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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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Open to Public Inspection

		ndar year 2015, or tax year beginning 01-0	01-2015			
Th		Family Foundation			dentification numb	er
c/c	BGA Fa	mily Office		04-3558239		
		street (or P O box number if mail is not delivered to street address) ark Drive Suite 1150	Room/suite	BTelephone nu	umber (see instructior	ns)
11	namia re	air blive Suite 1130	(617) 948-380)8		
	or town, on, MA(state or province, country, and ZIP or foreign postal code 02210		C If exemption	n application is pendir	ng, check here
G C l	neck all	that apply Initial return Initial return of a	former public charity	D 1. Foreign o	organizations, check h	iere >
		Final return A mended return	,		,	Г
		Address change Name change				
H C h	neck typ	pe of organization	te foundation	E If private fo	oundation status was	terminated
_s	ection	4947(a)(1) nonexempt charitable trust Other taxal	ble private foundation		on 307(3)(1)(7), ene	ek field
		et value of all assets at end JAccounting method	✓ Cash Accru			
		rom Part II, col (c),	be on cash basis)	under secti	on 307(b)(1)(b), the	CK Here
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see	Revenue and expenses per	Net investment (b) income	Adjusted net	Disbursements for chantable purposes
	1	<pre>instructions)) Contributions, gifts, grants, etc , received (attach</pre>				(d) (cash basis only)
	•	schedule)	1 678 039			
	2	Check ► ☐ If the foundation is not required to	1,0,0,033			
		attach				
		Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	88,604	88,60	4	
	5a	Gross rents				
<u>e</u>	6a	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	-73 452			
Reverkie	b	Gross sales price for all assets on line 6a	A Employer identification number 04-358239 BTelephone number (see instructions) (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 C If exemption application is pending, check is (617) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948-3808 (618) 948			
Re		2,434,101		1 220 92	16	
	7 8	Capital gain net income (from Part IV, line 2)		1,323,03		
	9	Income modifications				
	10a	Gross sales less returns and				
		allowances				
	b	Less Cost of goods sold				
	C	Gross profit or (loss) (attach schedule)	96-1 254.655		0	
	11	Other income (attach schedule)				
	12	Total.Add lines 1 through 11			-	0
	13 14	Other employee salaries and wages	0			
S	15	Pension plans, employee benefits				
15e	16a	Legal fees (attach schedule)				
<u> </u>	b	Accounting fees (attach schedule)				
Ë	С	Other professional fees (attach schedule)				
tiv∈	17	Interest				
tra Stra	18	Taxes (attach schedule) (see instructions)	9 55,500	50	0	0
≘	19	Depreciation (attach schedule) and depletion				
틜	20	Occupancy				
and Administrative Expenses	21	Travel, conferences, and meetings				
an	22	Printing and publications	06.1		-	
Operating	23	Other expenses (attach schedule)	18,390	15,68	5	0
rat	24	Total operating and administrative expenses.	70.000		_	
<u> </u>		Add lines 13 through 23	· · · · · · · · · · · · · · · · · · ·	16,18	7	742 526
_	25	Contributions, gifts, grants paid	/42,526		+	742,526
	26	Total expenses and disbursements. Add lines 24 and 25	816,416	16,18	5	742,526
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	622,120	, ,,,,		
	b	Net investment income (If negative, enter -0-) Adjusted net income(If negative, enter -0-)		1,402,25	2	
	С	Aujusteu net meome(n negative, enter -0-)				1

Рa	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	End o	f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	267 172	007.051	007.051
	2	Savings and temporary cash investments	267,172	987,851	987,851
	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 ▶			
ts	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)	1,578,005	1,002,914	1,002,914
	С	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)	5,931,251	6,121,137	6,121,137
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	7,776,428	8,111,902	8,111,902
	17	Accounts payable and accrued expenses			
ای	18	Grants payable			
abilities	19	Deferred revenue			
匵	20	Loans from officers, directors, trustees, and other disqualified persons			
Γa	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)			-
	23	Total liabilities(add lines 17 through 22)	0	α	-
S		Foundations that follow SFAS 117, check here ▶			
ce		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			-
န္မ	25	Temporarily restricted			-
Fund	26	Permanently restricted			-
골		Foundations that do not follow SFAS 117, check here			
ō		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds	0	0	-
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	-
t A	29	Retained earnings, accumulated income, endowment, or other funds	7,776,428		4
Net	30	Total net assets or fund balances (see instructions)	7,776,428		
	31	Total liabilities and net assets/fund balances(see instructions)	7,776,428	8,111,902	
Pa	rt 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 (must ag	gree	
		with end-of-year figure reported on prior year's return) $$		1	7,776,428
2		Enter amount from Part I, line 27a		2	622,120
3		Other increases not included in line 2 (itemize) ▶		3	0
4		Add lines 1, 2, and 3			8,398,548
5		Decreases not included in line 2 (itemize) ▶			286,646
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lı	ine 30 . 6	8,111,902

Part IV Capital Gains and Losses for Tax on Investment Income

		e kınd(s) of property sold (e g , re use, or common stock, 200 shs	·	How acquired P—Purchase (b) D—Donation	"	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Tab	ole					
b							
С							
d							
е е							
		Depreciation allowed	d Cost	or other basis	\top	Gair	or (loss)
(e) Gross sales price	(f) (or allowable)	-	expense of sale			(f) minus (g)
а	See Additional Data Tab	ole					
b							
С							
d							
е							
Со	mplete only for assets sho	wing gain in column (h) and owne	d by the foundation	on 12/31/69		Gains (Col	(h) gain minus
/i)	FM V as of 12/31/69	A djusted basis	Exc	ess of col (ı)		ol (k), but no	ot less than -0-) or
(1)	<u> </u>	(j) as of 12/31/69	(k) over	col (j), if any	(1)	Losses	(from col (h))
а	See Additional Data Tab	ole					
b							
С							
d							
е							
2	Capital gain net income		If gaın, also enter ı If (loss), enter -0-		2		1,329,836
3	Net short-term capital q	aın or (loss) as defined in sectioi	ns 1222(5) and (6)	,	<u> </u>		· · ·
-		t I, line 8, column (c) (see instru			3		
Part '	V Qualification Und	der Section 4940(e) for R	educed Tax on	Net Investme	-	 come	
For opt	ional use by domestic priv on 4940(d)(2) applies, leav	ate foundations subject to the se	ection 4940(a) tax	on net investment	ıncom		⊤Yes √ No
f"Yes,	" the foundation does not c	qualify under section 4940(e) Do	not complete this	part			1 165 10
1 Ent	er the appropriate amount	in each column for each year, se	ee instructions befo	re making any ent	ries		
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	itable-use assets		(d) Distributio (col (b) divided	n ratio
	2014	377,968		8,308,777			0 045490
	2013	362,825		4,687,858			0 077397
	2012	365,400		5,519,926			0 066197
	2011	586,850		4,578,347			0 128179
	2010	165,400		4,401,679			0 037577
2 3	A verage distribution rat)	ride the total on line	e 2 by 5, or by	2		0 354840
	•	foundation has been in existence	•	_	3		0 070968
4		oncharitable-use assets for 2015		<u> </u>	4		7,613,820
5				_	5		540,338
6		nent income (1% of Part I, line 27	•	<u> </u>	6		14,023
7		. 		_	7		554,361
8		tions from Part XII, line 4			8		742,526
	If line 8 is equal to or gr the Part VI instructions	eater than line 7, check the box i	n Part VI, line 1b, a	and complete that	part u	sıng a 1% ta:	rate See

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 (see instructions for Part XIV)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

If "Yes," complete Part XIV

and addresses

No

No

9

10

Par	t VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within th	e			
	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 disquali	fied 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	on application?	13	Yes	
	Website address ►N/A				
14	The books are in care of ▶John Dinneen co BGA Telep		1948-	3808	
		P+4 ▶ <u>02210</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check her	1 1	•	•	_
	and enter the amount of tax-exempt interest received or accrued during the year	15		1	1
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other	authority over	۔ ا	Yes	No
	a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank	and Einancial	16		No
	Accounts (FBAR) If "Yes", enter the name of the foreign country	aliu Filialiciai			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	ed			
	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 🗸 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	┌─ Yes 🗸 No			
	(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)?	ΓYes √ No			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"	1 103 4 110			
	ıf the foundation agreed to make a grant to or to employ the official for a period				
	after termination of government service, if terminating within 90 days)	┌ Yes ┌ No			
b	If any answer is "Yes" to $1a(1)-(6)$, did any of the acts fail to qualify under the exceptions described				
	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	▶_			
С	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?		1 c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a p	rıvate			
	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		 	
b	If "Yes," list the years > 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 494	2(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 49-	` ' '			
	to all years listed, answer "No" and attach statement—see instructions)		2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year	s here			
	▶ 20, 20, 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at	_			
		∏ Yes 🗸 No		 	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundat or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period appro				
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, o				
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determ				
	If the foundation had excess business holdings in 2015)		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable	purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeo				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year begin	ning in 2015?	4b		No

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Part IX-B

Total. Add lines 1 through 3

1 N/A 2 N / A

All other program-related investments. See instructions

A mount

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5

1

1

2

5

Part XI

1,584,105

6,121,137

7,729,766

7,729,766

115,946

380,691

380,691

14,023

366,668

366,668

366,668

742,526

742,526

14.023

728,503

Form **990-PF** (2015)

7,613,820

24,524

1a

1b

1c

1d

2 3

4

5

1

2c

3

4

5

6

7

1a

1h

2

За

3b

4

5

14,023

Part X Minimum Investment Return

Distributable Amount

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,

1

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

purposes

Fair market value of all other assets (see instructions).

Reduction claimed for blockage or other factors reported on lines 1a and 1e

2 3

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

2a

2b

Tax on investment income for 2015 from Part VI, line 5.

check here ► and do not complete this part.)

2a Income tax for 2015 (This does not include the tax from Part VI). . .

3 Distributable amount before adjustments Subtract line 2c from line 1. 4

5 6

7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . Part XII **Qualifying Distributions** (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

	olidistributed filcollie (see liisti t	actions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	Corpus	, cars prior to 2014	2017	366,668
	Undistributed income, if any, as of the end of 2015				300,000
	Enter amount for 2014 only				0
	·		0		-
	Total for prior years 20, 20, 20 Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
f	Total of lines 3a through e	632,981			
	Qualifying distributions for 2015 from Part				
	XII, line 4 \$ 742,526				
а	Applied to 2014, but not more than line 2a				0
	Applied to undistributed income of prior years		0		
_	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election	0			
	required—see instructions)				366.668
	Applied to 2015 distributable amount	275.050			366,668
	Remaining amount distributed out of corpus	375,858			
5	Excess distributions carryover applied to 2015	0			
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,008,839			
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		
Ч	Subtract line 6c from line 6b Taxable amount				
u	—see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				U
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
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)	0			
8	Excess distributions carryover from 2010 not	0			
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	1,008,839			
LO	Analysis of line 9				
	Excess from 2011				
	Excess from 2012 121,612				
	Excess from 2013 147,829				
	Excess from 2014				
е	Excess from 2015 375,858				
	,				Form 990-PF (2015)
					•

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	Part XIV Private Operating Founda				1 9)	
La	If the foundation has received a ruling or determined foundation, and the ruling is effective for 2015					
b	Check box to indicate whether the organization	n <u>is a private operat</u>	ing foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(-)
	year listed					
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
a	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b						
c	·					
	(1) Total support other than gross					
	·					
	· · · · · ·					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	·					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
•) -		Complete this	nart only if th	 	n had \$5 000 o	r more in
				ie organizatio	ii iiau \$5,000 0	i illore ili
L	Information Regarding Foundation Managers:	_				
а	, ,				•	ation
_	Richard Frisbie	00/				
D					large portion of the	e
	•		3			
2	Information Regarding Contribution, Grant, Gi	ft, Loan, Scholarshi	p, etc., Programs:			
	unsolicited requests for funds If the foundation	n makes gifts, grant			· ·	
	otner conditions, complete items 2a, b, c, and	a				
a	The name, address, and telephone number or	email address of the	e person to whom	applications shou	ld be addressed	
_						
E	• The form in which applications should be subr	nitted and information	on and materials t	they should includ	e	
C	under section 4942(j)(3)(B)(i) "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	· · · · · · · · · · · · · · · · · · ·	h as by geographica	al areas, charitabl	le fields, kinds of i	nstitutions, or othe	r

Form 990-PF (2015)

Part XV Supplementary Information(continued)

3 Grants and Contributions Paic	During the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient	Contribution	
			▶ 3a	742,526
b Approved for future payment				
Total			▶ 3b	0

	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt	
1 Prograi	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)	
a						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
f							
_	and contracts from government agencies						
3 Intere	ership dues and assessments						
	nds and interest from securities			14	88,604		
5 Net re	ntal income or (loss) from real estate						
	-financed property						
	lebt-financed property ntal income or (loss) from personal						
prope	rty						
	investment income			14	860		
	r (loss) from sales of assets other than cory			18	-73,452		
9 Netino	come or (loss) from special events			10	73,132		
.O Gross	profit or (loss) from sales of inventory						
1 Other	revenue a Book/Tax Difference			18	-255,515		
					,		
d							
		l I					
е	al Add columns (b), (d), and (e).		0		-239,503	1	
e l2 Subtot l3 Total./	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				-239,503 13		
e .2 Subtot .3 Total./ (See v	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to	calculations) o the Accomp	olishment of E	xempt Purpos	es	-239,503	
e .2 Subtot .3 Total./ (See v	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify (calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 2 Subtot 3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	
e 12 Subtot .3 Total./ (See v Part XV Line No.	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify a I-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation's	calculations) o the Accomplich income is re	olishment of E		es ontributed importa	-239,503 ntly to	

Part XVI		enardin	n Transfers 1	To and Trans	actions and	Relationshins !	With		Ра	ge 1.
IGICAVE	Noncharitable				actions and	itelutionsinps	******			
	organization directly or in 501(c) of the Code (othe			-					Yes	No
organizat	tions?									
a Transfers	s from the reporting four	ndation to	a noncharitable	exempt organız	ation of					1
(1) Cas	h							1a(1)		No
(2) Oth	erassets							1a(2)		No
b Other tra	ansactions									
(1) Sale	s of assets to a noncha	rıtable exe	empt organizatio	n				1b(1)		No
(2) Purc	hases of assets from a	noncharit	able exempt orga	anızatıon				1b(2)		No
(3) Rent	tal of facilities, equipme	nt, or othe	rassets					1b(3)		No
(4) Rein	nbursement arrangemen	nts						1b(4)		No
(5) Loar	ns or loan guarantees.							1b(5)		No
(6)Perfo	rmance of services or m	embership	o or fundraising s	solicitations				1b(6)		No
c Sharing o	of facilities , equipment , i	maılıng lıs	ts, other assets	, or paid employ	ees		[1 c		No
of the go	swer to any of the above ods, other assets, or se ansaction or sharing arra (b) Amount involved	rvices giv angement	en by the reporti	ing foundation I (d) the value o	f the foundation f the goods, othe	received less than	fair market es received	value I		nts
(a) Line No	(B) / illioune illivolved	(c) Harrie	or nonchantable ex-	empt organization	(a) Description	Tor transfers, transaction	ons, and shan	ng arrar	igeniei	
describe √ No	undation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule	ther than sectio	· ·	in section 527?		on of relation		es	
the	der penalties of perjury, best of my knowledge a prmation of which prepar ***** Signature of officer or t	ind belief, er has any	ıt ıs true, correc				May the return with the below	ıs bas e IRS dıs	sed on scuss th	all nis vn
	Drint/Type =======	nome	Dranara-la Cia-	anturo	Date	Check if self-	PTIN			_
	Print/Type preparer's Alfred C Torrisi CPAMSTCFP	name	Preparer's Sıgr	nature	2016-11-04	employed ▶ ┌─	P01	02108	193	
Paid Preparer Use		ey & CO F	°C			Firm's EIN ▶ 04	2958048	I		
Only	Firm's address ► 555 Turnpike Street S 01845	Suite 47 N	orth Andover, M	Α		Phone no (603)	627-4600)		
	1									

	and(s) of property sold (e g , real o e, or common stock, 200 shs Ml		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1073 BAZAARVOICE I	NC			2007-08-27	2015-07-10
18130 BAZAARVOICE	INC			2007-08-27	2015-09-03
6387 ZAYO				2012-06-29	2015-09-21
6114 ZAYO				2012-06-29	2015-11-26
584 MARKETO				2011-11-11	2015-11-19
400 WAYFAIR INC				2011-06-21	2015-11-19
18697 ZAYO GROUP H			2012-06-01	2015-09-21	
2817 WAYFAIR INC				2011-06-01	2015-11-19
17805 ZAYO GROUP H	OLDINGS			2012-06-01	2015-11-16
5631 MARKETO				2011-11-01	2015-11-19
rm 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income -	Columns e - h	
(e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)	
6,284			1,962	4,5	
89,958			19,748	70,;	
178,031			11,541		166,49
134,475			7,329		127,14
17,068			7,740		9,32
14,007			1,972		12,03
521,158			49,678		471,48
98,644			20,792		77,85
391,614			47,309		344,30
164,568			74,330		90,23
rm 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income -	Columns i - I	
Complete only for assets show	ing gain in column (h) and owned l	by the foundation	on on 12/31/69		(h) gain minus
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69		ess ofcol (ı) col (ʒ), ıfany	col (k), but not less than -0-) (I) Losses (from col (h))	
					4,32
					70,21
					166,49
					127,14
					9,32
					12,03
		+			

77,852 344,305 90,238

Form 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	tment Income -	Columns a - d		
	ınd(s) of property sold (e g , real e e, or common stock, 200 shs ML		(b) How ac quired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
BGA HORIZON FUND, L	.L		Р	2014-12-30	2015-12-31	
2496 HOME LOAN SER	VICING		Р	2014-07-15	2015-03-03	
3200 CREDIT SUISSE	NASSAUEN		Р	2015-03-04	2015-04-22	
1374 APPOLLO RESID	ENTIAL MORT		Р	2012-07-12	2015-03-03	
2677 CYS INVTS INC	COM		Р	2012-02-10	2015-03-03	
ISHARES GOLD TRSUT		Р	2013-02-06	2015-01-31		
ISHARES GOLD TRSUT	Р	2013-02-06	2015-01-31			
ISHARES GOLD TRSUT	Р	2013-02-06	2015-01-31			
ISHARES GOLD TRSUT			Р	2013-02-06	2015-02-28	
ISHARES GOLD TRUST			Р	2013-02-06	2015-02-28	
Form 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income -	Columns e - h		
(e) Gross sales price	Deprectation allowed (f) (or allowable)	I	or other basis expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)		
11,076				11,076		
46,090			57,427	-11,337		
100,072			100,610		-538	
21,660			26,972	-5,312		
24,245			34,544		-10,299	
2			2		0	
16			21		-5	
62			82		-20	
2			2		0	
15			21		-6	
Form 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	tment Income -	Columns i - I		
Complete only for assets show	ng gain in column (h) and owned b	y the foundation	on on 12/31/69	1	(h) gain minus	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		ess of col (I) col (J), If any		from col (h))	
					11,076	
					-11,337	
					-538	
					-5,312	
					-10,299	
					0	
					-5	
					-20	
					0	
					-6	

	al Gains and Losses for Ta		I		
	and(s) of property sold (e g , real e e, or common stock, 200 shs ML		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
ISHARES GOLD TRSUT	-		Р	2013-02-06	2015-02-28
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-03-31
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-03-31
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-03-31
700 ISHARES GOLD TI	RUST		Р	2013-02-06	2015-04-22
6496 ISHARES GOLD	TRSUT		Р	2013-02-06	2015-04-22
1554 ISHARES GOLD	TRUST	Р	2013-02-06	2015-04-22	
ISHARES GOLD TRUST	-	Р	2013-02-06	2015-04-30	
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-05-31
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-06-30
rm 990PF Part IV - Capita	al Gains and Losses for Ta	x on Inves	tment Income -	Columns e - h	I
(e) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)	
57			79		-22
2			2	-2	
16			22		
60			84		
8,042			11,344		-3,302
74,632			105,304		-30,672
17,854			25,176		-7,322
55			79		-24
57			79		-22
54			78		-24
m 990PF Part IV - Capit	al Gains and Losses for Ta	x on Inves	tment Income -	Columns i - I	
Complete only for assets show	ring gain in column (h) and owned l	by the foundati	on on 12/31/69		(h) gaın mınus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		cess of col (I) r col (j), if any		ot less than -0-) o (from col (h))
					-22
					(
					- (
					-24
					-3,302
					-30,67
					-7,32
					-24
					-22
		Ι΄			

Form 990PF Part IV - Capit	al Gains and Losses fo	or Tax on Inves	tment Income -	Columns a - d	
	and(s) of property sold (e g , e, or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-07-31
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-08-31
ISHARES GOLD TRSUT	-		Р	2013-02-06	2015-09-30
ISHARES GOLD TRSUT	-		Р	2013-02-06	2015-10-31
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-11-30
ISHARES GOLD TRUST	-		Р	2013-02-06	2015-12-31
11500 JP MORGAN CH	ASE & CO		Р	2013-03-05	2015-03-04
Capital Gains Dividends	:		Р		
Form 990PF Part IV - Capit	al Gains and Losses fo	or Tax on Inves	tment Income -	Columns e - h	
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basis expense of sale		or (loss) (f) minus (g)
55			85		-30
54			78		-24
52			78	-26	
55			82	-27	
51			80		-29
52			81		-29
507,714			499,452		8,262
6,192				6,192	
Form 990PF Part IV - Capit	al Gains and Losses fo	or Tax on Inves	tment Income -	Columns i - I	
Complete only for assets show	ring gain in column (h) and ov	wned by the foundati	on on 12/31/69		(h) gain minus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		cess of col (I) r col (j), if any	col (k), but not less than -0-) (I) Losses (from col (h))	
					-30
					-24
					-26
					-27
					-29
					-29
					8,262
					6,192

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
Big Brothers Big Sisters of Palm Beach & Martin Counties 5033 SE Federal Highway Stuart,FL 34997	N/A	Exempt	Charitable	1,000
Boston Symphony Orchestra Symphony Hall 301 Mass Ave Boston, MA 02115	N/A	Exempt	Charitable	1,000
Buzzards Bay Coalition 114 Front Street New Bedford, MA 02740	N/A	Exempt	Charitable	1,000
Citi Performing Arts Center 270 Tremont Street Boston, MA 02116	N/A	Exempt	Charitable	10,000
City Year 285 Columbus Ave Boston, MA 02116	N/A	Exempt	Charitable	1,000
Cure Alzheimers Fund 34 Washington St Suite 300 Wellesley Hills,MA 02481	N/A	exempt	Charitable	10,000
Dartmouth Natural Resources Trust 404 Elm Street Dartmouth, MA 02748	N/A	exempt	Charitable	1,000
Friends of Harvard Football 124 Mount Auburn Street Cambridge, MA 02138	N/A	Exempt	Charitable	10,000
Friends of the Public Garden 69 Beacon Street Boston, MA 02108	N/A	Exempt	Charitable	250
Harvard University 124 Mount Auburn Street Cambridge, MA 02138	N/A	Exempt	Charitable	500,000
Hobe Sound Community Chest 11450 Southeast Dixie Highway Hobe Sound,FL 33455	N/A	Exempt	Charitable	1,000
In The Pegasus Foundation PO Box 787 Hobe Sound,FL 33475	N/A	Exempt	Charitable	250
Jupiter Island Medical Clinic Inc 100 Estrada Square Hobe Sound,FL 33455	N/A	Exempt	Charitable	2,000
Jupiter Medical Center Foundation 1210 South Old Dixie Highway Jupiter,FL 33458	N/A	Exempt	Charitable	10,000
Lloyd Center 2201 Lloyd Center Portland, OR 97232	N/A	Exempt	Charitable	1,000

Recipient	If recipient is an individual,		Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
Massachusetts General Hospital 100 Charles River Plaza Suite 600 Boston,MA 02114	N/A	Exempt	Charitable	160,000
Metro Lacrosse Inc Bayside Office Center 150 Mount Vernon Street Suite Two Dorchester, MA 02125	N/A	Exempt	C haritable	1,000
New Bedford Whaling Museum 18 Johnny Cake Highway New Bedford, MA 02740	N/A	Exempt	Charitable	2,000
New England Aquarium Central Wharf Boston, MA 021103399	N/A	Exempt	C haritable	1,000
Ocular Immunology & Uveitis Foundation 5 Cambridge Center 8th Floor Cambridge, MA 02142	N/A	Exempt	Charitable	1,000
Our Sisters' School PO Box 7269 New Bedford, MA 02742	N/A	Exempt	Charitable	1,000
PMC-Jimmy Fund 77 Fourth Ave Needham, MA 02494	N/A	Exempt	Charitable	768
President And Fellows of Harvard University 124 Mount Auburn Street Cambridge,MA 02138	N/A	Exempt	Charitable	20,000
Teach For America 315 West 36th Street 7th Floor New York, NY 10018	N/A	Exempt	Charitable	2,500
The Trustees of Reservations 572 Essex Street Beverly,MA 01915	N/A	Exempt	Charitable	1,000
Three Squares England PO Box 1055 Dedham, MA 02027	N/A	Exempt	Charitable	258
United Way of Massachusetts 245 Summer Street Suite 1401 Boston, MA 02210	N/A	Exempt	Charitable	2,500
Total			▶ 3a	742,526

N/A

Name of Stock	«	End of Year Book	End of Year Fair	
EIN:	04-3558239			
	c/o BGA Family Office			
Name:	The Frisbie Family Found	dation		
TY 2015 Investments Corporate Stock Schedule				
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491317002066	

New Residential Invt Corp Com

Credit Suisse X-Links Cushing

Cherry Hill Mtg Invt Corp

Wayfıar Inc.

EIN: 04-3558239		
Name of Stock	End of Year Book Value	End of Yea Market V
CVC Invts Inc Com	50.238	

LIN. 04-3330239		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CYS Invts Inc Com	50,238	50,238
American Cap Agy Corp Com	53,858	53,858
Two Harbors Invt Corn	69.409	69.400

CYS Invts Inc Com	50,238	50,238
American Cap Agy Corp Com	53,858	53,858
Two Harbors Invt Corp	69,409	69,409
AG Mortgage Investment Trust Inc	61,041	61,041
Apollo Residential Mortgage Inc	60,587	60,587
SPDR Gold Tr Shs	237,848	237,848

AG Mortgage Investment Trust Inc	61,041	61,041
Apollo Residential Mortgage Inc	60,587	60,587
SPDR Gold Tr Shs	237,848	237,848
American Can Mts Inut Corn	E0 7E0	E0 7E0

	·	· · · · · · · · · · · · · · · · · · ·
Apollo Residential Mortgage Inc	60,587	60,587
SPDR Gold Tr Shs	237,848	237,848
American Cap Mtg Invt Corp	50,759	50,759
IP Morgan Chase & Co	0	

SPDR Gold Tr Shs	237,848	237,848
American Cap Mtg Invt Corp	50,759	50,759
JP Morgan Chase & Co	0	C
Home Loan Servicing Solutions	0	C

67,756

68,510

242,860

40,048

67,756

68,510

242,860

40,048

A3 I lieu Data -	DEN. 95491517002000				
TY 2015 Investments - Other Schedule					
The Frisbie Family Foundation					
c/o BGA Family Office					
04-3558239					
	The Frisbie Family Foundation				

DI N. 93491317002066

2,350,815

1,454,367

2,350,815

1,454,367

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BGA Horizon Fund, LLC

Greenlight Masters Offshore

EIN: U4-3330Z39			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Battery Income Fund	FMV	2,315,955	2,315,955

FMV

FMV

effie GRAPHIC Print - DO NOT PROCESS	AS FIIED Data -	DLN: 93491317002066
TY 2015 Other Decreases Sch	edule	
Name:	The Frisbie Family Foundation c/o BGA Family Office	

DI N. 02401217002066

286,646

EIN: 04-3558239

Description	Amoun

ofile CDA DUTC maint DO NOT DDOCECE As Filed Date

Change in Unrealized Holding Gain/Loss

Portfolio Deductions from Pass-Thrus

Professional Fees

15,685

DLN: 93491317002066

15,685

2,705

c/o BGA Family Office

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	EIN: 04-3558239	
Description	Revenue and Expenses per Books	Net Investment Income

Disbursements for

Adjusted Net Income

Charitable Purposes

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Notaxable Distribution (Return of Capital)

Book/Tax Difference

Name: The Frisbie Family Foundation

c/o BGA Family Office

EIN: 04-3558239				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net	

860

-255,515

t Income

860

-255,515

DLN: 93491317002066

TY 2015 Taxes Schedule		
	The Frisbie Family Foundation	
	The Frisbie Family Foundation c/o BGA Family Office	

DLN: 93491317002066

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Federal Taxes

EIN: 04-3558239				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State Tax	500	500		0

55,000

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491317002066
Schedule B		Schedule	of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service 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			
Name of the organization The Frisbie Family Four	Name of the organization Employer identification number				
c/o BGA Family Office	luacion			04-355823	39
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	├─ 501(c)() ((enter number) organiz	zation		
	T 4947(a)(1)	nonexempt charitable	trust not treated as a private found	dation	
	527 politica	al organization			
Form 990-PF	√ 501(c)(3) €	exempt private founda	tion		
	T 4947(a)(1)	nonexempt charitable	trust treated as a private foundation	n	
	─ 501(c)(3) t	axable private founda	tion		
1 *			received, during the year, contribut and II See instructions for determini	_	
Special Rules					
under sections t received from ai	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), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

schedule	B (Form 990, 990-EZ, or 990-PF) (2015)		Page 2			
	organization	Employer identification	number			
	e Family Foundation amily Office	04 2559220	04-3558239			
Part I		<u> </u>				
	Contributors (see Instructions) Use duplicate copies of Part I if additional					
(a) No.	(b)	(c) Total contributions	(d)			
NO.	Name, address, and ZIP + 4 See Additional Data Table	Total contributions	Type of contribution			
	See Additional Data Table		Person			
			Payroll			
		\$	Noncash			
						
			(Complete Part II for noncash			
			contribution)			
(-)	(1-)	(5)	, , , , , , , , , , , , , , , , , , ,			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
140.	Name, address, and zir 14	Total contributions				
			Person			
			Payroll			
		\$	Noncash 📙			
			(Complete Part II for noncash			
			contribution)			
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
			Person			
			Payroll			
		\$	Noncash			
			│			
			(Complete Part II for noncash			
			contribution)			
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
			Person			
			Payroll			
		\$	Noncash			
			Complete Book III for some of			
			(Complete Part II for noncash contribution)			
(-)	(6)	(5)	·			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
140.	Name, address, and zir 14	Total contributions				
			Person			
			Payroll			
		\$	Noncash			
						
			(Complete Part II for noncash			
			contribution)			
(a)	(b)	(c)	(d)			
Νo.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
			Person			
			Payroll			
		\$	Noncash			
			(Complete Part II for noncash contribution)			
	1		i continuation)			

Name of organization

The Frisbie Family Foundation c/o BGA Family Office

Employer identification number

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		04-	3558239
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
_	See Additional Data Table	\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2015)		Page 4
lame of organizatio		Em	ployer identification number
he Frisbie Family F /o BGA Family Offic		0.4	-3558239
Part III Exclusive total moline entroof \$1,000	<i>ely</i> religious, charitable, etc., contrib re than \$1,000 for the year from any	utions to organizations describe one contributor. Complete colum III, enter the total of <i>exclusively</i> i rmation once. See instructions.)	d in section 501(c)(7), (8), or (10) that ins (a) through (e) and the following religious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, ar	(e) Transfer of gift nd ZIP 4 R	elationship 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, ar	(e) Transfer of gift nd ZIP4 R	elationship 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, ar		elationship 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, ar	(e) Transfer of gift	elationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Software ID: Software Version:

EIN: 04-3558239

Name: The Frisbie Family Foundation

c/o BGA Family Office

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person —
			Payroll _
	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1		Faylon
	C/O BGA I Maillia Faik Dilive Suite I	\$ 6,336	Noncash
	Boston, MA 02210		
			(Complete Part II for
			noncash contribution)
			Person _
	Richard Frisbie		Payroll
	c/o BGA 1 Marina Park Drive Suite 1	\$ 92,100	
	<u> </u>	# 32,100	Noncash
	Boston, MA 02210		
			(Complete Part II for noncash contribution)
	+		Person -
			Person
	Richard Frisbie		Payroll 🗸
	c/o BGA 1 Marina Park Drive Suite 1	\$ 177,718	Noncash
	Backer MA 02240		Noncasii
	Boston, MA 02210		(Complete Part II for
			noncash contribution
			Person _
	Richard Frisbie		Payroll 🔽
	C/o BGA 1 Marina Park Drive Suite 1	\$ 140,439	Noncash
	Boston, MA 02210		
	56666,7,777,62225		(Complete Part II for
			noncash contribution)
			Person —
	_		Paris I
	Richard Frisbie		Payroll
	c/o BGA 1 Marina Park Drive Suite 1	\$ 17,073	Noncash
	Boston, MA 02210		
			(Complete Part II for
			noncash contribution)
			Person —
	Dishard Ewahia		Payroll _
	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1	± 14 CO4	· · ·
		\$ 14,694	Noncash
	Boston, MA 02210		
			(Complete Part II for
		[noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 Total contributions Person Payroll Beacon Street Investment Partners L c/o BGA 1 Marina Park Drive Suite 1 \$ 408,981 Noncash Boston, MA 02210 (Complete Part II for noncash contribution) Person Payroll Beacon Street Investment Partners L c/o BGA 1 Marina Park Drive Suite 1 \$ 100,637 Noncash Boston, MA 02210 (Complete Part II for noncash contribution) Person Person 11

q			1 013011
3	Beacon Street Investment Partners L c/o BGA 1 Marina Park Drive Suite 1	\$ 520,244	Payroll
	Boston, MA 02210		(Complete Part II for noncash contribution)
10	Beacon Street Investment Partners L c/o BGA 1 Marina Park Drive Suite 1 Boston, MA 02210	\$ 164,622	Person Payroll Noncash (Complete Part II for

Beacon Street Investment Partners L c/o BGA 1 Marina Park Drive Suite 1

Boston, MA 02210

Payroll

Noncash

(Complete Part II for noncash contribution)

\$ 32,349

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate)

Date received

Description of noncash property given

No. from Part I

	bescription of noncash property given	(see instructions)	bace received
1	1,073 Shares of Bazaarvoice (BV)	\$ 6,336	2015-07-10
2	18,130 Shares Bazaarvoice, Inc (BV)	\$ 92,100	2015-09-03
3	6,387 Shares of Zayo	<u> </u>	2015-09-21
4	6,114 Shares Zayo	<u> </u>	2015-11-16
5	584 Shares of Marketo (MKTO)	<u> </u>	2015-11-19
6	400 Shares of Wayfaır	<u> </u>	2015-11-20
7	17,805 Shares Zayo Group Holdings	<u>\$ 408,981</u>	2015-11-16
8	2,817 Shares Wayraır Inc	\$ 100,637	2015-11-19
9	18,697 Shares Zayo Group Holdings	\$ 520,244	2015-09-21
10	5,631 Shares Marketo (MKTO)	\$ 164,622	2015-11-19
10	5,631 Shares Marketo (MKTO)	\$ 164,622	2015-11-19

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a)
(b)
(b)
FMV (or estimate)

Pate received

No. From Fare 2	bescription of noncash property given	(see instructions)	Date received
11	9.41 Shares Wayfair Inc	\$ 32 349	2015-11-24