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Form 990-PF

Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 2016 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052 Open to Public Inspection

Name of foundation GEMAYEL FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 11 MEACHEN LANE City or town, state or province, country, and ZIP or foreign postal code SUDBURY, MA 01776-1399 A Employer identification number 47-7094302 B Telephone number 978-443-4543 C if exemption application is pending, check here	
Number and street (or P O box number if mail is not delivered to street address) 11 MEACHEN LANE City or town, state or province, country, and ZIP or foreign postal code SUDBURY, MA 01776-1399 Room/suite 978-443-4543 C If exemption application is pending, check here	
Number and street (or P O box number if mail is not delivered to street address) 11 MEACHEN LANE City or town, state or province, country, and ZIP or foreign postal code SUDBURY, MA 01776-1399 Room/suite 978-443-4543 C If exemption application is pending, check here	
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City or town, state or province, country, and ZIP or foreign postal code SUDBURY, MA 01776-1399	
SUDBURY, MA 01776-1399	
	•
G Check all that apply: X Initial return Initial return of a former public charity D 1 Foreign organizations, check here	•
Final return Amended return	
Address change Name change 2. Foreign organizations meeting the 85% test, check here and attach computation	•
H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated	
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here	•
I Fair market value of all assets at end of year J Accounting method: X Cash Cash F If the foundation is in a 60-month termination	n
(from Part II, col. (c), line 16) Uther (specify) under section 507(b)(1)(B), check here	
▶\$ 1,008,898. (Part I, column (d) must be on cash basis)	
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not expenses per books (a) Revenue and (b) Net investment income for charitable purposes.	ts
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income for charitable purpor (cash basis only	
1 Contributions, gifts, grants, etc., received 1,001,808. N/A	
2 Check In the foundation is not required to attach Sch. B	
3 Interest on savings and temporary cash investments	
4 Dividends and interest from securities 390. STATEMENT	1
5a Gross rents	
D Net rental income or (loss)	
62 Net gain or (loop) from pale of specto pet on line 10	
Gross sales price for all assets on line 6a	
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)	
8 Net short-term capital gain	
9 Income modifications	
10a Gross sales less returns and allowances	
D Less Cost of goods sold	
c Gross profit or (loss)	
11 Other income	
12 Total. Add lines 1 through 11 1,002,198. 390.	
13 Compensation of officers, directors, trustees, etc 0.	0.
14 Other employee salaries and wages	
15 Pension plans, employee benefits	
9 16a egal fees	
b Accounting feess ECEN/ED	
B Accounting reasurement of the professional free control of the p	
17 Interest S ALIC D 0 2016 O	
b Accounting fees CEVED c Other professional fees 17 Interest S AUG 2 2 2016 19 Depreciation and depletion 20 Occupancy OGDEN, UT 21 Travel, conferences, and meetings 22 Printing and publications	
19 Depreciation and depletion	
E 20 Occupancy OGDEN, UT	
21 Travel, conferences, and meetings	
22 Printing and publications	
22 Other expenses	
23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 0. 0.	
expenses. Add lines 13 through 23	0.
25 Contributions, gifts, grants paid	0.
26 Total expenses and disbursements.	<u> </u>
Add lines 24 and 25	0.
27 Subtract line 26 from line 12:	<u> </u>
a Excess of revenue over expenses and disbursements 1,002,198.	
b Net investment income (if negative, enter -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

급		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
٦,	art	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		710,003.	710,003.
	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 ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 2	0.	214,955.	222,235.
	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 ► MUTUAL FUNDS)	0.	77,240.	76,660.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	1,002,198.	1,008,898.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons		· · · · · · · · · · · · · · · · · · ·	
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ည	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
8	26				
Ē		Foundations that do not follow SFAS 117, check here			
ᅙ		and complete lines 27 through 31		•	
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds	0.	0.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
at A	29	Retained earnings, accumulated income, endowment, or other funds	0.	1,002,198.	
ž	30	Total net assets or fund balances	0.	1,002,198.	
	24	Total liabilities and not see to the delegand	0.	1,002,198.	
_				1,002,196.	
<u>P</u>	art	Analysis of Changes in Net Assets or Fund B	salances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	0.
2	Ente	r amount from Part I, line 27a		2	1,002,198.
3	Othe	r increases not included in line 2 (itemize)	· 	3	0.
4	Add	lines 1, 2, and 3		4	1,002,198.
5	Decr	eases not included in line 2 (itemize)			0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	1,002,198.
					Form 990-PF (2015)

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GEMAYEL FAMILY FOUNDATION

	AYEL FAMILY I					4	7-709	4302	Page 3
Part IV Capital Gains	and Losses for Tax	on investment	Income						
(a) List and desc	ribe the kind(s) of property s arehouse; or common stock,	sold (e.g., real estate,		(p) l	low acquired - Purchase	(c) Date : (mo., d	acquired	(d) Dat (mo., d	
	common stock,	200 SHS. MILG GO.)		D	- Donation	(1110., 0	ay, yi./	(1110., 0	ay, yr./
<u>1a</u>				 		 			
b NO	NE								
<u>C</u>				┼		<u> </u>			
<u>d</u>						1			
<u>e</u>	(0 D	-4 1 (1)0-	-44b b	1					
(e) Gross sales price	(f) Depreciation allowe (or allowable)		st or other basis expense of sale			(n) G (e) plus	ain or (loss) s (f) minus (g)	·
<u>a</u>									
<u>b</u>									
C									
<u>d</u>			 						
<u>e</u>			10/01/00						
Complete only for assets shown	T					(I) Gains (C	ol. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			col. (k), but r Losses	(from col. (
a									
b	-								
C									
<u>d</u>									
<u>e</u>									
2 Capital gain net income or (net ca		lso enter in Part I, line enter -0- in Part I, line		}	2				
3 Net short-term capital gain or (lo	ss) as defined in sections 12	22(5) and (6):							
If gain, also enter in Part I, line 8,		```		}					
If (loss), enter -0- in Part I, line 8				لل	3				
	Inder Section 4940	•				ncome			
(For optional use by domestic privat	e foundations subject to the	section 4940(a) tax or	n net investment i	ncome	e.)			N/A	
If section 4940(d)(2) applies, leave t	this part blank.								
Was the foundation liable for the sec			•	riod?				Yes	L No
If "Yes," the foundation does not qua									
1 Enter the appropriate amount in	1	-	rore making any (entries	i.	1		/d\	
(a) Base period years		(b) fying distributions	Net value of ne	(C)	c) (d) Distribution ratio (col. (b) divided by col. (c))				
Calendar year (or tax year beginn	ing in) Aujusteu quaii	iying distributions	Net value of the	Ullulla	ilabie-use ass	9612	(col. (b) div	ided by col	. (C))
2014									
2013		<u></u>							
2012									
2011					-		_		
2010			L				Γ		
9. Tatal of line 1 column (d)									
2 Total of line 1, column (d)	E year bass pared douds t	the total on line O by E	ar hii tha niimha			2	-		-
3 Average distribution ratio for the		the total off fille 2 by 5,	, or by the numbe	rorye	ars		1		
the foundation has been in existe	ence ii iess man o years					3	-		
4 Enter the net value of noncharita	ble-use assets for 2015 from	n Part X, line 5				4			
5 Multiply line 4 by line 3						5			·
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6			_
7 Add lines 5 and 6						7			
8 Enter qualifying distributions fro	m Part XII, line 4					8		-	
If line 8 is equal to or greater that See the Part VI instructions.		rt VI, line 1b, and com	plete that part usi	ng a 1	% tax rate.	<u> </u>			

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Pa	art VI Excise Tax Based on Investment Income (Section 4940	(a), 4940(b), 4940(e), or	1948 -	see i	nstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and ent	ter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if nece	essary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1				8.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth		2				0.
	Add lines 1 and 2	ŕ	3				8.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)	4				0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	•	5				8.
	Credits/Payments:						
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a					
	Exempt foreign organizations - tax withheld at source	6b					
	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d	1				
	Total credits and payments. Add lines 6a through 6d	-	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	hed	8	-			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		•		8.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded	11				
	art VII-A Statements Regarding Activities	Refunded		L			
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it participate or interven	e in		T 1	Yes	No
	any political campaign?	ation of aid it participate of interven	•		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposi	es (see instructions for the definitio	n\?		1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•	•				
	distributed by the foundation in connection with the activities	oop.co or any materials pagiler					
C	Did the foundation file Form 1120-POL for this year?				1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear*			_ ,		
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers.						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendit		_				
-	managers. ► \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IR	IS?			2		x
	If "Yes," attach a detailed description of the activities.				_ -		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	estrument, articles of incorporation.	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	•			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year				4a		X
	o If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			•	5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther;					
	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 sta	te law				
	remain in the governing instrument?				6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	nplete Part II, col. (c), and Part X	V		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ►					
	MA		_				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation	, , ,			8b	х	
9	is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4942(j)(5) for ca	lendar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," co				9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul		STMI	1 3	10	Х	

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Pa	art VII-A Statements Regarding Activities (continued)		1	
			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	<u> </u>	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?	13	X	L
	Website address ► N/A The basic address ► CEODGEG GRAVET	142 4	E 4 2	
14	The books are in care of ► GEORGES GEMAYEL Telephone no. ► 978 - 4			
4-	Located at ► 11 MEACHEN LANE, SUDBURY, MA ZIP+4 ►) T / / 0	1-13	<u>99</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.	T / 3	ـــا
10	and enter the amount of tax-exempt interest received or accrued during the year At any time during entered a year 2015, did the foundation have an interest in any authority are about		I/A Yes	No
16	, , , , , , , , , , , , , , , , , , , ,	40	162	
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for EuCEN Form 114. If "Vec." onter the name of the	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country			
Pá	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
ئــــا	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
1:	During the year did the foundation (either directly or indirectly):		1.00	1
.,	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	İ	İ	
	for the benefit or use of a disqualified person)?	1		
	(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.)	ł		
ı	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	İ	1	
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		1	İ
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1	
	before the first day of the tax year beginning in 2015?	10		х
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)):		1	
	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			1
	before 2015?			
	If "Yes," list the years \blacktriangleright ,,,,	}		
1	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1
	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	2b		
1	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
1	olf "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			1
	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		1	
	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	1	
4	a 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
		- 00	M DE	

Form 990-PF (2015) GEMAYEL FAMILY FOUNDATION			<u>47-70943</u>	<u>02 p</u>	age <u>6</u>
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	8 X No		
(2) Influence the outcome of any specific public election (see section 4955); of	ectly,				
any voter registration drive?	Y6	s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes		s X No			
(4) Provide a grant to an organization other than a charitable, etc., organizatio					
4945(d)(4)(A)? (see instructions)			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?	, or oducational purposco, or		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described				
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	iii riogalations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance (see made	•			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		unad			
expenditure responsibility for the grant?		I/A 🔲 Ye	s No		
		1/A 16	8 NO	1	
If "Yes," attach the statement required by Regulations section 53.494.	' '		İ		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		. .		
a personal benefit contract?	arrannal hanafri an -tt0	Y6	es 🗶 No	<u>_</u>	v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870		□	[]		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attributed by the foundation of the state of th				7b	
Paid Employees, and Contractors		anagers, Higniy	/		
1 List all officers, directors, trustees, foundation managers and their				,	
(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) Expe account, allowan	ense other ices
GEORGES GEMAYEL	TRUSTEE				
11 MEACHEN LANE					
SUDBURY, MA 01776	0.00	0.	0.		0.
MARIE JOSIANE GEMAYEL	TRUSTEE				
11 MEACHEN LANE]				
SUDBURY, MA 01776	0.00	0.	0.		0.
	_				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none	, enter "NONE."	<u> </u>	<u></u>	
(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	(e) Expe account,	ense other
NONE	devoted to position	(0)	compensation	allowan	ices
HONE	1_				
	-		_		
				<u> </u>	
		<u> </u>			
	İ				
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "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 statis	stical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pro	duced, etc.	Exhelises
1N/A		
2	 	
2		1
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 or	lines 1 and 2.	Amount
1 N/A		
2		-
		-
All other program-related investments. See instructions.		
3		
		1
Total. Add lines 1 through 3	>	0.

	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
·	Average monthly fair market value of securities	1a	42,699.
b		1b	101,429.
C		1c	101,427.
d		1d	144,128.
_	Reduction claimed for blockage or other factors reported on lines 1a and		111,120.
Ĭ	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	144,128.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,162.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	141,966.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,889.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)		<u></u>
1	Minimum investment return from Part X, line 6	1	3,889.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	8.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,881.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,881.
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	3,881.
_	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		•
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	· g	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:		
	Suitability test (prior IRS approval required)	_3a	
	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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	•
e	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
_	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	or the section

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				3,881.
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				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$				
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				0.
e Remaining amount distributed out of corpus	0.			
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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				3,881.
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	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				5 000 05 100 151

Form 990-PF (2015) GEMAYEL Part XIV Private Operating F	FAMILY FOU		I A guartier (1)		94302 Page 10
	·		1-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		*	. ▶ ∟	140404340	10(1)(5)
b Check box to indicate whether the found		ng roundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2013	(0) 2014	(6) 2013	(0) 2012	(6) 10(4)
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:			Ì		
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	•			-	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt			1		
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5.000 or m	ore in assets
at any time during				, , , , , , , , , , , , , , , , , , , 	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation w	-	than 2% of the total con	tributions received by th	e foundation hefore the clo	ise of any tax
year (but only if they have contributed					,
NONE					
b List any managers of the foundation w			(or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation ha	as a 10% or greater intere	est			
NONE					
2 Information Regarding Contribut			•		
Check here if the foundation the foundation makes gifts, grants, etc.				not accept unsolicited req	
	· · · · · · · · · · · · · · · · · · ·				u u.
a The name, address, and telephone num					
GEORGES GEMAYEL, 978	•		AIELOGGMAIL	· COM	
<u></u>	DBURY, MA 01		Should maked as		
b The form in which applications should APPLICATIONS ARE IN		•	snoula include:		
c Any submission deadlines:			·		
NONE					
d Any restrictions or limitations on award NONE	is, such as by geographic	aı areas, charitable fields	s, kinds of institutions, o	r other factors:	
1,0111					

Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
·	coue						
a							
b							
C							
d							
e							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments							
4 Dividends and interest from securities			14	390.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal			-				
property	ļ		-				
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory							
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
c							
d							
e		-					
12 Subtotal. Add columns (b), (d), and (e)		0.		390.	0.		
13 Total. Add line 12, columns (b), (d), and (e)					390		
(See worksheet in line 13 instructions to verify calculations.)				' ' _	320.		
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incom	ne is reported	in column (e) of Part XVI-A	contri	huted importantly to the accor	nnlishment of		
the foundation's exempt purposes (other than b				bulca importantly to the accor	inplianiment of		
	, , , , , , ,						
					 		
							
							
							
				·· ·			
							
							
							

I dit XV	Exempt Organ	•		iliu Italisaciiviis a	iliu nelationsii	nps with Noncharit	abie		
1 Did the	organization directly or indir		of the followin	a with any other organization	n described in section	on 501(c) of		29	No
	de (other than section 501(c)					11 30 1(0) 01	-	-3	110
	,				IZALIUIIS!				
	ers from the reporting founda	ILIUII IO A HUNCHARIAL	ne exempt or	yanızatıvı vi.			1.41		v
(1) Ca							1a(1)		X
	ther assets					ŀ	1a(2)		_ <u></u>
	ransactions:							ŀ	
	ales of assets to a noncharital					ī	1b(1)	-	<u>X</u>
٠,	urchases of assets from a no	•	rganization			T T	1b(2)		<u>X</u>
	ental of facilities, equipment,					Г	1b(3)		<u>X</u>
	eimbursement arrangements					-	1b(4)		<u>X</u>
٠,	oans or loan guarantees						1b(5)		<u>X</u>
(6) Po	erformance of services or me	mbership or fundrais	ing solicitatio	ns		_	1b(6)		X X X X X
	g of facilities, equipment, ma					Į	1c		<u>X</u>
	inswer to any of the above is							S,	
	rices given by the reporting fo			ed less than fair market valu	ie in any transaction i	or sharing arrangement, sho	w in		
	n (d) the value of the goods,			<u> </u>				_	
(a) Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions, and sha	ring arran	geme	nts
			N/A						
						·			
	·								
2a Is the	foundation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described	-			
	ion 501(c) of the Code (other	•	-				Yes	X] No
	," complete the following sch		(-//				,		
	(a) Name of org			(b) Type of organization	(c) Description of relationship			
	N/A								
									
				· · · · · · · · · · · · · · · · · · ·					
-									
								_	—
Ü	nder penalties of perjury, I declare	that I have examined this	s return, includir	ng accompanying schedules and	statements, and to the t	pest of my knowledge			
	nd belief, this true, compet, and cor					has any knowledge Return	he IRS dis with the p	orepar	er
Here	Jan VA	>		A. 12016	TRUSTE		Yes	ee ins	¬'
	Signature of officer of trustee	<u></u>		Date	Title	<u>- La</u>	res	Ц.	∐ No
	Print/Type preparer sina		Preparer's s		Date	Check If PTIN			
			09	7 1	1	self- employed			
Paid	STEPHEN GU	MADUKGEK,		Ley lex	08/10/16		2 N C 1	٥,4	
Prepare		TED WACUM	AN TIP	, 	NO/ TO/ TO	Firm's EIN ▶ 04-22	$\frac{3061}{1100}$		
Use On	Thin billion P 2222	ILEK WACUM	אוון איא	U		rumsein > 04-22	1130	1 /	
230 011	<u> </u>	O CAMPUTO	OF OWD	च्या 12mg चर	OOR				
				EET, 13TH FL	IOUR	Dhanna (17 33	0 ~ 0	. ^ ^	
	<u> </u>	STON, MA	<u> </u>	2348		Phone no. 617-33			
						For	m 990 -	۲t	(2015)

Schedule B

(Porm 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.rs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

	G:	EMAYEL FAMILY FOUNDATION	47-7094302
Organiz	ation type (check	one):	
Filers of	f:	Section:	
Form 99	0 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	00-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	ule. See instructions.
General	l Rule		
X	_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II See instructions for determining a contributor	-
Special	Rules		
	sections 509(a)(1 any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	a, or 16b, and that received from
	year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edustruction or animals. Complete Parts I, II, and III	
	year, contribution is checked, enter purpose. Do not	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because ole, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box is, charitable, etc ,
but it m	ust answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its let 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

Employer identification number

GEMAYEL FAMILY FOUNDATION

47-7094302

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	GEORGES GEMAYEL 11 MEACHEN LANE SUDBURY, MA 01776	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GEORGES GEMAYEL 11 MEACHEN LANE SUDBURY, MA 01776	\$\$298,895.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

GEMAYEL FAMILY FOUNDATION

47-7094302

Part II	Noncash Property (see instructions). Use duplicate copies of P	art 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
	EQUITIES AND MUTUAL FUNDS		
_2			
		\$ 298,895.	12/15/15
(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
		\$	
(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
		*	90, 990-EZ, or 990-PF) (2

tanic oi oiga	inization		Employer identification ilumi	DE1
СЕМУЛЕ	L FAMILY FOUNDATION		47-7094302	
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations described i	n section 501(c)(7), (8), or (10) that total more than \$1.0	00 for
	the year from any one contributor. Complete	columns (a) through (e) and the follow	ung line entry. For organizations	
	completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	is, charitable, etc., contributions of \$1,000 or li	ess for the year (Enter this info once)	
(a) No.	Ose duplicate copies of Part III if addition	lai space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I	(-,,	(0, 000 01 3	(a) cost ip non-citient girt to non-	
		(e) Transfer of gift		
		-		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
			-	
(a) No.		<u> </u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
raili				_
				
			 -	
			 	
-		<u></u>		
		(e) Transfer of gift		
	_			
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
				<u> </u>
(a) N/a	——————————————————————————————————————			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I	, . , ,	(c) 555 51 g	(c) coordinate of the same short	_
				
		(e) Transfer of gift		
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
	<u> </u>			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I	(b) i dipose oi git	(c) ose or girt	(d) Description of now girt is field	
	 	(e) Transfer of gift		
		•		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
Γ				

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO		
MERRILL LYNCH	390.	0.	390.	39	00.	
TO PART I, LINE 4	390.	0.	390.	39	90.	
FORM 990-PF		CORPORATE S'	rock		STATEMENT	2
DESCRIPTION			воо	K VALUE	FAIR MARKET	r
MERRILL LYNCH ACCT				214,955.	222,23	35.
TOTAL TO FORM 990-PF	, PART II,	LINE 10B		214,955.	222,23	35.
FORM 990-PF		SUBSTANTIAL CO			STATEMENT	3
NAME OF CONTRIBUTOR		ADDRESS				
GEORGES GEMAYEL		_	HEN LANE , MA 01776			

Gemayel Family Foundation Investments at Date of Donation

Cocyclic		O _{st} o	Charac	o la	Coet Back	Drice at 12/21/2015	Drive at 17/21/2015 Enir Market Value 17/21/15 Gain/Ilocol	(aso III aleg
Equities								- Carrol (1995)
•	American International Group Inc.	12/15/2015	3,586.00	59.94	214,944.84	61.97	222,224.42	2 7,279.58
	American International Group Inc. (Fractional Share)	12/15/2015	0.1676	59.94	10.05			3 0.34
	Equities Total	•			214,954.89	123.91	222,234.80	7,279.92
Mutual Funds/Cl	Mutual Funds/Closed End Funds/Uff							
	Vanguard information Tech ETF	12/15/2015	256.00	109.44	28,016.64	108.29	27,722.24	1 (294.40)
	Vanguard information Tech ETF (Fractional Share)	12/31/2015	0.1694	109.86	18.61	108.26	18.34	(0.27)
	Vanguard 500 Index Fund SHS ETF	12/15/2015	261.00	188.03	49,075.83	186.93	48,788.73	Ÿ
	Vanguard 500 Index Fund SHS ETF (Fractional Share)	12/29/2015	0.6969	185.59	129.34	186.93	130.27	0.93
	Mutual Funds/Closed End Funds/UIT total	•			77,240.42	590.41	76,659.58	3 (580.84)
Total					292,195.31	714.32	298,894.38	3 6,699.08
			Cash		710,002.86		710,002.86	10
			Equities		214,954.89		222,234.80	
			Mutual Funds		77,240.42	Ī	76,659.58	~
					1,002,198.17	•	1,008,897.24	احدا