

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



Form **990-PF**

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

▶ Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

OMB No 1545-0052

			ent of the Treasury levenue Service	► Information about Fo		PF and its separate					en to Public Insp	ection
	Fo	r cale	endar year 2015	or tax year beginning		08/	01 ,2015	, and endir			12/31,2	20 15
	N	ame o	f foundation						4	A Employeridentifi	cation number	
		LEN	NE BEAL CHAI	RITABLE FOUNDAT	'ION					47-7387821		
	N	umbe	r and street (or PO be	ox number if mail is not delive	ered to str	to street address) Room/suite			ון	B Telephone number (see instructions)		
			BOX 55806					<u> </u>	\perp	61	<u>7-482-527(</u>	<u> </u>
	С	ity or t	town, state or provinc	e, country, and ZIP or foreign	postal co	de						
									- 1'	C If exemption applicat pending, check here		▶
		BOSTON, MA 02205-5806							_			
	G	Chec	ck all that apply:	X Initial return		Initial return	-	oublic chari	ty 1	D 1 Foreign organizati	ons, check here	▶
		Final return				Amended ret				2 Foreign organizati 85% test, check he		
	_			Address change		Name change				computation		▶ 🔛
	H			zation: X Section 5		T .			- -	E If private foundation	status was terminated	. —
	$\dot{\perp}$			onexempt charitable trus		Other taxable pri				under section 507(b)	(1)(A), check here .	▶ ∐
	ı	-	market value o	· · · · · · · · · · · · · · · · · · ·	_	g method: X Ca	isn Acc	crual		F If the foundation is in		
			of year (from Pa ▶ \$ 1.		-	(specify) nn (d) must be on cas	h hage l			under section 507(b)	(1)(B), check here .	▶
	В				The					 -	(d) Disbursem	ents
	ш	artı	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)			a) Revenue and expenses per	(b) Net inv		(c)	Adjusted net	for charitab	le
			may not necessar column (a) (see in	rily equal the amounts in	İ	books	incon	ne		ıncome	purposes (cash basis only)	
	\neg	1		nts, etc , received (attach schedule)	. -	1,120,384.					(000.1.000)	,,
		2	Chack I if th	e foundation is not required t	ю .	1,120,301.						
		3	aπa	ich Sch B							· "	
		4		erest from securities		-0-		42.			S	TMT 1
2016		-										
30			Net rental income or									
SCAMMED JUN 0 1 2	е	6.		m sale of assets not on line 10	5	-0-				DECEN	ED	
	Revenue	b	Gross sales price for assets on line 6a	all					1	1655		
2	š	7		come (from Part IV, line 2) .			-0-	00		<u>S(</u>	
\Rightarrow	æ	8	· -	oital gain					18	R R YAM	12 919	
\mathcal{Q}		9		ons	• •				195			
		10a	Gross sales less retur and allowances						1	CANAL C		
		ь	Less Cost of goods s	sold .		-			<u> </u>		,	
8. J.		С		ss) (attach schedule)								
ñ		11		ach schedule)		1 120 204		42.				
	_	12		through 11 · · · · ·		1,120,384.		42.				
	s	13	•	icers, directors, trustees, etc								
	JSe	14		alaries and wages	ı							
	ē	16a	•	ployee benefits schedule) STMT . 2		3,350.		NONE		NONE	-	3,350
	ŭ	b	-	attach schedule)				2,02,2				37330
	Ve	c	-	I fees (attach schedule)							-	
	rati	17	•									
	ist	14 15 16a b c 17 18 19		edule) (see instructions).								
	듣	19	Depreciation (atta	ch schedule) and depletio	n . 🗀					-		
	둳	20	Occupancy		🗀							
	d d	21	Travel, conference	s, and meetings								
	ā	21 22	Printing and publi	cations		·						
	bu	23 24 25	Other expenses (a	ttach schedule)								
	ati	24	Total operating a	nd administrative expens	es.							
	Je.		Add lines 13 thro	ugh 23	• •	3,350.		NONE		NONE		3 <u>,350</u>
	Ö	25	Contributions, gift	s, grants paid	• •							
	_	26		sbursements Add lines 24 and	25	3,350.		NONE		NONE		3,350
		27	Subtract line 26 f			1 117 004						
		ı		r expenses and disbursements		1,117,034.	<u> </u>	40		<u> </u>		
		b		ncome (if negative, enter -0-)		· · · · · · · · · · · · · · · · · · ·		42.				

JSA For Paperwork Reduction Act Notice, see instructions.

FJC416 L715 05/12/2016 08:45:14

06338400

Form **990-PF** (2015)

Page 2

		Attached schedules and amounts in the	Beginning of year	End	of year
Pa	ırt II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1	Cash - non-interest-bearing			
İ		Savings and temporary cash investments		1,117,034	1,117,034
1		Accounts receivable	• ,		
		Less: allowance for doubtful accounts	and the second s	- break-matters with in the second of the se	
ı		Pledges receivable ▶		· · · · · · · · · · · · · · · · · · ·	1
1	4	Pleages receivable		-	<u>- </u>
l		Less: allowance for doubtful accounts			
- [_	Grants receivable			
1		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		, , , , , , , , , , , , , , , , , , , ,	
ı		Other notes and loans receivable (attach schedule)		- 	
1		Less allowance for doubtful accounts -			·
\$	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	s .		<u> </u>
- [Less accumulated depreciation			
-	12	(attach schedule) Investments - mortgage loans			
l	13	Investments - other (attach schedule)			
Į	14	Land, buildings, and equipment basis		· / ** / \$5 . \$1 . 1 . 1 . 1	
		Less accumulated depreciation			
	15	(attach schedule) Other assets (describe			
ı	16	Total assets (to be completed by all filers - see the			
ı		instructions Also, see page 1, item I)		1,117,034	. 1,117,034
ᅥ	17	Accounts payable and accrued expenses			1 30 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ŀ	Grants payable			
S	18	Deferred revenue			
:	19			1	
ij	20	Loans from officers, directors, trustees, and other disqualified persons.			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	22	Total liabilities (add lines 17 through 22)		NON	
_	23	Total liabilities (add lines 17 through 22)		11011	
S		and complete lines 24 through 26 and lines 30 and 31.			
S					
an	24	Unrestricted			
Bal	25	Temporarily restricted			-
2	26	Permanently restricted		-	
Net Assets or Fund Balances		Foundations that do not follow SFAS 117,			
Ξ		check here and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds		1 117 024	
šet	28	Paid-in or capital surplus, or land, bldg, and equipment fund		1,117,034	
As	29	Retained earnings, accumulated income, endowment, or other funds		1 115 024	
ij	30	Total net assets or fund balances (see instructions)		1,117,034	
ž	31	Total liabilities and net assets/fund balances (see		4 44 5 4 4 4	
		instructions)	L	1,117,034	: •
		Analysis of Changes in Net Assets or Fund Bala			
1		al net assets or fund balances at beginning of year - Part		I	
		l-of-year figure reported on prior year's return)			
2		er amount from Part I, line 27a			1,117,034.
3	3 Oth	er increases not included in line 2 (Itemize)		3	
	• Add	d lines 1, 2, and 3			1,117,034.
5	5 Dec	creases not included in line 2 (itemize)		5	
_6	<u>To</u> t	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column	(b), line 30 6	1,117,034.
					50rm QQQ-PF (2015)

	and Losses for Tax on Invedescribe the kind(s) of property sold		(b) How	(c) Date	
	P - Purchase	acquired (mo , day, yr)	(d) Date sold (mo., day, yr.)		
	ck warehouse; or common stock, 200	and mee do /	D - Donation	(1110 , 047, 71 7	
<u>a</u> b					
C					
d					
e			1		
	1	(h) Gain or (lo	oss)		
(e) Gross sales price		(e) plus (f) mini	us (g)		
a			ļ		
b			 		
C			+		
d					· · · · · · · · · · · · · · · · · · ·
е		11. 11- 12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			
Complete only for assets s	howing gain in column (h) and owned			Gains (Col (h) ga	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col. (յ), ıf any	COI	(k), but not less t Losses (from co	
a					
b			ļ		
С			-		
d					
e			 		
2 Capital gain net income of	v= /mot comital local	f gain, also enter in Part I, line 7	2		
• •	Į '	f (loss), enter -0- in Part I, line 7	-		
	in or (loss) as defined in sections	structions). If (loss), enter -0- in			
•					
Part V Qualification U	Index Section 4040/s) for Pos	duced Tax on Net Investment	Income	NT.	/A
		ibutable amount of any year in the	base perio	d?	Yes N
	not qualify under section 4940(e).		 		
	ount in each column for each yea	ar; see the instructions before making	ng any ent	ries.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2014					
2013					
2012			1		
2011			<u> </u>		
2010			 		
					-
		de the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if le	ess than 5 years	· 3 _		
4 Enter the net value of no	ncharitable-use assets for 2015 f	rom Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
8 Enter qualifying distribut	ions from Part XII, line 4		8		
If line 8 is equal to or g	reater than line 7, check the bo	x in Part VI, line 1b, and complete	that part	using a 1% ta	x rate. See th

X

X

8b

Enter the states to which the foundation reports or with which it is registered (see instructions)

MA
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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,"

Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	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			1
	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	
	Website address ► N/A			
14	The books are in care of ▶ FIDUCIARY TRUST COMPANY Telephone no ▶ (617) 482	-527	0	
	Located at ▶ 175 FEDERAL STREET, BOSTON, MA ZIP+4 ▶ 02110			
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		_	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	×	,	
	the foreign country	<i></i>		<u> </u>
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		, 9	* **
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			S
	disqualified person?	×	ş ^h	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		Ĭ.	1 1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	, 24 💸		. 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	, ;	\$	* * *
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		, * .	1.3
	foundation agreed to make a grant to or to employ the official for a period after	. (/3		1 84
	termination of government service, if terminating within 90 days)		. "	<u> </u>
ı	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			لنها
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	0	X
	Organizations relying on a current notice regarding disaster assistance check here	* ,	` \ (
•	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			ľ
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	~ 3	A. 700	3.
i	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and		š.	
	6e, Part XIII) for tax year(s) beginning before 2015?		~	\$3
	If "Yes," list the years		· .]
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		, ^	<u> </u>
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b		X
	all years listed, answer "No" and attach statement - see instructions)		25	
1	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		,	<u>.</u> .
	Details foundation held many those of 20% departs on indicate interest in any hydroce enterprise	s	3.	٠ · ا
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		4	
				
	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		١	1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		,	1 1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	[
	foundation had excess business holdings in 2015)	3b	N	A
	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
		-	0.PF	(2015)

Form 9	90-PF (2015)		47-73	87821	Page 6
Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)	
5a	During the year did the foundation pay or incur any amo	unt to			
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	. Yes X No	,
	(2) Influence the outcome of any specific public ele	ection (see section 4	1955); or to carry or	٦,	
	directly or indirectly, any voter registration drive?				•
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?		. Yes X No	•
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	-			,
	(5) Provide for any purpose other than religious, cl purposes, or for the prevention of cruelty to children	naritable, scientific, l	iterary, or educations		
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the				
~	Regulations section 53 4945 or in a current notice regain				
	Organizations relying on a current notice regarding disas				
c	If the answer is "Yes" to question 5a(4), does the				
•	because it maintained expenditure responsibility for the			. Yes No	.
	If "Yes," attach the statement required by Regulations see				
6a	Did the foundation, during the year, receive any fu		ectly to nay premiu	me	
Od	on a personal benefit contract?			Yes X No	.
ь	Did the foundation, during the year, pay premiums, direct			•	6b X
U	If "Yes" to 6b. file Form 8870	try or maneotry, on a	porsonar bonom comm		, , , , , , , , , , , , , , , , , , ,
7a	At any time during the tax year, was the foundation a pa	irty to a prohibited tax	shelter transaction?	Yes X No	.
	If "Yes," did the foundation receive any proceeds or have				1 1 -
	Information About Officers, Director				
	and Contractors List all officers, directors, trustees, foundation m	anagers and their	compensation (see	instructions)	<u> </u>
<u> </u>	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account,
	(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other allowances
<u>J.</u> B	RIAN POTTS	TRUSTEE		1	
C/0 I	FTC, P.O. BOX 55806, BOSTON, MA 02205-5806	1	-0-	-0-	-0-
NOLLY	Y E. CORLEY	TRUSTEE			
<u>C/0 I</u>	FTC, P O. BOX 55806, BOSTON, MA 02205-5806	1	-0-	-0-	-0-
JOSEI	PH ERDMAN	TRUSTEE			
C/0 I	FTC, P.O. BOX 55806, BOSTON, MA 02205-5806	1	-0-	-0-	-0-
KA'THI	LEEN M. MCCARTHY	TRUSTEE			
C/0 1	FTC, P.O. BOX 55806, BOSTON, MA 02205-5806	1	-0	-0-	-0-
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see instruction	ons). If none, enter
	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
	, reality and address of each employee pale more district expenses	devoted to position		plans and deferred compensation	other allowances
17017			NONE	NONE	MONT
NON	<u>E</u>	 	NONE	NONE	NONE
		•]			
				-	
Tota	I number of other employees paid over \$50,000				NONE
1014	Hamber of other employees paid over \$50,000 in				21011

3 Five highest-paid independent contractors for professional servi-	ces (see instructions). If none, enter "NON	-•
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
		37037
ONE		NONE
otal number of others receiving over \$50,000 for professional services		NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers prod	relevant statistical information such as the number of uced, etc	Expenses
1 NONE		
1000		
2		1
3		
A		
Part IX-B Summary of Program-Related Investments (see in: Describe the two largest program-related investments made by the foundation during the t		Amount
1 NONE	ax year on mes 1 and 2	
		18
2		
All other program-related investments See instructions		-
3NONE		

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundatio	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	NONE
	Average of monthly cash balances	1b	223,407.
	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	223,407.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)]	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	223,407.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	3,351.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	220,056.
6	Minimum investment return. Enter 5% of line 5	6	4,612.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	4,612.
	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.)	1	
c	Add lines 2a and 2b	1 2c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,611.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	4,611.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	4,611.
Part	XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	{	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,350.
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the.		
а		3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,350.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,350.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculated qualifies for the section 4940(e) reduction of tax in those years.	alculating wh	nether the foundation

Form **990-PF** (2015)

Par	t XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
•	line 7	· -			4,611.
2	Undistributed income, if any, as of the end of 2015				1,011.
	Enter amount for 2014 only.			NONE	
	Total for prior years 20,20,20		NONE	NONE	
	Excess distributions carryover, if any, to 2015		1,01,12		
	From 2010 NONE				
	From 2011 NONE				
	NONE				
	MONTE	}	1		
	MONTE				
	110111 2014 1 1 1 1 1 1	NONE			
	Total of lines 3a through e	110112			
7	line 4 \triangleright \$ 3,350.				
	Applied to 2014, but not more than line 2a			NONE	
U	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election				· · · · · · · · · · · · · · · · · · ·
C	required - see instructions)	NONE			
d	Applied to 2015 distributable amount				3,350.
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2015 .	NONE			NONE
	(If an amount appears in column (d), the same				-
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE	<u> </u>		
b	Prior years' undistributed income. Subtract		17077		
_	line 4b from line 2b		NONE		
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)		NONE	i.	
	tax has been previously assessed		NONE		<u>-</u>
d	Subtract line 6c from line 6b Taxable		NONE		
e	amount - see instructions		1101111		
_	4a from line 2a Taxable amount - see		1	NONE	
	instructions			10212	
f	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2016				1,261.
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section			1	
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)	NONE			···
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	NONE NONE			
	Analysis of line 9				
	Excess from 2011 NONE				
	Excess from 2012 NONE				
	Excess from 2013 NONE Excess from 2014 NONE				
e	Excess from 2015 NONE	<u> </u>	<u> </u>		

Form	990-PF (2015)			47-	7387821	Page 10
Par	t XIV Private Ope	rating Foundations	(see instructions a	nd Part VII-A, quest	tion 9)	NOT APPLICABLE
	If the foundation has r	eceived a ruling or d	etermination letter tha	t it is a private ope	rating	
	foundation, and the ruling					
b	Check box to indicate v	vhether the foundation	is a private operating	foundation described	in section 4942	2(j)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years	· 1 · ·	(e) Total
	justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	return from Part X for each					
	year listed					
b	85% of line 2a			<u> </u>		
	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					
е	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					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)),					
	or royaltres)					
	(3) Largest amount of sup- port from an exempt					
	organization (4) Gross investment income .					
Pa				t only if the found	lation had \$5,000	or more in assets at
	•	uring the year - see		····		
1	Information Regarding List any managers of before the close of an	the foundation who	have contributed mo	ore than 2% of the to more than \$5,000).	otal contributions rec (See section 507(d)(2)	eived by the foundation
	N/A					
ŀ	 List any managers of ownership of a partne 	the foundation who rship or other entity) o	own 10% or more of which the foundation	of the stock of a co on has a 10% or great	rporation (or an equi er interest.	ally large portion of the
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if unsolicited requests to other conditions, com	for funds. If the foun	dation makes gifts, g	to preselected character rants, etc. (see instru	aritable organizations uctions) to individuals	s and does not accept s or organizations under
_	The name, address, ar	•		ne person to whom a	pplications should be	addressed.
-	b The form in which app	olications should be su	ubmitted and informat	ion and materials the	y should include:	
						
	c Any submission deadl	ines.				

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

Part XV Supplementary Information (c	ontinued)										
3 Grants and Contributions Paid During	3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Foundation status of recipient Purpose of grant or contribution Amount Amou										
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount							
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount							
a Paid during the year			-								
,				J							
NONE											
NONE		ļ									
		1									
				1							
		ļ		ļ							
		ļ									
		1									
•											
			1	}							
			ł	ł							
]							
Total			3a	NONE							
		 									
b Approved for future payment											
				1							
			,]							
				1							
				i							
		1									
				1							
		1									
]			1							
	J]		J							
			İ								
				[
Total			▶ 3b								

JSA 5E1491 1 000

Part XVI-A	Analysis of Income-Produ	icing Acti	vities			
	mounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt function income
1 Program s	service revenue.	Business code	Amount	Exclusion code	Amount	(See instructions)
· · · · · · · · · · · · · · · · · · ·						
_						
		-				
e f						
	and contracts from government agencies					
_	hip dues and assessments					
	savings and temporary cash investments					
	s and interest from securities			ļ		
5 Net renta	I income or (loss) from real estate.					
a Debt-f	inanced property		3			
b Not de	ebt-financed property • • • • • • •	<u> </u>		1		· · · · · · · · · · · · · · · · · · ·
6 Net rental	income or (loss) from personal property			1		
-	estment income			 		
•	ss) from sales of assets other than inventory			 		
	ne or (loss) from special events • • • ofit or (loss) from sales of inventory			†		
	venue: a					
-						
е						
	Add columns (b), (d), and (e)		<u> </u>		<u> </u>	
13 Total. Ad	dd line 12, columns (b), (d), and (e)				13	
	Relationship of Activities	ulations)	accomplishment of E	vomnt Bu		
Part XVI-						
Line No.	Explain below how each activit accomplishment of the foundation					
▼	accomplishment of the foundation	on s exemp	or purposes (other than	by providin	g lulius for such purpose	s). (See manuchons.)
			··· -			
						
						
	-	<u> </u>				
					 	
						
			NOT APPLICABI	·Ε		
					·	
					.	
						
					 	
	<u> </u>					-
						
						
						
	1					- 000 DE

Form 990-PF (20						7-7387821			ge 13
Part XVII	Information R Exempt Organ		ansfers To and	Transaction	ons and	Relationships With Non	charit	table	,
ın secti						other organization described ction 527, relating to political		Yes	No
•	ers from the reporting	g foundation to	a noncharitable ex	empt organi	zation of:			i	
							1a(1)		X
(2) Oth	ner assets						1a(2)		X
	ransactions:								v
								l .	X
									X
									X
									X
									X
						allower (b) about distance above			X
						olu <mark>mn (b)</mark> should always sho f the foundation received les			
						f the goods, other assets, or			
(a) Line no	(b) Amount involved	(c) Name of r	noncharitable exempt or	ganization	(d) Descr	iption of transfers, transactions, and sh	arıng arra	ngeme	nts
		-							
		ļ							
		 							
		 				-			
		 					••		
2a le the	foundation directly	or indirectly at	filiated with or re	lated to on	e or more	tax-exempt organizations	-		
	bed in section 501(c							es 🗀	X No
	," complete the follo		·						
	(a) Name of organization	on	(b) Type of	organization		(c) Description of relatio	nship		
									
						·	_		
							•		
Unde	er penalties of perjury, I dec ect, and complete Declaration	lare that I have exam of preparer (other than	nined this return, including taxpayer) is based on all info	accompanying so ormation of which	chedules and s preparer has an	statements, and to the best of my knowle ry knowledge	dge and l	belief, it	: is true
Sign	Mim	115	5-12			JSTEE May the I	RS discu		
Here Sign	nature of officer or trustee		Date	<u> </u>	Title	with the (see instruction	ons)? X	Yes	below
0.9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Bo:d	Print/Type preparer's n	ame	Preparer's signatu	Para	,	Date Check If	PTIN		
Paid	MARK SPENCE			Muci	<u> </u>	05/12/2016 self-employed	P007		<u>70</u>
Preparer		IDUCIARY T		-		Firm's EIN ► 04	-1309	690	
Use Only	l.	O. BOX 55	, , ,	ດາ	205-580	96 Phone no 617-	182-5	370	
	<u>.i </u>	OSTON, MA	U	02	<u> </u>		402-5		(2015)

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Employer identification number

2015

ILENE BEAL CHARITA		47-7387821			
Organization type (check or	e):				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Check if your organization is Note . Only a section 501(c)(instructions.	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General	al Rule and a Special Rule. See			
General Rule					
or more (in mone)	X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules					
regulations under 13, 16a, or 16b, a	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.				
contributor, durin	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.				
contributor, durin contributions tota during the year fo General Rule app	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				
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special Rules on the state of the second state of Schedules	e box on line H of its Form 990-EZ or on i			

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
ILENE BEAL CHARITABLE FOUNDATION

Employer identification number 47-7387821

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	ESTATE OF ILENE BEAL C/O FTC, P.O. BOX 55806 BOSTON, MA 02205-5806	\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli 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)

STATEMENT

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı H	;; ;;
PART]	
990PF,	
FORM	

REVENUE AND EXPENSES INVESTMENT PER BOOKS INCOME	42.
DESCRIPTION	EST

FORM 990PF, PART I - LEGAL FEES

CHARITABLE PURPÓSES 	3,350.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	3,350.
	- MCCARTHY AND GOLDEN, LLC - TOTALS =
DESCRIPTION	LEGAL FEES -

06338400

7

STATEMENT

ILENE BEAL CHARITABLE FOUNDATION

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

ESTATE OF ILENE BEAL C/O FTC, P.O. BOX 55806 BOSTON, MA 02205-5806