



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

OMB No 1545-0052

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue ServiceDo 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.

For calendar year 2015 or tax year beginning

, and ending

Name of foundation Northern Bank & Trust Charitable Foundation, Inc.		A Employer identification number 46-1606139
Number and street (or P.O. box number if mail is not delivered to street address) 275 Mishawum Road	Room/suite	B Telephone number 781-569-5400
City or town, state or province, country, and ZIP or foreign postal code Woburn, MA 01801		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 397.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	97,035.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	35.	35.		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	97,070.	35.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees Stmt 1	1,525.	225.		1,300.
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
23 Other expenses Stmt 2	35.	0.		35.	
24 Total operating and administrative expenses. Add lines 13 through 23	1,560.	225.		1,335.	
25 Contributions, gifts, grants paid	133,400.			133,400.	
26 Total expenses and disbursements. Add lines 24 and 25	134,960.	225.		134,735.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<37,890.>				
b Net investment income (if negative, enter -0-)		0.			
c Adjusted net income (if negative, enter -0-)			N/A		

523501
11-24-15

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139

Page 2

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	38,287.	397.	397.	
	2 Savings and temporary cash investments				
	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				
	7 Other notes and loans receivable ▶				
	Less: allowance for doubtful accounts ▶				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
		11 Investments - land, buildings, and equipment: basis ▶			
Less accumulated depreciation ▶					
12 Investments - mortgage loans					
13 Investments - other					
14 Land, buildings, and equipment: basis ▶					
Less accumulated depreciation ▶					
15 Other assets (describe ▶)					
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		38,287.	397.	397.	
Liabilities		17 Accounts payable and accrued expenses			
		18 Grants payable			
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ▶)				
	23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds	0.	0.		
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
	29 Retained earnings, accumulated income, endowment, or other funds	38,287.	397.		
30 Total net assets or fund balances	38,287.	397.			
31 Total liabilities and net assets/fund balances	38,287.	397.			

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	38,287.
2 Enter amount from Part I, line 27a	2	<37,890.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	397.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	397.

523511
11-24-15

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139 Page 3

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	122,136.	58,593.	2.084481
2013	55,947.	34,137.	1.638896
2012	0.	19,700.	.000000
2011			
2010			

2 Total of line 1, column (d)	2	3.723377
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	1.241126
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	17,173.
5 Multiply line 4 by line 3	5	21,314.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	21,314.
8 Enter qualifying distributions from Part XII, line 4 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.	8	134,735.

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139

Page 4

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments:			
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		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

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

N/A

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139

Page 5

Part VII-A Statements Regarding Activities (continued)

	Yes	No
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	X
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	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X
14 The books are in care of ► Francis Kenney Telephone no. ► 781-569-5400 Located at ► 275 Mishawum Road, Woburn, MA ZIP+4 ► 01801		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A ► <input type="checkbox"/>	1b	
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	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years ► N/A 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.) N/A c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►	2b	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	X

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139

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:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A** ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A**

5b

X

6b

X

7b

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 3		0.	0.	0.

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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

Form 990-PF (2015)

Northern Bank & Trust Charitable
Foundation, Inc.

Form 990-PF (2015)

46-1606139 Page 7

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

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) Compensation
NONE		

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
See Statement 4	5,000.
2	
3	
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 lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139 Page 8

Part X **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	17,435.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	17,435.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	17,435.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	262.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,173.
6 Minimum investment return. Enter 5% of line 5	6	859.

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

1 Minimum investment return from Part X, line 6	1	859.
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	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	859.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	859.
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	859.

Part XII **Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	134,735.
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	134,735.
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	134,735.

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

Form 990-PF (2015)

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139 Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				859.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				54,208.
e From 2014				119,206.
f Total of lines 3a through e	173,414.			
4 Qualifying distributions for 2015 from Part XII, line 4: ► \$				134,735.
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2015 distributable amount				859.
e Remaining amount distributed out of corpus	133,876.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	307,290.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	307,290.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				54,208.
d Excess from 2014				119,206.
e Excess from 2015				133,876.

**Northern Bank & Trust Charitable
Foundation, Inc.**

Form 990-PF (2015)

46-1606139 Page 11

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Boys & Girls Club of Greater Billerica 19 Campbell Road Billerica, MA 01821	N/A	PC	General Operating Support	5,000.
Boys & Girls Club Woburn 1 Charles Gardner Lane Woburn, MA 01801	N/A	PC	Support low to moderate income children	5,000.
Budget Buddies 14 High Street Chelmsford, MA 01824	N/A	PC	Financial Literacy Program	2,500.
Community Supper and Food Pantry 235 Summer Road, Suite 205 Boxborough, MA 01719	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
Cor Unum Meal Center 118 South Broadway Lawrence, MA 01843-1427	N/A	PC	General Operating Support	1,500.
Total	See continuation sheet(s)			133,400.
b Approved for future payment				
None				
Total				0.

Form 990-PF (2015)

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

	Yes	No
--	-----	----

1a(1)	X
-------	---

1a(2)	X
-------	---

--	--	--

1b(1)	X
-------	---

1b(2)		X
-------	--	---

1b(3)		X
-------	--	---

1b(4)		X
-------	--	---

1b(5)		X
-------	--	---

1b(6)		X
-------	--	---

1c		X
----	--	---

Other assets,

how in

☐ Yes ☒ No

Form **990-PF** (2015)

Northern Bank & Trust Charitable
Foundation, Inc.

46-1606139

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Emerson Healthcare Foundation 133 Old Road to Nine Acre Corner Concord, MA 01742	N/A	PC	16th Annual Run-Walk for Cancer to support patient care	2,500.
Friends of the Sudbury Senior Citizens 52 Concord Road Sudbury, MA 01766	N/A	PC	Assist low and moderate income seniors	2,000.
Goodnow Library Foundation 21 Concord Road Sudbury, MA 01776	N/A	PC	Library technology upgrades	1,000.
Habitat for Humanity of Greater Lowell At Hicks Farm, 124 Main Street Westford, MA 01886	N/A	PC	General Operating Support	5,000.
Heading Home The Schrafft Center, 529 Main Street, Suite 100 Charlestown, MA 02129	N/A	PC	General Operating Support	10,000.
Heather Piazza and Bentley University c/o Bentley University, 175 Forest Street Waltham, MA 02452	None	I	2015 James McGarry Scholarship	5,000.
Hope Sudbury P.O. Box 802 Sudbury, MA 01776	N/A	PC	Assist low income families in need	2,500.
Joyal Capital Management Foundation 50 Resnik Road Plymouth, MA 02360	N/A	PC	Help low income children obtain sporting equipment and clothing	2,500.
Lincoln-Sudbury All Sports Booster Club, Inc. c/o David McCormick, 55 Hunt Road Sudbury, MA 01766	N/A	PC	Assist the sports programs	2,500.
Loaves and Fishes 234 Barnum Road Devens, MA 01434	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
Total from continuation sheets				117,400.

Northern Bank & Trust Charitable
Foundation, Inc.

46-1606139

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Margaret Fuller Neighborhood House, Inc. 71 Cherry Street Cambridge, MA 02139	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	1,000.
Merrimack Valley Food Pantry 735 Broadway Street Lowell, MA 01854	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
Minuteman Senior Services 26 Crosby Drive Bedford, MA 01730	N/A	PC	Money Management Program	2,500.
Mission of Deeds 6 Chapin Avenue Reading, MA 01867	N/A	PC	Housing	2,500.
Mystic Valley Elder Services 300 Commercial Street, #19 Malden, MA 02148	N/A	PC	Support elders and adults with disabilities to live independently	2,500.
Nashoba Learning Group 10 Oak Park Drive Bedford, MA 01730	N/A	PC	General Operating Support	10,900.
National Brain Tumor Society 55 Chapel Street, Suite 200 Newton, MA 02458	N/A	PC	General Operating Support	25,000.
NuPath 147 New Boston Street Woburn, MA 01801	N/A	PC	General Operating Support	2,500.
People Helping People P.O. Box 343 Burlington, MA 01803	N/A	PC	General Operating Support	5,000.
Reading Clergy Association 6 Salem Street Reading, MA 01867	N/A	PC	Reading Food Pantry	750.
Total from continuation sheets				

Northern Bank & Trust Charitable
Foundation, Inc.

46-1606139

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Roudenbush Community Center 65 Main Street Westford, MA 01886	N/A	PC	Support participation of low income families in educational and enrichment programs	2,500.
Servants Heart 200 Franklin Street Melrose, MA 02176	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
Sudbury Community Food Pantry P.O. Box 751 Sudbury, MA 01776	N/A	PC	\$2,000-Feed low income families; \$250-Replenish non-perishable food items	2,250.
Sunshine Gals of Billerica 6 Windsor Road Billerica, MA 01821	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
The Elizabeth Peabody House Emergency Food Pantry 277 Broadway Somerville, MA 02139	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	1,000.
Town of Westford Tax Relief for the Elderly and Disabled Fund 45 Main Street Westford, MA 01866	N/A	GOV	General Operating Support	1,000.
Westford Food Pantry 20 Pleasant Street Westford, MA 01886	N/A	PC	Replenish non-perishable food items for low and moderate income families in need	2,000.
Winchester Hospital Foundation 611 Main Street Winchester, MA 01890	N/A	SO I	Winchester Hospital's charity care for low and moderate income families	2,500.
Woburn Council of Social Concern 2 Merrimac Street Woburn, MA 01801	N/A	PC	General Operating Support	10,000.
YMCA of Metro North-Melrose 497 Main Street Melrose, MA 02176	N/A	PC	General Operating Support	2,500.
Total from continuation sheets				

523631
04-01-15

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

2015

Name of the organization

Northern Bank & Trust Charitable
Foundation, Inc.

Employer identification number

46-1606139

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

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)

Name of organization

Northern Bank & Trust Charitable
Foundation, Inc.

Employer identification number

46-1606139

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Northern Bank & Trust 275 Mishawum Road Woburn, MA 01801	\$ 97,035.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Northern Bank & Trust Charitable
Foundation, Inc.

46-1606139

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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

Northern Bank & Trust Charitable
Foundation, Inc.

46-1606139

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

Use duplicate copies of Part III if additional space is needed

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

Form 990-PF	Accounting Fees			Statement	1
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Accounting Fees	1,525.	225.		1,300.	
To Form 990-PF, Pg 1, ln 16b	1,525.	225.		1,300.	

Form 990-PF	Other Expenses			Statement	2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Filing Fees	35.	0.		35.	
To Form 990-PF, Pg 1, ln 23	35.	0.		35.	

Form 990-PF	Part VIII - List of Officers, Directors Trustees and Foundation Managers	Statement	3
-------------	-----------------------------------------------------------------------------	-----------	---

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
James J. Mawn 275 Mishawum Road Woburn, MA 01801	President/Director 0.50	0.	0.	0.
Francis Kenney 275 Mishawum Road Woburn, MA 01801	Treasurer/Director 0.50	0.	0.	0.
Donald Queenin 275 Mishawum Road Woburn, MA 01801	Clerk/Director 0.50	0.	0.	0.
Katie Gatcomb 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Mary Elizabeth Mawn-Ferullo 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Alicia J. Mawn-Mahlau 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Totals included on 990-PF, Page 6, Part VIII		0.	0.	0.

Form 990-PF	Summary of Direct Charitable Activities	Statement	4
-------------	-----------------------------------------	-----------	---

Activity One

Northern Bank & Trust Charitable Foundation awards up to 10 scholarships of \$5,000 or less to candidates who are accepted as full-time students in a bachelor's degree program and who have a parent or legal guardian employed as an active firefighter or police officer in the geographic area served by the Foundation.

To Form 990-PF, Part IX-A, line 1

Expenses

5,000.

Northern Bank & Trust Charitable Foundation
EIN: 46-1606139



[About](#) | [Rates & Calculators](#) | [Locations & Hours](#) | [Contact](#)

Search our site:

ACCOUNT ACCESS

Select your service

[Online Banking](#)

[Log In](#)

[Personal](#)

[Business](#)

[Wealth Management](#)

[Financial Answer Center](#)

[Customer Service Center](#)



About > Community Giving

Northern Bank & Trust Company is committed to supporting local charitable organizations within the following communities. Acton, Arlington, Bedford, Belmont, Billerica, Burlington, Cambridge, Carlisle, Chelmsford, Concord, Lexington, Lincoln, Littleton, Malden, Maynard, Medford, Melrose, North Reading, Reading, Somerville, Stoneham, Sudbury, Wakefield, Waltham, Watertown, Wayland, Westford, Weston, Wilmington, Winchester or Woburn, through sponsorships and the Northern Bank & Trust Charitable Foundation

Charitable Foundation

Through the Northern Bank & Trust Charitable Foundation we can support local non-profit 501(c)(3) organizations with larger contributions, typically from \$1,000 to \$10,000



**Northern Bank & Trust
Charitable Foundation**

Organizations we support through the Foundation include, but are not limited to, those that support educational opportunities or community development within one of the towns listed above

Requests are reviewed on a quarterly basis [Click here to apply.](#)

James E. McGarry, Jr. Scholarship for 2016

Established to honor the late James "Jim" McGarry, a former Woburn resident, for his 50 years of service to Northern Bank & Trust Company. It also pays tribute to his lifelong affinity for the fire and police departments in his city.

The \$5,000 scholarship will be awarded to a graduating high school senior with a parent or legal guardian who is an active firefighter or police officer employed in one of the following communities: Acton, Arlington, Bedford, Belmont, Billerica, Burlington, Cambridge, Carlisle, Chelmsford, Concord, Lexington, Lincoln, Littleton, Malden, Maynard, Medford, Melrose, North Reading, Reading, Somerville, Stoneham, Sudbury, Wakefield, Waltham, Watertown, Wayland, Westford, Weston, Wilmington, Winchester, and Woburn

[Click here for the application and scholarship guidelines.](#)

Please note Northern Bank & Trust Company does not make contributions of any kinds to political, religious, individuals, or discriminatory organizations

[back to top](#)



TAKE ACTION

- [Community Involvement](#)
- [Bank News](#)

CONTACT US

- [Call 800.273.6908](#)
- [Visit one of our offices](#)
- [Use our contact form](#)



275 Mishawum Road • Woburn, MA 01801 • 800 273 6908
© 2016, Northern Bank & Trust Company All rights reserved



[Security & Privacy](#) | [Legal](#)

Northern Bank & Trust Charitable Foundation

EIN: 46-1606139



Northern Bank & Trust Charitable Foundation

GRANT APPLICATION		
Legal Name of Organization _____		
Address _____		
Contact _____	Name of Executive Director _____	
Title _____	Title _____	
Phone _____	Organization Tax ID # _____	
Fax _____	Total Number of Board Members _____	Volunteers _____
Email _____	Total Number of Board Staff Full Time _____	Part Time _____
Total Annual Organization Budget _____		Fiscal Year End _____
Is entity a national organization? YES <input type="checkbox"/> NO <input type="checkbox"/> IRS 501(c)(3) nonprofit? YES <input type="checkbox"/> NO <input type="checkbox"/>		
<small>If no, identify your fiscal agent and attach the written agreement from the fiscal agent</small>		
PROJECT PROPOSAL NARRATIVE – Complete the following fields, or attach a narrative of no longer than 2 pages		
Brief Summary of the Proposal _____		
Description of specific request, including goals and objectives: _____		
Brief Summary of organization's mission: _____		
Describe how your organization benefits low-to-moderate income individuals within any or all of the following communities — Acton, Arlington, Bedford, Belmont, Billerica, Burlington, Cambridge, Carlisle, Chelmsford, Concord, Lexington, Lincoln, Littleton, Malden, Maynard, Medford, Melrose, North Reading, Reading, Somerville, Stoneham, Sudbury, Wakefield, Waltham, Watertown, Wayland, Westford, Weston, Wilmington, Winchester or Woburn		
Additional information about the organization's overall programs and project or capital support requested. _____		
Specific activities and timetable for meeting your stated objectives: _____		
Identify those organizations, if any, with which you collaborate and other resources which address this issue(s) in the proposal _____		
PROJECT BUDGET		
Amount Requested \$ _____		
Type of Request (check applicable) <input type="checkbox"/> Operating <input type="checkbox"/> Project <input type="checkbox"/> Capital <input type="checkbox"/> Other _____		
Use this field or attach a narrative of no longer than 1 page to describe the operating, project, capital, or other improvement for which you are requesting funding, including all associated costs and the period of time that the budget covers.		
Signature of Authorized Signer _____	Title _____	Date _____

Northern Bank & Trust Charitable Foundation
EIN: 46-1606139



NORTHERN BANK & TRUST CHARITABLE FOUNDATION, INC.

2016 SCHOLARSHIP APPLICATION

DEADLINE

The application deadline is **May 2, 2016**. To be considered by the Selection Committee, a completed application package must be postmarked or emailed on or before **May 2, 2016**. See Application Package Summary on page 6 for the requirements of a completed application package. **The Selection Committee will not consider late applications or late attachments.**

ELIGIBILITY REQUIREMENTS

Applicants must be accepted as a full-time matriculated students at a college or university providing a course of study leading to the awarding of a bachelor's degree; and be a graduating high school senior with a parent or legal guardian who is an active firefighter or police officer employed in one of the following communities: Acton, Arlington, Bedford, Belmont, Billerica, Burlington, Cambridge, Carlisle, Chelmsford, Concord, Lexington, Lincoln, Littleton, Malden, Maynard, Medford, Melrose, North Reading, Reading, Somerville, Stoneham, Sudbury, Wakefield, Waltham, Watertown, Wayland, Westford, Weston, Wilmington, Winchester, and Woburn.

I. PERSONAL INFORMATION

Name: _____
(Mr. /Ms.) First Middle Last

Home Address: _____

Phone #: (____)____ - _____ E-mail: _____

**Please note that our primary form of communication with you will be via e-mail.*

Date of Birth: ____ / ____ / ____

Northern Bank & Trust Charitable Foundation

NORTHERN BANK & TRUST
CHARITABLE FOUNDATION, INC.

EIN: 46-1606139

Applicant's Name: _____

II. ACADEMIC INFORMATION

High School Attended: _____ Graduation Date: Mo. _____ Yr. _____

Cumulative Grade Point Average: _____ Class Rank: _____

Highest SAT Reasoning Test: Math _____ Critical Reading _____ Writing _____

ACT: Single highest composite score _____

🍏 Attach a copy of your official high school transcript
AND

🍏 Copies of your SAT and/or ACT printed score report(s).

College you will be enrolled in full time during the 2016-2017 academic year?

Major field of study you plan to pursue (if known): _____

III. PERSONAL EXPERIENCE

(Please submit each section on a separate sheet with your name on the top right corner of each sheet.)

Extracurricular Experience: List your primary extracurricular activities in the order of their interest to you. Include dates, an estimate of the time commitment, offices held or major accomplishments and a brief description.

Community Service: List your community service and volunteer activities in the order of their interest to you. Include dates, an estimate of the time commitment, offices held or major accomplishments and a brief description.

Work Experience: List paid employment since the beginning of high school, including the summer. Include the address of the employer, the name of a supervisor, the specific job or duties and the number of hours worked per week.

Honors and Scholarships: List any honors or awards, academic or non-academic, you have received during high school. Provide a brief description.

Northern Bank & Trust Charitable Foundation

NORTHERN BANK & TRUST
CHARITABLE FOUNDATION, INC.

EIN: 46-1606139

Applicant's Name: _____

IV. ADDITIONAL INFORMATION (OPTIONAL)

Do you have any family, financial or other responsibilities or experiences that the Selection Committee should consider when reviewing your application? If yes, attach explanation on a separate sheet (with your name on the top right corner).

V. ESSAY

Write an essay on "What it means to me to have my parent or guardian involved in serving our community". The essay should be approximately 250-500 words, type-written and double-spaced, with your name on the top right corner of the page(s).

Northern Bank & Trust Charitable Foundation
EIN: 46-1606139

NORTHERN BANK & TRUST
CHARITABLE FOUNDATION, INC.

Applicant's Name: _____

VI. DEPARTMENT CERTIFICATION (POLICE or FIRE Department Official)

I hereby attest that _____ (the parent or legal guardian)
named in this application is a member in good standing of our department.

Signature of Department Official _____ Date _____

Printed Name of Department Official _____

Department _____

The parent or legal guardian must be an active firefighter or police officer employed in one of the following communities: Acton, Arlington, Bedford, Belmont, Billerica, Burlington, Cambridge, Carlisle, Chelmsford, Concord, Lexington, Lincoln, Littleton, Malden, Maynard, Medford, Melrose, North Reading, Reading, Somerville, Stoneham, Sudbury, Wakefield, Waltham, Watertown, Wayland, Westford, Weston, Wilmington, Winchester, and Woburn.

Northern Bank & Trust Charitable Foundation

NORTHERN BANK & TRUST
CHARITABLE FOUNDATION, INC.

EIN: 46-1606139

Applicant's Name: _____

VII. CERTIFICATIONS/AUTHORIZATIONS

(Please initial in the appropriate space.)

I authorize my school officials to release additional information about my academic, discipline and attendance records to the Northern Bank & Trust Charitable Foundation, Inc., upon request **(Please send current transcript and test scores as outlined on page 6).**

Yes _____ No _____

I authorize the Northern Bank & Trust Charitable Foundation, Inc., to review any social networking websites or so-called "blogs" of which I am a member or to which I am a contributor, including my personal webpages or accounts.

Yes _____ No _____

I certify that the information provided on this application and on all attachments is complete and true and my original work. I hereby apply for consideration of the James E. McGarry, Jr. Scholarship. I agree to be bound by all rules and regulations governing the scholarship. I also hereby consent to and authorize the use, reproduction, distribution and publication of my name, photograph, and any part of my application, including written essays, for any purpose relating to this scholarship, without compensation to me. I understand and agree that my name, photograph and/or likeness may be copied and distributed, in the sole discretion of the scholarship, by means of various media, including video, websites and/or newspapers.

Applicant Signature

Date

Northern Bank & Trust Charitable Foundation

NORTHERN BANK & TRUST
CHARITABLE FOUNDATION, INC.

EIN: 46-1606139

Applicant's Name: _____

Application Package Summary

Your application package should contain the following:

1. *Signed application form. Be sure your name is on the top right corner of every page of the application and attachments.*
2. *School transcript(s).*
3. *SAT/ACT score reports.*
4. *Personal experience sheets. (Section III)*
5. *Additional Information. (Section IV - Optional)*
6. *Essay. (Section V)*
7. *Department Certification. (VI)*
8. *Certification/Authorization. (VII)*

The application deadline is May 2, 2016. To be considered by the Selection Committee, a completed application package must be postmarked or emailed on or before May 2, 2016. The Selection Committee will not consider late applications or late attachments.

All finalists must be interviewed by the Selection Committee.

Please mail the application package to:

Northern Bank & Trust Charitable Foundation, Inc.
c/o Mary Elizabeth Mawn
275 Mishawum Road
Woburn, MA 01801

Applications can also be scanned and emailed to mcgarryscholarship@nbtc.com.