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Form **990-PF**

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 separate instructions is at www irs gov/form990pf. OMB No 1545-0052

For callend year 2015 or tax year beginning and ending	Depar	tmen	t of the Treasury			r social security numbers on arm 990-PF and its separate			Open to Public Inspection
Accounting methods Account					011 25000 1 0	THI 550-11 und its separate		s govnomissopi.	Open to Fubile Inspection
22-2757391								A Employer identification	number
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Control terms State or province, couring, and ZIP or foreign postal code BOSTON MA 0.21.0			•		livered to street	address)			• •
BOSTON, MA 02110 6 Check all that apply: Initial return of a former public clainty Amended return Anderes change Final return Address change Name change Section 4947(a)(1) nonexempt charitable trust Dinber tusable private foundation Section 4947(a)(1) nonexempt charitable trust Dinber tusable private foundation Fire market value of all assets at ond of yet a format provide foundation Format II, cot. (c), fuer 10) \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 14, 1442. \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 14, 1442. \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 14, 1442. \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 14, 1442. \$\frac{1}{2}\$\$ 13, 210, 748. [Part I, cottoring of those (section)] \$\frac{1}{2}\$\$ 138, 697. 138, 697. \$\frac{1}{3}\$\$ 14, 142. [\frac{1}{2}\$\$ 14, 142. [\	_			, 			<u>д803</u>	617-342-32	<u> </u>
Final return Amended return Amende					P or foreign	postal code		C If exemption application is pe	nding, check here
Contributions, gifts, giants, etc., received 1.4, 442. 1.4, 442. 1.5, 1.5, 1.5, 1.5, 1.5, 1.5, 1.5, 1.5,	G C	heck	all that apply:	Initial retur	'n	Initial return of a f	ormer public charity	D 1. Foreign organizations	, check here
Section 4947(3)(1) nonexempt charable trust Other taxable private foundation Farr market value of all assets at end of year Accounting method: Cash Accounti						Amended return		2. Foreign organizations mee	ating the 85% test.
Section 4947(a)(1) nonexempt chartable trust								check here and attach con	nputation
Fart maket value of all assets at end of year J Accounting method:	H_C	_				-	-4		
The common									
Name				ena ar yezr	_		Accida		. —
Part II Analysis of Revenue and Expenses (a) new yoot measure and expenses per books (b) Net measurement (c) Adjusted net (d) Control (necessary) result by amounts in colorer (d) may yoot measurement (d) Adjusted net (d) Control (necessary) (d) Part (d) P				748.	. —	· · · · · · · · · · · · · · · · · · ·	basis)		b), clicck liefe
1 Contributions, girts, girants, etc., received 2 Check ▶			Analysis of Revenue an	nd Expenses	d (d) may not	(a) Revenue and	(b) Net investment		(d) Disbursements for charitable purposes
Check	$\overline{}$	1				14.442.	.,	N/A	(000) 0000 011197
138,697. 138,697. 138,697.				•			, , , , , , , , , , , , , , , , , , ,		
Sa Gross rents Description and or december Description Descripti		3	Interest on savings and tempor						
D Net rental income or (loss) 6a Net gam or (loss) (from state of absets not on time 10 1,607,064 RECEIVED		4	Dividends and interest fro	om securities	S	138,697.	138,697.		STATEMENT 1
Solution Continue		5a	Gross rents						
Date		b	Net rental income or (loss)					SECENCE	
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Net Sint Cerebra Capital gain 9 Income modifications 10a and advances	an a	þ	assets on line 6a		,435.	`**\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
Net Sint Cerebra Capital gain 9 Income modifications 10a and advances	ě	-	-						
10a and allowances	٦	-	· -	in			754		<u> </u>
b Less Coast of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, frustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 2 Other professional fees 2 Other professional fees 3 Other professional fees 4 A, 851. 4 A, 851. 5 Depreciation and depletion 5 Occupancy 2 Travel, conferences, and meetings 2 Printing and publications 2 Other expenses 3 Other expenses 3 Other expenses 5 STMT 5			Gross sales less returns	1		· · · · · · · · · · · · · · · · · · ·	<u> </u>	OCDENI	T
c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, dreactors, rustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 2 Cother professional fees 3 Cother professional fees 4 Cother professional fees 5 STMT 4 STMT 5 STMT 4 STMT 5								COLVE IN C	
11 Other income 282. 282. STATEMENT 2 12 Total. Add lines 1 through 11 1,760,485. 1,746,043. 13 Compensation of officers, deectors, sustees, etc 0. 0. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees STMT 3 81,303. 69,108. 12,195. 15 Interest 18 Taxes STMT 4 4,851. 4,851. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 5 159,642. 142,320. 17,322. 24 Total operating and administrative expenses. Add lines 13 through 23 245,796. 216,279. 29,517. 25 Contributions, gifts, grants paid 790,750. 790,750. 27 Subtract line 26 from line 12: 3 Excess of revenue over expenses and disbursements b Net investment income (# negative, enter -0-) c Adjusted net income (#			-						
12 Total. Add lines 1 through 11 1,760,485.						282.	282.	1	STATEMENT 2
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b Accounting fees c Other professional fees STMT 3 81,303. 69,108. 12,195. 17 Interest		15	Pension plans, employee	benefits					
Interest Taxes STMT 4 4 , 851 .	Ses	16a	Legal fees				<u></u> .		
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18 Taxes STMT 4 4 4 851 	Ä		·	S	PMT 3	81,303.	69,108.		12,195.
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23 Other expenses STMT 5 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 790,750. 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)								<u> </u>	
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	顗		•			, , , , , , , , , , , , , , , , , , , ,	<u>, , , , , , , , , , , , , , , , , , , </u>		<u>'</u>
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	era	•					216,279.		29,517.
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		26	Total expenses and disb	ursements.					
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		27	Subtract line 26 from line	e 12 .			1		
c Adjusted net income (if negative, enter -0-)						723,939.	1 500 564		
							1,529,/64.	NT / N	
	52350					- instructions	L	I 1/1/14	Form 990-PF (2015)

•		
Form	990-PF	(2015)

C/O JOSEPH MCNAY

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۵	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	<u>End</u>	of year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	317,720.	1,506,487.	1,506,487.
		Accounts receivable			
	•	Less; allowance for doubtful accounts	AND ADDRESS AND ADDRESS OF THE PARTY OF THE	A	The same of the same of
	4	Pledges receivable		\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· · · · · · ·
	•		***************************************		[
	١.	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	1		
		Less: allowance for doubtful accounts		, ,,,,,,	
'n	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ass	100	Investments - U.S. and state government obligations STMT 7	706,378.	254,504.	251,160.
-	•••		9,881,890.	9,743,589.	
	1		9,881,890.	3,143,303.	11,455,101.
	C	Investments - corporate bonds	· · · · · · · · · · · · · · · · · · ·		
	11	Investments - land, buildings, and equipment basis	***************************************		COMPANY AND A DESCRIPTION OF THE PROPERTY OF T
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ►		3	220 25222
	` `	Less accumulated depreciation	**************************************	m me a no membrane 200 200 al al eleba a	non menone beamanne end der -
	15	Other assets (describe >			1
		·	+		
	16	Total assets (to be completed by all filers - see the	10 005 000	11 504 500	12 210 740
_	 	instructions. Also, see page 1, item I)	60 500	11,304,300.	13,210,748.
	17	Accounts payable and accrued expenses	00,500.	11,550.	
	18	Grants payable			
ŝ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	60,500.	11,550.	
_		Foundations that follow SFAS 117, check here	,	•	1
		and complete lines 24 through 26 and lines 30 and 31.			, , ,
ņ					
lances	24	Unrestricted			1
<u>a</u>	25	Temporarily restricted			√ / .
ĕ	26	Permanently restricted			* .
핕		Foundations that do not follow SFAS 117, check here			[3:\]
Ē		and complete lines 27 through 31.			
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds	11,280,246.	10,845,488.	1
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.]
As	29	Retained earnings, accumulated income, endowment, or other funds	-434,758.	647,542.	
ĕ	30	Total net assets or fund balances	10,845,488.	11,493,030.	1
Z					1
	31	Total liabilities and net assets/fund balances	10,905,988.	11,504,580.	`
_			•		-
<u> P</u>	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3		-	
•			JU		10,845,488.
_	•	at agree with end-of-year figure reported on prior year's return)		1	
		amount from Part I, line 27a		2	723,939.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	11,569,427.
5	Decr	eases not included in line 2 (itemize)	SEE ST	ATEMENT 6 5	76,397.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	11,493,030.
					Form 990-PF (2015)

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Part IV Capital Ga	ains and Lo	osses for Tax on In	vestment	Income						
(a) List an 2-story b	d describe the l rick warehouse	kind(s) of property sold (e.g. ; or common stock, 200 shs	., real estate, s. MLC Co.)		I. b	How a - Puro - Don		(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a STATE STREE	r acc x	X41968					P	VARI	OUS	VARIOUS
b STATE STREE	r ACC X	X41968					P	VARI	ous	VARIOUS
c STATE STREE	r acc x	X41968					P	VARI	ous	VARIOUS
d ESSEX GLOBAL							P	VARI	ous	VARIOUS
e										
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					iain or (loss s (f) minus	
a 5,493,89	95.			5,699,35	2.					-205,457.
ь 3,451,3		-		2,422,32						1,029,051.
c 501,3				390,69	4.					110,661.
d 672,8				•						672,809.
e										
	showing gain in	column (h) and owned by t	the foundation	on 12/31/69			(1)	Gains (0	Col. (h) gain	minus
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (1) col. (j), if any			còl.	(k), but	not less tha (from col. (n -0-) or
					$\neg \neg$	_		-		-205,457.
<u>b</u>		·,			$\neg \neg$					1,029,051.
					$\neg \neg$	_				110,661.
d										672,809.
e										0,2,0050
2 Capital gain net income or			- ın Part İ, lıne		}	2				1,607,064.
3 Net short-term capital gain If gain, also enter in Part I, If (loss), enter -0- in Part I,	line 8, column		ıd (6):		}	2			N/A	
Part V Qualification	on Under S	Section 4940(e) for	Reduced	Tax on Net	Inve	stm	ent Inco	me		
(For optional use by domestic										··
` ,	•	•	10 10(0) 10 011	not invostment inc	001110	•,				
If section 4940(d)(2) applies,	eave this part b	olank.								
Was the foundation liable for t	he section 4942	2 tax on the distributable am	ount of any ve	ar in the base peri	od2					Yes X No
If "Yes," the foundation does n				•						100 [110
1 Enter the appropriate amo					itries.	 .				
(a) Base period year	s	(b) Adjusted qualifying dist		Net value of no	(c)		-use assets		Distrit	(d) oution ratio vided by col. (c))
Calendar year (or tax year b	eginning in)		8,927.				7,626		(coi. (b) ait	.084003
2014			$\frac{5,327.}{5,174.}$				6,620			.041094
2013			8,263.				3,521			.085096
2012			6,948.				$\frac{3,321}{3,073}$.090933
2011							$\frac{3,073}{2,115}$.089686
2010		1,10	4,223.		12	, эт	2,113	'	-	.089686
2 Total of line 1, column (d)								2		.390812
3 Average distribution ratio f the foundation has been in			on line 2 by 5,	or by the number	от уеа	ars		3		.078162
4 Enter the net value of nonc	harıtable-use as	ssets for 2015 from Part X, I	line 5					4	1	3,794,301.
5 Multiply line 4 by line 3								5		1,078,190.
6 Enter 1% of net investment	income (1% of	f Part I, line 27b)						6		15,298.
7 Add lines 5 and 6								7		1,093,488.
8 Enter qualifying distribution	ns from Part YI	I fine 4						8		820,267.

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.

THE NEW ENGLAND FOUNDATION

Exempt personal poundations described in section 4940(c), check here				2757		- A.!	Page 4
Dates of ruling or determination latter;		<u> </u>	10 - S	see ins	struc	tion	S)
a Domestic Guindations that meat the section 4940(e) requirements in Part V, check here	1a	\$.		~		3	, (
of Part I, line 27b. a All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 3 Add thes 1 and 2 3 0.595. Subtilla A, (incomp) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment theorem. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment theorem. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment theorem. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment theorem. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment theorem. Subtract line 4 from line 3. If 200 or less, enter -0- 5 Tax based on investment subtraction of the state line 4 from line 3. If 200 or less, enter -0- 6 Exempt foreign organizations - tax withheld at source 6 Exempt foreign organizations - tax withheld at source 7 Tax dec. If the total or lines 5 and 6 is more than line 0, enter amount owed 8 Tax dec. If the total or lines 5 and 6 is more than line 2, enter amount owed 9 Tax dec. If the total or lines 5 and 6 is more than line 2, enter amount owed 10 Overpayment. If line 7 is more than line 10 tall of lines 5 and 8, enter the mount overpaid 1 Enter the amount of 10 ine 10 to 5 received to 2 of 18 settines that 2 to 10 or 10 received 2 line 10 pages 10 pag					<u>.</u> .	`. <u> </u>	
a All other domestic foundations enter 2% of the 27h. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2	b	· · ·	1			0,5	<u>95.</u>
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· '					9		X
	10	· ,			10		Х

Form 990-PF (2015) C/O JOSEPH MCNAY

Pa	rt VII-A	Statements Regarding Activities (continued)				
					Yes	No
11	At any time	e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512	2(b)(13)? If "Yes," attach schedule (see instructions)		11		х
12	Did the fou	indation make a distribution to a donor advised fund over which the foundation or a disqualified person had advis	ory privileges?			
	If "Yes," att	ach statement (see instructions)		12		X
13	Did the fou	indation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website ad	· · · · · · · · · · · · · · · · · · ·				
14			e no.▶ <u>617-43</u>	<u>2-3</u>	<u> 200</u>	
	Located at	▶125 HIGH STREET, BOSTON, MA	ZIP+4 ▶ 02	<u> 110</u>		
15	Section 49	47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				
	and enter t	he amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
16	At any time	e during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,			Yes	
	securities,	or other financial account in a foreign country?		16		Х
	See the ins	structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		, ((
D -	foreign cou			44,53	:	
Pa		Statements Regarding Activities for Which Form 4720 May Be Required			V I	
		1 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
14	=	year did the foundation (either directly or indirectly):	▔▗ ▗▁ ▔ਓ▔ ▗▖			
		e in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X No			
	-	ualified person? In goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	, , , , , , , , , , , , , , , , , , ,	- 1	
		ompensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	773 373		
		fer any income or assets to a disqualified person (or make any of either available	res no	< \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
		e benefit or use of a disqualified person)?	Yes X No	13		
		to pay money or property to a government official? (Exception. Check "No"			,	
		foundation agreed to make a grant to or to employ the official for a period after			*	
		nation of government service, if terminating within 90 days.)	Yes X No		,	
b		ver is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			Same .	
_	_	.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	î 1b	S časta .	
		ons relying on a current notice regarding disaster assistance check here	▶			
C	-	indation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	d			
	before the	first day of the tax year beginning in 2015?		1c	**	X
2	Taxes on fa	ailure to distribute income (section 4942) (does not apply for years the foundation was a private operating founda	tion			
	defined in s	section 4942(j)(3) or 4942(j)(5)):		(3)		
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) beg	inning	3	} ^	
	before 201	5?	Yes X No	, š		
	If "Yes," list	t the years >		- 1	`	
b		ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to inco				
	valuation o	f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and a				
		- see instructions.)	N/A	2b		
C	If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1	i	,
	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
3a		indation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the	·	Yes X No	1		
D		I it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persoi	i i			
		169; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) Is acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? <i>(Use Sched</i>)	· .		Ì	
		•	nle C, N/A	a.		
A۵		0, to determine if the foundation had excess business holdings in 2015) indication invest during the year any amount in a manner that would jeopardize its charitable purposes?	A/A	3b 4a		<u>x</u>
		indation invest during the year any amount in a mariner that would jeopardize its charitable purposes? Indation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pu	rnose that	76		
		en removed from jeopardy before the first day of the tax year beginning in 2015?	500 1.101	4b	- 1	X
		, again, and an analysis and an again and an again and an again			-PF	

THE NEW ENGLAND FOUNDATION Form 990-PF (2015) C/O JOSEPH MCNAY 22-2757391 Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 1113 Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 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 N/A Yes No expenditure responsibility for the grant? 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 Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances JOSEPH C. MCNAY C/O ESSEX INV. MGMT. TRUSTEE 125 HIGH STREET 1.00 BOSTON, MA 02110 0 0 0. COLIN MCNAY C/O ESSEX INV. TRUSTEE 125 HIGH STREET 0 0. BOSTON, MA 02110 1.00 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation NONE

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

(a) Name and address of each employee paid more than \$50,000

NONE

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense expense devoted to position

(f) Compensation

(o) Co

Form **990-PF** (2015)

THE NEW ENGLAND FOUNDATION

Form 990-PF (2015) C/O JOSEPH MCNAY	22-	<u>2757391</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."		~
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) C	ompensation
ESSEX INVESTMENT MANAGEMENT	INVESTMENT		
	MANAGEMENT	8:	1,303.
	_		
	-		
Tabel Bumber of others recourse over \$50,000 for professional convers			0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	ical information cuch ac the		191
number of organizations and other beneficiaries served, conferences convened, research papers produ		Expens	ses
1 NOT APPLICABLE			
			0.
2			

3			
+ · · · · · · · · · · · · · · · · · · ·			
A			
4	*		
Part IX;B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amour	nt
1 NOT APPLICABLE			-
			0.
2			
All others are a shirt to the control of the contro			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	>		0.
		Form 990	- PF (2015)

Form 990-PF (2015)

C/O JOSEPH MCNAY

LP	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	12,906,630.
b	Average of monthly cash balances	1b	1,097,737.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	14,004,367.
е	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	14,004,367.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	210,066.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	13,794,301.
6	Minimum investment return. Enter 5% of line 5	6	689,715.
<u> P</u>	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	689,715.
2a	Tax on investment income for 2015 from Part VI, line 5		
ь	Income tax for 2015. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	30,595.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	659,120.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	659,120.
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	659,120.
P	art XII Qualifying Distributions (see Instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	820,267.
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	820,267.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	820,267.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	or the section

Form **990-PF** (2015)

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Form 990-PF (2015)

THE NEW ENGLAND FOUNDATION C/O JOSEPH MCNAY

Part XIII Undistributed Income (s	ee instructions)			
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	**************************************	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		659,120.
line 7 2 Undistributed income, if any, as of the end of 2015	7 7 7 7	3,5 1 1,0 5,8 3	, , , , , , , , , , , , , , , , , , ,	337,120.
a Enter amount for 2014 only			0.	()
b Total for prior years:			N.	
b total for prior years.	, ş	0.	· › š	,
3 Excess distributions carryover, if any, to 2015:				
a From 2010 524,015.		v		
b From 2011 547,932.	3883	y \.}}		
c From 2012 419,213.			` `	
d From 2013	*	,		
e From 2014 522,980.	^		., "	
f Total of lines 3a through e	2,014,140.	, ;	/\$\	
4 Qualifying distributions for 2015 from	` `	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Part XII, line 4: ► \$ 820,267.	·	•		
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.			CEO 100
d Applied to 2015 distributable amount	1.61 1.47	3.8	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	659,120.
e Remaining amount distributed out of corpus	161,147.	<u> </u>		` ` ` `
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.			0.
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	2,175,287.			
b Prior years' undistributed income. Subtract	. ^ &	_		. *
line 4b from line 2b		0.		\$ 2
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.	<u> </u>	* * * * * * * * * * * * * * * * * * * *
d Subtract line 6c from line 6b. Taxable	*** ****	0.	, · · · · · · · ·	
amount - see instructions	. 3. s	<u> </u>		
			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2015. Subtract	, ,	**	•	· «»
lines 4d and 5 from line 1. This amount must	/	, , ,		
be distributed in 2016	<u> </u>			0.
7 Amounts treated as distributions out of	^	> /		• · · · · · · · · · · · · · · · · · · ·
corpus to satisfy requirements imposed by				1
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	524,015.			
9 Excess distributions carryover to 2016.	,		,	
Subtract lines 7 and 8 from line 6a	1,651,272.	\$ 4	`	
10 Analysis of line 9:		**; <	× ×	*
a Excess from 2011 547,932.		4	*	
b Excess from 2012 419,213.				,
c Excess from 2013		, ,		
d Excess from 2014 522,980.	~	,		•
e Excess from 2015 161,147.				

THE NEW ENGLAND FOUNDATION

Form 990-P	F (2015) C/O JOS	EPH MCNAY			22-275	57391 Page 10
	Private Operating F			A, question 9)	N/A	
	oundation has received a ruling o					
founda	ation, and the ruling is effective fo	r 2015, enter the date of t	the ruling	▶		
b Check	box to indicate whether the found	lation is a private operatir	ng foundation described in	section	4942(j)(3) or 494	12(J)(5)
	the lesser of the adjusted net	Tax year		Prior 3 years		
ıncom	e from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	ment return from Part X for				<u> </u>	
	ear listed					
b 85% o		_	-			
					 	
-	ring distributions from Part XII,					
	for each year listed				*	
	nts included in line 2c not					
	irectly for active conduct of					
exemp	t activities				 	
e Qualify	ring distributions made directly					
for act	ive conduct of exempt activities.					
Subtra	ct line 2d from line 2c			_		
	ete 3a, b, or c for the	-				
	tive test relied upon: s" alternative test - enter:					
	alue of all assets					
` ,	alue of assets qualifying					
	nder section 4942(j)(3)(B)(i) vment" alternative test - enter		-			
	minimum investment return					
	in Part X, line 6 for each year				1	
listed					 	
c "Suppo	ort" alternative test - enter:					
	otal support other than gross			1		
	vestment income (interest, vidends, rents, payments on				1	
	curities loans (section					
_	2(a)(5)), or royalties)					
	ipport from general public					
	d 5 or more exempt					
	ganizations as provided in ction 4942(j)(3)(B)(iii)					
	rgest amount of support from				-	
, ,	exempt organization					
	oss investment income				· ·	
Part XV	Supplementary Info	rmation (Complet	te this part only if	the foundation	had \$5 000 or more	in accete
- 411719	at any time during th			the roundation	nad wo,ooo or more	in assets
1 Inform	nation Regarding Foundation	n Managers:				-
	y managers of the foundation who	_	han 2% of the total contri	hutions received by the	foundation before the close	of any tay
year (b	ut only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2).)	buttons received by the	Touridation botors the close	of any tax
NONE			(// //			
	y managers of the foundation who	own 10% or more of the	etack of a corporation (a	ur an aqually large next	n of the oursership of a	norobin or
	ntity) of which the foundation has			ir an equally large portio	in or the ownership of a part	nership or
NONE	,,	- L 10 10 01 g. autai into 00	•			
						
	nation Regarding Contribution					
Check	here X if the foundation of	nly makes contributions t	o preselected charitable o	rganizations and does n	ot accept unsolicited reques	ts for funds. If
the fou	ndation makes gifts, grants, etc. (see instructions) to indivi	iduals or organizations un	der other conditions, co	mplete items 2a, b, c, and d	
	me, address, and telephone numb	er or e-mail address of th	ne person to whom applica	ations should be addres	sed:	
N/A, 6	5173423200					
b The for	m in which applications should be	submitted and informate	on and materials they sho	ould include:		
N/A						
-	bmission deadlines:					
N/A	A					<u> </u>
d Any re: N/A	strictions or limitations on awards	, such as by geographica	ı areas, charıtable fields, k	ands of institutions, or c	other factors:	

Part XV. Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year				
SEE ATTACHED	N/A	ALL PUBLIC	SEE ATTACHED STATEMENT	
	<u> </u>	CHARITIES		790,750.
				- .
Total	· · · · · · · · · · · · · · · · · · ·	*	► 3a	790,750.
b Approved for future payment				
NONE			i	
NONE		Ì		
		_		-
Total			▶ 3b	0.

Form 990-PF (2015)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
chief group amount amount of the control of the con	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
G					
d					
e					
f					· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies					
2 Membership dues and assessments	<u> </u>	·			·
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	138,697.	
5 Net rental income or (loss) from real estate:				?	·
a Debt-financed property	ļ		\sqcup		-112
b Not debt-financed property			\longmapsto	· · · · · · · · · · · · · · · · · · ·	
6 Net rental income or (loss) from personal			1 1		
property	ļ.,		1		
7 Other investment income	ļ		14	282.	
8 Gain or (loss) from sales of assets other			ا ا	1 600 064	
than inventory	ļ		18	1,607,064.	
9 Net income or (loss) from special events			\vdash		
10 Gross profit or (loss) from sales of inventory			\vdash		
11 Other revenue:					
a			+ +		
ь	 		1 1		
<u> </u>	-		┼─┤		
d					
e	1	0.	1	1,746,043.	0.
13 Total. Add line 12, columns (b), (d), and (e)			1	13	1,746,043.
(See worksheet in line 13 instructions to verify calculations.)				· · · · · · · · · · · · · · · · · · ·	2,710,013.
	- 4ba A aaa	mulichment of Ev		Disamono	
Part XVI-B Relationship of Activities to	tne Accor	mpushment of Ex	empt	Purposes	
Line No. Explain below how each activity for which income	me is reported in	n column (e) of Part XVI-A	contribi	uted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than t	by providing fund	ds for such purposes).			
NOT APPLICABLE					
					
					. w
<u></u>		· · · · · · · · · · · · · · · ·			
					<u> </u>
					·
		-			
523621 11-24-15					Form 990-PF (2015)

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

1	Did the	e organization directly or indi	rectly engage in any of the follo	owing with any other organizat	ion described in se	ction 501(c) of		Yes	No
)(3) organizations) or in section						
Transfers from the reporting foundation to a noncharitable exempt organization of:									
(1) Cash									_X_
	(2) Ot	her assets					1a(2)		X
b	Other t	ransactions:							
	(1) Sa	ales of assets to a noncharita	ble exempt organization				1b(1)		X
	(2) PL	irchases of assets from a no	ncharitable exempt organization	n			1b(2)		X
	(3) Re	ental of facilities, equipment,	or other assets				1b(3)		X
	(4) Reimbursement arrangements								X
	(5) Lo	ans or loan guarantees					1b(5)		X
(6) Performance of services or membership or fundraising solicitations									X
C	Sharin	g of facilities, equipment, ma	ailing lists, other assets, or paid	employees			1c		X
d	If the a	nswer to any of the above is	"Yes," complete the following s	chedule. Column (b) should a	lways show the fair	market value of the goods, of	her ass	ets,	
	or serv	rices given by the reporting fo	oundation. If the foundation rec	eived less than fair market val	ue in any transactio	n or sharing arrangement, sh	ow in		
	colum	(d) the value of the goods,	other assets, or services receiv	ed.					
(a)L	ine no	(b) Amount involved	(c) Name of noncharit	able exempt organization	(d) Descripti	on of transfers, transactions, and sh	arıng arra	ngemer	ts
			N/2	<u> </u>					
				·					

						<u>. </u>			
			L						
2a		•	tly affiliated with, or related to,	· -	izations described	_	_		_
			r than section 501(c)(3)) or in s	section 527?			_ Yes	X] No
<u>b</u>	If "Yes,	complete the following sch		1		<u> </u>			
		(a) Name of org	ganization	(b) Type of organization	 	(c) Description of relationsh	р		
		N/A			-	· · · · · · · · · · · · · · · · · · ·			
					1				
			· · · · · · · · · · · · · · · · · · ·		1		·		
					1				
	1				4.44444				
C:	ا م		that I have examined this return, inclu- polete Declaration of preparer (other t			May	the IRS d	scuss th	ns
Sig He		Line 1/M	NOW QUI	1 Man 200	W \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	show	n below (
110		MAN	VIVI	11/2/201		man X	Yes		No
		ignature of officer or trustee		Date /	Title	Chack Tit Torre			==
		Print/Type preparer's na	arne Preparer	s signature	Date	Check if PTIN			
Pa	id		1)	bra Cohan	5/12/16	self- employed	400		
	na epare	DIANA COHE		·	1 5, 12, 10		188		
	epare se Onl	1 1 1 1 1 1 1 1 1 1	OITTE TAX LLP			Firm's EIN ► 86-10	00/	1 4	
J		·	O DEDVETEN CONT	17.77M					
			O BERKELEY STR			Dh 617 42	7 2	300	
		BO	STON, MA 02116			Phone no. 617-43	m 99 0		(2015)
						101	III ラブし	,	ZU 131

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

Employer identification number

2015

Name of the organization

THE NEW ENGLAND FOUNDATION

C/O JOSEPH MCNAY 22-2757391

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 X 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** 🔟 For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, chantable, 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 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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

Name of organization
THE NEW ENGLAND FOUNDATION
C/O JOSEPH MCNAY

Employer identification number

22-2757391

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THOMAS EBERT BASS IRREVOCABLE TRUST C/O ESSEX INVESTMENT MGMT CO, LLC 125 HIGH STREET BOSTON, MA 02110	\$14,442.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization

THE NEW ENGLAND FOUNDATION

C/O JOSEPH MCNAY

Employer identification number

22-2757391

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			
		\$				
(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 990,	990-EZ,	or 990-PF)	(2015

Name of organization THE NEW ENGLAND FOUNDATION Employer identification number

	SEPH MCNAY			22-2757391			
Part III	Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious,	olumns (a) through (e) and the folio	OWING line entry. For organization	s			
	Use duplicate copies of Part III if additional	space is needed.	tess for the year (cite) this into one				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I	(6, 222		(0, 2000				
				· <u>· · · · · · · · · · · · · · · · · · </u>			
		(e) Transfer of gi	ft				
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee			
1.							
1							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Farti				•			
				1			
<u> </u>							
		(e) Transfer of git	ft				
	Transferee's name, address, and	4 7ID + 4	Pelationship of trac	sferor to transferee			
	Transferee's fiame, address, and	ZIF T 4	Helationship of trai	isieror to d'arisieree			
]							
(2) 212		<u> </u>					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I							
1							
	(e) Transfer of gift						
			Relationship of transferor to transferee				
	Transferee's name, address, and	<u> </u>	Relationship of trai	sferor to transferee			
1							
l ·							
'							
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Doso	ription of how gift is held			
from Part I	(b) Ful pose of gift	(c) Ose of gift	(d) Desc	inpuon or now girt is neid			
.							
				· · · ·			
F		(e) Transfer of git	ft	 			
		.,					
	Transferee's name, address, and	1 ZIP + 4	Relationship of tran	sferor to transferee			

1		ı					

FORM 990-PF	DIVIDEND	S AND INTER	REST	FROM SECT	JRITIES S	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
DIVIDEND AND INTEREST INCOME	138,697	•	0.	138,69		
TO PART I, LINE 4	138,697	•	0.	138,69	138,697	
FORM 990-PF		OTHER I	NCOM	Œ		STATEMENT 2
DESCRIPTION			REV	A) ENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME				282.	282.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11		282.	282.	
FORM 990-PF	0	THER PROFES		(B)	(C)	CHARLEMENT 3
DESCRIPTION		EXPENSES PER BOOKS		INVEST- T INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ESSEX INVESTMENT		81,303.		69,108	•	12,195.
TO FORM 990-PF, PG	1, LN 16C	81,303.		69,108	•	12,195.
FORM 990-PF		TAX	ŒS		Ş	STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID	_	4,851.	-	4,851		0.
TO FORM 990-PF, PG	1, LN 18	4,851.		4,851	•	0.
	_					

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CUSTODIAL FEES ACCOUNTING FEES EXPENSES: FROM K-1S MA FILING FEE	6,326. 17,252. 135,994. 70.	6,326. 0. 135,994. 0.		0. 17,252. 0. 70.	
TO FORM 990-PF, PG 1, LN 23	159,642.	142,320.		17,322.	

FORM 990-PF OTHER DECREASES IN N	ET ASSE	TS OR E	UND BALANCES	STATEMENT 6	;
DESCRIPTION				AMOUNT	
PRIOR PERIOD LIABILITY ADJUSTMENT MISCELLANEOUS ADJUSTMENT IN PRIOR Y	EAR FUN	ID BALAN	ICE	76,00 39	
TOTAL TO FORM 990-PF, PART III, LIN	IE 5			76,39	7.
FORM 990-PF U.S. AND STATE/C	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 7	
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	I
US TREASURY BILLS AND NOTES	x		254,504.	251,16	0.
TOTAL U.S. GOVERNMENT OBLIGATIONS			254,504.	251,16	0.
TOTAL STATE AND MUNICIPAL GOVERNMEN	T OBLIG	ATIONS			
TOTAL TO FORM 990-PF, PART II, LINE	10A		254,504.	251,16	0.

FORM 990-PF CORPORATE STOCK		STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COMMON STOCK GLOBAL LIFE	4,595,052. 5,148,537.	6,083,636. 5,369,465.
TOTAL TO FORM 990-PF, PART II, LINE 10B	9,743,589.	11,453,101.

NEW ENGLAND FOUNDATION 12/31/2015

FORM 990PF, PART XV, LINE 3a CONTRIBUTIONS PAID

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Name of the Recipient	Relationship	Status	Purpose of grant or contribution	Amount
Annual Gilder Gala	None	501(c)(3)	General Welfare	25,000
ALS Foundation	None	501(c)(3)	Medical	500
Armor Karma	None	501(c)(3)	General Welfare	1,000
Bidwell House Museum	None	501(c)(3)	Cultural	2,500
Boston Ballet	None	501(c)(3)	Education	50,000
Brigham and Women's Hospital	None	501(c)(3)	Medical	1,000
Boston Conservatory	None	501(c)(3)	Cultural	10,000
Boston Symphony Orchestra	None	501(c)(3)	Cultural	23,700
Brigham and Women's Hospital	None	501(c)(3)	Medical	15,000
Cardinal Spellman High School	None	501(c)(3)	Education	500
Celebrity Senes Boston	None	501(c)(3)	Cultural	20,000
Church of the Redeemer	None	501(c)(3)	Religious	11,500
Dartmouth University	None	501(c)(3)	Education	54,000
Dana Farber Cancer Institute	None	501(c)(3)	Medical	25,500
EXPLO	None	501(c)(3)	General Welfare	2,000
Fidelity Chantable	None	501(c)(3)	General Welfare	10,000
Max Warburg Benefit	None	501(c)(3)		2,000
Mory's Foundation	None	501(c)(3)	General Welfare	1,000
MSPCA	None	501(c)(3)	General Welfare	22,000
MFA Patron Program	None	501(c)(3)	General Welfare	30,000
New England Football Club	None	501(c)(3)	General Welfare	1,000
NYHS Chairman's Council	None	501(c)(3)		10,000
New York Historical Society	None	501(c)(3)	Education	22,500
Nobles	None	501(c)(3)		500
Park School	None	501(c)(3)	Education	1,000
Policeman's Fund	None	501(c)(3)	General Welfare	50
Roxbury Latin	None	501(c)(3)	Education	80,000
Sippican Historical Society	None	501(c)(3)		1,000
St Marys Food Pantry	None	501(c)(3)		500
Tenacity	None	501(c)(3)		130,000
The Boston Minstrel Company	None	501(c)(3)		1,500
Trustees of the Reservations	None	501(c)(3)	General Welfare	400
UCross Foundation	None	501(c)(3)		5,000
WGBH	None	501(c)(3)		100
Winsor Annual Fund	None	501(c)(3)		75,000
Yale University	None	501(c)(3)	Education	155,000
SUBTOTAL DONATIONS		. , , ,	-	790,750