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# Form 990-PF

### Return of Private Foundation

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

OMB No. 1545-0052

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2014 2015 For calendar year 2014 or tax year beginning APR 1, and ending A Employer Identification number Name of foundation ASSOCIATION FOR THE RELIEF OF AGED WOMEN OF NEW BEDFORD 04-6056367 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 432 COUNTY STREET (508)717-0400City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW BEDFORD, MA 02740 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here X Accrual 1 Fair market value of all assets at end of year | J | Accounting method F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 18,380,251. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome N/A 18. Contributions, gifts, grants, etc., received 2 Check ► X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 436,291. 436,291 STATEMENT Dividends and interest from securities 5a Gross rents n Net rental income or (loss) 404,617. 6a Net gain or (loss) from sale of assets not on line 10 2,982,239. 404,617 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) Other income. 840,926. Total. Add lines through VEC 840,908 12 79,233. 0. 79,233. Compensation of officers, directors, trustees, etc. 15,610.Other enfelloyee salaries and wages 15 15,610. 0. 0 2,395. 2,395. 15 Pension plans, employee benefits 619. 0. 619. 16a Legal fees 27,150. 9,503. 17,647. b Accounting feeOGDEN STM1 71,028. 88,785. 17,757. c Other professional fees 17 Interest 15,391 STMT 5 7,255. 0. 18 Taxes 73. 0 . 19 Depreciation and depletion 17,020. 17,020. Occupancy Travel, conferences, and meetings 21 Printing and publications 16,745. 23 STMT 6 16,745 0. Other expenses Total operating and administrative <u> 227,552</u>. 263,021 27,260. expenses. Add lines 13 through 23 795,711. 795,711 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,023,263. 1,058,732 27,260. Add lines 24 and 25 27 Subtract line 26 from line 12

LHA For Paperwork Reduction Act Notice, see instructions.

2 Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

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<u>-217,806</u>.

813,648

N/A

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	<u> </u>	
	(must agree with end-of-year figure reported on prior year's return)	1	18,340,671.
2	Enter amount from Part I, line 27a	2	-217,806.
3	Other increases not included in line 2 (itemize) ► UNREALIZED GAINS/LOSSES	3	244,858.
4	Add lines 1, 2, and 3	4	18,367,723.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	18,367,723.

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18,356,039.

31 Total liabilities and net assets/fund balances

18,380,251

		NEW BEDFORD						0	<u>4-605</u>	<u>6367</u>	Page 3
P	art IV Capital Gains	and Losses for Tax on Ir	nvestment	Income							
		ribe the kind(s) of property sold (e g irehouse, or common stock, 200 sh			`P	low acq - Purch - Donat	ase	( <b>c</b> ) Date ( (mo , d		(d) Dat (mo , da	
1a	SALE OF INVEST	MENTS				I	?	VARI	ous	12/3	
	SALE OF INVEST	MENTS				I	9	VARI	ous	12/3	1/14
C	CAPITAL GAINS	DIVIDENDS									
d											
<u>e</u>					<u>L_</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Ga (e) plus	ain or (loss) (f) minus (	(g)	
а	2,538,828.			2,179,88	2.					358	,946.
b	391,654.			397,74	0.					-6	,086.
C	51,757.									51	<u>,757.</u>
<u>d</u>		_							_		
e			l								
	Complete only for assets showing	ig gain in column (h) and owned by	the foundation	on 12/31/69					ol (h) gain		
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			col		ot less thai (from col (		
а		-								358	,946.
b								•			,086.
C										51	<u>,757.</u>
d											
<u>e</u>											
2	Capital gain net income or (net ca	If gain, also ente If (loss), enter -0			}	2	_			404	,617.
3	Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar			[						
•	If gain, also enter in Part I, line 8,		iiu (0)		J.						
_	If (loss), enter -0- in Part I, line 8				Л	3			N/A		
P	Part V Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inv	estm	ent Inc	ome			
(Fo	or optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	icome	.)					
lf o	ection 4940(d)(2) applies, leave th	hie nart blank									
11 3	ection 4540(u)(2) applies, leave ti	iis part bialik									
Wa	is the foundation liable for the sec	tion 4942 tax on the distributable an	nount of any ye	ear in the base pe	rıod?					Yes	X No
_		lify under section 4940(e) Do not co									
<u>1</u>		each column for each year, see the I	nstructions be	fore making any e	ntries					(4)	
	(a) Base period years	(b)			(c)	.4.4.1.			Distrib	(d) oution ratio	
	Calendar year (or tax year beginnii			Net value of no					(col (b) div	ided by col	
	2013		37,152.				7,743				58942
	2012		1,933.				3,291				60715
	2011_		2,801.				1,988				58882
	2010		3,017.				870				53394
_	2009		7,602.		14	,081	L <b>,</b> 485	•		. 0	<u>53091</u>
_										2	85024
	Total of line 1, column (d)							2		• 2	05024
	_	5-year base period - divide the total	on line 2 by 5,	or by the number	or ye	ars				0	57005
	the foundation has been in exister	nce it less than 5 years .						3		• 0	37003
	Fator the autorities of a coeleanter	No was assets for 0014 from Dark V	line C					4	1	7,437	.968.
4	Enter the net value of nonchantal	ole-use assets for 2014 from Part X,	line 5				•	<del>-</del>		1 / 1 5 /	,,,,,,,
_	Markhalis kan A his kan O							_		994	,051.
Ð	Multiply line 4 by line 3	•						5			,031.
_	F-h 40/ - 5 h h h h	(40) (Double live 07h)								8	,136.
0	Enter 1% of net investment incon	118 (176 OF PARTI, 11118 2/0)				•		6			,
,	Add lines E and C							7		1,002	.187
1	Add lines 5 and 6				•	••		-		-,002	, ~ 0 , •
8	Enter qualifying distributions from	n Part XII, line 4						8		1,023	,263.
		i line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax ra	ate				
	See the Part VI instructions.			-							

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ASSOCIATION FOR THE RELIEF OF AGED WOMEN

Form 990-PF (2014) OF NEW BEDFORD 04-605			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	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)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%		<u>8,1</u>	<u>36.</u>
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 enter -0-)			0.
3 Add lines 1 and 2		8,1	<u> 36 .</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		8,1	36.
6 Credits/Payments			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 18,000.			
b Exempt foreign organizations - tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld . 6d			
7 Total credits and payments. Add lines 6a through 6d	1	8,0	00.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
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		9,8	64.
11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 9,864 - Refunded ▶ 11			0.
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		_
distributed by the foundation in connection with the activities.			
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 year			
(1) On the foundation ► \$ O • (2) On foundation managers ► \$ O •			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers > \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
If "Yes," attach a detailed description of the activities.		<del></del>	'''
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T.			
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			
	6	х	
remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
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	<b>—</b>	- <del></del>	
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)	-		
	8b	х	1
of each state as required by General Instruction G? If "No," attach explanation  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	-05	<u></u> -	
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	g	•	х
	10	-	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .	orm <b>990</b>	-PF	

### ASSOCIATION FOR THE RELIEF OF AGED WOMEN

†or <del>n</del>	1 990-PF (2014) OF NEW BEDFORD 04-605	6367		Page 5
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			-
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		_X
13	The state of the s	13	X	
	Website address ► N/A		<del></del>	
14				
	Located at ►432 COUNTY STREET, NEW BEDFORD, MA ZIP+4 ►0	2/40		
15	, , , , , , , , , , , , , , , , , , , ,	). N	<b>/</b> ⊅	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	NI.
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	ا مد ا	Yes	No X
	securities, or other financial account in a foreign country?	16	L	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the			
D:	foreign country ►  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	i	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Τ.	Yes	No
12	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 X 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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
t	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?	10	,	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014? Yes X No			
	If "Yes," list the years \			
	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		: 
	: 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			
٠				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?			
t	ı 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.)  N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		<u>X</u> _
	Fi	rm <b>99</b> 0	)-PF	(2014)

			il		
2 Compensation of five highest-paid employees (other than those	included on line 1). If none	, enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances	
CHERYL RANDALL-MACH - 432 COUNTY	EXEC DIR				
STREET, NEW BEDFORD, MA 02740	40.00	79,233.	2,395.	0.	
				-	
Total number of other employees paid over \$50,000	_		<b>&gt;</b>	(	

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

OF NEW BEDFORD

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	17,775,855.
b	Average of monthly cash balances	16	17,775,855. 713,513.
C		10	
đ	Total (add lines 1a, b, and c)	1d	18,489,368.
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	18,489,368.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 11	4	1,051,400.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,437,968.
6	Minimum Investment return. Enter 5% of line 5	6	871,898.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	871,898.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c _	8,136.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	863,762.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	863,762.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	863,762.
P	Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		1 022 262
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,023,263.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	2 A (k	3a	
þ	Cash distribution test (attach the required schedule)	3b	1 000 060
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,023,263.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		0 100
	income Enter 1% of Part I, line 27b	5	8,136.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,015,127.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation	qualifies fo	r the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see Instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				863,762.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	<u> </u>
b Total for prior years				
<del></del>		0.		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
3 Excess distributions carryover, if any, to 2014				
a From 2009 80,568.				
b From 2010 78,916.				
t From 2011 169,592.				
d From 2012 195, 194.				
e From 2013 173, 473.	607 742	<u> </u>		
f Total of lines 3a through e	697,743.			
4 Qualifying distributions for 2014 from		•		
Part XII, line 4 ►\$ 1,023,263.			^	
a Applied to 2013, but not more than line 2a			0.	<del></del>
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	V •			863,762.
d Applied to 2014 distributable amount	159,501.			003,702.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	857,244.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable	***************************************		······································	······································
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				······································
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must		[		
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		į		
may be required - see instructions)	0.			·
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	80,568.			
9 Excess distributions carryover to 2015.				,
Subtract lines 7 and 8 from line 6a	776,676.			
10 Analysis of line 9				
a Excess from 2010 78,916.		[		
b Excess from 2011 169,592.		į.		
c Excess from 2012 195,194.		Į.		
d Excess from 2013 173, 473.		Į.		
e Excess from 2014 159,501.				
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Part XiV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)		
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2014, enter the date of t	he ruling	▶	02/14/86	
<b>b</b> Check box to indicate whether the foun	dation is a private operatin	g foundation described i	n section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					<u> </u>
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter. (1) Value of all assets					
,,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter				· · · · · · · · · · · · · · · · · · ·	<del> </del>
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed c "Support" alternative test - enter					<del>  </del>
• •					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					<del></del>
(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	<u> </u>				<del></del>
			if the founda	ation had \$5,000 or m	ore in assets
at any time during t		uctions.)			<del></del>
1 Information Regarding Foundation	<del>-</del>				
a List any managers of the foundation why year (but only if they have contributed r			ibutions received	by the foundation before the cl	ose of any tax
	11016 (11a11 \$5,000) (566 56	501011 507(0)(2) )			
NONE					<del></del>
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large	e portion of the ownership of a	partnership or
NONE	a a to to or greater inteles	•			
<del></del>	i 0 0'# I	0-1-1111			
2 Information Regarding Contribut				4	aata faa faada lif
Check here X if the foundation of the foundation makes gifts, grants, etc.	Inly makes contributions to	o preselected charitable (	organizations and	does not accept unsolicited req	uests for tunds II
	<u> </u>	<del>-</del>		<del></del>	
a The name, address, and telephone num	ber or e-mail address of tr	ne person to whom applic	cations should be	addressed	
				<del> </del>	
b The form in which applications should t	e submitted and informati	ion and materials they sh	ould include		
c Any submission deadlines					
e miy submission deadiffes					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields,	kınds of institutior	ns, or other factors	
				<u> </u>	

Form 990-PF (2014)

OF NEW BEDFORD

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment 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) recipient or substantial contributor a Paid during the year TOWN AGENCY ACUSHNET COUNCIL ON AGING 59 1/2 S MAIN ST 13,150. ACUSHNET, MA 02743 PUBLIC CHARITY ELDER SERVICES ART THERAPY INSPIRATIONAL ART FOR SENIORS, INC. 1 BROOKLAWN STREET 6,500. NEW BEDFORD, MA 02745 PUBLIC CHARITY ELDER SERVICES COASTLINE ELDERLY SERVICES, INC. 1646 PURCHASE STREET 25,000. NEW BEDFORD, MA 027406819 PUBLIC CHARITY ELDER SERVICES COMMUNITY NURSE & HOSPICE CARE, INC. 62 CENTER STREET 32,750. FAIRHAVEN, MA 02719 ELDER SERVICES TOWN AGENCY DARTMOUTH COUNCIL ON AGING 628 DARTMOUTH STREET 51,605. S DARTMOUTH, MA 02748 SEE CONTINUATION SHEET(S) **▶** 3a 795,711. Total b Approved for future payment NONE **▶** 3b ٥. Total

Form 990-PF (2014) OF NEW BEDFORD			_	04-6	056367 Page 12
Part XVI-A Analysis of Income-Produ	cing Activitie	es			
Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					·····
b			1		
C		<del> </del>	<del>  </del>		
d	.		1		<del>-</del>
6	· <del>   </del>				
g Fees and contracts from government agencies	· <del> </del>		-		
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash		<del> </del>			
Investments					
4 Dividends and interest from securities .			14		436,291
5 Net rental income or (loss) from real estate				17 17 1 17 17 17 17 17 17 17 17 17 17 17	,,,,
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			-		
8 Gain or (loss) from sales of assets other			18		404,617
than inventory  9 Net income or (loss) from special events	-		1 10		101/01/
10 Gross profit or (loss) from sales of inventory					
11 Other revenue		<del>,</del>	1		
a					
b					
C					
d	.				
e		0			040 000
12 Subtotal Add columns (b), (d), and (e)	. <u>L 1</u>	0.	·	0.	840,908 840,908
13 Total. Add line 12, columns (b), (d), and (e)	•			13	040,300
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities	to the Accon	nplishment of Ex	xemp	t Purposes	
Line No. Explain below how each activity for which inc			contrib	outed importantly to the accomp	lishment of
the foundation's exempt purposes (other than			- 011		CHANCE
18 PROCEEDS FROM SALE OF	STOCK USI	ED TO FURNI	SH_	FINANCIAL ASSI	STANCE
		<del></del>			
		· ·····			
					<del> </del>
		<del></del>			
					<del></del>
		<del></del>			

Form 990-PF (2	2014) OF NE	W BEDFORD						04-	<u>-6056367</u>	Page 13
Part XVII	Information Re Exempt Organ	egarding Trans	fers To a	and Tr	ansactions	and	Relations	ships With No	ncharitable	•
1 Did the or	ganization directly or indi		f the followin	a with ar	v other organiza	tion de	ecribed in sec	tion 501/c) of	<del></del>	Yes No
	(other than section 501(c)									100 110
	from the reporting found				-	amzam	UII3*			
(1) Cash	•	ation to a noncharitable	o exempt on	gamzano					1a(1)	x
(2) Other									1a(2)	X
b Other tran		•			• •					
	of assets to a nonchanta	ble exempt organizatio	n .						16(1)	X
	hases of assets from a no			•				•	1b(2)	X
	al of facilities, equipment,		gamzanom					•	1b(3)	X
	bursement arrangements								1b(4)	X
	s or loan guarantees								1b(5)	X
	ormance of services or me	embership or fundraisi	na solicitatio	ons					1b(6)	X
	f facilities, equipment, ma					•			10	X
-	wer to any of the above is	-			lumn (b) should	always	show the fair	market value of the	goods, other assi	ets,
	es given by the reporting f									
	d) the value of the goods,						•			
(a) Line no	(b) Amount involved	(c) Name of n		e exempt	organization		(d) Description	on of transfers, transact	ions, and sharing arr	angements
			N/A							
			•							
			•							
									_	
	· - · · · · · · · · · · · · · · · · · ·									
			· ·							
										<u></u>
								-		
				•						
									- <u></u>	
2a Is the fou	ndation directly or indirec	tly affiliated with, or re	lated to, one	or more	tax-exempt orga	anızatıo	ns described		_	
ın section	501(c) of the Code (othe	r than section 501(c)(	3)) or in sect	tion 5271	•				Yes	X No
b if Yes, c	omplete the following sch			,					<del></del>	
	(a) Name of org	ganization		(b) Typ	oe of organization	n		(c) Description of	relationship	
	N/A			ļ						
				ļ		_				<del></del>
				ļ						
				<u> </u>						
				<u> </u>						
l and h	r penalties of perjury, I declare relief, it is <u>tr</u> ue, correct, and coi								May the IRS of return with the	discuss this
Sign	Phiana	Muxe	_		6.17.15				shown below	(see instr)?
Here	Munice	000,000	<del></del>		6.1775	_ Z			X Yes	L No
Sig	nature of officer or trustee				ate	1-	Title	Chaol.	DTIN	
	Print/Type preparer's na	ame	Preparer's s	ignature		Dat	te	Check If	PTIN	
<b>D</b>			120	1	hamb JU	IN 1	2 2015	self- employed	D00365	710
Paid	PETER C. I				nono 10	1 1	~ ZUIJ		P00365	
Preparer	Firm's name ► BUR	KE & LAMB,	, P.C.	i				Firm's EIN	04-34966	50
Use Only		· · · · · · · · · · · · · · · · · · ·								<del>-</del>
	Firm's address ► 30								0004 4	900
	NE NE	W BEDFORD,	, MA U	12/40				Phone no 50	08-984-4	
									Form <b>99(</b>	<b>)-PF</b> (2014

04-6056367

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient FAIRHAVEN COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 229 HUTTLESTON AVENUE FAIRHAVEN, MA 027191956 70,176. GREATER NEW BEDFORD COMMUNITY HEALTH PUBLIC CHARITY ELDER SERVICES CENTER, INC. 874 PURCHASE STREET 65,000. NEW BEDFORD, MA 027406232 INTER-CHURCH COUNCIL PUBLIC CHARITY ELDER SERVICES 412 COUNTY STREET NEW BEDFORD, MA 02740 88,050. NEW BEDFORD COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 181 HILLMAN ST, BLDG 9 NEW BEDFORD, MA 02740 24,750. OTHER INDIVIDUALS INDIVIDUALS SEE ATTACHED LIST 367,130. WESTPORT COUNCIL ON AGING TOWN AGENCY ELDER SERVICES 75 REED ROAD 44,100. WESTPORT, MA 02790 PUBLIC CHARITY ELDER SERVICES YWCA SOUTHEASTERN MASS 20 SOUTH SIXTH STREET 7,500. NEW BEDFORD, MA 02740 Total from continuation sheets 666,706.

FORM 990-PF DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
US TRUST 488,048	51,75	7. 436,291.	436,291.	
TO PART I, LINE 4 488,048	51,75	7. 436,291.	436,291.	
FORM 990-PF	LEGAL	FEES	Si	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	619.	0.		619.
TO FM 990-PF, PG 1, LN 16A =	619.	0.		619.
FORM 990-PF	ACCOUNTI	NG FEES	Si	TATEMENT 3
FORM 990-PF  DESCRIPTION	ACCOUNTI  (A) EXPENSES PER BOOKS	NG FEES  (B)  NET INVEST-  MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES
DESCRIPTION  ACCOUNTANTS  TO FORM 990-PF, PG 1, LN 16B	(A) EXPENSES PER BOOKS 27,150.	(B) NET INVEST- MENT INCOME  9,503.  9,503.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  17,647.
DESCRIPTION  ACCOUNTANTS  TO FORM 990-PF, PG 1, LN 16B	(A) EXPENSES PER BOOKS 27,150.	(B) NET INVEST- MENT INCOME  9,503.  9,503.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  17,647.
DESCRIPTION  ACCOUNTANTS  TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF	(A) EXPENSES PER BOOKS 27,150.  27,150.  THER PROFES  (A) EXPENSES	(B) NET INVEST- MENT INCOME  9,503.  9,503.  SIONAL FEES  (B) NET INVEST-	(C) ADJUSTED NET INCOME  ST  (C) ADJUSTED	(D) CHARITABLE PURPOSES  17,647.  17,647.  TATEMENT 4  (D) CHARITABLE

FORM 990-PF	TAX	ES	STATEMENT 5																							
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM																						
FEDERAL EXCISE TAX PAYROLL TAXES	8,136. 0. 7,255. 0.																								7,25	0. 55.
TO FORM 990-PF, PG 1, LN 18 =	15,391.		0.		7,25	55.																				
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6																				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTED NET INCOM																						
MISC ADMINISTRATIVE EXPENSE INSURANCE	13,109. 3,636.		0.		13,10																					
TO FORM 990-PF, PG 1, LN 23	16,745.		0.		16,74	15.																				
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7																				
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKET	Г																				
		COST	17	7,705,009.	17,705,00	9.																				
TOTAL TO FORM 990-PF, PART II	, LINE 13	-	17	7,705,009.	17,705,00	9.																				
FORM 990-PF DEPRECIATION OF	' ASSETS NOT	HELD FOR	INVE	ESTMENT	STATEMENT	8																				
DESCRIPTION		T OR BASIS		JMULATED RECIATION	BOOK VALUE	<b>Ξ</b>																				
COMPUTER COMPUTER EQUIPMENT		1,470. 1,090.	-	1,470. 1,090.		0.																				
TOTAL TO FM 990-PF, PART II,	LN 14	2,560.		2,560.		0.																				

FORM 990-PF	OTHER ASSETS	OTHER ASSETS						
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE		FAIR MARKET VALUE 28,160.				
ACCRUED INVESTMENT INCOME	39,916.	28,16	50.					
TO FORM 990-PF, PART II, LINE 15	39,916.	39,916. 28,160						
	ST OF OFFICERS, D D FOUNDATION MANA	STATI	STATEMENT 10					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT				
CHERYL RANDALL-MACH	EXECUTIVE DIRE	EXECUTIVE DIRECTOR 40.00 79,233.						
NANCY KURTZ	TRUSTEE 1.00	0.	0.	0.				
ROSEMARY SABER	TRUSTEE 1.00	0.	0.	0.				
JO-ANN BEAULIEU	TREASURER 6.00	0.	0.	0.				
ROSEANNE O'CONNELL	PRESIDENT 6.00	0.	0.	0.				
SHANNON BACHMAN	TRUSTEE 2.00	0.	0.	0.				
ELIZABETH BRINKERHOFF	VICE PRESIDENT	0.	0.	0.				
SANDRA FOGG	TRUSTEE 1.00	0.	0.					

ASSOCIATION FOR THE RELIEF	OF AGED WOMEN		04-6056367		
EMILY PINHEIRO	TRUSTEE 1.00	0.	0.	0.	
GILLIAN HARRIS	TRUSTEE 1.00	0.	0.	0.	
BARBARA WACKOWSKI-FARIA	TRUSTEE 1.00	0.	0.		
LORRAINE MELLO	TRUSTEE 1.00	0.	0.		
LYNN WYLDE	TRUSTEE 1.00	0.	0.	0.	
JEAN SILVER	TRUSTEE 2.00	0.	0.	0.	
SUSAN ROTHSCHILD	TRUSTEE 2.00	0.	0.	0.	
GRETCHEN WHIPPLE	TRUSTEE 1.00	0.	0.	0.	
DEBORAH BROOKE	CLERK 6.00	0.	0.	0.	
DIANE BREAULT	TRUSTEE 1.00	0.	0.	0.	
JEANETTE DOYLE	TRUSTEE 1.00	0.	0.	0.	
ANN FOX	TRUSTEE 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	79,233.	2,395.	0.	

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT 11
PART X, LINE 4

\$1,051,400 IS DEEMED NECESSARY TO PAY BUDGETED EXPENSES AND DISBURSEMENTS.

# ASSOCIATION FOR THE RELIEF OF AGED WOMEN, INC. 04-6056367 PAGE 11, PART XV, LINE 3A OTHER INDIVIDUALS APR 14 - MAR 15

A, D	South Dartmouth, MA	2,488 00
A, D	New Bedford, MA	50 00
A, M	South Dartmouth, MA	4,059 40
A, F	Fairhaven, MA	429 45
A, H	North Dartmouth, MA	1,784 04
В, Е	New Bedford, MA	80 00
В, М	New Bedford, MA	1,142 50
B, R	New Bedford, MA	100 00
B, C	New Bedford, MA	1,748 00
В, К	Fairhaven, MA	210 00
В, Т	North Dartmouth, MA	2,206 48
В, Р	Fairhaven, MA	1,010 00
В, М	North Dartmouth, MA	1,180 00
В, А	Fairhaven, MA	2,388 01
B, J	Westport, MA	99 00
B, L	New Bedford, MA	1,592 31
C, I	New Bedford, MA	2,032 00
C, <b>M</b>	New Bedford, MA	2,700 00
C, C	Westport, MA	2,207 32
C, L	Fairhaven, MA	3,822 00
C, E	Acushnet, MA	1,166 85
C, R	New Bedford, MA	146 75
C, D	Westport, MA	2,663 42
C, E	Fairhaven, MA	3,120 94
C, <b>M</b>	Westport, MA	2,566 72
C, J	New Bedford, MA	4,744 00
C, L	New Bedford, MA	343 81
C, S	New Bedford, MA	3,829 47
C, L	New Bedford, MA	4,921 58
C, J	Fairhaven, MA	2,104 24
C, Y	New Bedford, MA	168 00
C, N	Westport, MA	617 35
C, C	South Dartmouth, MA	642 80
C, R	New Bedford, MA	1,440 00
C, D	New Bedford, MA	3,200 00
C, D	Westport, MA	3,259 40
C, G	New Bedford, MA	1,048 98
D, <b>M</b>	North Dartmouth, MA	1,559 00
D, C	Fairhaven, MA	2,071 05
D, V	Fairhaven, MA	2,537 53

D, J	Westport, MA	239 84
D, L	New Bedford, MA	400 00
D, H	New Bedford, MA	536 40
D, <b>M</b>	Westport, MA	2,206 48
D, L	New Bedford, MA	4,080 00
D, E	New Bedford, MA	400 00
D, C	New Bedford, MA	1,611 16
D, M	Fairhaven, MA	2,604 00
D, A	New Bedford, MA	203 06
D, J	New Bedford, MA	392 45
D, L	North Dartmouth, MA	2,205 81
F, L	New Bedford, MA	1,200 00
F, L	Fairhaven, MA	798 00
F, B	New Bedford, MA	2,422 68
F, C	New Bedford, MA	786 36
F, E	Westport, MA	4,053 00
F, E	South Dartmouth, MA	2,305 00
F, L	New Bedford, MA	1,000 00
F, L	New Bedford, MA	3,053 50
F, M	New Bedford, MA	386 00
G, B	Fairhaven, MA	2,787 38
G, A	Westport, MA	784 61
G, V <sup>'</sup>	Westport, MA	380 00
G, C	New Bedford, MA	2,700 00
G, A	New Bedford, MA	398 00
G, C	New Bedford, MA	620 00
G, M	New Bedford, MA	1,000 00
G, P	Fairhaven, MA	2,204 94
G, O	North Dartmouth, MA	2,690 27
G, N	Fairhaven, MA	1,659 40
H, G	New Bedford, MA	957 38
Н, В	New Bedford, MA	1,467 00
H, M	Fairhaven, MA	3,287 00
I, L	New Bedford, MA	576 07
J, N	Westport, MA	201 90
J, S	Fairhaven, MA	2,421 37
K, J	Fairhaven, MA	3,461 07
K, M	Fairhaven, MA	5,551 00
K, V	Westport, MA	100 00
L, B	Fairhaven, MA	2,067 00
L, H	South Dartmouth, MA	3,394 40
L, J	Westport, MA	25 00
L, L	New Bedford, MA	100 00
L, C	South Dartmouth, MA	2,208 08
L, G	Westport, MA	1,666 77
L, S	New Bedford, MA	1,083 22
L, E	New Bedford, MA	8,659 83

L, E	New Bedford, MA	2,390 00
L, A	Westport, MA	529 89
M, A	New Bedford, MA	1,048 98
M, E	Westport, MA	299 84
м, н	Westport, MA	3,439 50
M, E	New Bedford, MA	405 00
M, C	Fairhaven, MA	259 47
M, T	New Bedford, MA	1,300 00
M, M	South Dartmouth, MA	4,781 90
M, J	South Dartmouth, MA	2,700 88
M, M	New Bedford, MA	700 00
M, A	New Bedford, MA	6,094 60
M, E	New Bedford, MA	807 27
M, D	Westport, MA	-846 24
M, A	South Dartmouth, MA	515 85
M, J	Acushnet, MA	350 00
M, M	Fairhaven, MA	3,344 38
M, C	Fairhaven, MA	1,675 04
M, I	Westport, MA	1,384 00
M, M	Fairhaven, MA	5,403 00
M, J	North Dartmouth, MA	2,032 22
M, E	New Bedford, MA	2,900 00
M, J	Fairhaven, MA	1,491 20
M, C	Fairhaven, MA	2,877 66
M, H	South Dartmouth, MA	2,600 00
N, P	North Dartmouth, MA	2,685 07
O, A	New Bedford, MA	4,336 68
O, R	New Bedford, MA	18,084 95
P, L	Fairhaven, MA	529 20
P, M	Fairhaven, MA	3,849 77
Р, В	South Dartmouth, MA	1,489 90
P, L	New Bedford, MA	524 49
P, G	Westport, MA	1,400 00
P, S	Westport, MA	3,530 13
P, V	Fairhaven, MA	3,915 32
P, H	Fairhaven, MA	8,959 20
P, D	North Dartmouth, MA	459 40
P, D	New Bedford, MA	-41 71
P, A	New Bedford, MA	437 36
R, H	South Dartmouth, MA	2,566 72
R, N	New Bedford, MA	800 00
R, P	New Bedford, MA	88 00
R, A	South Dartmouth, MA	1,840 00
R, C	New Bedford, MA	475 18
R, R	Fairhaven, MA	2,885 90
R, L	Westport, MA	6,165 10
R, K	North Dartmouth, MA	800 00

D D	Now Dodford 84A	1 520 45
R, R R, A	New Bedford, MA South Dartmouth, MA	1,629 45
R, F	North Dartmouth, MA	1,871 60 852 00
R, M	Westport, MA	3,091 30
R, L	New Bedford, MA	
R, M	,	440 00
•	New Bedford, MA	300 00
S, D	North Dartmouth, MA	3,365 00
S, D	North Dartmouth, MA	5,452 07
S, I	New Bedford, MA	1,202 00
S, M	Fairhaven, MA	2,208 08
S, J	Fairhaven, MA	2,020 00
S, B	New Bedford, MA	760 00
S, A	New Bedford, MA	3,654 00
S, D	South Dartmouth, MA	3,700 00
S, M	New Bedford, MA	2,320 00
S, L	Fairhaven, MA	2,207 38
S, L	North Dartmouth, MA	843 59
S, B	Fairhaven, MA	9,902 96
S, R	New Bedford, MA	1,765 68
S, B	Westport, MA	2,207 32
s, K	New Bedford, MA	1,998 81
S, P	New Bedford, MA	2,325 67
S, P	New Bedford, MA	337 00
S, A	South Dartmouth, MA	1,249 98
S, B	New Bedford, MA	360 00
S, D	New Bedford, MA	2,205 81
T, D	Westport, MA	834 30
T, M	New Bedford, MA	1,061 00
T, M	New Bedford, MA	147 00
T, A	Fairhaven, MA	841 20
T, D	South Dartmouth, MA	8,207 38
T, B	New Bedford, MA	1,738 14
T, A	Westport, MA	2,425 68
T, E	Acushnet, MA	109 34
T, J	New Bedford, MA	3,440 00
V, R	Fairhaven, MA	5,006 51
V, G	Acushnet, MA	3,721 72
V, K	Westport, MA	2,207 32
V, P	New Bedford, MA	1,569 84
w, c	New Bedford, MA	169 40
w, B	New Bedford, MA	2,252 18
W, L	Fairhaven, MA	1,406 92
Z, G	Fairhaven, MA	2,641 60
_, ~	, annuron, mr.	
		367,130 16

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990-PF

													- 71		
Current Year Deduction	• 0	73.	73.	• •					•						lization Deduction
Current Sec 179		<del></del>	0	·····			******		!	<u></u>	<del></del>		•		mercial Revita
Accumulated Depreciation	1,470.	1,017.	2,487.		111						<del> : · · · ·</del>				/age, Bonus, Com
Basis For Depreciation	1,470.	1,090.	2,560.			<del></del>		*******		***************************************	<del></del>				* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
* Reduction in Basis			0												* ITC
Bus % Excl	***	· <b>···</b> ······	• • • • • • • • • • • • • • • • • • • •						•••				******		
Unadjusted Cost Or Basis	1,470.	1,090.	2,560.												(D) - Asset disposed
Line	16	16													ė
Lrfe	2.00	5.00													
Method	ТS													 	
Date Acquired	010607SL	TS607180												 	
Description	COMPUTER	SCOMPUTER EQUIPMENT	30-rr rg		<del>- 111</del>				····	N.1198.1		***************************************			
Asset No	1	(7)		·····			·········								428102 05-01-14