efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319013316

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 *www.irs.gov/form990pf*.**

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation
CAIL FAMILY FOUNDATION

A Employer identification number
20-2034269

Number and street (or P O box number if mail is not delivered to street address)
99 FLORENCE ST BLDG N 60 APT 3C

Room/suite

B Telephone number (see instructions)
(781) 769-5858

City or town, state or province, country, and ZIP or foreign postal code
CHESTNUT HILL, MA 02467

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 1,780,996

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part 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 instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	250,000			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	245	245		
	4	Dividends and interest from securities	75,913	75,874		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	48,685			
	b	Gross sales price for all assets on line 6a 152,657				
	7	Capital gain net income (from Part IV, line 2)		48,685		
	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 schedule)				
	11	Other income (attach schedule)	105	105		
	12	**Total.** Add lines 1 through 11	374,948	124,909		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	5,000	5,000		0
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	5,106	647		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	6,426	6,426		0
	24	**Total operating and administrative expenses.** Add lines 13 through 23	16,532	12,073		0
	25	Contributions, gifts, grants paid	202,900			202,900
	26	**Total expenses and disbursements.** Add lines 24 and 25	219,432	12,073		202,900
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	155,516			
	b	**Net investment income** (if negative, enter -0-)		112,836		
	c	**Adjusted net income** (if negative, enter -0-)				

Part 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 of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	51,522		
	2	Savings and temporary cash investments	5,597	5,367	5,367
	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 ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	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)	1,424,778	1,500,907	1,775,629
	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 instructions Also, see page 1, item I)	1,481,897	1,506,274	1,780,996
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)	0	33,027	
	23	**Total liabilities**(add lines 17 through 22)	0	33,027	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,481,897	1,473,247	
	30	**Total net assets or fund balances**(see instructions)	1,481,897	1,473,247	
	31	**Total liabilities and net assets/fund balances**(see instructions)	1,481,897	1,506,274	

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

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,481,897
2	Enter amount from Part I, line 27a	2	155,516
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,637,413
5	Decreases not included in line 2 (itemize) ▶	5	164,166
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,473,247

Part IV Capital Gains and Losses for Tax on Investment Income

	List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a	See Additional Data Table			
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
	(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a	See Additional Data Table			
b				
c				
d				
e				

2	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7	2	48,685
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	203,049	1,608,886	0 126205
2013	190,642	1,407,772	0 135421
2012	188,449	1,293,868	0 145648
2011	146,003	1,238,455	0 117891
2010	89,136	1,072,114	0 083140

2	**Total** of line 1, column (d)	2	0 608305
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 121661
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	1,673,582
5	Multiply line 4 by line 3	5	203,610
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	1,128
7	Add lines 5 and 6	7	204,738
8	Enter qualifying distributions from Part XII, line 4	8	202,900

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b		1	2,257
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3	Add lines 1 and 2		3	2,257
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	2,257
6	Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 — 6a: 2,640			
b	Exempt foreign organizations—tax withheld at source — 6b:			
c	Tax paid with application for extension of time to file (Form 8868) — 6c:			
d	Backup withholding erroneously withheld — 6d:			
7	Total credits and payments Add lines 6a through 6d		7	2,640
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	5
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 overpaid** ▶		10	378
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ 378 **Refunded** ▶		11	0

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	If the answer is "Yes" to ***1a*** *or* ***1b,*** *attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		No
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10	Yes	

Part VII-A Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		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 ▶ N/A

14 The books are in care of ▶ KELLY A BERARDI Telephone no ▶ (781) 407-0300

Located at ▶ 34 SOUTHWEST PARK WESTWOOD MA ZIP+4 ▶ 02090

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over 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 Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ 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)? ☐ Yes ☑ No			
	(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). ☐ Yes ☑ No			
b	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		
	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))			
a	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____, 20____, 20____, 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		
c	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____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	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		
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 jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(Continued)*

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?		**5b**	
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**6b**	**No**
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		**7b**	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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
MILTON CAIL 99 FLORENCE ST BUILDING N 3C CHESTNUT HILL,MA 02467	TRUSTEE 0 25	0	0	0
LOIS CAIL 99 FLORENCE ST BUILDING N 3C CHESTNUT HILL,MA 02467	TRUSTEE 0 25	0	0	0
FAITH KAPLAN 336 COUNTRY CLUB RD NEWTON CENTRE,MA 02459	TRUSTEE 0 25	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		

Total number of others receiving over $50,000 for professional services. . . . . ▶ 0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
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 the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions **3**	
Total. Add lines 1 through 3 . . . . . ▶	0

Part X Minimum Investment Return

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes			
a	Average monthly fair market value of securities		1a	1,659,329
b	Average of monthly cash balances		1b	39,739
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	1,699,068
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	1,699,068
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	25,486
5	**Net value of noncharitable-use assets.**Subtract line 4 from line 3 Enter here and on Part V, line 4		5	1,673,582
6	**Minimum investment return.**Enter 5% of line 5		6	83,679

Part XI Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6			1	83,679
2a	Tax on investment income for 2015 from Part VI, line 5	2a	2,257		
b	Income tax for 2015 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	2,257
3	Distributable amount before adjustments Subtract line 2c from line 1			3	81,422
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	81,422
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount**as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	81,422

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	202,900
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	202,900
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0
6	**Adjusted qualifying distributions.**Subtract line 5 from line 4	6	202,900

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				81,422
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010 89,634				
b From 2011 85,004				
c From 2012 124,568				
d From 2013 121,819				
e From 2014 127,829				
f **Total** of lines 3a through e	548,854			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ $ 202,900				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions)		0		
c Treated as distributions out of corpus (Election required—see instructions)	0			
d Applied to 2015 distributable amount				81,422
e Remaining amount distributed out of corpus	121,478			
5 Excess distributions carryover applied to 2015	0			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:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	670,332			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
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)	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	89,634			
9 **Excess distributions carryover to 2016.** Subtract lines 7 and 8 from line 6a	580,698			
10 Analysis of line 9				
a Excess from 2011 85,004				
b Excess from 2012 124,568				
c Excess from 2013 121,819				
d Excess from 2014 127,829				
e Excess from 2015 121,478				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				202,900
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
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			14	245	
4 Dividends and interest from securities. . .			14	75,913	
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 income.			41	105	
8 Gain or (loss) from sales of assets other than inventory			18	48,685	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory . .					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .		0		124,948	0
13 **Total.** Add line 12, columns (b), (d), and (e).				13	124,948

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2016-11-14	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
KELLY A BERARDI		2016-11-14		P01203181

Firm's name ▶ GRAY GRAY & GRAY LLP

Firm's EIN ▶ 04-2088368

Firm's address ▶ 150 ROYALL STREET SUITE 102 CANTON, MA 02021

Phone no (781) 407-0300

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
2500 ALPS ETF TR ALERIAN MLP	P	2014-04-28	2015-01-22
1350 COHEN & STEERS CLOSEDENDED OPPO COM	P	2013-07-10	2015-06-23
920 ALPS ETF TR ALERIAN MLP	P	2010-10-13	2015-01-22
400 ALPS ETF TR ALERIAN MLP	P	2010-11-08	2015-01-22
450 ALPS ETF TR ALERIAN MLP	P	2010-11-08	2015-01-22
168 CANOE EIT INCOME FD	P	2011-01-04	2015-01-09
1526 MORGAN STANLEY GROWTH PORTFOLIO CL A	P	2014-11-10	2015-12-28
FROM K-1 KKR	P	2014-12-31	2015-12-31
FROM K-1 KKR	P	2014-12-31	2015-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
43,056		44,275	-1,219
16,886		17,149	-263
15,845		11,420	4,425
6,889		5,015	1,874
7,750		5,629	2,121
1,914		2,508	-594
60,000		17,962	42,038
		14	-14
317			317

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-1,219
			-263
			4,425
			1,874
			2,121
			-594
			42,038
			-14
			317

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ADOPT A PLATOON PO BOX 5038 HAGERSTOWN,MD 21741		PUBLIC CHARITY	TO SUPPORT THE CAUSE	500
ALZHEIMER ASSOCIATION 480 PLEASANT ST WATERTOWN,MA 02472		PUBLIC CHARITY	TO SUPPORT RESEARCH FOR A CURE	1,250
AMERICA'S VETDOGS 371 E MAIN ST SMITHTOWN,NY 11787		PUBLIC CHARITY	PROVIDE SERVICE DOGS TO SEVERELY WOUNDED VETERANS	500
AMERICAN DIABETES ASSOCIATION PO BOX 1833 MERRIFIELD,VA 22116		PUBLIC CHARITY	SUPPORT FOR PROGRAM	1,500
AMERICAN RED CROSS 139 MAIN ST CAMBRIDGE,MA 02142		PUBLIC CHARITY	SUPPORT THE ORGANIZATION TO CONTINUE ITS PROGRAMS	2,000
ARTHRITIS FOUNDATION PO BOX 96280 WASHINGTON,DC 20090		PUBLIC CHARITY	HELP EFFORTS TO PROVIDE HELP AND HOPE	1,000
ASPCA 424 EAST 92ND STREET NEW YORK,NY 101286804		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
BAILEY'S TEAM 164 WESTSIDE AVENUE NORTH ATTLEBORO,MA 02760		PUBLIC CHARITY	SUPPORT INDIVIDUALS & FAMILIES LIVING WITH AUTISM	1,000
BETH ISRAEL DEACONESS 33 BROOKLINE AVE BOSTON,MA 02215		PUBLIC CHARITY	PROVIDE ADVANCED HEALTH CARE	20,000
BINA FARM CENTER 207 UNION ST NATICK,MA 01760		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVE BOSTON,MA 02115		PUBLIC CHARITY	SUPPORT FOR PROGRAM	750
BOYS & GIRLS CLUBS OF NEWTON 50 CONGRESS ST BOSTON,MA 02109		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
BOYS TOWN 200 FLANAGAN BLVD BOYSTOWN,NE 68010		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	1,000
BRIGHAM AND WOMEN'S HOSPITAL 116 HUNTINGTON AVE BOSTON,MA 02116		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	10,000
CARE 151 ELLIS STREET ATLANTA,GA 30303		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	1,500
Total . . . . . ▶ **3a**				202,900

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CAREER COLLABORATIVE 77 SUMMER STREET BOSTON,MA 02110		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
CATHOLIC RELIEF SERVICES 228 W LEXINGTON STREET BALTIMORE,MD 212013443		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
COMBINED JEWISH PHILANTHROPIES 126 HIGH STREET BOSTON,MA 02110		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	38,000
COMPANION FOR HEROES PO BOX 7328 FAIRFAX STATION,VA 22039		PUBLIC CHARITY	BRING TOGETHER VETERANS AND PETS	1,000
CROHN'S & COLITIS 386 PARK AVENUE SOUTH NEW YORK,NY 10016		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
CYSTIC FIBROSIS FOUNDATION PO BOX 52074 PHOENIX,AZ 85072		PUBLIC CHARITY	SUPPORT FOR PROGRAM	1,500
DANA FARBER CANCER INSTITUTE 44 BINNEY STREET BOSTON,MA 02115		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	5,000
DOCTORS WITHOUT BORDERS PO BOX 5022 HAGERSTOWN,MA 21741		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	3,500
EASTER SEALS 484 MAIN ST WORCESTER,MA 01608		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
FEEDING AMERICA 35 E WACKER DRIVE CHICAGO,IL 606012200		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
FOREVER HOME RESCUE NEW ENGLAND 106 ADAMS STREET MEDFIELD,MA 02052		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
GENTLY GIANTS DRAFT HORSE RESCUE 17250 OLD FREDERICK RD MT AIRY,MD 21771		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	100
GREATER BOSTON FOOD BANK 70 SOUTH BAY AVE BOSTON,MA 02118		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
HABITAT FOR HUMANITY PO BOX 1509 AMERICUS,GA 31709		PUBLIC CHARITY	SUPPORT FOR PROGRAM	1,000
HEBREW COLLEGE 160 HERRICK ROAD NEWTON CENTRE,MA 02459		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	27,200
Total . . . . . ▶ **3a**				202,900

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK,AR 72202		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
HELP OUR WOUNDED PO BOX 96361 WASHINGTON,DC 20090		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
HILLEL INTERNATIONAL 800 EIGHTH STREET NW WASHINGTON,DC 200013724		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
HOME FOR LITTLE WANDERERS 271 HUNTINGTON AVE BOSTON,MA 02115		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
JEWISH COMMUNITY CENTERS OF GREATER BOSTON 333 NAHANTON ST NEWTON,MA 02459		PUBLIC CHARITY	SUPPORT FOR PROGRAMS	20,000
JEWISH COMMUNITY HOUSING FOR ELDERLY 30 WALLINGFORD ROAD BRIGHTON,MA 02135		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	10,000
JEWISH DISASTER RELIEF FUND 17469 ZIA CAPRI BOCA RATON,FL 33428		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
JEWISH FAMILY & CHILD SERVICES 1430 MAIN ST WALTHAM,MA 02451		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
JEWISH FEDERATION OF SOUTH PALM BEACH 9901 DONNA KLEIN BLVD BOCA RATON,FL 33428		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	1,000
JEWISH INSTITUE FOR NATIONAL SECURITY AFFAIRS 1307 NEW YORK AVE WASHINTON,DC 20005		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
KIDS WISH NETWORK 4060 LOUIS AVE HOLIDAY,FL 34691		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
LEUKEMIA & LYMPHOMA SOCIETY PO BOX 9031 PITTSFIELD,MA 01202		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG,MD 20871		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
MADD 511 E JOHN CARPENTER FRWY IRVING,TX 75062		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
MARCH OF DIMES 114 TURNPIKE ROAD WESTBOROUGH,MA 01581		PUBLIC CHARITY	TO SUPPORT THEIR CAUSE	1,000
Total . . . . . ▶ **3a**				202,900

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MASSACHUSETTS HOUSING AND SHELTER ALLIANCE PO BOX 120070 BOSTON,MA 02112		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
MORGAN MEMORIAL PO BOX 55009 BOSTON,MA 02205		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,000
MUSCULAR DYSTROPHY ASSOC 3300 EAST SUNRISE DR TUCSON,AZ 85718		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON,MA 02115		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	500
NATIONAL GEOGRAPHIC SOCIETY 1145 17TH STREET WASHINGTON,DC 20036		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
NATIONAL FOUNDATION FOR CANCER RESEARCH 4600 EAST WEST HIGHWAY BETHESDA,MD 20814		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	1,500
NEWTON COMMUNITY DEVEOPMENT FOUNDATION 425 WATERTOWN STREET NEWTON,MA 02458		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
OLD COLONY COUNCIL BSA 2438 WASHINGTON ST CANTON,MA 02021		PUBLIC CHARITY	SUPPORT FOR PROGRAM	1,000
OXFAM AMERICA PO BOX 7011 ALBERTLEA,MN 56007		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	2,500
OUTSIDE THE BOX 300 FIRST AVE NEEDHAM,MA 02494		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH STREET NW WASHINHTON,DC 20006		PUBLIC CHARITY	SUPPORT VETERANS WHO HAVE EXPERIENCED SPINAL CORD IN	1,000
PARKINSONS DISEASE FOUNDATION 135 PARKINSON AVE STATEN ISLAND,NY 10305		PUBLIC CHARITY	SUPPORT FOR THE CAUSE	1,500
PAWS FOR PURPLE HEARTS 5860 LABATH AVENUE ROHNERT PARK,CA 94928		PUBLIC CHARITY	SUPPORT FOR THE CAUSE	500
PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON STREET WATERTOWN,MA 02472		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	3,000
PINE STREET INN 444 HARRISON AVE BOSTON,MA 02118		PUBLIC CHARITY	HELP FOR THE HOMELESS	1,000
Total . . . . . ▶ **3a**				202,900

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PLANNED PARENTHOOD PO BOX 97166 WASHINHTON,DC 20077		PUBLIC CHARITY	SUPPORT FOR THE CAUSE	500
PMC JIMMY FUND 101 HUNTINGTON AVE BOSTON,MA 02199		PUBLIC CHARITY	SUPPORT FOR THE CAUSE	250
PROGERIA RESEARCH FOUNDATION PO BOX 3453 PEABODY,MA 019613453		PUBLIC CHARITY	SUPPORT FOR THE CAUSE	500
PROJECT BREAD 145 BORDER STREET EAST BOSTON,MA 021281903		PUBLIC CHARITY	SUPPORT TO END HUNGER	1,000
PROJECT HOPE PO BOX 35391 BRIGHTON,MA 02168		PUBLIC CHARITY	TO HELP POVERTY AROUND THE WORLD	1,000
ROSIE'S PLACE 889 HARRISON AVE BOSTON,MA 02118		PUBLIC CHARITY	TO SUPPORT HOMELESS WOMEN	500
SILENT SPRING INSTITUTE 29 CRAFTS STREET NEWTON,MA 02458		PUBLIC CHARITY	BREAST CANCER RESEARCH	100
SMILE TRAIN PO BOX 96246 WASHINGTON,DC 20090		PUBLIC CHARITY	TRAINING, UTILIZING, AND EMPOWERING LOCAL DOCTORS AN	1,500
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY,AL 36104		PUBLIC CHARITY	TO FIGHT HATE, AND TEACH TOLERANCE	1,000
SPECIAL OLYMPICS PO BOX 322 HATHORNE,MA 01937		PUBLIC CHARITY	SUPPORT FOR PROGRAM	500
ST FRANCIS HOUSE PO BOX 55859 BOSTON,MA 02205		PUBLIC CHARITY	TO SUPPORT PROGRAMS	1,250
ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105		PUBLIC CHARITY	TO SUPPORT PROGRAMS	1,000
SYNAGOGUE COUNCIL OF MASSACHUSETTS 1320 CENTRE STREET NEWTON,MA 02459		PUBLIC CHARITY	SUPPORT FOR THE PROGRAM	500
TEMPLE BETH AVODAH 45 PUDDINGSTON LANE NEWTON,MA 02459		PUBLIC CHARITY	TO SUPPORT PROGRAMS	200
THE FOUNDATION FOR AIDS PO BOX 96635 WASHINTON,DC 20090		PUBLIC CHARITY	TO SUPPORT PROGRAMS	1,500
Total . . . . . ▶ **3a**				202,900

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNICEF 101 HUNTINGTON AVE BOSTON,MA 02199		PUBLIC CHARITY	SUPPORT THE ORGANIZATION TO CONTINUE ITS PROGRAMS	2,000
UNIVERSITY OF MIAMI 1320 S DIXIE HWY CORAL GABLES,FL 33124		PUBLIC CHARITY	SUPPORT FOR PROGRAMS	300
VIETNAM VETERANS MEMORIAL FUND 2600 VIRGINIA NW WASHINGTON,DC 20037		PUBLIC CHARITY	TO SUPPORT THEIR PROGRAMS	500
WGBH LEADERSHIP CIRCLE 1 GUEST STREET BOSTON,MA 02108		PUBLIC CHARITY	SUPPORT FOR THE PROGRAMS	5,000
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD JACKSONVILLE,FL 32256		PUBLIC CHARITY	TO SUPPORT THE PROGRAMS	1,000
ZAMIR CHORALE OF BOSTON POBOX 590126 NEWTON,MA 02459		PUBLIC CHARITY	SUPPORT JEWISH CULTURE AND TRADITION	2,500
Total . . . . . ▶ **3a**				202,900

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Accounting Fees Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,000	5,000		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Investments - Other Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
STOCKS & SECURITIES	AT COST	786,006	1,090,807
STOCKS & SECURITIES	AT COST	714,901	684,822

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Other Decreases Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Description	Amount
UNREALIZED GAIN/LOSS FOR CONTRIBUTIONS OF STOCK	162,000
P/Y ADJ.	2,166

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Other Expenses Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	5,783	5,783		0
BANK CHARGES	68	68		0
ANNUAL REPORT	125	125		0
MISCELLANEOUS	450	450		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Other Income Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 KKR & CO - ROYALTY INCOME	19	19	19
K-1 KKR & CO - OTHER NET INCOME	86	86	86

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Other Liabilities Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Description	Beginning of Year - Book Value	End of Year - Book Value
CASH OVERDRAFT	0	33,027

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Substantial Contributors Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Name	Address
MILTON CAIL	99 FLORENCE ST BUILDING N 3C CHESTNUT HILL,MA 02467

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013316

TY 2015 Taxes Schedule

Name: CAIL FAMILY FOUNDATION

EIN: 20-2034269

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	647	647		0
FEDERAL TAXES	4,459	0		0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319013316

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

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*

OMB No 1545-0047

2015

Name of the organization
CAIL FAMILY FOUNDATION

Employer identification number
20-2034269

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization CAIL FAMILY FOUNDATION

Employer identification number 20-2034269

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MILTON L CAIL 99 FLORENCE ST BLDG N 60 APT 3C CHESTNUT HILL, MA 02467	$ 234,000	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
2	MILTON L CAIL 99 FLORENCE ST BLDG N 60 APT 3C CHESTNUT HILL, MA 02467	$ 16,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization
CAIL FAMILY FOUNDATION

Employer identification number
20-2034269

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	6000 SHARES MORGAN STANLEY FOCUS GROWTH PORTFOLIO CL A	$ 234 000	2015-12-31
		$	
		$	
		$	
		$	
		$	

Name of organization	**Employer identification number**
CAIL FAMILY FOUNDATION	20-2034269

Part III *Exclusively* **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of** ***exclusively*** **religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $** ______________

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	