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# Form **990-PF**

EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.

ror	calengar year 2014 or lax year beginning		, and ending		
Na	ne of foundation			A Employer identification	number
·P	OLYNATE FOUNDATION			27-6958071	
	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	O BOX 600615			617-964-47	66
	or town, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is p	ending, check here
_ <u>N</u>	EWTON, MA 02460				
G (	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test.
_	X Address change	X Name change	<u> </u>	check here and attach co	mputation
H (	Check type of organization: X Section 501(c)(3) ex			E If private foundation sta	
<u> </u>		Other taxable private foundang method: X Cash	- T	under section 507(b)(1)	
	air market value of all assets at end of year J Accounting	•	Accrual	F If the foundation is in a	
	om Part II, col. (c), line 16) -\$ 11 , 030 , 170 . (Part I, colu.	ther (specify)	hasis )	under section 507(b)(1)	o(B), check here
	art   Analysis of Revenue and Expenses			(a) Advested not	(d) Disbursements
[ [	(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>b)</b> Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	3,100,000.	, ,	N/A	(casir oasis ority)
	2 Check if the foundation is not required to attach Sch B	3,100,000.	% & 8		
	3 Interest on savings and temporary cash investments	101.	101.		STATEMENT 1
	4 Dividends and interest from securities	17,041.	17,041.		STATEMENT 2
	5a Gross rents				, ,
	b Net rental income or (loss)	· · · · · ·	/		• • • • • • • • • • • • • • • • • • • •
•	6a Net gain or (loss) from sale of assets not on line 10	9,194.			
ğ	b Gross sales price for all 377,569.				
Revenue	7 Capital gain net income (from Part IV, line 2)		9,194.		
Œ	8 Net short-term capital gain				
	9 Income modifications Gross sales less returns				
	10a and allowances			<u> </u>	
	b Less Cost of goods sold			<u> </u>	<u> </u>
	c Gross profit or (loss)			ļ	1
	11 Other income	2 106 226	26 226		
_	12 Total. Add lines 1 through 11	3,126,336.	26,336	<del></del>	0.
	13 Compensation of officers, directors, trustees, etc				7
	<ul><li>14 Other employee salaries and wages</li><li>15 Pension plans, employee benefits</li></ul>			1 / / /	<del>  </del>
ses	16a Legal fees	· · ·		<del>                                     </del>	1./
		1,600.	0.	1 3/	0.
ă	c Other professional fees			, , ,	1/
ě	17 Interest			1.1 8.1	/
ati	18 Taxes STMT 4	1,802.	0.		0.
State	19 Depreciation and depletion			1 - 1.01	
門内である and Administrative Exper	20 Occupancy	-			
爱 <b>P</b>	21 Travel, conferences, and meetings				
	22 Printing and publications				
,,	1				
ON CHANGOS Derating and Administra	24 Total operating and administrative				
		3,402.	0	•	0.
e õ &	25 Contributions, gifts, grants paid	351,500.		<u> </u>	351,500.
N	26 Total expenses and disbursements.	254 222			354 500
201 <del>5</del>	Add lines 24 and 25	354,902.	0	•	351,500.
(mg/ 2	27 Subtract line 26 from line 12:	0 771 424			
	a Excess of revenue over expenses and disbursements	2,771,434.	26 226		
	b Net investment income (if negative, enter -0-)		26,336	N/A	
	C Adjusted net income (if negative, enter -0-)	Ī		IX\\\\X	ī

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Fair Market	Value

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
L	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	376,668.	3,418,073.	3,418,073.
	2	Savings and temporary cash investments			
		Accounts receivable	<del> </del>		
٠	۰	Less; allowance for doubtful accounts			÷ .
		<del> </del>	<del></del>		
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts			
	ļ.	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			an a
		Less accumulated depreciation	-	•	
	19	Investments - mortgage loans			
	13	Investments - other			
	1				
	'*	Land, buildings, and equipment basis			
		Less accumulated depreciation	6 214 757	5,944,786.	7,612,097.
		Other assets (describe ► SECURITIES )	6,214,757.	5,344,700+	7,612,037.
	16	Total assets (to be completed by all filers - see the	C FO1 40F	0 161 050	11 020 170
_	_	instructions. Also, see page 1, item I)	6,591,425.	9,362,859.	11,030,170.
	17	Accounts payable and accrued expenses			, in the second
	18	Grants payable		. <u>.</u>	ì
es	19	Deferred revenue			,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			· · ·
jap	21	Mortgages and other notes payable			, 3
_	22	Other liabilities (describe			
		•			1
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			i
		and complete lines 24 through 26 and lines 30 and 31.			'
ces	24	Unrestricted			0
aŭ	25	Temporarily restricted		-	
Bal	1	Permanently restricted			
Net Assets or Fund Balan		Foundations that do not follow SFAS 117, check here			:
Ξ	]	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets	l	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	28	- · · · · · · · · · · · · · · · · · · ·	6,591,425.	9,362,859.	1
¥ A	29	Retained earnings, accumulated income, endowment, or other funds	6,591,425.	9,362,859.	•
ž	30	Total net assets or fund balances	0,391,423.	9,302,033.	
			6 501 405	0 262 050	
	31	Total liabilities and net assets/fund balances	6,591,425.	9,362,859.	<u> </u>
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
					<del>,</del>
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		6 501 405
	•	st agree with end-of-year figure reported on prior year's return)		1	6,591,425.
2	Ente	r amount from Part I, line 27a		2	2,771,434.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	9,362,859.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	9,362,859.
					Form <b>990-PF</b> (2014)

<del></del>	e the kind(s) of property sold (e.g.	_	income	(b) How a	cquired (	c) Date acq	uired	(d) Date sold
	house; or common stock, 200 shs			P - Pur D - Dor	chase '	(mo., day,	yr.)	(mo., day, yr.)
1a PARTNERS GLOBAL						8/03		02/07/14
b PARTNERS GLOBAL						18/03		05/08/14
c PARTNERS GLOBAL						8/03		08/01/14
d PARTNERS GLOBAL						8/03		11/03/14
e EUROS	<del></del>	r		<u> </u>	P (	6/30		08/19/14
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain (e) plus (f	or (loss ) minus (	(g)
a 61,703.			57,21					4,484.
ь 57,222.			51,55					5,671.
c 48,189.			44,44					3,745. 2,387.
d 47,418.			45,03					<7,093.
e 163,037.	ann in column (b) and award by	the foundation	170,13	<del>                                      </del>	- 0	0 (0-1	(1-)	
Complete only for assets showing	<u> </u>					Gains (Col. 'k), but not		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	cess of col. (1) col. (j), if any			Losses (fr		(h)) ´
a								4,484.
b								5,671.
С							_	3,745.
d		<u></u>						2,387.
е					<del></del>			<7,093.
2 Capital gain net income or (net capi	tal loss) { If gain, also ente If (loss), enter -0	r in Part I, line I- in Part I, line	7 7	} 2				9,194.
3 Net short-term capital gain or (loss)	`							
If gain, also enter in Part I, line 8, co		(-).		<i>]</i> [	ŀ			
If (loss), enter -0- in Part I, line 8	der Section 4940(e) for			<u> </u>	<u> </u>		N/A	<u> </u>
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify	on 4942 tax on the distributable and under section 4940(e). Do not co	omplete this pa	ırt.				٠	Yes X No
1 Enter the appropriate amount in ea		nstructions be	fore making any e			т.		(4)
Base period years Calendar year (or tax year beginning			Net value of no				Dıstrı ol. (b) dı	bution ratio vided by col. (c))
2013		7,739.			35,137			.048661
2012	26	8,149.			30,871			.041697
2011		4,852.			11,114			.000914
2010		0.			89,174	•		.000000
2009		_	<u> </u>			<del></del>		
								.091272
2 Total of line 1, column (d)			b t			2		• 0312/2
3 Average distribution ratio for the 5-	<u> </u>	on line 2 by 5,	or by the number	of years				.022818
the foundation has been in existence	e if less than 5 years					3		•022010
4 Enter the net value of noncharitable	-use assets for 2014 from Part X,	line 5				4		8,039,609.
5 Multiply line 4 by line 3						5		183,448.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		263.
7 Add lines 5 and 6						7		183,711.
8 Enter qualifying distributions from I	Part XII. line 4					8		351,500.
If line 8 is equal to or greater than I See the Part VI instructions.	•	e 1b, and comp	plete that part usin	ng a 1% ta	x rate.	<u> </u>		•

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	rt VI Excise Tax Based on Investment Income (Section 494		940(e), or 4	948	- see ı	nstru	ction	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here  and e		ì			, .		
	Date of ruling or determination letter: (attach copy of letter if nec	<u> </u>		-			~~	1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	P	1			2	63.
	of Part I, line 27b							, [
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, co	. (b). ノ					•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)		2				0.
3	Add lines 1 and 2			3			2(	<u>63.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)		4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			20	63.
6	Credits/Payments:			ľ. ".	, ,,,	,, , , , , , , , , , , , , , , , , , ,	, ···	33
а	2014 estimated tax payments and 2013 overpayment credited to 2014	6a		i	ا ، · · · · ، ، ، ، ، ، ، ، ، ، ، ، ، ،	30.30	* *	2.1
þ	Exempt foreign organizations - tax withheld at source	6b		148.	1.7.2	- ·		, , ,
C	Tax paid with application for extension of time to file (Form 8868)	6c				\$ 4% B	. 13	JS, 8 1
d	Backup withholding erroneously withheld	6d	•	1441	198			,
7	Total credits and payments. Add lines 6a through 6d			7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<b>&gt;</b>	9			2	63.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<b>•</b>	10				
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax		Refunded >	11				
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it partici	pate or intervene	ın			Yes	No
	any political campaign?					1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions	for the definition	)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	nd copies of any ma	aterials publish	ed or		4 3	<b>W</b> 78	34 19
	distributed by the foundation in connection with the activities.						3 18	3 24.5
c	Did the foundation file Form 1120-POL for this year?					10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year:						
	(1) On the foundation. $\blacktriangleright$ \$ 0 • (2) On foundation managers	-	0.			4 4 %	× . 5. 5.	o >
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend		foundation	-		1.18	23 %	2.8.6
	managers. ► \$ 0.	·					4	
2	Has the foundation engaged in any activities that have not previously been reported to the l	IRS?				2	*	X
	If "Yes," attach a detailed description of the activities					823	(4) s	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles o	f incorporation, o	or		<b>1</b>		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		, ,			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year					4a		X
	o If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?			N	I/A	4b		-
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?			•	5		X
-	If "Yes," attach the statement required by General Instruction T.					\$ /	-4,	, .
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:					À :	¥ ,,
-	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandato	ry directions that con	flict with the state	e law			7 )	23/
	remain in the governing instrument?	ry directions that con	inot with the state	o iavi		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co.	molete Part II. sel	(a) and Part VI	,		7	х	
′	The the roundation have at least \$5,000 in assets at any time during the year in thes, Co.	implete Fart II, coi	c), and Fan A	,		7 %	41 N	3 8 8
٥.	Enter the etates to which the foundation reports or with which it is registered (eas instruction	0.00)				* 3 3	* 65 (	1 . 53
oa	Enter the states to which the foundation reports or with which it is registered (see instruction MA	ulis) <b>–</b>						
		AMana Cararrel (:	lantanata\		<del></del>	13	8:	1
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Altorney General (or c	esignate)			1.3. A	<sub>w</sub>	
_	of each state as required by General Instruction G? If "No," attach explanation		040/3/534			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of s		942(J)(5) for cal	endar			· ,	,.
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"		_	1 m 2		9	<u>                                     </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	dule listing their names an	d addresses	CMT	r 5	10	X	L

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?

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,

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

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 2014.)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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3b

4a

Yes X No

N/A

during the year?

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Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
. NONE		
	<del>"</del>	
	<del></del>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A   Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the	Expenses
1 N/A		
	-	i
2		
3		1
4		
		-
Part IX-B   Summary of Program-Related Investments	··	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
		1
2		
		}
All other program-related investments. See instructions.		

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▶

Total. Add lines 1 through 3

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Page 8 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: 7,571,713. a Average monthly fair market value of securities 1a 590,327. 1b .b Average of monthly cash balances c Fair market value of all other assets 1c 8,162,040. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 8,162,040. 3 Subtract line 2 from line 1d 122,431 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 8,039,609 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 401,980. Minimum investment return. Enter 5% of line 5 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.) 401,980. Minimum investment return from Part X, line 6 1 263 2a Tax on investment income for 2014 from Part VI, line 5 2a 2b Income tax for 2014. (This does not include the tax from Part VI.) 263 C Add lines 2a and 2b 2c 401. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 401 5 5 Deduction from distributable amount (see instructions) 6 401 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 717. 7 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 351,500. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b 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 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b 351,500. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 263. income. Enter 1% of Part I, line 27b 5

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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351.

6

990-PF (2014) POLITICAL POLITICAL STATES OF THE POLITICAL POLITICA	e instructions)	76\	$\top$	(c)	( <b>d</b> ) 2014
rt XIII Undistributed income (see	(a)	(b) Years prior to 2013		2013	
Ţ	Corpus	-	1	1	401,717.
Distributable amount for 2014 from Part XI,					
. <del>.</del>				322,768.	
Undistributed income, if any, as of the end of 2014					1
a Enter amount for 2013 only			0.		,
b Total for prior years:			-		, k
			1		
Excess distributions carryover, if any, to 2014:		1	1		23.4
a From 2009	]		1	v*,	
bFrom 2010	٠,				3 3 4 3 4 4 4
c From 2011	<b>⅓</b>	. }		* *	
dFrom 2012		6.l		·	
e From 2013  f Total of lines 3a through e	/ . *		1	* * *,	
	* * * * * * * * * * * * * * * * * * * *		. \ '	322,768	
	<b></b> 1°° ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′	· · · · · · · · · · · · · · · · · · ·	<u> </u>		1 2 8 8 8 8
. La DO43 but not flote than mis -	, , ,		0.	*****	* * * * * * * * * * * * * * * * * * * *
a diotribiliteli illiculto oi Pitti		^	<del></del>		
- (Flootion remilifed - See mistration)	3 % ~	_ 1"	7 13 T		28,732.
T-noted as distributions out of corpus		0.			
required - See Illsudctioner		\$ ** * * * * * * * * * * * * * * * * *		32.5	0.
oo44 dictribilialilis dillouis		0.1		* > \$-	
mount distributed out of		0.	-	, , , , , , , , , , , , , , , , , , ,	
5 Excess distributions carryover applied to	unt			, , ,	
(If an amount appears in the must be shown in column (a) )			, l		w * *
6 Enter the net total of each column as		0.	. /	<u> </u>	
		_ <del></del>	,	( * 2 / )	* * * * * * * * * * * * * * * * * * * *
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	st 🔽	******	0.	**********	
b Prior years' undistributed into	* 4 * \$ *	, *\2 & 3 *	\	(1)	
line 4b from line 2b  c Enter the amount of prior years'		ş ·	1		
c Enter the amount of prior years undistributed income for which a notice of		-	۱		. : 1
undistributed income for which deficiency has been issued, or on which the section 4942(a) tax has been previous	isly	`, ) ** · · · · · · · · · · · · · · · · ·	0.		
the section 4942(a) tax has		`	0 -	, , )	
assessed dSubtract line 6c from line 6b. Taxable		\$ \$ \$ \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>		
			•		0.
ncome for ZU IS. Subtract	it line	\			,
Tavania attiount 500 "		1000			372,985
naame tot 70 14, Julius	·				
lines 4d and 5 from line 1. This amount	Luinzi '," ;				
					s · \$
. hard as distribilities our	od by			1	
		<b>.</b> ∤			
170/h)(1)(F) Of 4942(9)(V) (C		0.			√
and can incliding					
a Evence distributions carryover morn		0.		<u> </u>	
1 - 4 0 100 5 (11 11115 /		0.			`
Tuesde distributions Carryover to "		<del>-</del>			<u>;</u>
Subtract lines 7 and 8 from the out	,	•		1	* ,
10 Analysis of line 9:					,
a Excess from 2010		-		1	,
b Excess from 2011				1	
c Excess from 2012 dExcess from 2013					Form <b>990-PF</b> (2
IF. Assoc from 2015					

Part XIV   Private Operating Fo	oundations (see ins		A, question 9)	N/A	30071 Tago N
1 a If the foundation has received a ruling or			<u> </u>		<del></del>
foundation, and the ruling is effective for			<b>▶</b>		
<b>b</b> Check box to indicate whether the foundation		=	section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	· · · · · · · · · · · · · · · · · · ·	Prior 3 years	()/(-/	U <u>/</u> \-/
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					··········
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
`					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter				-	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,	İ				
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)	1				
(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				<del></del>	
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during the			ii tile loulidatioi	1 11au 45,000 01 111	ore in assets
1 Information Regarding Foundation			· · · · · · · · · · · · · · · · · · ·		
a List any managers of the foundation who		than 2% of the total cont	ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed m			indutions received by the	C TOUTHURENOTE DOTOTO THE GIO.	30 Of any mx
SEE STATEMENT 6	, , ,	. ,, ,,			
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation (	or an equally large port	ion of the ownership of a n	artnershin or
other entity) of which the foundation has			or an equally large port	ion of the ownership of a p	arthoromp of
NONE	-				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarshin etc Pr	ograms.		
Check here ► X if the foundation of				not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc. (					
a The name, address, and telephone numb	<u> </u>				
a the hame, address, and telephone humb	or or o man address or t	and person to whom apple	cations should be addit		
b The form in which applications should b	e submitted and informa	tion and materials they sh	only include.		
2 The form in Which approximate of order of	o oublimited and informa	non and materials they of	iodia molado.		
c Any submission deadlines;					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year 1040 CONNECTIONS INC COMMUNITY GOOD 2120 NORTHGATE PARK CHATTANOOGA, TN 37415 1,000. CABOT SCHOOL COMMUNITY GOOD 229 CABOT STREET NEWTON CORNER, MA 02460 32,500. CHOODA BIKE ZAMBIA COMMUNITY GOOD 846 52ND STREET OAKLAND, CA 94608 2,000. NATIONAL ABILITY CENTER COMMUNITY GOOD 1000 ABILITY WAY PARK CITY, UT 84060 5,000. PARK CITY SAILING COMMUNITY GOOD P O BOX 981236 PARK CITY, UT 84098 5,000. SEE CONTINUATION SHEET(S) Total ➤ 3a 351,500. **b** Approved for future payment NONE

0.

**▶** 3b

Total

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
entor gross amounts amoss otherwise malegies.	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
2	0000				
b	·		<del>                                     </del>		
c	·		$\vdash$		
и — — — — — — — — — — — — — — — — — — —	·				
<u> </u>	·	<del></del>	<u> </u>		
f	-		-	· · · · · · · · · · · · · · · · · · ·	
g Fees and contracts from government agencies	·				
2 Membership dues and assessments					
3 Interest on savings and temporary cash		<u> </u>			
investments	523000	101.	1		
4 Dividends and interest from securities	1		-		17.041.
5 Net rental income or (loss) from real estate:				; ; · J. A.&	17,041.
a Debt-financed property	* * * * * *				**** * * * * * * * * * * * * * * * * * *
b Not debt-financed property	ļ				-
6 Net rental income or (loss) from personal	<del>                                     </del>				
property					
7 Other investment income			-		
Gain or (loss) from sales of assets other	<del>                                     </del>				
			ļ		9,194.
than inventory  9 Net income or (loss) from special events	<u> </u>				3,134.
10 Gross profit or (loss) from sales of inventory	-		<del> </del>		
11 Other revenue:	<del></del>		<del>                                     </del>		
_					
a	-		-		
D	-		<u> </u>		
<u> </u>	-				
<u> </u>	-		-		
6	, , , , , , , ,	101.		0.	26 225
12 Subtotal. Add columns (b), (d), and (e)	1 2 1	101.		L	26,235. 26,336.
13 Total. Add line 12, columns (b), (d), and (e)				13	20,330.
(See worksheet in line 13 instructions to verify calculations.)	<del></del>	<del></del>			
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which income	ome is reported i	n column (e) of Part XVI-A	contri	buted importantly to the accor	nnlishment of
the foundation's exempt purposes (other than				outou importantily to the docon	iphonition of
8 INCREASE IN VALUE FOR					
			<u>′</u>		
			-		
				<del></del>	
				<del></del>	
			•		
<del></del>		<del></del>			<del> </del>
	· · ·			<del></del>	
				<del>.</del>	
	<del></del>				<del></del>
				<del></del>	
				· · · · · · · · · · · · · · · · · · ·	
		<del></del>			
	-				
423621 11-24-14					Form <b>990-PF</b> (2014)

Par	t XVII	Information Re Exempt Organ		sfers To a	ınd Tra	nsactions a	ind Relation	ships With Noncha	aritable	)	
1 [	Old the ord	ganization directly or indir		of the following	o with any	other organization	on described in sec	tion 501(c) of		Yes	No
		other than section 501(c)			-	_					
		from the reporting founda			_						r*
	1) Cash				,				1a(1)		X
,	(2) Other	assets							1a(2)		X
	Other trans										
(	(1) Sales	of assets to a noncharital	ble exempt organizat	ion					1b(1)		X
		ases of assets from a nor	· -					•	1b(2)		X
	( <b>3</b> ) Renta	l of facilities, equipment, o	or other assets	•					1b(3)		X
	(4) Reimt	oursement arrangements							1b(4)		X
(	( <b>5)</b> Loans	or loan guarantees							1b(5)		X
(	(6) Perfo	rmance of services or me	mbership or fundrais	sing solicitatioi	ns				1b(6)		X
c S	Sharing of	facilities, equipment, mai	iling lists, other asset	ts, or paid emp	ployees				1c		X
d I	f the ansv	ver to any of the above is	"Yes," complete the f	ollowing sche	dule. Colu	mn (b) should alv	ways show the fair	market value of the goods,	, other ass	sets,	
(	or service:	s given by the reporting fo	oundation. If the four	idation receive	ed less tha	ın faır market valı	ie in any transactio	on or sharing arrangement,	show in		
		) the value of the goods, (						<u></u>			
<b>(a)</b> ∟ın	e no	(b) Amount involved	(c) Name of	noncharitable	exempt o	rganization	(d) Description	on of transfers, transactions, and	d sharing ai	rangeme	nts
				N/A							
								<u></u>			
	_										
								<del></del>			
			ļ								
	_			<u>-</u>			<u> </u>		-		
			<u></u>			<del> </del>	<del></del>				
							<del>                                     </del>	<del></del> .			
											—
0-	la 45 a 6		<u></u>								
		ndation directly or indirect	= :			ax-exempt organi	izations described		Yes	Γv	☐ No
		501(c) of the Code (other	• •	(3)) or in sect	110N 52/				res	LA	טוו נ
U	ii res, co	omplete the following sch (a) Name of org			(h) Tyne	e of organization	T	(c) Description of relation	nship		
		N/A	James and The State of the Stat		(2) 1) p			(0) 2 000			
		14/21			<b></b>			<del></del>			
					<del>                                     </del>						
					<del> </del>				· -		
				·	<del>                                     </del>					-	
	Under	penalties of perjury, I declare	that I have examined thi	s return, includin	ng accompa	nying schedules and	d statements, and to the	he best of my knowledge	lay the IBS	discuss	thic
Sig	n and be	elief, it is true, correct, and con	nplete Declaration of pre	eparer (other thai	n taxpayer)	is based on all inforr	nation of which prepa	rer has any knowledge	May the IHS eturn with t hown belov	he prepa	rer etr 12
Hei					1		TRUST		X Ye	s E	No
	Sign	nature of officer or trustee	)		Da	te	Title				
		Print/Type preparer's na	ame	Preparer's si	ignature		Date	Check if PTIN	Vi .		
								self- employed			
Pai	d	ROBERT GOO	DMAN, CPA	ROBERT	GOO	DMAN, C	11/04/15		00360		<u>}</u>
	parer	Firm's name ► ROB				<del></del>	<u> </u>	Firm's EIN ▶ 04-			
Use	Only			-							
		Firm's address ▶ 13	40 CENTRE	STREE	T, S	UITE 200	)				

Phone no. 617 964-4766

NEWTON CENTER, MA 02459

#### 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2014

Name of the organization **Employer identification number** POLYNATE FOUNDATION 27-6958071 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 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) (2014)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

## POLYNATE FOUNDATION

27-6958071

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + <u>4</u>	(c) Total contributions	(d) Type of contribution
1	MR SHERMAN PO BOX 600615 NEWTON, MA 02460	\$3,100,000.	Person X Payroll
(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 Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Employer identification number

## POLYNATE FOUNDATION

27-6958071

Part II	Noncash Property (see instructions). Use duplicate copies of Pal	rt II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(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. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<del></del>		<b>\$</b>	
(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 4 Name of organization Employer identification number 27-6958071 POLYNATE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use 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. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

#### POLYNATE FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient 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 PROMYS FOUDATION COMMUNITY GOOD P O BOX 15502 100,000. BOSTON, MA 02215 THE ART OF PROBLEM SOLVING COMMUNITY GOOD P O BOX 390389 CAMBRIDGE, MA 02139 80,000. TWIN TO TWIN TRANSFUSION FOUNDATION COMMUNITY GOOD 411 LONGBEACH PARKWAY BAY VILLAGE, OH 44140 15,000. WARING SCHOOL COMMUNITY GOOD 35 STANDLEY STREET BEVERLY, MA 01915 50,000. WASHINGTON UNIVERSITY COMMUNITY GOOD 1 BROOKINGS DRIVE 6,000. ST LOUIS, MO 63130 COMM FDN OF GREATER CHATTONOOGA COMMUNITY GOOD 1270 MARKET STREET 5,000. CHATTANOOGA, TN 37402 COMMINITY GOOD FAMILY ACCESS OF NEWTON 492 WALTHAM STREET 5,000. NEWTON , MA 02465 COMMUNITY GOOD USA CANADA 129HANCOCK STREET 25,000. CAMBRIDGE, MA 02139 HAMPSHIRE COLLEGE COMMUNITY GOOD 893 WEST STREET AMHERST, MA 01002 20,000. 306,000. Total from continuation sheets

FORM 990-PF INTERES	ST ON SAVI	NGS AND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT 1
SOURCE		REVE	(A) REVENUE PER BOOKS 101.		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
SMITH BARNEY		101.				
TOTAL TO PART I, LI		101.	101.			
FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO	
OPAP SA	17,041	•	0. 1	7,041.	17,04	1.
TO PART I, LINE 4	17,041	•	0. 1	7,041.	17,04	1.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	
ACCOUNTING FEE		1,600.		0.		0.
TO FORM 990-PF, PG	1, LN 16B =	1,600.	-	0.		0.
FORM 990-PF		TAX	TAXES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTEI NET INCOM	
US TREASURY MASSACHUSETTS TAX FOREIGN	_	63. 35. 1,704.		0.		0. 0. 0.
TO FORM 990-PF, PG	1, LN 18	1,802.		0.		0.
	_		-			<del></del>

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

ADDRESS

PAUL A. SHERMAN

21 GIBSON ROAD
NEWTON, MA 02460

FORM 990-PF

PART XV - LINE 1A

STATEMENT 6

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

MR. SHERMAN MRS. HSU