Notice, se	e instructions.			Form 990-PF (2013)

GANSETT FOUNDATION

For	m 99	0-PF (2013)C/O FOUGERE & ASSOCIATES	INC.	04-	3535723 Page 2
=			Beginning of year	End of	year
LP	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		<u>" </u>	
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable			·
	7	Less: allowance for doubtful accounts			
		Grants receivable			
	5	Receivables due from officers, directors, trustees, and other			
	ם		380.		
	_	disqualified persons	300.		
	7	Other notes and loans receivable			
	_	Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	2,420,139.	3,119,002.	5,484,761.
	14	Land, buildings, and equipment: basis			<u> </u>
	1	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)	2,420,519.	3,119,002.	5,484,761.
	17				
	18	Grants payable			
Ø	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë		Other liabilities (describe)			
				* 	
	23	Total liabilities (add lines 17 through 22)	0.		
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ės	24	Unrestricted			
auc	25	Temporarily restricted			
3al	26	Permanently restricted			
둳	-"	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
or Fund Balances	27	Capital stock, trust principal, or current funds	2,420,519.	3,119,002.	
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets	l	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Net/	29	Total net assets or fund balances	2,420,519.	3,119,002.	
Z	30	Total liet assets of fullu paralices	2,420,313.	3,113,002.	
	31	Total liabilities and net assets/fund balances	2,420,519.	3,119,002.	
Ξ			· · · · · · · · · · · · · · · · · · ·	3,113,002.	
Ц	<u>art</u>	Analysis of Changes in Net Assets or Fund Ba	liances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	(mu:	st agree with end-of-year figure reported on prior year's return)		1	2,420,519.
2	Ente	r amount from Part I, line 27a		2	698,483.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	3,119,002.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30		3,119,002.
					Form 990-PF (2013)

	nd Losses for Tax on In	vestmen	t Income		_		04 333	<u> </u>
	be the kind(s) of property sold (e.g. chouse; or common stock, 200 shs			(b) ¹	low acquired - Purchase - Donation		e acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a SUNAMERICA GNMA	a SUNAMERICA GNMAS FUND 21589 SHARES					03/	14/12	02/11/13
b CAPITAL GAINS D	IVIDENDS		_			<u> </u>		
<u>c</u>								
e e								<u> </u>
	(f) Depreciation allowed	(a) Cos	st or other basis			(b)	Gain or (toss)
(e) Gross sales price	(or allowable)		expense of sale				us (f) minus	
a 244,214.			250,00	0.				-5,786.
b 345.								345.
C				_				
e e								
	gain in column (h) and owned by t	he foundation	on 12/31/69			(I) Gains	(Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), If any			col. (k), bu	t not less that s (from col. (n -0-) or
a								-5,786.
b								345.
C								
d								
<u>e</u>		Dart I line		$\overline{}$		<u> </u>		
2 Capital gain net income or (net capi	tal loss)				2			-5,441.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, co if (loss), enter -0- in Part I, line 8		d (6):		}	2		N/A	
	der Section 4940(e) for	Reduced	Tax on Net	Inv	estment I	ncome	11/11	
(For optional use by domestic private f	oundations subject to the section 4	940(а) tax оп	net investment in	come	.)		-	
If section 4940(d)(2) applies, leave this	s part blank.							
	•			- 40				
Was the foundation liable for the section If "Yes," the foundation does not qualify			•	100?				Yes X No
1 Enter the appropriate amount in ea				ntries.			-	
(a) Base period years	(b)			(c)			Distrit	(d) oution ratio
Calendar year (or tax year beginning	· -		Net value of nor				(col. (b) div	rided by col. (c))
2012		0,850.			<u>,997,77</u>			.050481
2011 2010		5, <u>448.</u> 8,903.			, <u>317,68</u> 922,47			.459479 .573351
2009		7,500.		-	844,62			.399586
2008		8,000.		1	,112,69			.052126
					_			-
2 Total of line 1, column (d)						2		1.535023
3 Average distribution ratio for the 5-		n line 2 by 5,	or by the number	of yea	ars		1	205005
the foundation has been in existenc	e ii iess tiidii 5 yedis					3	 	.307005
4 Enter the net value of noncharitable	-use assets for 2013 from Part X, I	ine 5				4	 	3,643,721.
5 Multiply line 4 by line 3						5		1,118,641.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		20.
7 Add lines 5 and 6						7	<u> </u>	1,118,661.
8 Enter qualifying distributions from F						8	<u> </u>	114,500.
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	% tax rate.			

GANSETT FOUNDATION

	GANGETI FOUNDATION			
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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	0 1115111	ICTIO	13)
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			40.
U	of Part I, line 27b			<u> </u>
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2			40.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			40.
	Credits/Payments:			
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 5,000.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		5,0	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4,9	60.
	Enter the amount of line 10 to be: Credited to 2014 estimated tax		3,9	
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		ļ	
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
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 .	İ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.	ļ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	<u>X</u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		-	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	 	_ <u>A</u> _
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	┼	<u>v</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-	X
•	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1
6				
	 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	
′	bid the foundation have at least \$5,000 in assets at any time during the year. If Test, Complete Fart II, Con. (c), and Fart NV	<u> </u>	1	-
Q۵	Enter the states to which the foundation reports or with which it is registered (see instructions)			
va	MA	-	1	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
U	of each state as required by General Instruction G? If "No," attach explanation	8b	x	1
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	"	† <u></u>	
•	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 STMT 6	10	x	<u> </u>

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

4b X

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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

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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2013.)

If "Yes," list the years

during the year?

statement - see instructions.)

N/A

N/A

Yes X No

2b

3Ь

4a

X

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

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) Compensa	ition
NONE	_
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	0
	—
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 <u>N/A</u>	
· · · · · · · · · · · · · · · · · · ·	
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 <u>N/A</u>	
2	
All other many political annual control of the cont	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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C/O FOUGERE & ASSOCIATES, INC.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 2,502,490. a Average monthly fair market value of securities 1a 1,196,719. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 3,699,209. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3,699, Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 55,488. 643,721 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 182,186. Minimum investment return. Enter 5% of line 5 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.) 182,186. Minimum investment return from Part X, line 6 40. 2a Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) h Add lines 2a and 2b 182,146. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 182,146. Add lines 3 and 4 5 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 182 146. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 114,500. Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 114,500. 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

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

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114,500.

6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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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				182,146.
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 3,104.				
b From 2009 300, 269.				
c From 2010 484,973.				
d From 2011 576,668.				
e From 2012 1,060.				
f Total of lines 3a through e	1,366,074.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: \triangleright \$ 114,500.				
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				114,500.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	67,646.			67,646.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,298,428.			
b Prior years' undistributed income. Subtract	2/250/1200			
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	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	1,298,428.			
10 Analysis of line 9:				
a Excess from 2009 235,727.				
b Excess from 2010 484, 973.				
c Excess from 2011 576,668.				
d Excess from 2012 1,060.				
e Excess from 2013				

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Form 990-PF (2013) C/O FOUGERE & ASSOCIATES, I

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year COLGATE UNIVERSITY N/A EDUCATIONAL SUPPORT FOR EDUCATION 13 OAK DRIVE INSTITUTION 15,000. HAMILTON, NY 13346 DANA FARBER CANCER INSTITUTE N/A HOSPITAL SUPPORT FOR PATIENT CARE, RESEARCH AND 10 BROOKLINE PLACE WEST, 6TH FLOOR BROOKLINE, MA 02445-7226 EDUCATION 10,000. HERITAGE FOUNDATION RESEARCH AND SUPPORT FOR PUBLIC N/A EDUCATIONAL 214 MASSACHUSETTS AVENUE POLICY RESEARCH WASHINGTON, DC 20002 INST 5,000, HORIZONS FOR HOMELESS CHILDREN N/A CHILDREN'S SUPPORT FOR HOMELESS 1705 COLUMBUS AVE CHARITY CHILDREN ROXBURY, MA 02119 10,000. HYDROCEPHALUS ASSOCIATION PUBLIC CHARITY SUPPORT FOR MEDICAL N/A RESEARCH 4340 EAST WEST HIGHWAY, SUITE 905 BETHESDA MD 20814 5,000. SEE CONTINUATION SHEET(S) Total ➤ 3a 114,500. b Approved for future payment NONE Total

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Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business	(a) Business code Amount		(d) Amount	Related or exempt function income	
a	0000		-		 	
b	_					
c					· · · · · · · · · · · · · · · · · · ·	
d	1 1					
f	_					
g Fees and contracts from government agencies	_	<u> </u>		-		
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	3,317.		
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					13,461.	
8 Gain or (loss) from sales of assets other		- -				
than inventory			14	345.	-5,786.	
9 Net income or (loss) from special events					- <u>- </u>	
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)).	3,662.	7,675.	
13 Total. Add line 12, columns (b), (d), and (e)				13	11,337.	
(See worksheet in line 13 instructions to verify calculations.)	1			_		

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

Line No.			ch activity for which income						buted importantly to the	accomplishment of
	the found	ation's exem	npt purposes (other than by	provid	ding funds fo	or such	purposes).	•		
4	INCOME	FROM	INVESTMENTS	IS	USED	то	FUND	THE	CHARITABLE	CONTRIBUTIONS
	OF THE	FOUNI	DATION.							
8	INCOME	FROM	INVESTMENTS	IS	USED	TO	FUND	THE	CHARITABLE	CONTRIBUTIONS
	OF THE	FOUNI	DATION.							
									<u> </u>	
							<u>.</u>			
	<u> </u>				_					
					_					
]							-		

323621 10-10-13

Form 990)-PF (20	013) C/O F	OUGERE &	ASSOCI	ATES, INC.		<u> </u>	<u>3535723</u>	<u>Pa</u>	ge 13
Part 2	KVII			nsfers To	and Transactions	and Relationsl	hips With No	ncharitable	,	
		Exempt Organ		·					V	N 1.
					ng with any other organizati		on 501(c) of	}	Yes	NO
		•			27, relating to political organ	nizations?				
		from the reporting found	lation to a noncharit	able exempt or	ganization of:			4-(1)	ľ	v
	Cash	anasta.						1a(1)		X
٠,	Other	assets sactions:						1a(2)		
		sactions. of assets to a noncharita	hle evernt organiz	ation				1b(1)		x
٠.,		ases of assets from a no						1b(1)		X
\-,		l of facilities, equipment,	•	organization				1b(3)		X
٠,		oursement arrangements						1b(4)		X
		or loan guarantees						1b(5)		X
٠,		mance of services or me	embership or fundra	aising solicitation	ons			15(6)		X
c Sha	aring of	facilities, equipment, ma	ailing lists, other ass	ets, or paid en	nployees			1c		Х
					edule. Column (b) should al	lways show the fair m	arket value of the	goods, other ass	ets,	
or s	services	given by the reporting f	foundation. If the fol	undation receiv	red less than fair market val	ue in any transaction	or sharing arrange	ement, show in		
col	ımn (d) the value of the goods,								
(a) Line no	<u> </u>	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transaction	ons, and sharing arra	angeme	nts
				<u> </u>		_				_
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	_l		<u> </u>							
		•	•	•	e or more tax-exempt organ	izations described				_
		501(c) of the Code (othe		c)(3)) or in sec	tion 527?			Yes	X	J No
b_lf"\	es," co	mplete the following sch			(h) Tura of account		1.5	-1-4		
		(a) Name of org	ganization		(b) Type of organization	ļ <u>.</u>	c) Description of re	eiationship		
		N/A				 				
						 	 _			
						 				
	-					 				
	Under	penalties of perjury, I declare	that I have examined th	his return, includi	ng accompanying schedules and	statements, and to the	best of my knowledge	May the IRS d		
Sign	and be	lief, it is true, correct, and of	molete Declaration of p	oreparer (other tha	an taxpayer) is based on all inform	mation of which preparer	has any knowledge	return with the	prepare	er
Here		Mat	SIMUV.	2	15/13/14	trus	tec	X Yes		No
	Sign	ature of officer of Guite			Date	Title				
		Print/Type preparer's na		Preparer's s	signature	Date	Check if	PTIN		
		CORINNE CA	PRARO				self- employed			
Paid		FLANAGAN			IE CAPRARO F	05/06/14		P00025		
Prepa		Firm's name PO'C	CONNOR & 1	DREW, F	°.C.		Firm's EIN ► 0	4-30005	23	
Use (-	Firm's address > 0.7	A A STATE OF THE							
		Firm's address ▶ 27	CHURCH S	STREET			1			

WINCHESTER, MA 01890

Phone no. 781-729-4949

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

Name of the organization

GANSETT FOUNDATION

C/O FOUGERE & ASSOCIATES, INC.

Employer identification number

04-3535723

Organization type (check one):								
Filers o	f:	Section:						
Form 99	90 or 990-EZ	501(c)() (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization						
Form 99	90-PF	X 501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General	Rule							
X	For an organization contributor. Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.						
Special	Rules							
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% is Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	total contributions)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III.						
	contributions for us If this box is checked purpose Do not co	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. The ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions of \$5,000 or more during the year						
but it mi	ust answer "No" on	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990-PF, Part I, line 2, to 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
GANSETT FOUNDATION

Employer identification number

04-3535723

C/O FOUGERE & ASSOCIATES, INC.

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	TIMOTHY BARROWS 21 FAYERWEATHER STREET CAMBRIDGE, MA 02138	\$\$ \$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

GANSETT FOUNDATION

C/O FOUGERE & ASSOCIATES, INC.

04-3535723

Part II Noncash Property (see instructions). Use duplicate copi	es of Part II if additional space is needed.
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Part II	Noncash Property (see instructions). Use duplicate copies of Par	τ II iτ additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	27,860 SHARES OF AMBARELLA STOCK		
		\$806,826.	12/23/13
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
153 10-24-	-13	\$\$Schedule B (Form 9	90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Name of organization Employer identification number GANSETT FOUNDATION GERE & ASSOCIATES, INC.

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)

\$\Bigsir \frac{104 - 3535723}{1,000 for the year.}\$ C/O FOUGERE & ASSOCIATES, Part III Use duplicate copies of Part III if additional space is needed (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (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 (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MARINE BIOLOGY LAB	N/A	RESEARCH AND	SUPPORT OCEANOGRAPHIC	
7 MBL STREET		EDUCATIONAL	RESEARCH	
WOODS HOLE, MA 02543		INST		5,000
MGH FUND	N/A	HOSPITAL	SUPPORT FOR PATIENT	
165 CAMBRIDGE ST	[,,		CARE RESEARCH AND	
BOSTON, MA 02114-2792			EDUCATION	10,000
NEW ENGLAND AQUARIUM	N/A	PUBLIC CHARITY	SUPPORT FOR RESEARCH	
CENTRAL WHARF			AND EDUCATION	
BOSTON, MA 02110-3399				2,500
PIONEER INSTITUTE OF PUBLIC POLICY	N/A	RESEARCH	SUPPORT FOR PUBLIC	
85 DEVONSHIRE STREET, 8TH FLOOR		ORGANIZATION	POLICY RESEARCH	
BOSTON, MA 02109				1,000
POMONA COLLEGE	N/A	EDUCATIONAL	SUPPORT FOR EDUCATION	
333 NORTH COLLEGE WAY		INSTITUTION		
CLAREMONT, CA 91711-6312				15,000
STEPPINGSTONE FOUNDATION	N/A	CHILDREN'S	SUPPORT FOR INNER-CITY	
155 FEDERAL STREET SUITE 800		CHARITY	уоитн	
BOSTON, MA 02110				10,000
UNITED WAY	N/A	CHILDREN'S	SUPPORT FOR	
51 SLEEPER STREET		CHARITY	UNDERPRIVILEGED	
BOSTON, MA 02210			CHILDREN	5,000
WOUNDED WARRIORS	N/A	VETERANS	SUPPORT FOR WOUNDED	
4899 BELFORT ROAD SUITE 300	.,,	SUPPORT	VETERANS	
JACKSONVILLE FL 32256		ORGANIZATION		5,000
LITTLE SISTERS OF THE POOR	N/A	ELDERY CHARITY	SUPPORT FOR ELDERLY	
186 HIGHLAND AVE				
SOMERVILLE MA 02143-1507		-		1,000
CAMBRIDGE HISTORICAL SOCIETY	N/A	HISTORICAL	SUPPORT FOR MUSEUMS	
159 BRATTLE STREET	[,,	SOCIETY	AND ARCHIVES	
CAMBRIDGE, MA 02138		<u> </u>		5,000
Total from continuation sheets				69 500

C/O FOUGERE & ASSOCIATES, INC. Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient OUTSET CONTEMPORARY ART FUND N/A PUBLIC CHARITY SUPPORT FOR ART 7 COMMONWEALTH AVENUE 10 000 BOSTON MA 02116 Total from continuation sheets

FORM 990-PF DIV	/IDENDS	AND INTE	REST	FROM SECU	RITIES S	STATEMENT 1
	ROSS MOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
MORGAN STANLEY	3,662.	3	45.	3,317	3,317	,
TO PART I, LINE 4	3,662.	3	45.	3,317	3,317	
FORM 990-PF		OTHER	INCO	ME		STATEMENT 2
DESCRIPTION					(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FEDERAL INCOME TAX REFUN	_		13,461.	0.		
TOTAL TO FORM 990-PF, PA	ART I,	LINE 11 =		13,461.	0.	
FORM 990-PF		ACCOUNT	ING	FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	-	3,500	•	0.	·	0.
TO FORM 990-PF, PG 1, LN	16B	3,500	- - = =	0.		0.
FORM 990-PF		OTHER	EXPE	NSES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE FILING FEE FEES	_	500 800		500. 800.		0.
TO FORM 990-PF, PG 1, LN	7 23 —	1,300	•	1,300.		0.

FORM 990-PF (OTHER INVESTMENTS		STATEMENT 5	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
MORGAN STANLEY - MMKT ACCOUNT	COST	1,138,051.	1,138,051.	
MORGAN STANLEY - VARIOUS STOCKS/MUTUAL FUNDS	COST	1,980,951.	4,346,710. 5,484,761.	
TOTAL TO FORM 990-PF, PART II, I	LINE 13	3,119,002.		
	JBSTANTIAL CONTRIE T VII-A, LINE 10	UTORS	STATEMENT 6	
NAME OF CONTRIBUTOR	ADDRESS			
TIMOTHY BARROWS AND MARGARET FLANAGAN	C/O O'CONNOR	& DREW PC, 27 (CHURCH STREET	
I MINIOTAL	WINCHESTER, M	A 01890		

FORM 990-PF

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

STATEMENT

7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

TIMOTHY BARROWS AND MARGARET FLANAGAN, C/O O'CONNOR & DREW, PC, INC. 27 CHURCH STREET WINCHESTER, MA 01890

TELEPHONE NUMBER

781-729-4949

FORM AND CONTENT OF APPLICATIONS

NO FORMAL PROCEDURE HAS BEEN ESTABLISHED.

ANY SUBMISSION DEADLINES

NONE AT THE PRESENT TIME.

RESTRICTIONS AND LIMITATIONS ON AWARDS

LIMITED TO ORGANIZATIONS OPERATED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY, EDUCATIONAL, AM. ATHLETICS PURPOSES UNDER IRC SEC. 501(C)(3). RECIPIENTS WILL BE SELECTED BY THE SOLE DISCRETION OF TRUSTEES.