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Department of the Treasury

Internal Revenue Service

DLN: 93491134002376

OMB No 1545-0052

Open to Public

Inspection

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.

, and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation The Edward Lee and Slocumb Hollis Perry Foundation 31-1621824 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 214 Allandale Rd-A (617) 739-1298 C If exemption application is pending, check here ▶ City or town, state or province, country, and ZIP or foreign postal code Chestnut Hill, MA 02467 G Check all that apply Initial return of a former public charity Initial return **D** 1. Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation **H** Check type of organization \checkmark Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 6,001 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per ıncome necessarily equal the amounts in column (a) (see (b) (c) purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 320,000 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6a Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) . . C 11 Other income (attach schedule) Total. Add lines 1 through 11 320,017 17 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). 16a Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . c **17** 囱 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications. . 牣 23 Other expenses (attach schedule). . 24 Total operating and administrative expenses. 50 Add lines 13 through 23 339,510 339,510 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 339,560 339,510 25 27 Subtract line 26 from line 12 -19,543 Excess of revenue over expenses and disbursements a Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) book value	(B) Book value	\dashv	(c) Fair France Value
	2	Savings and temporary cash investments	25,544	6	,001	6,001
	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			$\overline{}$	
Assets	9	Prepaid expenses and deferred charges			-	
881	10a	Investments—U S and state government obligations (attach			_	
•	100	schedule)				
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) -				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) 🟲				
	15	O ther assets (describe 🟲)				
	16	Total assets(to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	25,544	6,	,001	6,001
	17	Accounts payable and accrued expenses				
.n	18	Grants payable				
₫	19	Deferred revenue				
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Lia	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe 🟲)				
	23	Total liabilities(add lines 17 through 22)			0	
J.		Foundations that follow SFAS 117, check here 🕨 🦵				
Balances		and complete lines 24 through 26 and lines 30 and 31.				
lar	24	Unrestricted				
Ba	25	Temporarily restricted				
пd	26	Permanently restricted				
or Fund		Foundations that do not follow SFAS 117, check here				
ō		and complete lines 27 through 31.				
Assets	27	Capital stock, trust principal, or current funds				
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
t A	29	Retained earnings, accumulated income, endowment, or other funds	25,544	6	,001	
Net	30	Total net assets or fund balances(see instructions)	25,544		,001	
	31	Total liabilities and net assets/fund balances(see instructions)	25,544	6,	,001	
Pa	rt III				_	
1		Total net assets or fund balances at beginning of year—Part II, column				
_		with end-of-year figure reported on prior year's return)			+	25,544
2		Enter amount from Part I, line 27a			+	-19,543
3		Other increases not included in line 2 (itemize)		_ 3	+	
4		Add lines 1, 2, and 3		4	+	6,001
5		Decreases not included in line 2 (itemize)		5	+	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	arcii, colullin (D), lin	e 30 . 6	1	6,001

the Part VI instructions

Part	IV Capital Gains	and Losses for Tax on Inve	stment Income	e			
		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	(6)	Date acquired mo , day, yr)	Date sold (d) (mo , day, yr)
1a							
b							
с							
d							
	e) Gross sales price	Depreciation allowed		t or other basis			or (loss)
a		(f) (or allowable)	(g) plus	expense of sale	+	(II) (e) pius	(f) minus (g)
					+		
<u> </u>					+		
<u> </u>					_		
d							
е							
Сс	mplete only for assets	showing gain in column (h) and owne			_		(h) gain minus
(i)	FMV as of 12/31/69	Adjusted basis (j) as of 12/31/69		cess of col (1) er col (j), if any	(1)		ot less than -0-) o i (from col (h))
а							
b							
С							
d							
е							
3	Net short-term capit If gain, also enter in in Part I, line 8 .	al gaın or (loss) as defined in section Part I, line 8, column (c) (see instru	ctions) If (loss), e) enter - 0 -] 3		
Part	V Qualification (Jnder Section 4940(e) for R	educed Tax or	n Net Investme	ent II	ncome	
	tional use by domestic ¡ on 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investment	incon	ne)	
		e section 4942 tax on the distributa ot qualify under section 4940(e) Do			eriod?		┌ Yes ┌ No
1 En	iter the appropriate amo	unt in each column for each year, se	ee instructions bef	ore making any en	tries		
Base	(a) e period years Calendar for tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divided	n ratio
, car (2014	410,762		77,931		, so. (b) alviace	5 270842
	2013	310,900		11,155			27 870910
	2012	306,250		297,188			1 030492
	2011	375,000		288,277			1 300832
	2010	247,575		265,923			0 931003
2	Totalof line 1, colum	n (d)			2		36 404079
3		ratio for the 5-year base period—div the foundation has been in existence			3		7 280816
4		f noncharitable-use assets for 2015		_	4		30,987
5	Multiply line 4 by line	3			5		225,611
6		stment income (1% of Part I, line 27		—	6		,
7			•	<u> </u>	7		225,611
,		butions from Part XII, line 4		· · · · · ·	•		339 510

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

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	940(e)	, or 4948—se	e pag	e 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		•	<u> </u>					
Ia	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			ļ					
	(attach copy of letter if necessary—see instructions)			ĺ					
b	Domestic foundations that meet the section 4940(e) requirements in Part V	, check		J	1				0
	here 🟲 🔽 and enter 1% of Part I, line 27b								
C	All other domestic foundations enter 2% of line 27b Exempt foreign organize Part I, line 12, col (b)	ations 6	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndatıon	s only Othe	ers	2				0
3	Add lines 1 and 2			•	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou	ındatıor	ns only Oth	ers	4				
_	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	ontor - C	1_		5				
5		enter - c	,	•	5				0
6	Credits/Payments	۔ ا	ı						
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
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				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2			_	8				
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 amoun				10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	0	Refunded	_	11				
	t VII-A Statements Regarding Activities				1				
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loc	ar registatio	n or a	a		4 -	Yes	No
	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 just definition (2)	politica	i purposes (seein	istructi	ons	1b		Na
	for definition)?		nuce of any			•	10		No
	published or distributed by the foundation in connection with the activities.	s allu cc	ppies or arry r	iiateiia	15				
_	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo			• • r		•			
•	(1) On the foundation \blacktriangleright \$ (2) On foundation managers								
e	Enter the reimbursement (if any) paid by the foundation during the year for pol				osed				
_	on foundation managers > \$		Aponaica o	~ · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
2	Has the foundation engaged in any activities that have not previously been re	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in i	its aove	ernina instru	ment.	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a cont	_	-	•			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of						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 du						5		No
	If "Yes," attach the statement required by General Instruction T.	J	•						
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	945)sa	tisfied eithe	r					
	By language in the governing instrument, or								
	ullet By state legislation that effectively amends the governing instrument so the	hat no r	nandatory d	rectio	ns				
	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	s," complete	Part II	, col. (c),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ($\!\!\!$	(see ins	structions)						
	№ ОН								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9								
_	General (or designate) of each state as required by General Instruction G? If				:		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s If "Yes," complete Part XIV	see inst	LIUCLIONS FOR	rart X	(1 A) ,		9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes,</i>	 "attack	a schedule	listina	their n	ames	-	\vdash	140
10	and addresses.		, a scriedule	uu		um 63	10	Yes	
					•			لتت	

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►EDWARD LEE PERRY Telephone no ►(617	739	-1298	
	Located at 214 Allandale Rd-A Chestnut Hill MA ZIP+4 102467			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
				
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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 Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here.			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 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			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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
Ь	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	1 '	No

Pa	Statements Rega	arding	Activities for	Wh	ich Form 4720	мау	Be Required (Cont	inue	:d)
5a	During the year did the foundation	n pay or	incur any amoun	t to					
	(1) Carry on propaganda, or othe	erwise att	tempt to influence	e leg	ıslatıon (section 49	45(e))? 	No	
	(2) Influence the outcome of any	/ specific	: public election (see	section 4955), or to	carr	-у		
	on, directly or indirectly, any	voter re	gıstratıon drıve?.	•			│ Yes ▽	No	
	(3) Provide a grant to an individu	ual for tra	avel, study, or oth	ersi	ımılar purposes?		☐ Yes ☐	No	
	(4) Provide a grant to an organiz	ation oth	er than a charita	ble, e	etc , organization de	scrib	ed		
	ın section 4945(d)(4)(A)? (s	ee instru	uctions)				⊤ Yes ▽	No	
	(5) Provide for any purpose othe	r than re	ligious, charitable	e, sc	ientific, literary, or				
	educational purposes, or for	the preve	ention of cruelty t	o ch	ıldren or anımals?.			No No	
b	If any answer is "Yes" to 5a(1)-	(5), did a	any of the transact	tions	fail to qualify under	the	exceptions described in		
	Regulations section 53 4945 or	ın a curr	ent notice regard	ıng d	lisaster assistance	(see	ınstructions)?		5b
	Organizations relying on a curre	nt notice	regarding disast	eras	sistance check here	≥		_	
c	If the answer is "Yes" to questio	n 5a(4),	does the foundat	ion c	laım exemption from	n the			
	tax because it maintained expen	diture re	sponsibility for th	ie gra	ant?		T Yes T	- No	
	If "Yes," attach the statement requ	uired by R	Regulations section	n 53.	4945-5(d).				
6a	Did the foundation, during the ye	ar, receiv	ve any funds, dire	ctly	or indirectly, to pay	pren	niums on		
	a personal benefit contract?							No No	
b	Did the foundation, during the ye	ar, pay p	remiums, directly	orı	ndırectly, on a perso	nal b	penefit contract?		6b No
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax year,	was the f	oundation a party	/ to a	a prohibited tax shel	ter tr	ansaction? Tyes F	No No	
b	If yes, did the foundation receive	any pro	ceeds or have an	y net	t income attributable	e to t	he transaction?		7b
Do	Information Abou	ıt Offic	ers, Directors	, Tı	ustees, Founda	tior	n Managers, Highly	Paid	l Employees,
	rt VIII and Contractors								
1	List all officers, directors, trustee	es, found	ation managers a	nd t	heir compensation (see ii			
			tle, and average	(c)	Compensation(If		(d) Contributions to		Expense account,
	(a) Name and address		nours per week voted to position		not paid, enter -0-)	er	nployee benefit plans		other allowances
		(b) dev	voted to position		-0-)	and	deferred compensation		
EDW	ARD LEE PERRY	_	ent & Trustee		0		0		0
	Allandale Rd-A	1 00							
	stnut Hill, MA 02467 CUMB HOLLIS PERRY	T ==== ::	0 T						
	Allandale Rd-A	1 00	rer & Trustee		0		0		0
	stnut Hill, MA 02467								
ANNE	H PERKINS	Trustee	 e		0		0		0
509	7 West Lake Rd	1 00							
Mon	ticello,FL 32344								
_2	Compensation of five highest-pai	d employ	ees (other than t	those	e included on line 1–	-see		iter"	NONE."
	(a)		Title, and aver	age			Contributions to employee benefit		Evnonco account
Naı	me and address of each employee		hours per wee		(c) Compensation	n	plans and deferred		Expense account, other allowances
	more than \$50,000	(b) devoted to posi	tion			(d) compensation	(- /	
NON	NE								
		- -							
		$\overline{}$							
		<u> </u>					<u> </u>		
ıota	I number of other employees paid	over\$50	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				🟲	I	0

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Higl	hly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE	" <u>. </u>
(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 rel organizations and other beneficiaries served, conferences convened, research papers produced.		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	•	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	<u> </u>	
	purposes		
а	A verage monthly fair market value of securities	1a	o
ь	A verage of monthly cash balances	1b	31,459
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	31,459
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	31,459
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	472
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	30,987
6	Minimum investment return. Enter 5% of line 5	6	1,549
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	1,549
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,549
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,549
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,549
	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes	_	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	339,510
	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	339,510
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	339,510
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed	Income (see instri	uctions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015	from Part XI. line 7	·	,			1,549
	Undistributed income, if any, as						
a	Enter amount for 2014 only.						
h	Total for prior years 20						
3	Excess distributions carryover,						
а	From 2010	, 11 411, , to 2015					
b	From 2011	360,586					
c	From 2012	291,391					
d	From 2013	310,342					
	From 2014	406,865					
f	Total of lines 3a through e		1,369,184				
4	Qualifying distributions for 201!	5 from Part					
	XII, line 4 🕨 \$						
а	Applied to 2014, but not more t	:han line 2a					
b	Applied to undistributed income	e of prior years					
	(Election required—see instruct						
C	Treated as distributions out of crequired—see instructions)						
d	Applied to 2015 distributable a	mount					1,549
е	Remaining amount distributed o	ut of corpus	337,961				
5	Excess distributions carryover	applied to 2015					
	(If an amount appears in column same amount must be show	. ,,					
6	Enter the net total of each coluindicated below:	ımn as					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	1,707,145				
b	Prior years' undistributed incom	e Subtract					
	line 4b from line 2b						
C	Enter the amount of prior years'						
	income for which a notice of defi been issued, or on which the sec	•					
	tax has been previously assess	, ,					
d	Subtract line 6c from line 6b Ta						
	—see instructions						
е	Undistributed income for 2014	Subtract line					
	4a from line 2a Taxable amoun	t—see					
_	instructions						
Т	Undistributed income for 2016 lines 4d and 5 from line 1. This						
	be distributed in 2015						0
7	Amounts treated as distribution	s out of					
	corpus to satisfy requirements i						
	section 170(b)(1)(F) or 4942(g						
0	be required - see instructions). Excess distributions carryover	F					
8	applied on line 5 or line 7 (see i						
9	Excess distributions carryover t						
_	Subtract lines 7 and 8 from line		1,707,145				
10	Analysis of line 9						
	Excess from 2011	360,586					
b	Excess from 2012	291,391					
c	Excess from 2013	310,342					
d		406,865					
е	Excess from 2015	337,961					

Р	art XIV	Private Operating Foundat	t ions (see ınstrı	uctions and Part	: VII-A, questio	on 9)	
La		tion has received a ruling or detern and the ruling is effective for 2015,					
b	Check box to	o indicate whether the organization	ıs a prıvate opera	tıng foundatıon de	scribed in section	on	T 4942(j)(5)
		sser of the adjusted net	Tax year		Prior 3 years		
		Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	ınvestment	return from Part X for each	(a) 2015	(0) 2014	(6) 2013	(u) 2012	
	•						
		a					
C		stributions from Part XII,					
		ch year listed					
a		luded in line 2c not used ctive conduct of exempt					
	•	· · · · · · · · · · · · · · · · · · ·					
e		istributions made directly					
_		nduct of exempt activities					
	Subtract line	2d from line 2c					
. (Complete 3a,	b, or c for the					
	alternative t	est relied upon					
а	"Assets" alt	ernative test—enter					
	(1) Value o	fall assets					
	` '	f assets qualifying					
		ection 4942(j)(3)(B)(i)			ļ		<u> </u>
b		" alternative test— enter 2/3					
		investment return shown in					
_	•	5 for each year listed			-		
C		ternative test—enter					
	• •	upport other than gross					
		ent income (interest, ds, rents, payments					
		rities loans (section					
		5)), or royalties)					
		from general public					
	and 5 o	r more exempt					
	_	ations as provided in					
		4942(j)(3)(B)(III)					
		amount of support					
		exempt organization					
	<u> </u>	nvestment income pplementary Information ((h - d &E 000 -	
G	_	ets at any time during the	•	• •	e organizati	on nau \$5,000 c	i illore ili
		Regarding Foundation Managers:	year —see mis	u ucuons. j			
а		agers of the foundation who have c	ontributed more th	nan 2% of the tota	l contributions r	eceived by the found	lation
		ose of any tax year (but only if they					
	NONE						
b	List any man	agers of the foundation who own 10	% or more of the	stock of a corpora	tion (or an equa	lly large portion of th	ie
	ownership of	a partnership or other entity) of wh	ich the foundation	n has a 10% or gre	eater interest		
	NONE						
	Information	Regarding Contribution, Grant, Gift	t Loan Scholamb	in etc Drograms			
		► If the foundation only makes co equests for funds If the foundation					
		ons, complete items 2a, b, c, and d		its, etc (see mstr	actions) to marv	iduals of organizatio	iis uiidei
	in a small	,,, realistic realistic Ea, s, e, and a	•				
а	The name, a	ddress, and telephone number or e	-mail address of t	he person to whom	n applications sh	ould be addressed	
		EE PERRY CO EDWARD LEE AND					
	214 Allanda						
		II,MA 02467					
_	(617)739-						
b	The form in	which applications should be submi	itted and informat	ion and materials t	they should incli	ıde	
	N/A						
c	Any submis	sion deadlines					
	N/A						
ط ا		ions or limitations on awards, such	as hy geographic	alareae charitabl	e fields kinds of	finetitutione or othe	ır
u	factors	ions of minications on awards, such	as by geographic	ai aicas, CildiildDI	c neius, killus 01	matitutions, or othe	d .
		MEDICAL OPEDUCATIONAL DU	PPOSES				
	тп⊏АКІЪ,	MEDICAL OR EDUCATIONAL PU	ドトロシE タ				

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data TableSee Additional Data Table 339,510 **b** Approved for future payment

Form 990-PF (2015)					Page 12
Part XVI-A Analysis of Income-Produc	I		T	512 512 514	(e)
Enter gross amounts unless otherwise indicated	Unrelated bu	(b)	Excluded by section (c)	(d)	Related or exempt function income
1 Program service revenue	Business code		Exclusion code	A mount	(See Instructions)
a b					
c					
d e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash investments					17
4 Dividends and interest from securities5 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					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c d					
e 12 Subtotal Add columns (b), (d), and (e)					17
13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			:	13	
Part XVI-B Relationship of Activities to		plishment of I	Exempt Purpos	es	
Line No. Explain below how each activity for whith the accomplishment of the foundation's instructions)					
3 Bank Account Interest					

Part XVII	Noncharitable Exempt			insactio	ons and Relations	snips with			
	ganization directly or indirectly en D1(c) of the Code (other than sect	gage	e in any of the following					Yes	No
organizati			(/(/	,					
	from the reporting foundation to a	none	charıtable exempt orga	nızatıon o	f				
(1) Cash							1a(1)		No
(2) Other	rassets						1a(2)		No
b O ther tran	nsactions								
(1) Sales	of assets to a noncharitable exer	npt d	organization				1b(1)		No
(2) Purch	nases of assets from a noncharital	ole e	xempt organization				1b(2)		No
(3) Renta	al of facilities, equipment, or other	asse	ets				1b(3)		No
(4) Reiml	bursement arrangements						1b(4)		No
(5) Loans	s or loan guarantees						1b(5)		No
(6)Perforr	mance of services or membership	or fu	ndraising solicitations.				1b(6)		No
c Sharing of	facılıtıes, equipment, mailing lists	s, oth	her assets, or paid emp	loyees.			1c		No
								5	
ili aliy tial	isaction of sharing arrangement, s	SIIOW	in column (a) the valu	e or the go	Jous, other assets, or	services receive	:u		
(a) Line No	(b) Amount involved (c) Name of	nonc	charitable exempt organizati	on (d) Description of transfers,	transactions, and sha	ring arra	ngemer	nts
described	ın section 501(c) of the Code (otl						. 广Y 6	es 🔽	No
	(a) Name of organization		(b) Type of orga	nızatıon	(c)	Description of relati	onship		
Sign the burnfor the hard	pest of my knowledge and belief, it mation of which preparer has any	ıs tr	rue, correct, and compl wledge 2016-05-	ete Decla	******	May treturn with tbelow	r) is ba: he IRS di he prepa	sed on	all nis vn
	·					(see ı	nstr)?	Yes	Vо
	Print/Type preparer's name EDWARD J BELL	Р	reparer's Signature		Date 2016-05-13	Check if self- employed ▶	PTIN	l	
Paid Preparer	Firm's name ► GRIES FINANCIAL LLC	•				Firm's EIN ▶			
Use Only	Firm's address 🕨					Phone no			
	ffacilities, equipment, mailing lists, other assets, or paid employees. Lic No wer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value dids, other assets, or services given by the reporting foundation if the foundation received less than fair market value dids, other assets, or services given by the reporting foundation if the foundation received less than fair market value maction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and shaning arrangements (b) Amount involved (c) Name of nonchantable exempt organization of transfers, transactions, and shaning arrangements (a) Description of transfers, transactions, and shaning arrangements (b) Amount involved (c) Name of nonchantable exempt organizations in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (h) Type of organization of preparer (other than taxpayer) is based on all materials of the proparer and the proparer show help to the proparer show hel								
	1								

If recipient is an individual,	Foundation	Purpose of grant or	A mount
any foundation manager or substantial contributor	recipient	Contribution	
	exempt	General Fund	1,500
	exempt	General Fund	15,000
	exempt	General Fund	45,000
	exempt	General Fund	5,000
	exempt	General Fund	5,000
	exempt	General Fund	15,000
	exempt	General Fund	2,500
	exempt	General Fund	50,000
	exempt	General Fund	1,000
	exempt	General Fund	5,000
	exempt	General Fund	10,000
	exempt	General Fund	40,000
	exempt	General Fund	10,000
	exempt	General Fund	750
	exempt	General Fund	200
	show any relationship to any foundation manager	show any relationship to any foundation manager or substantial contributor exempt exempt	show any relationship to any foundation manager or substantial contributor exempt exempt General Fund exempt General Fund

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
Huntington Theatre Company 264 Huntington Ave Boston, MA 02115		exempt	General Fund	10,000
PMC Jimmy Fund 77 Fourth Ave Needham Heights, MA 02494		exempt	General Fund	250
Francis Ouimet Scholarship Fund 300 Arnold Palmer Blvd Norton, MA 02766		exempt	General Fund	250
Museum of Fine Arts Boston 465 Huntington Ave Boston, MA 02115		exempt	General Fund	30,000
Wildlife Conservation Society 2300 Southern Blvd Bronx,NY 10460		exempt	General Fund	1,000
African Wildlife Foundation 1400 Sixteenth St NW Suite 120 Washington, DC 20036		exempt	General Fund	300
Smile Train PO Box 96231 Washington, DC 20090		exempt	General Fund	250
CARE PO Box 9569 Merrifield, VA 22116		exempt	General Fund	250
Museum of Fine Arts Boston 465 Huntington Ave Boston, MA 02460		exempt	General Fund	20,000
Discalded Inc(Mark Morris Dance Group) 3 Lafayette Ave Brooklyn,NY 11217		exempt	General Fund	1,000
Massachusetts Historical Society 1154 Boylston Street Boston, MA 02215		exempt	General Fund	1,000
Museum of Modern Art 11 West 53rd St New York, NY 10019		exempt	Gerneral Fund	360
ASPCA 424 East 92nd St New York, NY 10128		exempt	General Fund	500
Walden Woods Project 44 Baker Road Lincoln, MA 01773		exempt	General Fund	1,000
The Elephant Sanctuary PO Box 393 Hohenwald,TN 38462		exempt	General Fund	500
Total			▶ 3a	339,510

Offil 990F1 Part AV Line 5 - Gra				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MSPCA- Angell 350 South Huntington Ave Boston, MA 02130		exempt	General Fund	500
Sarah Lawrence College 1 Mead Way Bronxville, NY 10708		exempt	General Fund	1,500
Marine Toys for Tots Foundation 18251 Quantico Gateway Dr Triangle,VA 22172		exempt	General Fund	250
WGBH 1 Guest Street Brighton, MA 02135		exempt	General Fund	10,000
WGBH 1 Guest Street Brighton, MA 02135		exempt	General Fund	10,000
American Repertory Theater 64 Brattle St Cambridge, MA 02138		exempt	General Fund	10,000
Metropolitan Opera Guild 70 Lincoln Square New York, NY 10023		exempt	General Fund	2,000
Boston Symphony Orchestra 301 Massachusetts Ave Boston,MA 02115		exempt	General Fund	8,000
New England Conservatory of Music 290 Huntington Ave Boston, MA 02115		exempt	General Fund	15,000
Opera America 330 Seventh Ave New York, NY 10001		exempt	General Fund	2,500
Vincent Memorial Hospital 55 Fruit St Brighton, MA 02135		exempt	General Fund	5,000
AFRICAN WILDLIFE FOUNDATION 1400 Sixteenth St Suite 120 Washington, DC 20036		exempt	General Fund	500
Buddy Dog Humane Society 151 Boston Post Road Sudbury, MA 01776		exempt	General Fund	150
Marble House Project 1161 Dorset West Rd Dorset, VT 05251		exempt	General Fund	300
CARE PO Box 1870 Merrifield, VA 22116		exempt	General Fund	250
Total				339,510

		_		_
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	A mount
a Paid during the year				
Kids Wish Network PO Box 9569 Wilton,NH 03086		exempt	General Fund	200
Smile Train PO Box 96231 Washington, DC 20090		exempt	General Fund	250
Wildlife Conservation Society 2300 Southern Blvd Bronx,NY 10460		exempt	General Fund	500
Total			▶ 3a	339,510

TY 2015 Other Expenses Schedule

Name: The Edward Lee and Slocumb Hollis Perry Foundation

EIN: 31-1621824

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Service Fees				

TY 2015 Taxes Schedule

Name: The Edward Lee and Slocumb Hollis Perry Foundation

EIN: 31-1621824

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Ohio Taxes	50	50		

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As Filed Data -

DLN: 93491134002376

_N. 93491134002376

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

		31-1621824			
Organization type (che	ck 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 found.	undation			
	□ 501(c)(3) taxable private foundation				
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, co from any one contributor Complete Parts I and II See instructions for de				
Special Rules					
under sections 50 received from any	on described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $99(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 99 one contributor, during the year, total contributions of the greater of (1 r (ii) Form 990-EZ, line 1 Complete Parts I and II	90-EZ), Part II, line 13, 16a, or 16b, and that			
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ otal contributions of more than \$1,000 <i>exclusively</i> for religious, charitable of cruelty to children or animals. Complete Parts I, II, and III	· · · · · · · · · · · · · · · · · · ·			
during the year, of this box is checked purpose Do not do	on described in section $501(c)(7)$, (8) , or (10) filing Form 990 or 990-EZ contributions $exclusively$ for religious, charitable, etc., purposes, but noted, enter here the total contributions that were received during the year complete any of the parts unless the General Rule applies to this organile, etc., contributions totaling \$5,000 or more during the year	such contributions totaled more than \$1,000 If for an exclusively religious, charitable, etc, nization because it received nonexclusively			
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)

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,

Name of organization

The Edward Lee and Slocumb Hollis Perry Foundation

Employer identification number 31-1621824

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	HELEN WADE GREENE CHARITABLE TRUST 127 Public Square	\$ 320,000	Person Payroll	고
	Cleveland, O H 4 4 1 1 4	<u>φ 920,000</u>	Noncash (Complete Part II for contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person Payroll	Г Г
		\$	Noncash (Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		\$	Payroll	Γ
			Noncash (Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		\$	Payroll	Γ
			Noncash (Complete Part II fo	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash (Complete Part II for contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash (Complete Part II fo	or noncash

Name of organization The Edward Lee and Slocumb Hollis Perry Foundation		Employer identification number		
The Edward Lee an	d Slocumb Hollis Perry Foundation	31-1621824		
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	
		s		
(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	
		s		
(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-E∠, or 990-PF) (2015)

Page 4

Name of organizatio The Edward Lee and	on Slocumb Hollis Perry Foundation		mployer identification number
total mo line entr of \$1,000	re than \$1,000 for the year from any o	utions to organizations describe one contributor. Complete colun III, enter the total of exclusively mation once. See instructions.)	ad in section 501(c)(7), (8), or (10) that mns (a) through (e) and the following religious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee