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Department of the Treasury

Internal Revenue Service

#### DLN: 93491222003195

OMB No 1545-0052

Open to Public Inspection

### **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 instructions is at <u>www.irs.gov/form990pf</u>.

, and ending 12-31-2014 For calendar year 2014, or tax year beginning 01-01-2014

		undation LAND BIOLABS FOUNDATION		A Employer identification number							
INC	W ENGI	LAND BIOLADS FOUNDATION				04-2776213					
Num	ber and	d street (or P O box number if mail is r	not delivered to street address	s) Room/suite		<b>B</b> Telephone nu	ımber (see ınstructioi	ns)			
24	0 COUN	NTY ROAD				(978) 998-7990	)				
		n, state or province, country, and ZIP or IA 019382723	r foreign postal code			C If exemption application is pending, check here ▶ ☐					
		F	<u> </u>					_			
<b>G</b> Cr	neck a	Il that apply Initial return Final return	Initial return of a	former public charit	У	_	rganizations, check h	,			
			ge Name change				rganizations meeting :k here and attach co				
<b>H</b> Ch	eck ty	ype of organization 🔽 Section		ate foundation			undation status was f n 507(b)(1)(A), chec				
Гs	ection	n 4947(a)(1) nonexempt charita				under seedo	11 307(b)(1)(A), chec	. T			
		ket value of all assets at end	J Accounting method	Cash 🗸 Acc	rual		ation is in a 60-mont				
		from Part II, col. (c), r\$ 9,194,952	Other (specify) (Part I, column (d) musi	t he on cash hasis )		under sectio	n 507(b)(1)(B), chec	ck nere 📕 I			
Part I Analysis of Revenue and Expenses (The							(d) Disbursements				
total of amounts in columns (b), (c), and (d) may n necessarily equal the amounts in column (a) (see instructions) )		c), and (d) may not	(a) Revenue and expenses per books	(b) N	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)				
	1	Contributions, gifts, grants, etc	c , received (attach								
		schedule)		199,801							
	2	Check ► ┌ If the foundation is	not required to attach								
		Sch B									
	3	Interest on savings and tempo	rary cash investments								
	4	Dividends and interest from se	curities	168,402		168,402					
	5a	Gross rents									
	Ь	Net rental income or (loss)	<u> </u>								
Ę	6a	Net gain or (loss) from sale of	assets not on line 10	535,497							
Revenue	b	Gross sales price for all assets 4,202,901									
	7	Capital gain net income (from F				535,497					
	8	Net short-term capital gain .  Income modifications									
	9										
	10a	Gross sales less returns and allowances									
	ь	Less Cost of goods sold									
	c	Gross profit or (loss) (attach s	chedule)								
	11	Other income (attach schedule	e)								
	12	<b>Total.</b> Add lines 1 through 11		903,700		703,899					
	13	Compensation of officers, direc	ctors, trustees, etc	83,995				83,995			
	14	Other employee salaries and w	vages	39,479				39,479			
Š	15	Pension plans, employee benef		26,098				26,098			
Ψ	16a	Legal fees (attach schedule).									
Expenses	Ь	Accounting fees (attach sched		9,817		00.507		9,817			
₽	_ c	Other professional fees (attack		92,157		88,682		3,475			
Administrative	17	Interest		101 <b>%</b> 14,650		101		14,650			
Ę.	18 19	Taxes (attach schedule) (see in Depreciation (attach schedule	·	14,030				14,030			
핕	20	Occupancy	·								
ΑĠ	21	Travel, conferences, and meet		14,615				14,615			
and	22	Printing and publications		2,124				2,124			
ਲ ਹ	23	Other expenses (attach sched		12,385				12,385			
Operating	24	Total operating and administra									
មួយ		Add lines 13 through 23		295,421		88,783		206,638			
á	25	Contributions, gifts, grants pai	d	509,349				509,349			
	26	Total expenses and disburseme	ents. Add lines 24 and	804,770		88,783		715,987			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expens	ses and disbursements	98,930							
	ь	Net investment income (If nega	atıve, enter -0-)			615,116					
	С	Adjusted net income (if negative	ve, enter -0-)								

Pa	rt II	<b>Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book Value	(B) Book Value	(c) Full Flurice Value
	2	Savings and temporary cash investments	128,508	177,195	177,195
	3	Accounts receivable ►	<u> </u>	, , , , , , , , , , , , , , , , , , ,	,
	_	Less allowance for doubtful accounts	10,600	7,281	7,281
	4	Pledges receivable 25,001	10,000	,,201	,,201
	7	Less allowance for doubtful accounts -		25,001	25,001
	5	Grants receivable		25,001	23,001
	_	Receivables due from officers, directors, trustees, and other			
	6	disqualified persons (attach schedule) (see instructions)			
	_	Other notes and loans receivable (attach schedule)   100,000			
	7		100,000	100,000	100,000
		Less allowance for doubtful accounts		100,000	100,000
ssets	8	Inventories for sale or use		2.214	2 214
	9	Prepaid expenses and deferred charges			
∢		Investments—U S and state government obligations (attach schedule)		_	<u> </u>
		Investments—corporate stock (attach schedule)		_	
	С	Investments—corporate bonds (attach schedule)	581,887	239,421	238,258
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
		Investments—mortgage loans			
	13	Investments—other (attach schedule)	41,409		
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe	1,819,340	2,128,540	<u>186</u> 3 °
	16	<b>Total assets</b> (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	8,711,658		
	17	Accounts payable and accrued expenses			
ķ	18	Grants payable	108,976	176,847	
abilities	19	Deferred revenue			
ā	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe	425.272	402.050	
	23	Total liabilities (add lines 17 through 22)	125,372	193,960	
S		Foundations that follow SFAS 117, check here			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.	8,586,286	9,000,992	
<u>a a</u>	24	Unrestricted	8,360,260	9,000,992	
ă	25	Temporarily restricted			
ınd	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here			
o		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds			
155	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	0.506.206	9,000,992	
Net	30	Total liabilities and not assets (fund belongs (see instructions)	8,586,286		
_	31	Total liabilities and net assets/fund balances (see instructions)	8,711,658	9,194,952	
	rt II		( ) 1 :	1 1	
1		Total net assets or fund balances at beginning of year—Part II, column			
_		, , , , , , , , , , , , , , , , , , , ,			8,586,286
2		Enter amount from Part I, line 27a			98,930
3		Other increases not included in line 2 (itemize)			315,951
4		Add lines 1, 2, and 3		· · · · 4	9,001,167
5 6		Decreases not included in line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5)—			9,000,992
•		Total het assets of fund balances at end of year (line 4 linnus line 5)—	. a.c.i., colullii (D), I		5,000,532

the Part VI instructions

	(a) List and describe to 2-story brick warehood			(b) How acquired P—Purchase D—Donation (c) Date acquired (mo, day, yr) (mo, day					
1 a	INVESTMENT SECUR	ITIES				Р	2013	3-12-30	2014-12-31
b	INVESTMENT SECUR	ITIES				Р	2014	1-01-01	2014-12-31
С									
d									
e									
,	<b>\</b> C =	(f)	Depreciation allowe	d	(g) Cost	or other basis	1	(h) Gain	or (loss)
(e	e) Gross sales price		(or allowable)		plus exp	ense of sale		(e) plus (f	) mınus (g)
а				0		2,130,40	7		543,444
b	1,529	9,050		0		1,536,99	7		-7,947
С									
d									
e									
Со	mplete only for assets sh	owing gain in	column (h) and owne	ed by tl					(h) gaın mınus
(i)	FM V as of 12/31/69		(j) Adjusted basis			ess of col (ı)	col (	• • •	less than -0-) <b>or</b>
	, ,	0	as of 12/31/69	0	overco	ol (j), ıf any	0	Losses (III	om col (h))
a		0		0			0		543,444 -7,947
b				- 0			<u> </u>		-7,947
С							-		
d									
e									
	If gain, also enter in Pa in Part I, line 8 .					• •	3		-7,947
Part	V Qualification Ur	nder Sectio	n 4940(e) for R	<u>leduc</u>	<u>ed Tax on</u>	Net Investme	ent Inco	ome	
(For opt	cional use by domestic pr	ıvate foundatı	ons subject to the se	ection (	4940(a) tax o	n net investment	income )	)	
	on 4940(d)(2) applies, le	·		-  -   -   -			d D		┌ Yes ✔ No
	e foundation liable for the " the foundation does not						enour		) 1 es  • 140
	ter the appropriate amour						ries		
	(a)			I				(d)	
Base	period years Calendar	Adjusted qual	(b) Ifying distributions	Net v	(c) alue of nonchari	table-use assets	,	Distribution	n ratio
year (	or tax year beginning in) 2013		659,449			7,974,708	(co	ol (b) divided	0 082693
	2013		574,744			6,943,277			0 082777
	2011		513,158			6,745,627			0 076073
	2010		560,980			6,536,860			0 085818
	2009		476,119			6,087,172			0 078217
2	<b>Total</b> of line 1, column	(d)					2		0 405578
3	A verage distribution ra the number of years th						3		0 081116
4	Enter the net value of r	noncharitable-	use assets for 2014	4 from	Part X, line 5.	[	4		8,575,114
5	Multiply line 4 by line 3	3				[	5		695,579
6	Enter 1% of net invest	ment income	(1% of Part I, line 2	7b).		[	6		6,151
7	Add lines 5 and 6						7		701,730
8	8 Enter qualifying distributions from Part XII, line 4				[	8		715,987	

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

Form	990-PF (2014)		Р	age <b>4</b>
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the installation	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here 🟲 🦵 and enter "N/A"			
	on line 1			
	Date of ruling or determination letter(attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			5,151
_	here Fand enter 1% of Part I, line 27b			-,
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			0
3	enter - 0 - ) Add lines 1 and 2			5,151
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			
-	enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		(	5,151
6	C redits/P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 <b>6a</b> 8,000			
ь	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		;	8,000
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🗸 if Form 2220 is attached 🕏 8			30
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1,819
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 1,819 Refunded 11			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	It participate or intervene in any political campaign?	1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file <b>Form 1120-POL</b> for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ (2) On foundation managers ► \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	If "Yes," attach the statement required by General Instruction T.			
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		No
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MA			
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	Yes	
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	<u> </u>		
	and addresses.	10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶www nebf org			
14	The books are in care of ▶JESSICA L BROWN Telephone no ▶(978)	998-	7990	
	Located at ▶240 COUNTY ROAD IPSWICH MA ZIP+4 ▶0193827			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			
15	and enter the amount of tax-exempt interest received or accrued during the year	•		- 1
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	rt 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.	<u> </u>	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? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V 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)?			
	for the benefit or use of a disqualified person)?			
	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 ) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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 2014?	1c		No
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(1)(3) or 4942(1)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years > 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 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 2014.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	igsqcut	No
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 2014?	4b		No

Pa	rt VII-B Sta	tements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inued	')	1 age O
5a	During the year	did the foundation	n pay	or incur any amoun	t to						
	(1) Carry on pro	paganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	:)) <sup>?</sup>	√ No		
	(2) Influence th	e outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry			
	on, directly	or indirectly, any	voter	registration drive?.				<b>┌</b> Yes <b>┌</b>	√ No		
	(3) Provide a gi	ant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provide a gi	ant to an organiza	ition	other than a charita	ble,	etc , organization de	scrib	ped			
	ın section 4	945(d)(4)(A)? (s	ee ins	structions)				<b>┌</b> Yes <b>┌</b>	√ No		
	(5) Provide for	any purpose other	than	religious, charitabl	e, sc	ientific, literary, or					
	educational	purposes, or for t	he pr	evention of cruelty t	to ch	ıldren or anımals?.			√ No		
b	If any answer is	"Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transad	tion	s fail to qualify unde	r the	exceptions described in			
	Regulations sec	tion 53 4945 or i	nac	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	
	O rganizations r	elyıng on a curren	t not	ice regarding disast	eras	sistance check her	e	▶↑	- [		
С				4), does the foundat							
								T Yes [	- <sub>No</sub>		
				y Regulations section							
6a				ceive any funds, dire			prer	niums on			
									√ No		
ь								·		6b	No
	If "Yes" to 6b, fi			,	•	., .			ŀ		-
7a	•		vas tl	ne foundation a party	v to a	nrohibited tax shel	lter ti	ransaction? <b>TYes F</b>	- No		
	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?								7b		
								n Managers, Highly			ovees
Pa		Contractors			-,	ustees, i suitae				р.	, , , ,
1	List all officers,	directors, trustee	s, foı	ındation managers a	nd t	heir compensation (	see i	nstructions).			
				Title, and average		c) Compensation		(d) Contributions to	(e) E:	xpense	account,
	(a) Name and	daddress	1	hours per week devoted to position		(f not paid, enter -0-)		mployee benefit plans I deferred compensation			wances
See	Addıtıonal Data T	ahle		.voccu to position		• ,	una	deterred compensation			
	Additional Data 1	чыс	1								
			┨								
									-		
			-								
_2_	Compensation of	five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	ONE."	
<b>/</b>	<b>.</b> N			(b) Title, and aver	age			(d) Contributions to	(-) [		
(a		ss of each emplo nan \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred	1	•	account, wances
	<b>F</b>	····· + · · / · · · /		devoted to positi	on			compensation			
NON	1E										
				1							
									-		
								<u> </u>			
Tota	ı <b>I</b> number of other	employees paid o	vers	\$50,000					1		0

**Total.** Add lines 1 through 3

Part VIII Information About Officers, Directors, T and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional ser	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MORGAN STANLEY SMITH BARNEY	INVESTMENT MANAGEMENTPENSION PLAN	89,067
1 PENN PLAZA	MANAGEMENT	
NEW YORK, NY 10001		
	1	
	]	
<b>Total</b> number of others receiving over \$50,000 for professional serv	/ices	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Inclorganizations and other beneficiaries served, conferences convened, research pape		Expenses
1 NEBF SUPPORTS PRIMARILY GRASSROOTS ORGANIZATIO BIOCULTURAL DIVERSITY, ECOSYSTEMS, FOOD SECURITY	· 1	474,544
2		
3		
4		
Part IX-B Summary of Program-Related Investme	ents (see instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		

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. 1 purposes 1a 8.554.338 1h 151.361 1c 1d 8.705.699 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 8.705.699 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 130.585 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 8.575.114 5 428,756 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 428.756 1 Tax on investment income for 2014 from Part VI, line 5. . . . . . 6.151 2a Income tax for 2014 (This does not include the tax from Part VI). . . 6.151 2c 3 3 422.605 4 4 5 5 422.605 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 422.605 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 715.987 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 715,987 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 6,151 709,836 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

For	m 990-PF (2014)					Page <b>9</b>
Р	art XIII Undistributed Income (	see ınstru	ıctıons)			_
			(a)	(b)	(c)	(d)
_		}	Corpus	Years prior to 2013	2013	2014
	Distributable amount for 2014 from Part XI	· -				422,605
	Undistributed income, if any, as of the end	I				
a	Enter amount for 2013 only	-				
	Total for prior years 20, 20,					
3	Excess distributions carryover, if any, to 20	1				
a	From 2009	172,768 239,460				
D	From 2010	184,384				
C	From 2011	236,360				
a	From 2012	276,416				
	Total of lines 3a through e		1,109,388			
			1,107,300			
4	Qualifying distributions for 2014 from Part XII, line 4 🕨 \$ 715,987					
_	Applied to 2013, but not more than line 2a					
D	Applied to undistributed income of prior yea (Election required—see instructions)					
	Treated as distributions out of corpus (Elec					
·	required—see instructions)					
d	Applied to 2014 distributable amount					422,605
	Remaining amount distributed out of corpus	F	293,382			
5	Excess distributions carryover applied to 2	014				
	(If an amount appears in column (d), the	İ				
	same amount must be shown in column (a).)					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract li	ne 5	1,402,770			
b	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistribute	ed				
	income for which a notice of deficiency has been issued, or on which the section 4942(	a)				
	tax has been previously assessed.					
d	Subtract line 6c from line 6b Taxable amou	ınt				
	—see instructions					
е	Undistributed income for 2013 Subtract lir	ne				
	4a from line 2a Taxable amount—see					
_	Instructions	}				
Т	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount mus					
	be distributed in 2015	_				0
7	Amounts treated as distributions out of					
	corpus to satisfy requirements imposed by					
	section 170(b)(1)(F) or 4942(g)(3) (Election					
_	be required - see instructions)					
8	Excess distributions carryover from 2009 r		172,768			
_	applied on line 5 or line 7 (see instructions)	'· · ·	•			
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a		1,230,002			
10	Analysis of line 9	· · ·				
	Excess from 2010	239,460				
	Excess from 2011	184,384				
	Excess from 2012	236,360				
d	Excess from 2013	276,416				
e	Excess from 2014	293,382				

	art XIV Private Operating Foun	<b>idations</b> (see in	istructions and P	Part VII-A, questic	on 9)	
1a	If the foundation has received a ruling or de					
	foundation, and the ruling is effective for 20	)14, enter the date	of the ruling	▶∟		
b	Check box to indicate whether the organiza	ition is a private o	perating foundation	n described in sectio	on <b>Г</b> 4942(j)(3) d	r <b>Г</b> 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	ıncome from Part I or the mınımum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each	(4) 2011	(5) 2013	(6) 2012	(4) 2011	
	year listed					
	85% of line 2a					
C	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt					
	activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
_	under section 4942(j)(3)(B)(i)			-		
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"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					
Pa	rt XV Supplementary Informatio	n (Complete t	his part only if	the organization	on had \$5.000	or more in
	assets at any time during			J	· · · · · · · · · · · · · · · · · · ·	
1	Information Regarding Foundation Manage		-			
а	List any managers of the foundation who ha					dation
	before the close of any tax year (but only if	they have contrib	uted more than \$5	,000) (See section	507(a)(2))	
	NONE					
	List any managers of the foundation who ov	m 10% or more of	the stock of a corr	oration (or an equal	ly large portion of t	ne
	ownership of a partnership or other entity)		·		ry large portion of the	
	, , , , , , , , , , , , , , , , , , , ,			_		
	NA					
2	Information Regarding Contribution, Grant	, Gift, Loan, Schola	arship, etc., Progra	ms:		
	Check here F If the foundation only make	es contributions t	o preselected char	itable organizations	and does not accer	ot
	unsolicited requests for funds If the found					
	other conditions, complete items 2a, b, c, a	and d				
а	The name, address, and telephone number	or e-mail address	of the person to w	hom applications sh	ould be addressed	
	JESSICA L BROWN					
	240 COUNTY ROAD					
	IPSWICH, MA 019382723					
	(978) 998-7990	1 11 1 5		1 11 1 1 1 1 1 1		
b	The form in which applications should be s			ais they should inclu	ıde	
	SEE ATTACHED NOTE REGARDING MIS	SION AND GUID	ELINES			
C	Any submission deadlines					
	APPLICATIONS ARE REVIEWED TWICE					
d	Any restrictions or limitations on awards, s factors	such as by geogra	pnical areas, charif	table fields, kinds of	institutions, or other	er
	SEE ATTACHED NOTE REGARDING MIS	STON AND CHID	ELTNEC			

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
a Paid during the year See Additional Data Table	any foundation manager or substantial contributor	recipient	Contribution	
Total	<u> </u>	<u></u>		509,349

	-PF (2014)					Page <b>12</b>
	Analysis of Income-Produci		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
ь						
d						
f g Fees 2 Memb 3 Intere	s and contracts from government agencies ership dues and assessments est on savings and temporary cash tments					
<b>4</b> Divide	ends and interest from securities			14	168,402	
<b>a</b> Debt <b>b</b> Not o <b>6</b> Net re	t-financed property debt-financed property					
8 Gain d	or (loss) from sales of assets other than tory			18		535,497
<b>10</b> Gross <b>11</b> Other	come or (loss) from special events profit or (loss) from sales of inventory. revenue a					
c						
12 Subtot 13 Total. (See	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify ca  T-B Relationship of Activities to  Explain below how each activity for which the accomplishment of the foundation's	the Accom h income is re	<b>plishment of E</b> ported in column (	Exempt Purpos  (e) of Part XVI-A co	ontributed importa	703,899 ntly to
8	INSTRUCTIONS )  INVESTMENT INCOME IS USED TO PRO	OVIDE GRAN	ΓS			

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations   Did the organization directly or indirectly legage in any aft the following with any other organization described is section 502 (c) of the Code (other then section 501 (c)(3) organizations 277, reading to political organizations (1) facility (bit of Code (other than section 501 (c)) in accordance   Ves.   No.	Form 990-P	F (2014)							Рa	ge <b>13</b>
section 501(c) of the Code (other than section 501(c)3) organizations of againstations?  a Transfers from the reporting foundation to a noncharitable exempt organization of (3) Cash	Part XVI				actio	ns and Relations	ships With			
a Transfers from the reporting foundation to a noncharitable exempt organization of  (3) Cash.									Yes	No
(3) Cash. (2) Other assets. (3) Sales of assets to a nonchantable exempt organization. (3) Sales of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Sales of assets from a nonchantable exempt organization. (4) Reimburgement arrangements. (5) Leans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) In the answer to any of the above is "Yes," complete the following schedule: Collumn (b) should always show the fair market value in any transaction or of harding arrangements, shown in collumn (d) the value of the goods, other assets, or services in every law reporting deviations. Fifth foundation received less than fair market value in any transaction or athering arrangements. And in collumn (d) the value of the goods, other assets, or services received.  (a) The No (b) Amoent involved (c) Name of monchantable exempt organization (d) Decorption of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other trans section 501(c)(3)) or in section 527?.  (a) The No (b) Amoent involved (c) Name of monchantable exempt organization (d) Decorption of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other trans section 501(c)(3)) or in section 527?.  (a) The No (b) Amoent involved (c) Name of monchantable exempt organization (c) Decorption of transfers, transactions, and sharing arrangements described in the section 501(c)(3) or in section 527?.  (b) Time of organization of property organizations of	organıza	tions?								
(2) Other assets.   Ia(2)   No b Other transactions   Ia(3)   No (3) Seles of assets to a noncharitable exempt organization.   Ib(3)   No (3) Pental of facilities, equipment, or other assets.   Ib(3)   No (4) Reimburs ment arrangements.   Ib(4)   No (5)   Loans or loan guaranties.   Ib(4)   No (6) Porformance of services or membership or fundriasing solicitations.   Ib(4)   No (6) Porformance of services or membership or fundriasing solicitations.   Ib(6)   No (7)   No (8)   No (9) Porformance of services or membership or fundriasing solicitations.   Ib(6)   No (10)	<b>a</b> Transfer	s from the reporting four	ndation to a none	charitable exempt organiza	ation of					
Description of relationships								1a(1)		No
(2) Purchases of assets to a nonchantable exempt organization.  (2) Purchases of assets from a nonchantable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement errangements.  (5) Loans or loan guarantees.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundriansing solicitations.  (6) Performance of services or membership or fundriansing solicitations.  (7) Loans or loan guarantees.  (8) Loans or loan guarantees.  (8) Loans of loanswer to any of the above is "Yes," complete the following schedule: Column (b) should always show the farm market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than far market value in any transaction or sharing arrangement, show in column (g) the value of the codes, other assets, or services given by the reporting foundation if the foundation accompanying schedules and statuments, and to the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 503 (c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 503 (c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 503 (c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 503 (c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 503 (c) of the Code (other than section 501(c)(3)) or in sec	<b>(2)</b> Oth	erassets						1a(2)		No
(2) Purchases of assets from a nonchartable exempt organization.  (3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (7) Loans or loan guarantees.  (8) Performance of services or membership or fundraising solicitations.  (8) Performance of services or membership or fundraising solicitations.  (8) Performance of services or membership or fundraising solicitations.  (9) Link for a six or 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 boundation. If this foundation received less than for market value in any transaction or sharing arrangement, show in culium (d) the value of the goods, other assets, or services received.  (a) Link for (b) Amount involved.  (b) Amount involved.  (c) Riame of noncharidable exempt organization.  (d) Description of transfers, transactions, and sharing arrangements.  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?.  (a) No.  10 Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?.  (b) Tryes, "complete the following schedule.  (a) Name of organization.  (b) Type of organization.  (c) Description of relationship.  (d) Description of relationship.  (e) Description of relationship.  (b) Type of organization of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Performance of affection of ficer or trustee.  Promiting the propagation of the propagation of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Performance of affection of the code (other than taxpayer) is based on all informatio										
(3) Rental of facilities, equipment, or other assets.  (4) Reimbursement arrangements.  (5) Loans for loan guarantees.  (6) Performance of services or membership or fundrasing solicitations.  (6) Performance of services or membership or fundrasing solicitations.  (7) Loans for load guarantees.  (8) Loans or load guarantees.  (9) Line No  (1) If the answer to any of the above is "Yes," complete the following schedule. Column (10) 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.  (8) Line No  (9) Amount movived  (1) Jine No  (1) Amount movived  (2) Name of noncharitable exempt organization.  (3) Line No  (4) Description of transfers, transactions, and sharing arrangements.  (5) Line No  (6) Amount movived  (7) Amount movived  (8) Amount movived  (9) Amount movived  (9) Amount movived  (1) Amount movived  (1) Amount movived  (2) Name of noncharitable exempt organization.  (3) Description of transfers, transactions, and sharing arrangements are serviced in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (9) If "Yes," complete the following schedule  (1) If "Yes," complete the following schedule  (2) If "Yes," complete the following schedule  (3) Name of organization  (4) Description of transfers, transactions, and sharing arrangements, 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  Proparer  (2) If the arrangements are severed to the propagate sharing arrangements.  (2) If the arrangements are severed to the propagate sharing arrangements are severed to the propagate sharing arrangements.  (2) I								_		
(4) Reimbursement arrangements.				· -				$\overline{}$		
(S) Loans or loan guarantees.  (6) Performance of services or membership or fundraising solicitations.  (6) Performance of services or membership or fundraising solicitations.  (6) Unit of the goods, other sassets, or services given by the reporting foundation If the following is chedule. 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 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) Imme No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and shaming arrangements of the goods, other assets, or services received  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)) of the Code (other than section 501(c)) of the Code (other than section 501(c)(3)) or in section 527?  11"Yes, "complete the following schedule (b) Type of organization (c) Description of relationship.  12"Yes No  13"Yes No  14"Yes, "complete the following schedule 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  15"Yes No  15"Yes										
(a) Line No (b) Amount involved (c) Name of foncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  (a) Line No (b) Amount involved (c) Name of foncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  (b) Line No (c) Name of organization (d) Type of organization (e) Type of organization (e) Type of organization of which preparer has any knowledge and belief, its tirue, correct, and complete Declaration of preparer (other than sexper) is Signature of officer or trustee  Princt' ype preparer's name Times and Preparer's Signature  Princt' ype preparer's name Times Andrews Phone no (978) 887-  Phone no (978) 887-  Phone no (978) 887-		<del>-</del>						— <u>`</u>		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.  It No 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 market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Ine No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  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?  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?  (a) Name of organization  (b) Type of organization (c) Description of relationship  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  Printy perparer's name TimoTry perparer's name TimoTry F HAGAN  CPA  Printy perparer's name TimoTry F HAGAN  Prim's andress  Prim's address  Prim's address  Prim's address  Phone no (978) 887-										
d If the answer to any of the shows 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.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tex-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes I'No b If "yes," complete the following schedule.  (a) Name of organization. (b) Type of organization. (c) Description of relationship.  Sign Here    Under-penalties of penjury, 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.    Very organization of which preparer has any knowledge.   Very organization of preparer (other than taxpayer) is based on all information of which preparer as any knowledge.   Very organization of preparer (other than taxpayer) is based on all information of which preparer as any knowledge.   Very organization of preparer (other than taxpayer) is based on all information of which preparer as any knowledge.   Very organization of preparer (other than taxpayer) is based on all information of which preparer as ame   Very organization of preparer (other than taxpayer) is based on all information of which preparer as ame   Very organization of Preparer (other than taxpayer) is based on all information of which preparer as ame   Very organization organization of Preparer (other than taxpayer) is based on all i										
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 shand arrangements, show in column (d) the value of the goods, other assets, and shang arrangements.  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?										No
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?	of the go	ods, other assets, or se	rvices given by	the reporting foundation I	f the fo	undation received les	ss than fair mark	et value		
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line No	(b) Amount involved	(c) Name of nonc	charitable exempt organization	(d)	Description of transfers,	transactions, and sha	ring arra	ngemer	nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	-									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			<u> </u>							
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   May the IRS discuss this return with the preparer shown below (see instr.)? ✓ Yes ✓ No    Print/Type preparer's name TIMOTHY F HAGAN CPA   Preparer's Signature   Date 2015-08-10   Check if self-employed ► ✓ Firm's name ► BERNARD JOHNSON & COMPANY PC   Firm's address ►   Phone no (978) 887-	describe	d in section 501(c) of th	he Code (other t					. <b>⊢</b> Y€	es F	No
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		(a) Name of organization	n	(b) Type of organiza	tion	(c)	Description of relati	onship		
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										
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										
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										
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										
Here  ******  Signature of officer or trustee  Date  Title  Print/Type preparer's name TIMOTHY F HAGAN CPA  Preparer  Firm's name ▶ BERNARD JOHNSON & COMPANY PC  Firm's address ▶  Phone no (978)887-	the Infe	best of my knowledge a	and belief, it is tr	rue, correct, and complete						
Signature of officer or trustee  Date  Print/Type preparer's name TIMOTHY F HAGAN CPA  Preparer's Signature  Preparer's Signature  Preparer's Signature  Date 2015-08-10  Check if self-employed ▶  PTIN  Firm's name ▶ BERNARD JOHNSON & COMPANY PC  Firm's address ▶  Phone no (978)887-	- 1	****		2015-07-27	, k	****	return			
Print/Type preparer's name TIMOTHY F HAGAN CPA  Firm's name ▶ BERNARD JOHNSON & COMPANY PC  Firm's address ▶  Preparer's Signature 2015-08-10  employed ▶ Firm's EIN ▶  Phone no (978) 887-		Signature of officer or t	rustee	Date	— <b>,</b>	Title	below			
Preparer Use Only    BERNARD JOHNSON & COMPANY PC   Phone no (978) 887-		TIMOTHY F HAGA		Preparer's Signature				PTIN		
Use Only Firm's address ▶ Phone no (978)887-		BERNARD JOHNSOI	N & COMPANY I	PC			Firm's EIN ►	•		
	•	Firm's address 🕨	TOPSFIELD, MA	01983						

## Form 990PF Part VIII Line 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
JESSICA L BROWN	EXECUTIVE	83,995	15,720	0
275 HIGH ROAD NEWBURY,MA 01951	DIRECTOR 30 00			
HENRY P PAULUS	TRUSTEE	0	0	0
85 EAST INDIA ROW 35A BOSTON,MA 02110	5 0 0			
DAVID C COMB	TRUSTEE	0	0	0
1 NORTONS POINT MANCHESTER, MA 01944	5 0 0			
HEIDI ELLARD	TRUSTEE	0	0	0
15 FOREST LANE BOXFORD,MA 01921	5 0 0			
MARCOS A NETO	TRUSTEE	0	0	0
5 SARGENT STREET CAMBRIDGE,MA 02140	5 0 0			

Recipient	If recipient is an individual, show any relationship	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	to any foundation manager or substantial contributor			
a Paid during the year				
ESSEX COUNTY TRAIL ASSOCIATION INC PO BOX 166 HAMILTON, MA 01936		PC	MAINTENANCETRAILAND OUTREACH	5,000
IPSWICH RIVER WATERSHED ASSOCIATION 143 COUNTY ROAD IPSWICH,MA 01938		PC	RESTORATION ATFLOODPLAINRIVERBEND RESERVATION	5,000
WINDHOVER FOUNDATION INC 257R GRANITE STREET ROCKPORT,MA 01966		PC	DANCEQUARRY3	4,000
CENDEP PO BOX 742 LIMBE CAMEROON, MA 00000		NC	COLLECTION OFESTABLISH A LIVINGCAULIFLOROUS PLANTS	7,500
GLOUCESTER MARITIME HERITAGE CENTER INC 23 HARBOR LOOP GLOUCESTER, MA 01930		PC	FORWARDFISH ITEXHIBIT	2,500
COMMUNITY ACTION FOR DEVELOPMENT OLD MARKET SQUARE PO BOX 85 BANGEM SW REGION CAMEROON, MA 00000		NC	WILDLIFEPROMOTE COMMUNITYMANAGEMENT	6,000
ENVIRONMENTAL GOVERNANCE INSTITUTE PARAMOUNT MOLYKO PO BOX 211 BUEA CAMEROON, MA 00000		NC	OF WILDLIFEHUMAN DIMENSIONSCONSERVATION	6,500
PANDRILLUS FOUNDATION USA PO BOX 10082 PORTLAND,OR 97296		PF	SCHEME AS ANGREEN LEAF VEGETABLEALTERNATIVE LIVELIHOOD	5,500
RURAL ALLIANCE FOR YOUTH DEVELOPMENT BOX 401 LIMBE CAMEROON, MA 00000		NC	WILDLIFECOMMUNITY- BASEDCONSERVATION	8,200
TREES FOR THE FUTURE INC 1400 SPRING STREET SILVER SPRING,MD 20910		PC	AND CROPTREE PLANTINGDIVERSIFICATION	6,000
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BOULEVARD BRONX,NY 10460		PC	COLLABORATIONSTRENGTHENINGAMONG TWO GROUPS	8,000
HERP CONSERVATION - GHANA PO BOX KS-6980 KUMASI GHANA,MA 00000		NC	SEA TURTLES ANDSAVING THREATENEDHABITAT	7,500
PAN AFRICAN ORGANIZATION PO BOX 2153 TL TAMALE NORTHERN REGION GHANA, MA 00000		NC	AND ENVIRONMENTALTREE PLANTINGEDUCATION	7,000
WETLANDS AND AGROFORESTRY DEV FOUNDATION PO BOX 595 HOHOE VOLTA REGION GHANA, MA 00000		NC	RESTORATIONWETLANDS	5,000
OCEANA INC 1350 CONNECTICUT AVENUE NW WASHINGTON,DC 20036		PC	BELIZE'SSAFEGUARDINGBARRIER REEF	7,000
Total				509,349

Recipient  Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor			
a Paid during the year				
WILDLIFE CONSERVATION NETWORK 209 MISSISSIPPI STREET SAN FRANCISCO, CA 94107		PC	MEETKIDSSHARKS	5,800
TRIGOH 25 CALLE 2-39 ZONA 1 GUATEMALA CITY GUATEMA, MA 00000		NC	REFUGE NETWORKPROMOTE A FISH	6,000
ALLIANCE FOR INTL REFORESTATION 4514 CHAMBLEE DUNWOODY ROAD ATLANTA,GA 30338		PC	AND SUSTAINABLEINDIGENOUS MICROBUSINESSESFARMING	10,800
FUNDENOR AQ'AB'AL 5 AVENIDA Y 3 CALLE ZONA 1 PURULHA BAJA VERAPAZ G,MA 00000		NC	BELIEFS ANDINTEGRATINGPRACTICES	7,500
GRASSROOTS INTERNATIONAL INC 237 BOYLSTON STREET BOSTON,MA 02130		PC	GARDENING ANDWOMEN'S VEGETABLELEADERSHIP	7,500
OXLAJUJ AJPOP 5TA AVENIDA A 5-75 COLONIA EL CENTR HUEHUETENANGO GUATEMAL, MA 00000		NC	NATURALCONSERVING THERESOURCE BASE	7,000
FUNDACION ENTRE VOLCANES FRENTE A OFICINAS DEL BANCO DE LA P MOYOGALPA ISLA DE OMET,MA 00000		NC	CLIMATE	7,100
INDO-PACIFIC CONSERVATION ALLIANCE 1525 BERNICE STREET HONOLULU, HI 96817		PC	INSTITUTIONALBUILDINGSTRENGTH	6,500
AMERICAN BIRD CONSERVANCY 4249 LOUDON AVENUE THE PLAINS, VA 20198		PC	ENDANGEREDPROTECTINGWILDLIFE	8,000
FUNDACION CORDILLERA TROPICAL EDIFICIO EL CONSORCIO CALLE JAIME R CUENCA ECUADOR,MA 00000		NC	RESTOREPROTECT ANDCLOUD FORESTS	6,500
ALIANZA ARKANA 23532 CALABASAS ROAD STE A CALABASAS,CA 91302		NC	A N D C O O K G R O W	8,000
STRATEGIES FOR INTL DEVELOPMENT 330 PENNSYLVANIA AVENUE SE WASHINGTON, DC 20003		PC	EDUCATION ANDDAIRY FARMERSTRAINING	6,600
TURTLE ISLAND RESTORATION NETWORK PO BOX 370 FOREST KNOLLS,CA 94933		PC	FEMALE WHALEPROTECTINGSHARKS	5,000
BACKYARD GROWERS 269 MAIN STREET GLOUCESTER, MA 01930		PC	GARDENSCHOOLYARDPROGRAM	5,000
GULF OF MAINE INSTITUTE 117 MAINE STREET WEST NEWBURY, MA 01985		PC	DRIFTERSOCEANPROJECT	5,000
Total				509,349

Recipient	If recipient is an individual, show any relationship	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	to any foundation manager or substantial contributor			
a Paid during the year				
MASSACHUSETTS AUDUBON SOCIETY 208 SOUTH GREAT ROAD LINCOLN,MA 01773		PC	AND LEADERSHIPSTUDENT MAPPINGINITIATIVE	5,000
NORTHEAST ORGANIC FARMING ASSN 411 SHELDON ROAD BARRE,MA 01005		PC	SHORE2015 NORTHWORKSHOPS	3,300
RAWART WORKS INC 37 CENTRAL SQUARE LYNN,MA 01901		PC	PROGRAMDOOR 2 DOOR	5,000
SOUTH SUDANESE ENRICHMENT FOR FAMILIES 339 PLEASANT STREET MALDEN, MA 02148		PC	EXPRESSIONYOUTH ARTISTPROJECT	4,000
THE FOOD PROJECT 10 LEWIS STREET LINCOLN, MA 01773		PC	FARMERSLYNN CENTRALMARKET	5,000
CENTER FOR RURAL EMPOWERMENT AND THE ENVIRONMENT 925 NW HOYT STREET NO 411 PORTLAND,OR 97209		NC	MICRO-ENTERPRISESSNAIL FARMING	6,000
THE GREENS PO BOX 5112 BAMENDA CAMEROON, MA 00000		NC	RADIO CONSERVATION PRO GRAM	6,000
CSRAD PO BOX 19 NKROFUL WESTERN REGION GHANA, MA 00000		NC	MONTONSO SACREDSAFEGUARDINGFOREST	6,300
THE CONSERVATION FOUNDATION 10S404 KNOCH KNOLLS ROAD NAPERVILLE,IL 60565		PC	TRADITIONALGOVERNANCE	5,000
YA'AXCHE CONSERVATION TRUST 20A GEORGE PRICE STREET PUNTA GORDA BELIZE,MA 00000		NC	CAPACITY BUILDINGCOMMUNITYINITIATIVE	8,500
MANGROVE ASSOCIATION KM 85 CARRETERA EL LITORAL SAN VINCENTE EL SALVAD, MA 00000		NC	CULTURALSUSTAINABLEDEVELOPMENT	8,400
FUNDACION TRADICIONES MAYAS APARTADO POSTAL 107 PANAJACHEL SOLOLA GUATEMALA,MA 07010		NC	MEDICINALADVANCE USE OFPLANTS	7,000
FUNDAECO BLYTHE HOUSE BRIDGE STREET HALESWORTH SUFFOLK UK, MA 00000		NC	THE SEAYOUTH FORPROGRAM	8,000
IDAMHO CALLE LA MERCED CASA 1201 BARRIO LA PLAZUELA HON, MA 00000		NC	FOR SUSTAINABLECITIZEN PARTICIPATIONDEVELOPMENT	7,000
BAY ISLANDS CONSERVATION ASSN NEW AIRPORT ROAD UTILA HONDURAS, MA 00000		NC	GUANAJARESTORATION OF THEISLAND	8,000
Total				509,349

Recipient	If recipient is an individual, show any relationship	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	to any foundation manager or substantial contributor			
a Paid during the year				
THE CHILDREN'S HOME PROJECT PO BOX 8066 CHANDLER, AZ 85246		PC	ENVIRONMENTALARTS AND THEATERPROGRAM	5,000
FAUNA & FLORA INTERNATIONAL INC 1720 N STREET NW WASHINGTON, DC 20036		PC	MANAGEMENT OF THESUSTAINABLEOMETEPE ISLAND RESERVE	7,000
MADRE 121 WEST 27TH STREET NEW YORK,NY 10001		PC	A SEED BANK TODEVELOPMENT OFSAVE NATIVE SPECIES	8,000
LIDEMA AV ECUADOR 2131 CASILLA 11237 LA PAZ BOLIVIA,MA 00000		NC	AGROBIODIVERSITYRESTORATION OFRE LAKETITICACA	6,000
REALIDADES REALIDAD ACCION Y DESARROLLO ESTADOS UNIDOS 600 SUCRE BOLIVIA, MA 00000		NC	EDUCATION INREFORESTATIONRURAL COMMUNITIES	6,500
FUNDACION SEMILLA AMBIENTAL CALLE MANOSCA 812 Y VASCO DE CONTRE QUITO ECUADOR, MA 00000		NC	EDUCATION ANDENVIRONMENTALRESEARCH	6,000
ASOCIACION MINGA PERU JOSE MAIRA DE LA JARA Y URETA 264 M LIMA PERU,MA 00000		NC	LEADERSHIPWOMEN'SPROJECT	7,900
CAMINO VERDE INC 95 MARTHAS POINT ROAD CONCORD,MA 01742		PC	AGROFORESTRYOIL POLYCULTURESYSTEMS	7,500
CTR FOR AMAZON COMMUNITY ECOLOGY 1637B NORTH ATHERTON STREET STATE COLLEGE,PA 16803		PC	OF VALUE- ADDEDSUSTAINABLE HARVESTNONTIMBER FOREST PRODUCTS	8,000
QOLPAY CTR FOR WATERSHED DEV CALLE LOS NARCISOS N138 HUANCAYO JUNIN PERU, MA 00000		NC	OF WETLANDSSUSTAINABLE USEIN HUANCAYO	6,000
ARTCORPS INC 240 COUNTY ROAD IPSWICH, MA 01938		PC	OPERATINGGENERALSUPPORT	87,594
ACTORS STUDIO OF NEWBURYPORT INC 50 WATER STREET NEWBURYPORT, MA 01950		PC	STEWARDSHIPENVIRONMENTALEDUCATION PROGRAMS	750
THE TRUSTEES OF RESERVATIONS 572 ESSEX STREET BEVERLY, MA 01915		PC	OPERATINGGENERALSUPPORT	400
CHANGE IS SIMPLE INC 8 ENON STREET BEVERLY, MA 01915		PC	OPERATINGGENERALSUPPORT	1,000
COASTAL TRAILS COALITION INC PO BOX 1016 NEWBURYPORT, MA 01950		PC	OPERATINGGENERALSUPPORT	500
Total				509,349

Recipient	If recipient is an individual, show any relationship	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	to any foundation manager or substantial contributor	тестрієть		
a Paid during the year				
EAST COAST GREENWAY ALLIANCE INC 5315 HIGHGATE DRIVE DURHAM,NC 27713		PC	SYSTEMTRAILACTIVITIES	500
GLOBAL DIVERSITY FOUNDATION PO BOX 194 BRISTOL,VT 05443		PC	ENVIRONMENTALGLOBALSUMMER ACADEMY	1,000
INTL FUNDERS FOR INDIGENOUS PEOPLES PO BOX 29184 SAN FRANCISCO,CA 94129		PC	OPERATINGGENERALSUPPORT	550
IPSWICH PARTNERSHIP INC 29 WATER STREET IPSWICH,MA 01938		PC	OPERATINGGENERALSUPPORT	1,500
IUCN-US 1630 CONNECTICUT AVENUE NW WASHINGTON,DC 20009		PC	MANAGEMENTSUPPORT	1,000
NS COMMUNITY COLLEGE FDN INC 1 FERNCROFT ROAD DANVERS,MA 01923		PC	STUDIESENVIRONMENTALSHOLARSHIP	750
THE OCEAN FOUNDATION 1990 M STREET NW WASHINGTON,DC 20036		PC	DEEP SEACAMPAIGN AGAINSTMINING	1,000
PARTNERS IN HEALTH 888 COMMONWEALTH AVENUE BOSTON,MA 02215		PC	EBOLARESPONSE	500
QUEBEC-LABRADOR FOUNDATION INC 555 SOUTH MAIN STREET IPSWICH,MA 01938		PC	STEWARDSHIPINTERNATIONALPROGRAM	1,000
SACRED LAND FILM PROJECT 2150 ALLSTON WAY SUITE 440 BERKELEY,CA 94704		PC	OPERATINGGENERALSUPPORT	250
THE SACRED NATURAL SITES INITIATIVE PO BOX 64 AB LEUSDEN NL, MA 00000		NC	OPERATINGGENERALSUPPORT	500
SMALL SOLUTIONS INC 3 OAK STREET NEWBURYPORT, MA 01950		PC	OPERATINGGENERALSUPPORT	400
SUSTAINABLE BOLIVIA 1374-B DANIELSON ROAD SATA BARBARA,CA 93108		PC	OPERATINGGENERALSUPPORT	1,000
TERRALINGUA 13269 COVERED ROAD ATLANTIC MINE,MI 49905		PC	OPERATINGGENERALSUPPORT	750
TOLEDO INSTITUTE FOR DEV AND ENVIRONMENT PO BOX 150 PUNTA GORDA BELIZE,MA		NC	WORLD PARKS2014CONGRESS	1,500
00000				
Total	<u></u>			509,349

			aring the real of Approved for rac	<b>/</b>
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial	Foundation status of recipient	Purpose of grant or contribution	A mount
	contributor			
<b>a</b> Paid during the year				
ECOLOGIC DEVELOPMENT FUND 25 MT AUBURN STREET CAMBRIDGE,MA 02138		PC	ANNUALEVENT	250
CONFLUENCE PHILANTHROPY 475 RIVERSIDE DRIVE NEW YORK,NY 10115		NC	OPERATINGGENERALSUPPORT	1,000
CONSULTATIVE GROUP ON BIO DIVERSITY PO BOX 29361 SAN FRANCISCO, CA 94129		NC	OPERATINGGENERALSUPPORT	1,950
EDGE FUNDERS ALLIANCE PO BOX 559 SAN FRANCISCO, CA 94110		NC	OPERATINGGENERALSUPPORT	1,000
INTL FUNDERS FOR INDIGENOUS PEOPLES PO BOX 29184 SAN FRANCISCO, CA 94129		PC	SUPPORT/CONFERENCEGENERAL OPERATINGREGISTRATION	3,491
NEW ENGLAND INTL DONORS 420 BOYLSTON STREET BOSTON,MA 02116		NC	OPERATINGGENERALSUPPORT	1,000
UNITED VISION PO BOX 364 BUEA SOUTHWEST REGION CAMER, MA 00000		NC	AND POVERTYBIODIVERSITYALLEVIATION	5,000
GLOUCESTER STAGE COMPANY 267 EAST MAIN STREET GLOUCESTER,MA 01930		PC	ACTING2015 YOUTHWORKSHOP	5,000
GATE OF HOPE HUMANITY PO BOX AH 1314 ACHIMOTA ACCRA SCHOO NEWTOWN GHANA,MA 00000		NC	CONSERVATION PROGRAM	2,000
VARIOUS PROGRAM RECIPIENTS 240 COUNTY ROAD IPSWICH,MA 01938		PC	PROGRAM MONITORINGPROGRAM WORKSHOPSPROGRAM EVALUATION	29,689
THE CONSULTATIVE GROUP ON BIOLOGICAL DIVERSITY PO BOX 29361 SAN FRANCISCO, CA 941290361		NC	OPERATINGGENERALSUPPORT	3,125
Total				509,349

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DLN: 93491222003195

OMB No 1545-0047

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

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

2014

**Employer identification number** 

MEW ENGLAND BIOLAE	NEW ENGLAND BIOLABS FOUNDATION					
Organization type (che	ck one)					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization	501(c)( ) (enter number) organization				
	☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a pri	rivate foundation				
	527 political organization	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation					
	☐ 4947(a)(1) nonexempt charitable trust treated as a private	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation					
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, om any one contributor. Complete Parts I and II. See instructions for o					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) filing Form 990 or 990-EZ that met f 09(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 o y one contributor, during the year, total contributions of the greater o or (ii) Form 990-EZ, line 1 Complete Parts I and II	or 990-EZ), Part II, line 13, 16a, or 16b, and that				
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990- otal contributions of more than \$1,000 exclusively for religious, char n of cruelty to children or animals Complete Parts I, II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
NEW ENGLAND BIOLABS FOUNDATION

**Employer identification number** 04-2776213

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	NEW ENGLAND BIOLABS INC  240 COUNTY ROAD  IPSWICH, MA 01938	\$143,000	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	MR AND MRS DONALD COMB 240 COUNTY ROAD  IPSWICH, MA 01938	\$50,501	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 3	MR DAVID COMB AND COLLEEN FITZGIBBO PO BOX 121  PRIDES CROSSING, MA 019650121	\$5,000	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Name of organization
NEW ENGLAND BIOLABS FOUNDATION

04-2776213

Part II	needed (see instructions) Use duplicate copies of Part II if additional space is		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$_	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)		Page <b>4</b>
	organization SLAND BIOLABS FOUNDATION		Employer identification number
INEW ENG	SLAND BIOLABS FOUNDATION		04-2776213
Part III	that total more than \$1,000 for the year f	rom any one contributor. Com ter the total of exclusively religious structions ) ►	lescribed in section 501(c)(7), (8), or (10) plete columns (a) through (e) and the following line us, charitable, etc, contributions of \$1,000 or less for \$
(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 ReI	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rel	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rel	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 Rel	ationship of transferor to transferee

### **TY 2014 Accounting Fees Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BERNARD JOHNSON & COMPANY REVIEW & TAX	9,817			9,817

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DLN: 93491222003195

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

### TY 2014 Gain/Loss from Sale of Other Assets Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

Name	Date Acquired	How A cquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
INVESTMENT SECURITIES		Purchased			4,202,901	3,667,404	Cost		535,497	

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# **TY 2014 Investments Corporate Bonds Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS #398-114901-322	239,421	238,258

## **TY 2014 Investments Corporate Stock Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCK #398-163731-322	409,669	510,913
COMMON STOCK #398-115215-322	2,877,779	3,875,738
COMMON STOCK #398-115216-322	2,223,643	3,239,966

# TY 2014 Investments Government Obligations Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

**EIN:** 04-2776213

**US Government Securities - End of** 

**Year Book Value:** 1,004,109

**US Government Securities - End of** 

Year Fair Market Value: 1,018,286

State & Local Government Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair Market Value: efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491222003195

### **TY 2014 Other Assets Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	1,819,340	2,128,540	

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### **TY 2014 Other Assets Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	1,819,340	2,128,540	

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### **TY 2014 Other Assets Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	1,819,340	2,128,540	



### **TY 2014 Other Decreases Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Description	Amount
PENALTIES	175

### DLN: 93491222003195

### **TY 2014 Other Expenses Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

<b>Description</b>	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	457			457
PAYROLL SERVICE FEES	1,787			1,787
OFFICE SUPPLIES	1,256			1,256
MEMBER DUES	4,282			4,282
FUNDRAISERS	547			547
BOARD EXPENSES	1,343			1,343
COMPUTER EXPENSE	1,275			1,275
FILING FEES	125			125
TELEPHONE	65			65
INSURANCE	358			358
ENTERTAINMENT	390			390
OTHER EXPENSES	500			500

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### **TY 2014 Other Increases Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Description	Amount	
NET UNREALIZED GAIN ON INVESTMENTS	315,951	

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### **TY 2014 Other Notes/Loans Receivable Long Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
ECUMENICAL DEVELOPMENT CORPORATION (OIKO CREDIT)	NONE	50,000	50,000	2013-05	2015-05	TWO YEAR PROMISSORY	2 000000 %	UNSECURED, FULL RECOURSE	INVESTMENT	NOTE	50,000
ROOT CAPITAL INC	NONE	50,000	50,000	2012-11	2015-11	DUE ON DEMAND	2 500000 %	UNSECURED, FULL RECOURSE	INVESTMENT	NOTE	50,000

#### **TY 2014 Other Professional Fees Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MORGAN STANLEY INVESTMENT MANAGEMENT FEES	88,682	88,682		
GAIL McELHINNEY BOOKKEEPING	3,090			3,090
MORGAN STANLEY PENSION PLAN FEES	385			385

### **TY 2014 Taxes Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	8,450			8,450
FEDERAL EXCISE	6,200			6,200