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DLN: 93491134006036

OMB No 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

Open to Public Inspection

For	caler	ndar year 2015, or tax y	/ear beginning 01-0	71-2015	, an	d ending 1	2-31-2015				
Pod		amıly Foundatıon Inc					entification numbe	er			
		1 Poduska			L	04-3235379					
		street (or P O box number if mail is i	not delivered to street address)	Room/suite		B Telephone nun	nber (see instruction	s)			
25.) Meauw	/Drook Road			-	(781) 893-3964					
	or town, ton, MA	, state or province, country, and ZIP o 02493	r foreign postal code	-1		C If exemption	application is pendin	g, check here 🕨 🦵			
G Ch	neck al	I that apply Initial return	Initial return of a fo	ormer public charity		D 1. Foreign or	ganizations, check he	ere 🕨 🗀			
		Final return Address chang	, ,			2. Foreign or test, check	ganizations meeting k here and attach co	the 85% F			
		pe of organization	ble trust	e private foundation			ındatıon status was t n 507(b)(1)(A), chec				
I Fair of y	r marke year <i>(fr</i>	et value of all assets at end rom Part II, col. (c), \$ 51,310	JAccounting method Other (specify)	▼ Cash		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► Γ					
	rt I	Analysis of Revenue a	and Fynenses					Disbursements			
		(The total of amounts in columns (necessarily equal the amounts in co instructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	let investment income	Adjusted net (c) income	for charitable purposes (d) (cash basis only)			
	1	Contributions, gifts, grants, e	tc , received (attach								
		schedule)		42,036	,						
	2	Check 🟲 🦵 If the foundation	is not required to attach								
Reveilue		Sch B									
	3	Interest on savings and temp	·	1	 						
	4	Dividends and interest from s Gross rents		4	 	4	4				
	5a b	Net rental income or (loss)									
	6a	Net gain or (loss) from sale o		47,552							
	ь	Gross sales price for all asse									
Ж	7	Capital gain net income (from	n Part IV, line 2)			47,552					
	8	Net short-term capital gain .									
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	b	Less Cost of goods sold									
	C	Gross profit or (loss) (attach	·								
	11	Other income (attach schedu		20 503	<u> </u>	17.556					
	12	Total. Add lines 1 through 11 Compensation of officers, dire		89,592		47,556	4				
	13 14	Other employee salaries and			-						
ر. م	15	Pension plans, employee ben			 						
ŠΨ	16a	Legal fees (attach schedule).			 						
Expenses	ь	Accounting fees (attach sche		5,255	 						
		Other professional fees (atta		<u> </u>	<u> </u>						
and Administrative	17	Interest	•		 						
trat	18	Taxes (attach schedule) (see									
S	19	Depreciation (attach schedul	·	% 590							
튑	20	Occupancy		_							
ਰ ਵ	21	Travel, conferences, and mee	etings	2,407							
an(22	Printing and publications									
	23	Other expenses (attach sche	dule)	913							
Operating	24	Total operating and administ	<u>-</u>								
<u>8</u>		Add lines 13 through 23		13,687		0		0			
U	25	Contributions, gifts, grants pa		94,850				94,850			
	26	Total expenses and disbursen 25	nents.Add lines 24 and	108,537		0		94,850			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over exper		-18,945		47.556					
	b	Net investment income (if near	·			47,556	4				
	C	Adjusted net income(If negat					4				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			of year
			(a) Book Value	(b) Book	Value	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	69,583		50,425	50,425
	3	Accounts receivable				
		Less allowance for doubtful accounts -				
	4	Pledges receivable -				
		Less allowance for doubtful accounts 🟲				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts 🟲				
94	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🕨				
		Less accumulated depreciation (attach schedule) 🟲				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis 🕨				
		Less accumulated depreciation (attach schedule) 🟲 668	1,475	多	885	885
	15	O ther assets (describe 🟲)				
	16	Total assets(to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	71,058		51,310	51,310
	17	Accounts payable and accrued expenses				
	18	Grants payable				
å.	19	Deferred revenue				1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				-
림	21	Mortgages and other notes payable (attach schedule)				-
-	22	Other liabilities (describe				
	23	Total liabilities(add lines 17 through 22)			0	-)
		Foundations that follow SFAS 117, check here				
8		and complete lines 24 through 26 and lines 30 and 31.				
릙	24	Unrestricted				
훒	25	Temporarily restricted				-
=	26	Permanently restricted				
<u>,5</u>		Foundations that do not follow SFAS 117, check here				-
or Fund Balance		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds	71,058		51,310	-)
₹	30	Total net assets or fund balances(see instructions)	71,058		51,310	-)
	31	Total liabilities and net assets/fund balances(see instructions)	71,058		51,310	-)
Da	rt III		<u> </u>			
1	- TT	Total net assets or fund balances at beginning of year—Part II, column	(a) line 20 /must ==	roo T	$\overline{}$	
1		with end-of-year figure reported on prior year's return)			1	71,058
2		Enter amount from Part I, line 27a		-	2	-18,945
3					3	-10,945
		Other increases not included in line 2 (itemize) Add lines 1, 2, and 3		− ⊦	4	E2 112
4 5		· ·		· · · ·	5	52,113 803
		Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5)—I			6	51,310
6		Total her assets of fund parances at end of year (fine 4 fillings fille 5)—	arcii, column (b), m			31,310

the Part VI instructions

Part	IV Capital Gains and	Loss	es for Tax on Inves	stmen	<u>it Income</u>					
	List and describe the (a) 2-story brick warehou		of property sold (e g , re ommon stock, 200 shs			How acqu P—Purch (b) D—Dona	ase		acquired , day, yr)	Date sold (d) (mo , day, yr)
1 a	304 shs - Anadarko Pet	e Corp				P		2009-	11-12	2015-12-15
b	696 shs - Anadarko Pet	e Corp				Р		2009-	11-12	2015-12-15
	210 shs - Palo Alto Net					Р		2014-	01-08	2015-06-26
d										
е										
(e) Gross sales price		Depreciation allowed (f) (or allowable)	d		or other basis		(1		n or (loss) (f) mınus (g)
a	14,6	528				8	,922			5,706
b	33,4	190				2.0	,428			13,062
с	37,3	394				8	,610			28,784
d										
е										
Co	omplete only for assets show	ving gair	n in column (h) and owne	d by the	e foundation	on 12/31/69				(h) gaın mınus
(i)	FMV as of 12/31/69		Adjusted basis			ess of col (ı)				ot less than -0-) or (from col (h))
	, ,		(j) as of 12/31/69		(K) over	col (j), if any		(I)	LUSSES	5,706
a										13,062
b										28,784
										20,704
d										
e			,	76		D T . l	, 1			
2	Capital gain net income	or (net c				n Part I, line 7 in Part I, line		2		47,552
3	Net short-term capital g	aın or (lo	ss) as defined in section	ns 122	2(5) and (6)					
	If gain, also enter in Part in Part I, line 8	I, line 8	, column (c) (see instru	ctions)	If (loss), er	nter -0-	}	3		
Part	V Qualification Und	er Sec	ction 4940(e) for R	educe	ed Tax on	Net Invest	mer	nt Inco	me	
	tional use by domestic priva on 4940(d)(2) applies, leav	ite found	dations subject to the se							
	e foundation liable for the se ," the foundation does not q						se pe	rıod?		┌ Yes ┌ No
1 E r	ter the appropriate amount	ın each (column for each year, se	ee instr	uctions befo	re making any	entr	ies		
	(a) e period years Calendar for tax year beginning in)	Adjusted	(b) qualifying distributions	Net va	(c) Ilue of nonchar	ıtable-use assets		(col	(d) Distributio (b) divided	
	2014		109,939							
	2013		177,250							
	2012		147,749				_			
	2011		305,900				_			
	2010		25,200				+	_		
2 Totalof line 1, column (d)							-	2		
3	3 A verage distribution ratio for the 5-year base period—divide the number of years the foundation has been in existence if I							з		
4								4		
5	Multiply line 4 by line 3.						. $acksquare$	5		
6	Enter 1% of net investm	ent incoi	me (1% of Part I, line 27	7b)			. 🗀	6		476
7	Add lines 5 and 6						-	7		476
8	Enter qualifying distribut						-	8		94,850
	If line 8 is equal to or are		•					art licin/		

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	940(e)	. or 4948—se	ee page	2 18 of	the inst	ructio		age 4			
1a	Exempt operating foundations described in section 4940(d)(2), check here		,	\ \								
Ia	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	(J	1				476			
	here 🟲 🔽 and enter 1% of Part I, line 27b			• •								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations and 1, line 12, col (b)	ations	enter 4 % of									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	2							
3												
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndatıor	ns only Oth	ers	4							
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - (١_		5				476			
6	Credits/Payments			•	3				470			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	807								
b	Exempt foreign organizations—tax withheld at source	6b		007								
c	Tax paid with application for extension of time to file (Form 8868)	6c										
d	Backup withholding erroneously withheld	6d										
7	Total credits and payments Add lines 6a through 6d				7				807			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				807			
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed.				9							
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10			-	331			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	331	Refunded		11							
	t VII-A Statements Regarding Activities		- Ner andea			<u> </u>						
1a	During the tax year, did the foundation attempt to influence any national, state	orlo	ral legislatio	n or di	<u></u>			Yes	No			
	it participate or intervene in any political campaign?	2, 01 10	cui registacio	,	u		1a		No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	oolitica	l nurnoses i	· · 'caa In	• • etructi							
_	for definition)?					-	1b		No			
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	opies of any i	materia	ls	-						
	published or distributed by the foundation in connection with the activities.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
С	Did the foundation file Form 1120-POL for this year?						1c		No			
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo			r								
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers		= -									
e	Enter the reimbursement (if any) paid by the foundation during the year for pol	ıtıcal e	xpenditure 1	ax ımp	osed							
	on foundation managers 🕨 \$											
2	Has the foundation engaged in any activities that have not previously been rep	ported	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 it	ts gove	erning instru	ıment,	articles	5						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	ormed	copy of the c	hanges			3		No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	lurıng t	the year?.				4a		No			
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		No			
5	Was there a liquidation, termination, dissolution, or substantial contraction du	rıng th	e 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 49	45)sa	itisfied eithe	r								
	By language in the governing instrument, or											
	By state legislation that effectively amends the governing instrument so the	nat no r	mandatory d	irectio	ns							
	that conflict with the state law remain in the governing instrument?						6	Yes				
7	Did the foundation have at least $$5,000$ in assets at any time during the year	?If "Ye	s," 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 ($\hspace{-0.1cm}$	see ins	structions)									
	<u>M</u> A											
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99						8b	Yes				
	General (or designate) 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 year 2015 or the taxable year beginning in 2015 (s	ee ins	tructions for	rart X	1 /) /		^		N:-			
10	If "Yes," complete Part XIV	#	h a cabadal	liction:	• •		9	\vdash	No			
10	Did any persons become substantial contributors during the tax year? <i>If "Yes, and addresses.</i>			_	uieir n	airies	10		No			
	and addresses.						10	oxdot	.10			

Pai	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		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 ► <u>N/A</u>			
14	The books are in care of ▶Susan M Poduska Telephone no ▶(781)893	-3964	
	Located at ▶295 Meadowbrook Road Weston MA ZIP+4 ▶0249324			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	• •	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	م ا	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	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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 Vo			
	(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 ✓ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes ✓ 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)?			
	(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)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	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 2015?	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(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes ▼ No			
	If "Yes," list the years 🕨 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	If "Yes," did it have excess business holdings in 2015 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 2015.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\vdash	No
ъ Б	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 2015?	4b		No

Pai	Statements Rega	rding Activities for	· Wr	nich Form 4720	May	Be Required (<i>Cont</i>	tinue	ed)		
5a	During the year did the foundatio	n pay or incurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e))?	√ No			
	(2) Influence the outcome of any	specific public election ((see	section 4955), or to	carı	ry				
	on, directly or indirectly, any	voter registration drive?				T Yes 🖟	√ No			
	(3) Provide a grant to an individu	al for travel, study, or otl	ners	ımılar purposes?		┌ Yes रि	√ No			
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organization de	scrib	ped				
	in section 4945(d)(4)(A)? (s	ee instructions)				\ Yes \	√ No			
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transac	tions	s fail to qualify under	r the	exceptions described in				
	Regulations section 53 4945 or	n a current notice regard	ling d	disaster assistance	(see	instructions)?		5b		No
	Organizations relying on a currer	t notice regarding disast	eras	ssistance check her	e		_			
С	If the answer is "Yes" to question									
	tax because it maintained expend	liture responsibility for th	he gr	ant?		T Yes [√ No			
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	niums on				
	a personal benefit contract?						- No			
b	Did the foundation, during the yea	ar, pay premiums, directl	y orı	ndirectly, on a perso	onall	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter tı	ransaction? \(Yes \)	√ No			
b	If yes, did the foundation receive	•	-	•				7b		No
	Information Abou	t Officers, Director						l Emp	loyee	s,
	and Contractors	·		<u>, </u>						
1	List all officers, directors, trustee	s, foundation managers a	nd t	heir compensation (see i	nstructions).				
		Title, and average	(c)	Compensation(If		(d) Contributions to		Evnens		unt
	(a) Name and address	hours per week		not paid, enter	e	mployee benefit plans		•	e accou Illowanc	
		(b) devoted to position		-0-)		deferred compensation	L`´			
See	Additional Data Table									
		1								
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE.	,	
	(a)	Title, and aver	.2.00			Contributions to				
Nar	me and address of each employee		_	(c) Compensation	n	employee benefit			se acco	
	more than \$50,000	(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	otnera	allowand	es
NON	IE									
										
							1			
		 								
							-			
.	I mumb an a fact	<u> </u>				<u> </u>	-			
LOTA	I number of other employees paid of	vers50000.	_		_		1			

Part VIII Information About Officers, Directors, Trusto and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (E"
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the number	of Expenses
rganizations and other beneficiaries served, conferences convened, research papers prod	uced, etc	Lxpelises
1		
2		
3		
4 Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during	•	A mount
1	the tax year on lines I and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•

Part X Minimum Investment Return

PG	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	0
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	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	
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return.Enter 5% of line 5	6	0
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5 2a 476		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	476
3	Distributable amount before adjustments Subtract line 2c from line 1	3	476
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	476
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	94,850
	Program-related investments—total from Part IX-B	1b	
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	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	94,850
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	476
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	94,374
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

Р	art XIII Undistributed Income (see inst	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				0
	Undistributed income, if any, as of the end of 2015				
а					
b					
3					
а	From 2010				
b	From 2011)			
c	From 2012 147,750)			
d	From 2013 177,250)			
е	From 2014				
f	Total of lines 3a through e	769,200			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 94,850				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
c	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
	Applied to 2015 distributable amount	04.050			
	Remaining amount distributed out of corpus	94,850			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the 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 line 5	864,050			
	Prior years' undistributed income Subtract	,			
_	line 4b from line 2b				
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)				
a	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
u	—see instructions				
e	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 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 may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not	25,200			
0	applied on line 5 or line 7 (see instructions)	,			
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	838,850			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012 147,750				
	Excess from 2013 177,250				
d	Excess from 2014 110,650				
е	Excess from 2015 94,850				

P	art XIV	Private Operating Foundat	i ons (see ınstru	ictions and Part	VII-A, question	9)	
1a		dation has received a ruling or determ , and the ruling is effective for 2015,			- 1		
b	Check box	to indicate whether the organization	is a private operat	ting foundation des	scribed in section		厂 4942(j)(5)
2a	Enter the I	esser of the adjusted net	Tax year		Prior 3 years		(-) T-1-1
		m Part I or the minimum t return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	•						
		2a					
C		distributions from Part XII, ach year listed					
d	directly for	ncluded in line 2c not used active conduct of exempt					
e	Qualifying	distributions made directly conduct of exempt activities					
3	Complete 3	ne 2d from line 2c . . . a, b, or c for the					
_		test relied upon					
а		Ilternative test—enter of all assets					
	(2) Value	of assets qualifying section 4942(j)(3)(B)(i)					
b	of minimun	nt" alternative test— enter 2/3 n investment return shown in e 6 for each year listed					
c	· ·	alternative test—enter					
		support other than gross					
		ment income (interest,					
		nds, rents, payments curities loans (section					
)(5)), or royalties)					
		ort from general public					
		or more exempt zations as provided in					
		n 4942(j)(3)(B)(III)					
		st amount of support					
		n exempt organization investment income					
Da		upplementary Information (C	omplete this	nart only if the	l e organization	had \$5,000 o	r more in
I G		ssets at any time during the			c organization	au \$5,000 0	inore in
1 a	Informatio List any ma	on Regarding Foundation Managers: anagers of the foundation who have co close of any tax year (but only if they	ontributed more th	an 2% of the tota			lation
b		anagers of the foundation who own 10 of a partnership or other entity) of wh		•		large portion of th	e
2	Informatio	on Regarding Contribution, Grant, Gift	. Loan, Scholarshi	p. etc Programs:			
	Check here	e if the foundation only makes co I requests for funds If the foundation Itions, complete items 2a, b, c, and d	ntributions to pre	selected charitable			
а	Susan M P	owbrook Road A 02493	mail address of th	ne person to whom	applications shou	ıld be addressed	
b	The form II Letter of R	n which applications should be submi equest	tted and informati	on and materials t	hey should include		
C	Any submi None	ssion deadlines					
d	Any restric	ctions or limitations on awards, such	as by geographica	al areas, charitable	e fields, kinds of ir	stitutions, or othe	r
	None						

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 94,850 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Produc	ina Astivitia				Page 12
Enter gross amounts unless otherwise indicated	Ι -	usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exempt function income (See
a	Business code	Amount	Exclusion code	Amount	instructions)
b					
c d					
e					
f g Fees and contracts from government agencies					
 2 Membership dues and assessments. 3 Interest on savings and temporary cash investments. 					
4 Dividends and interest from securities			14		1
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income8 Gain or (loss) from sales of assets other than					
Inventory					47,552
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory					
b					
c d					
e					
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e).				13	47,552 47,556
(See worksheet in line 13 instructions to verify	calculations)				,555
Part XVI-B Relationship of Activities to Explain below how each activity for who the accomplishment of the foundation?	ıch ıncome ıs re	ported in column ((e) of Part XVI-A c	ontributed importa	
instructions) 8 Provided for the Foundation to Increase	Support of Char	itable O rganizatio	ons		
	- ' '				

Par	- XVI.	Noncharitable					action	is and I	keiationsnips	with								
		organization directly or i	ndırectly e	ngage	ın any of t	the following wit						Yes	No					
org	ganızat	tions?																
a Tra	ansfers	s from the reporting four	ndation to	a nonc	harıtable (exempt organiza	ation of											
(1)) Cas	h									1a(1)		No					
(2)) Othe	erassets									1a(2)		No					
b Ot	her tra	ansactions																
(1)) Sale	es of assets to a noncha	rıtable exe	mpt or	ganızatıoı	n					1b(1)		No					
(2)) Purc	chases of assets from a	noncharita	able ex	empt orga	anızatıon					1b(2)		No					
(3)) Rent	tal of facilities, equipme	nt, or othe	rasset	ts						1b(3)		No					
(4)) Rein	nbursement arrangemer	nts								1b(4)		No					
(5)) Loar	ns or loan guarantees.									1b(5)		No					
(6)) Perfor	rmance of services or m	embership	or fun	draising s	olicitations					1b(6)		No					
c Sh	arıng d	of facilities, equipment,	mailing list	ts, oth	er assets,	or paid employ	ees				1c		No					
of	the go	swer to any of the above ods, other assets, or se ansaction or sharing arr	rvices give angement,	en by t show i	he reporti In column	ng foundation I (d) the value of	f the fou	ndation r	eceived less than	n fair marke	et value							
(a) Lin	e No	(b) Amount involved	(c) Name	of nonch	narıtable exe	empt organization	(d) I	Description	of transfers, transact	ions, and sha	ırıng arra	ngemen	nts					
de	scribe	undation directly or indid in section 501(c) of the complete the following (a) Name of organization	ne Code (o schedule		an sectioi		ın sectio			otion of relation	. 「Ye	s V	No					
	111	dar nanaltina af	T de ala	+b = + 7 '		ounced #4 4-	انتلموري		manusa a - l d - d	المعامما	hora : :-!		+-					
Sign Here	the Info	der penalties of perjury, best of my knowledge a prmation of which prepar ******	ind belief, i	ıt ıs tru	ie, correct					n taxpaye May t return	r) is bas he IRS di	sed on	all					
		Signature of officer or t	rustee			Date	r	Title		below (see ii	nstr)? 🗸	Yes□N	No					
		Print/Type preparer's Daniel Tilton CPA C MST MSFP		Prepa	rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN P(012246	593						
Paid Prep Use Only	arer	Firm's name F TILTON & COMPANY Firm's address F	PC				-		Firm's EIN ►	1								
Jilly		510 BOSTON POST	Firm's address ► 510 BOSTON POST RD WESTON, MA 024931529									Phone no (781) 373-2244						

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Susan M Poduska	Pres/Treasurer	0		
295 Meadowbrook Road Weston, MA 024932450	6 00			
John William Poduska Sr	Director	0		
295 Meadowbrook Road Weston, MA 024932450	0 00			
Thomas Chase	Clerk/Director	0		
57 Cobblestone Circle North Andover, MA 01845	0 00			
Bonnie M Menton	Director	0		
PO Box 202 West Tisbury, MA 02575	0 00			
Susan M Poduska	Director	0		
295 Meadowbrook Road Weston, MA 024932450	0 00			
Mary Beth Pandiscio	Director	0		
57 Sisson Road Harwichport, MA 02646	0 00			
John William Poduska Jr	Director	0		
9 Briarwood Lane Winchester, MA 01890	0 00			
Annie Burke	Director	0		
22104 Kyle Drive Briarcliff, TX 78669	0 00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			•••	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Commonwealth Shakespeare Co 126 Lewis Wharf Boston,MA 02110	N/A		Plays of William Shakespeare	8,500
Dana Farber Cancer Institute 450 Brookline Avenue Boston, MA 02115	N/A		Medical Research - Cancer	25,000
Justin Mee Lift Fund - Emerald Neck 125 The Fenway Boston,MA 02115	N/A		Maintain, Restore, and Protect the Parks of the Emerald Necklace in Boston	750
MIT Council for the Arts 600 Memorial Drive Cambridge, MA 02138	N/A		Arts Programs at MIT	6,000
NE Paralyzed Veterans of America 1600 Providence Highway Suite 143 Walpole, MA 02081	N/A		Medical Research - Spinal Cord Dysfunction	250
St Judes Hospital 262 Danny Thomas Place Memphis,TN 38105	N/A		Medical Research - Pediatric Diseases	1,000
St Peter's Episcopal Church 320 Boston Post Road Weston, MA 02493	N/A		Religious and Community Activities	13,000
Wounded Warrier Project 4899 Belfort Road Suite 300 Jacksonville, FL 32256	N/A		Programs and Services for Severely Injured Service Members	1,000
Lahey Clinic 41 Mall Road Burlington, MA 01805	N/A		Medical Research	25,000
YMCA of Martha's Vineyard 111 Edgartown Vineyard Haven Rd Oak Bluffs, MA 02557	N/A		Community Centered Organization	5,000
Aquinna Gayhead Community Associati PO Box 494 Chilmark,MA 02535	N/A		Gay Head Lighthouse Fund	1,500
Alzheimer's Association PO Box 96011 Washington, DC 20090	N/A		Alzheimer's care, support, research and advocacy	1,000
American Foundation for Suicide Pre 120 Wall Street 29th Floor New York, NY 10005	N/A		Fund suicide research and education programs	1,000
Bridget Brigade Foundation 9 Emerson Road Winchester, MA 01890	N/A		Provide support to critically ill children and their families	1,000
Cans for Charity Inc 140 Walnut Street Wellesley Hills, MA 02481	N/A		Raise funds for charity through recycling	250
Total			▶ 3a	94,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

				•
Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
Community Food Bank of NJ 31 Evans Terminal Hillside, NJ 07205	N/A		Fight hunger and poverty in New Jersey	1,000
Dukes County Deputy Sherif's Associ PO Box 2215 Vineyard Haven, MA 02568	N/A		Raise funds for youth programs	100
Fresh Air Fund 633 3rd Avenue 14th Floor New York, NY 10017	N/A		Provide children living in low- income communities with summer experiences in the country	1,000
Habitat for Humanity 240 Commercial Street 4th Floor Boston, MA 02109	N/A		Building homes for low-income families	1,000
JDRF 26 Broadway 14th Floor Boston, MA 02109	N/A		Fund research into type 1 diabetes	500
O mid Foundation USA 6617 Lone O ak Drive Bethesda, MD 20817	N/A		Assist vulnerable young women in Iran transform their lives	1,000
Total				94,850

TY 2015 Accounting Fees Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Services	2,655	0	0	0
Tax Services	2,600	0	0	0

DLN: 93491134006036

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

TY 2015 Depreciation Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
Computer	2014-10-28	1,553	78	200DB	38 00 %	590			

TY 2015 Land, Etc. Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Machinery and Equipment	1,553	668	885	885

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491134006036

TY 2015 Other Decreases Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Description	Amount
Federal Tax	803

TY 2015 Other Expenses Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MA annual registration	19			
Postage	2			
State filing fees	20			
Supplies	68			
Telephone	804			

TY 2015 Other Professional Fees Schedule

Name: Poduska Family Foundation Inc

co Susan M Poduska

EIN: 04-3235379

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal	3,522	0	0	0
Web Services	1,000	0	0	0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93491134006036

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Poduska Family Foundation Inc

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.

2015

Employer identification number

co Sus	an M Poduska	04-3235379
Organ	ization type (check o	ne)
Filers	of:	Section:
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
		☐ 527 political organization
Form 9	90-PF	√ 501(c)(3) exempt private foundation
		□ 501(c)(3) taxable private foundation
	Only a section 501(c)(7	7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
⊽	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
		any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Specia	al Rules	
Γ	under sections 509(a received from any on	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations (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 e contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990-EZ, line 1 Complete Parts I and II
Γ	during the year, total	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III
Γ	during the year, contr this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ibutions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If inter here the total contributions that were received during the year for an exclusively religious, charitable, etc., olete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

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), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization Poduska Family Foundation Inc co Susan M Poduska Employer identification number 04-3235379

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person John W Poduska Sr **Payroll** 295 Meadowbrook Road \$ 31,074 Noncash Weston, MA02493 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person John W Poduska Sr Payroll 295 Meadowbrook Road \$ 47,590 Noncash Weston, MA 02493 (Complete Part II for noncash contributions) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions)

Name of organiza		Employer identification	number
Poduska Family F co Susan M Podu		04-3235379	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	210 shares of Palo Alto Networks common stock	\$ 31,074	2015-04-10
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1,000 shares of Anadarko Pete Corp common stock	\$ 47,590	2015-12-14
(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
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990	0, 990-EZ, or 990-PF) (2015)		Page 4
Name of organization Poduska Family Foun So Susan M Poduska	ndation Inc		Employer identification number 04-3235379
total mor line entry of \$1,000	re than \$1,000 for the year from any o	one contributor. Complete co III, enter the total of <i>exclusive</i> mation once. See instruction	ibed in section 501(c)(7), (8), or (10) that lumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) ► \$
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gri	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
-	Transferee's name, address, an	(e) Transfer of gri	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
	Transferee's name, address, an	(e) Transfer of gif	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
- -	Transferee's name, address, an	(e) Transfer of gridd ZIP4	Relationship of transferor to transferee
•			