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## DLN: 93491255001047

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

OMB No 1545-0052 2015

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. Internal Revenue Service ▶ Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Inspection , and ending 10-31-2016 For calendar year 2015, or tax year beginning 11-01-2015 A Employer identification number Name of foundation CLIPPER SHIP FOUNDATION INC 04-2687384 Number and street (or P O box number if mail is not delivered to street address) GMA FOUNDATIONS 2 LIBERTY SQ NO 500 BTelephone number (see instructions) (617) 426-7080 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02109 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return A mended return ✓Address change Name change  ${\bf 2.}\,$  Foreign organizations meeting the 85%test, check here and attach computation If private foundation status was terminated  $\checkmark$ Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation JA ccounting method ✓ A ccrual IFair market value of all assets at end F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) ▶\$ 22,581,443 (Part I, column (d) must be on cash basis ) Part I **Analysis of Revenue and Expenses** Disbursements Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Adjusted net Net investment for charitable expenses per ıncome (c) ıncome books (d) (cash basis only) 1 Contributions, gifts, grants, etc , received (attach 2 attach Sch B 3 Interest on savings and temporary cash investments 864,293 864,293 4 Dividends and interest from securities Gross rents . . . . . . . . . . . Net rental income or (loss) \_ b 963.561 Net gain or (loss) from sale of assets not on line 10 **6**a b Gross sales price for all assets on line 6a 1,326,943 963,561 Capital gain net income (from Part IV, line 2) . . . 8 q Income modifications . . **10**a Gross sales less returns and allowances b Less Cost of goods sold . . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) . . . . -7,245 -7,245 1.820.609 1.820.609 Total.Add lines 1 through 11 20.000 5.000 15.000 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages . . . 14 Pension plans, employee benefits . . . 15 (چ 1.879 16a Legal fees (attach schedule). . . . . 1.879 Ω 9 12,875 12,875 Accounting fees (attach schedule). . . . b 2,566 85,711 Other professional fees (attach schedule) . 88,277 c 17 (چ 22,409 0 0 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion . 20 Occupancy . . . . . . Travel, conferences, and meetings. 2.040 n 2.040 21 n 22 Printing and publications . . . . 26 26 3.847 0 3.847 23 Other expenses (attach schedule). . . . Total operating and administrative expenses. 24 7.566 121.378 Add lines 13 through 23 . . . . . . . 1.348.600 1.393.600 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 1.499.953 7.566 1.514.978 27 Subtract line 26 from line 12

Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)

Adjusted net income(if negative, enter -0-)

Expenses

Operating and Administrative

а

b

1.813.043

320.656

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
		should be for end-or-year amounts only (See instructions )	(a) Book Value 57,827	<b>(b)</b> Book Value 80,676	(c) Fair Market Value 80,676
	1	Cash—non-interest-bearing	37,827	60,676	80,676
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	_	Less allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ă	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 ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	23,352,238	22,482,046	22,482,046
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶		1	1
	15	Other assets (describe)	4,761	18,721	18,721
	16	<b>Total assets</b> (to be completed by all filers—see the			
		Instructions Also, see page 1, item I)	23,414,826	22,581,443	22,581,443
	17	Accounts payable and accrued expenses	45.000		
s	18	Grants payable	45,000		
ıtıe	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ξĺ	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )	45.000		
	23	Total liabilities(add lines 17 through 22)	45,000	U	
S		Foundations that follow SFAS 117, check here			
Fund Balance		and complete lines 24 through 26 and lines 30 and 31.	22 260 026	22 504 442	
ılaı	24	Unrestricted	23,369,826	22,581,443	
ä	25	Temporarily restricted			
밀	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶			
9		and complete lines 27 through 31.			
Assets	27	Capital stock, trust principal, or current funds			
155	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	23,369,826	22,581,443	
Net	30	Total net assets or fund balances (see instructions)	23,414,826		
	31	Total liabilities and net assets/fund balances(see instructions)	23,414,626	22,581,443	
	rt III		( )   0-:	1 1	
1		Total net assets or fund balances at beginning of year—Part II, column	` ''	·	22.262.225
_		, 3 , , , , ,		<del></del>	23,369,826
2		Enter amount from Part I, line 27a			320,656
3 4		Other increases not included in line 2 (itemize)   Add lines 1, 2, and 3		3	23,690,482
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	1,109,039
6		Total net assets or fund balances at end of year (line 4 minus line 5)—I	Part II column (b) li		22,581,443
_		. stast assets of fana balances at the of year (line + lillings line s)—i			22,301,773

Part IV Capital Gains ar					Page <b>3</b>	
p.: 01.:.0 41	nd Losses for Tax on Inve	stment Income	1			
	List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)  (b) D-Donatic					
1a SALE OF PUBLICLY TR	RADED SECURITIES					
b FROM GMO FORESTRY	Y FUND 8-B LP K-1					
С						
d						
e						
	Depreciation allowe	d Cost	or other basis	Gair	n or (loss)	
(e) Gross sales price	(f) (or allowable)		expense of sale	I	(f) minus (g)	
a 1,326	5,943		412,67	8	914,265	
b					49,296	
с						
d						
e						
	owing gain in column (h) and owne	d by the foundation	on 12/31/60	Cauna (Cal	(h) ==========	
	Adjusted basis		ess of col (I)		(h) gain minus ot less than -0-) <b>or</b>	
(i) F M V as of 12/31/69	(j) as of 12/31/69		col (j), if any		(from col (h))	
a					914,265	
b					49,296	
С						
d						
e						
-		If gain, also enter i	n Dawt I line 7			
2 Capital gain net income	e or (net capital loss)	If (loss), enter -0-		2	963,561	
3 Net short-term capital						
• Necestion capital	gain or (loss) as defined in sectio	ns 1222(5) and (6)				
If gain, also enter in Pa	gaın or (loss) as defined ın sectio rt I, line 8, column (c) (see ınstru 			3		
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instru	ctions) If (loss), er	nter - 0 -	3 nt Income		
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instru	ections) If (loss), er	Net Investme	nt Income		
If gain, also enter in Pain Part I, line 8  Part V Qualification Un  For optional use by domestic privariance.	rt I, line 8, column (c) (see instru  der Section 4940(e) for R  vate foundations subject to the se	ections) If (loss), er	Net Investme	nt Income		
If gain, also enter in Pain Part I, line 8  Part V Qualification Un  For optional use by domestic privile section 4940(d)(2) applies, lead  Was the foundation liable for the section 4940 (d)	rt I, line 8, column (c) (see instruction)  Ider Section 4940(e) for Revate foundations subject to the seave this part blank  section 4942 tax on the distribute	Reduced Tax on ection 4940(a) tax of able amount of any	Net Investment on net investment	income )	⊤Yes <b>√</b> No	
If gain, also enter in Pain Part I, line 8  Part V Qualification Un  For optional use by domestic privile f section 4940(d)(2) applies, lead  Was the foundation liable for the section does not	rt I, line 8, column (c) (see instruction) (see	Reduced Tax on ection 4940(a) tax of able amount of any to not complete this	Net Investment on net investment year in the base per	Income )	∏ Yes <b>√</b> No	
If gain, also enter in Pain Part I, line 8  Part V Qualification Un  For optional use by domestic privile f section 4940(d)(2) applies, lead  Was the foundation liable for the section 4940 (d) (applies) f "Yes," the foundation does not	rt I, line 8, column (c) (see instruction)  Ider Section 4940(e) for Revate foundations subject to the seave this part blank  section 4942 tax on the distribute	Reduced Tax on ection 4940(a) tax of able amount of any to not complete this	Net Investment on net investment year in the base per	Int Income Income ) eriod?		
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	990-PF (2015)			age <b>4</b>
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ 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		18	3,130
с	here 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			Ω
3	enter - 0 - ) Add lines 1 and 2		1 1	3,130
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			3,130
•	enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		18	3,130
6	Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 36,720			
Ь	Exempt foreign organizations—tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 5,000			
d	Backup withholding erroneously withheld		4.	. 720
7	Total credits and payments Add lines 6a through 6d			1,720
8 9	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached  8  Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed 9			
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			3,590
11	Enter the amount of line 10 to be Credited to 2015 estimated tax   23,590 Refunded  11			0
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	It participate or intervene in any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$0 (2) On foundation managers $\blacktriangleright$ \$0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers   \$0	_		N-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	$\vdash$	No
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	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 either			
	By language in the governing instrument, or	]	ן ו	
	By state legislation that effectively amends the governing instrument so that no mandatory directions	ļ	] !	
	that conflict with the state law remain in the governing instrument?	6	Yes	
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 XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
h	►MA  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
b	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		. 55	
-	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		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		No

Pai	t 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			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►HTTP //CLIPPERSHIPFOUNDATION ORG			
14	The books are in care of ▶CLIPPER SHIP FOUNDATION INC Telephone no ▶(617)	426-	7080	
	Located at ▶2 LIBERTY SQ STE 500 BOSTON MA ZIP+4 ▶02109			
16	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		. –	
15		•		
	and enter the amount of tax-exempt interest received or accrued during the year		1 1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1 1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	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 Volume No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo		ļ ļ	
	(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 for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		i i	
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes 🗸 No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations		i i	
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
			' '	
С	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?	<b>1</b> c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes 🗸 No			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
2-	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	1 100 14 110		 	
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, <b>(2)</b> 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 <b>(3)</b>			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015 )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-14		.13
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

-(:1	Statements keya	ıuıı	IG ACTIVITIES TO	AAI	1101111 4720	ria y	be kequired	1 ( CC	munue	-u /		
5a	During the year did the foundation		•									
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 49	45(e	)))?	Yes	✓ No			
	(2) Influence the outcome of any		,		, ,		•					
	on, directly or indirectly, any	voter	registration drive?.	•		٠	$\cdots \cdots $	Yes	✓ No		 	
	(3) Provide a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		Γ	Yes	✓ No	ļ		
	(4) Provide a grant to an organization section 4945(d)(4)(A)? (se				· -			Ves	√ No			
	(5) Provide for any purpose other						'		4 110	İ		
	educational purposes, or for t		- '		* * * * * * * * * * * * * * * * * * * *			Yes	√ No			
b	If any answer is "Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transac	tions	fail to qualify under	the	•			İ	İ	ĺ
	Regulations section 53 4945 or	nac	urrent notice regard	ıng c	lisaster assistance	(see	instructions)?.			5b		
	Organizations relying on a curren	t not	ice regarding disast	eras	sistance check here	e			•			
									Г	1		ı
c	If the answer is "Yes" to question	•	**		•							
	tax because it maintained expend					•		Yes	☐ No			
	If "Yes," attach the statement requ				, ,							
<b>6</b> a	Did the foundation, during the year	-	•			prer			_			
	a personal benefit contract?					•	•		✓ No	i	 	
b	Did the foundation, during the yea	ar, pa	y premiums, directly	or I	ndirectly, on a perso	onal	benefit contract?			6b		No
<b>-</b> -	If "Yes" to 6b, file Form 8870	41						_	_			
	At any time during the tax year, v				•		ı		✓ No	 	 	
b	If yes, did the foundation receive									7b	Jama	
Pai	Information Abou and Contractors	t On	icers, Directors	, II	rustees, rounda	itioi	п мападегѕ,	nıgn	пу Рап	a Emp	noye	es,
1	List all officers, directors, trustee	s, fou	ındation managers a	nd t	heir compensation (	see i	nstructions).					
	(a) Name and address	(b)	Title, and average hours per week devoted to position	(c)	Compensation(If not paid, enter -0-)		(d) Contributions mployee benefit	plans	(e)	Expense other		
See	Additional Data Table	<u> </u>			-	and	deferred compe	nsatio	on			
-	Additional Bata Fable	1										
		1										
		1										
		1										
2	Compensation of five highest-paid	lemp	loyees (other than	thos	e included on line 1-	-see	instructions). If	none	, enter "	NONE.	,	
	(a)		Title, and aver	age			Contributi					
Nar	me and address of each employee	oaid	hours per wee		(c) Compensatio	n	employee plans and o			Expens other		
	more than \$50,000 		(b) devoted to pos	tion			(d) compens	ation				
10 N	IE											
									_			
									+			
									_			

Form 990-PF (2015)		Page <b>7</b>
Part VIII Information About Officers, Directors, and Contractors (continued)	, Trustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GMA FOUNDATIONS INC	ADMINISTRATION	84,711
2 LIBERTY SQ STE 500 BOSTON,MA 02109		
<b>Total</b> number of others receiving over \$50,000 for professional s	ervices	0
Part IX-A Summary of Direct Charitable Activitie	es	
List the foundation's four largest direct chantable activities during the tax year organizations and other beneficiaries served, conferences convened, research p		Expenses
1	apers produced, etc	·
2		
3		
4		
Part IX-B Summary of Program-Related Investr	ments (see instructions)	1
Describe the two largest program-related investments made by the foundat	cion during the tax year on lines 1 and 2	A mount
1		-
2		
All other program-related investments See instructions		

Total. Add lines 1 through 3 Form **990-PF** (2015)

## Form 990-PF (2015) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1 purposes 1a 22,670,285 1b 90,173 1c 1d 22,760,458 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 22,760,458 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 341,407 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 5 22,419,051 1,120,953 **Distributable Amount** Part XI (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.) 1 1,120,953 1 Tax on investment income for 2015 from Part VI, line 5. . . . . . 2a 18,130 2a Income tax for 2015 (This does not include the tax from Part VI ). . . 2c 18,130 3 Distributable amount before adjustments Subtract line 2c from line 1. . . . . . 3 1,102,823 4 4 5 5 1,102,823 6 6 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 1,102,823

1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,514,978
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	A mounts set aside for specific charitable projects that satisfy the		_
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,514,978
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	18,130
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,496,848
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	er the fo	undation qualifies for

Ŀ	art XIIII Undisti	ributed Income (see instri	uctions)			
			(a)	(b)	(c)	(d)
			Corpus	Years prior to 2014	2014	2015
		for 2015 from Part XI, line 7				1,102,823
		e, if any, as of the end of 2015			0	
		14 only		0	0	_
	Total for prior years	20, 20, 20		0		
	From 2010	carryover, if any, to 2015 433,309				
	From 2011	•				
	From 2012					
	From 2013					
е	From 2014	442,620				
f	Total of lines 3a throu	ugh e	1,905,054			
4	Qualifying distribution	ns for 2015 from Part				
	XII, line 4 🕨 \$	1,514,978				
а	Applied to 2014, but	not more than line 2a			0	
b		ted income of prior years		0		
_		ee instructions)	0			
С	required—see instruc	ons out of corpus (Election	O .			
d	Applied to 2015 distr	· · · · · · · · · · · · · · · · · · ·				1,102,823
	Remaining amount dis	T T	412,155			· · ·
	<del>-</del>	carryover applied to 2015	0			0
	(If an amount appears	· ' '				
	same amount mus	st be shown in column (a) )				
6	Enter the net total of	f each column as				
	indicated below:	4	2,317,209			
	•	4c, and 4e Subtract line 5	2,317,209			
D	Prior years' undistribu			0		
c		rior years' undistributed				
	income for which a no	· · · · · · · · · · · · · · · · · · ·				
	· ·	ich the section 4942(a)		0		
A	•	Sly assessed				
u				0		
е		for 2014 Subtract line				
	4a from line 2a Taxal				0	
_	instructions				0	
t	Undistributed income	for 2016 Subtract ne 1 This amount must				
	be distributed in 2015					0
7	A mounts treated as d	listributions out of				
	corpus to satisfy requ					
		or 4942(g)(3) (Election may ructions)	0			
8	•	carryover from 2010 not				
٦		ne 7 (see instructions)	433,309			
9	Excess distributions of	•	4 000 000		_	
	Subtract lines 7 and 8	3 from line 6a	1,883,900			
	Analysis of line 9	1 222.045				
	Excess from 2011.					
	Excess from 2012. Excess from 2013.					
c d		— — —				
	Excess from 2015.	· · · · · · · · · · · · · · · · · · ·				
_		- 1				

For	m 990-PF (2015)					Page <b>10</b>
ŀ	art XIV Private Operating Foundat	<b>ions</b> (see ınstru	ictions and Part	VII-A, question	9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
	· · · · · · · · · · · · · · · · · · ·		_			T 40.43(-)(E)
	Check box to indicate whether the organization Enter the lesser of the adjusted net	Tax year	ing foundation des	Prior 3 years	4942(j)(3) or	4942(J)(5)
	income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed	(4) 2013	(6) 2014	(6) 2013	(u) 2012	
ь	85% of line 2a					
	Qualifying distributions from Part XII,					
	line 4 for each year listed					
a	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 "Assets" alternative test—enter					
a	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b						
	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					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization (4) Gross investment income					
Pa	rt XV Supplementary Information (C	Complete this	part only if th	e organization	had \$5,000 or	more in
	assets at any time during the	year—see inst	ructions.)			
1	Information Regarding Foundation Managers:		20/ 611			
а	List any managers of the foundation who have cobefore the close of any tax year (but only if they					ition
Ь	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				large portion of the	
	ownership of a partnership of other entity) of wi	ien die iodilaadion	nas a 10 % or gre	dier merese		
2	Information Regarding Contribution, Grant, Gift	t, Loan, Scholarshi	p, etc., Programs:			
	Check here ► ☐ If the foundation only makes co	ontributions to pre	selected charitab	ole organizations ar	nd does not accept	
	unsolicited requests for funds If the foundation		ts, etc (see instru	uctions) to individu	als or organization	s under
	other conditions, complete items 2a, b, c, and d					
а	The name, address, and telephone number or e-	-mail address of th	ne person to whom	n applications shou	ld be addressed	
	ELIZABETH DREWRY C/O GMA FOUNDATIONS 2 LIBERTY SQ					
	STE 500					
	BOSTON, MA 02109					
	(617) 426-7080 EDREWRY@GMAFOUNDATIONS COM					
	The form in which applications should be submi	tted and informati	on and materials t	hey should include		
b	APPLICATIONS MUST BE FILED ONLINE ON			•		MT N.C
	EXHIBITS PERSONAL RESUMES OF THE PR					
	PROGRAM, AN ORGANIZATION-WIDE BUDG					
	TEMPLATE WHICH IS AVAILABLE FOR DOW SUPPORT, CURRENT BOARD MEMBERSHIP N					
	HAS RECEIVED FUNDING WITHIN THE PAST				· ·	
	THE NEW REQUEST, EVEN IF IT HAS ALREA					
	RECENTLY COMPLETED FISCAL YEARS (IF Y APPLICANT'S IRS FORM 990 RETURNS FOR				•	ORTHE
	Any submission deadlines	THE TWO PIOST	RECEIVIET COM	FLETED TAX TEAT	(3	
C	NONE					
—	Any restrictions or limitations on awards, such	as by deodraphic	al areas charitabli	e fields, kinds of in	stitutions or other	
u	factors	D, geographic	areas, enameable	s neras, kinas or ili	catations, or other	
	THE FOUNDATION DOES NOT FUND THE GE					,
	PAROCHIAL, OR CHARTER SCHOOLS HOWE					
	SCHOOL'S CORE CURRICULUM WILL BE CO TUTORING, SUPPLEMENTAL ART, SPORTS,					
	MENTORING, COUNSELING, LEADERSHIP D					
	MADE FOR THE SUPPORT OF INDIVIDUAL					
	INDIVIDUAL CDC-SPONSORED LOW INCOM CENTRAL FOCUS IS ADVOCACY, RELIGIOU					
	FELLOWSHIPS, STUDENT LOANS OR TRAVE	L, WRITING OR F	UBLISHING OF	BOOKS OR ARTIC	LES, CAMPAIGNS	FOR
	ENDOWMENT FUNDS, PRODUCTION OF MAS	SS MEDIA, OR EX	(PENSES RELATE	ED TO CONFEREN	CES OR CONVEN	TIONS

Form 990-PF (2015) Page **11** Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 1,393,600 **b** Approved for future payment

Total. .

Enter gross	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	<b>(e)</b> Related or exempt
<b>1</b> Program	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	<b>(d)</b> A mount	function income (See instructions)
a						, , ,
<b>g</b> Fees a	and contracts from government agencies					
<b>3</b> Interes	rship dues and assessments					
	nds and interest from securities			14	864,293	
5 Net ren	ital income or (loss) from real estate					
	financed property					
	ebt-financed property ntal income or (loss) from personal					
propert	ty					
8 Gain or	r (loss) from sales of assets other than ory			18	963,561	
	ome or (loss) from special events profit or (loss) from sales of inventory					
 <b>11</b> Otherr	evenue <b>a</b> K-1 PASSTHROUGH FROM GMO FORESTRY FUND 8-B LP			14	-7,245	
b						
12 Subtota 13 Total.A	al Add columns (b), (d), and (e) dl line 12, columns (b), (d), and (e)		0	l	1,820,609 <b>3</b>	1,820,609
	orksheet in line 13 instructions to verify in relationship of Activities to		olishment of E	xempt Purpose		
Line No. ▼	Explain below how each activity for whithe accomplishment of the foundation's instructions )					

Part XVI	Noncharitable				actions and F	Relationships	With			
1 Did the o	rganization directly or i				n any other organ	ızatıon described	ın			
	01(c) of the Code (other	er than sect	ion 501(c)(3) o	rganızatıons) or	in section 527,	relating to politica	al		Yes	No
organızat										
	s from the reporting four									
` '	h						-	la(1)		No
	erassets							La(2)		No
<b>b</b> Other tra										
	s of assets to a noncha						-	lb(1)		No
	hases of assets from a						-	Lb(2)		No
	al of facilities, equipme						<b>-</b>	Lb(3)		No
	nbursement arrangemer ns or loan guarantees.						<b>—</b>	Lb(4) Lb(5)		No No
	mance of services or m						-	Lb(5)		No
• •	of facilities, equipment,	•	_				-	1c		No
-	swer to any of the above	_					L			140
of the go	ods, other assets, or se	rvices give	n by the reportin	ng foundation If	the foundation re	eceived Íess than	faır market	value		
(a) Line No	(b) Amount involved	(c) Name o	f noncharitable exe	mpt organization	(d) Description	of transfers, transacti	ons, and shar	ng arrai	ngemer	nts
des crībe∈ <b>√</b> No	undation directly or indi	ne Code (ot	•	•		-		ГΥ€	!S	
D II fes,	complete the following (a) Name of organization		(b	) Type of organizat	ion	(c) Descrip	tion of relation	iship		
the Info	der penalties of perjury, best of my knowledge a rmation of which prepar	and belief, it	is true, correct							
Sign Here	*****			2017-09-11	*****		May the return with the			
'	Signature of officer or t	rustee		Date	Title		below (see ins	tr)?	Yes [	No
<b>'</b>	Print/Type preparer's ALFONSO PERILLO		Preparer's Sign	ature	Date 2017-08-16	Check if self- employed ▶	PTIN PO(	9504	91	
Paid Preparer Use	Firm's name ► EDELSTEIN AND CO	MPANY LLI	o			Firm's EIN ▶ 04	I 1-2442519			
Only	Firm's address ► 160 FEDERAL STREE 02110	T 9TH FLO	OR BOSTON, N	MA.		Phone no (617	) 227-6161			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances	
BENJAMIN H LACY	CHAIRMAN/DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
DONALD J GREENE	PRESIDENT/DIRECTOR	0	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
GENE ALLEN MILLER	TREASURER/DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
ANA PEREZ CAMAYD	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
KATHARINE LACY	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
HANNAH BLAISDELL	CLERK	0	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
JEAN S WHITNEY	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
CELIA M GRANT	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
BRYAN SPENCE	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				
KAY BERTHOLD FRISHMAN	DIRECTOR	2,000	0	0	
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

Title, and average

(a) Name and address

	hours per week (b) devoted to position	not paid, enter -0-)	Contributions to employee benefit plans and deferred compensation	(e) other allowances
JOANNE POKASKI	DIRECTOR	2,000	0	0
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00			
TYRA SIDBERRY	DIRECTOR	2,000	0	0
2 LIBERTY SQUARE STE 500 BOSTON,MA 02109	2 00			

(c) Compensation(If

Expense account,

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Recipient	show any relationship to	status of	contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FRIENDSHIP WORKS INC 105 CHAUNCY STREET BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
BOSTON LANDMARKS ORCHESTRA INC 214 LINCOLN ST 331 BOSTON,MA 02134	N/A	PC	PROGRAM SUPPORT	5,000
DEAFINC 215 BRIGHTON AVE ALLSTON,MA 02134	N/A	PC	PROGRAM SUPPORT	10,000
NEIGHBORS WHO CARE INC 174 MOODY STREET WALTHAM,MA 02453	N/A	PC	PROGRAM SUPPORT	7,500
WELLMET PROJECT INC 675 MASSACHUSETTS AVE CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | 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	A mount
a Paid during the year				
3-21 FOUNDATION INC 770 MASSACHUSETTS AVE 390191 CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	7,500
ADAPTIVE SPORTS NEW ENGLAND 89 SOUTH ST 603 BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
BIKES NOT BOMBS INC 284 AMORY STREET JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
LAWRENCE BOYS AND GIRLS CLUB INC 136 WATER STREET LAWRENCE, MA 01841	N/A	PC	PROGRAM SUPPORT	20,000
CAMBRIDGE COMMUNITY SERVICES 99 BISHOP ALLEN DR 1 CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	7,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
THE CENTER FOR TEEN EMPOWERMENT 384 WARREN STREET BOSTON,MA 02119	N/A	PC	PROGRAM SUPPORT	10,000
EAST BOSTON ECUMENICAL COMMUNITY COUNCIL 50 MERIDIAN STREET EAST BOSTON,MA 02128	N/A	PC	PROGRAM SUPPORT	10,000
ELIZABETH STONE HOUSE INC 8 NOTRE DAME ST ROXBURY,MA 02119	N/A	PC	PROGRAM SUPPORT	10,000
FAMILIES FIRST PARENTING PROGRAMS INC 9 GALEN ST STE 400 WATERTOWN, MA 02472	N/A	PC	PROGRAM SUPPORT	10,000
GIRLS INCORPORATED OF LYNN 50 HIGH STREET LYNN,MA 01902	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
INNERCITY WEIGHTLIFTING INC PO BOX 171313 BOSTON,MA 02117	N/A	PC	PROGRAM SUPPORT	5,000
LOUIS D BROWN PEACE INSTITUTE 15 CHRISTOPHER ST DORCHESTER,MA 02122	N/A	PC	PROGRAM SUPPORT	10,000
MASSACHUSETTS COALITION FOR OCCUPATIONAL SAFETY AND HEALTH 1532B DORCHESTER AVE DORCHESTER,MA 02122	N/A	PC	PROGRAM SUPPORT	7,500
NATIVITY PREPARATORY SCHOOL OF BOSTON INC 39 LAMARTINE ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
RAWART WORKS INC 37 CENTRAL SQUARE 2 LYNN,MA 01901	N/A	PC	PROGRAM SUPPORT	7,500
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
SAVE THE HARBOR SAVE THE BAY 212 NORTHERN AVE 304 BOSTON,MA 02210	N/A	PC	PROGRAM SUPPORT	5,000
STRONG WOMEN STRONG GIRLS 555 AMORY ST 3R BOSTON,MA 02130	N/A	PC	PROGRAM SUPPORT	7,500
THE URBANO PROJECT 29 GERMANIA ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
FAMILY SERVICES OF THE MERRIMACK VALLEY 430 N CANAL ST LAWRENCE, MA 01840	N/A	PC	PROGRAM SUPPORT	4,000
THE CITY ON A HILL FOUNDATION INC 58 CIRCUIT ST BOSTON, MA 02119	N/A	PC	PROGRAM SUPPORT	5,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
BALLET THEATRE OF BOSTON INC 400 HARVARD ST CAMBRIDGE,MA 02138	N/A	PC	PROGRAM SUPPORT	7,500
BOSTON DEBATE LEAGUE 54 CANAL ST BOSTON,MA 02114	N/A	PC	PROGRAM SUPPORT	10,000
COACHING FOR CHANGE INC 75 AMORY ST 3RD FLOOR BOSTON,MA 02119	N/A	PC	PROGRAM SUPPORT	7,500
COMPANY ONE 539 TREMONT ST BOSTON, MA 02116	N/A	PC	PROGRAM SUPPORT	10,000
ELLIS MEMORIAL & ELDRIDGE HOUSE INC 58 BERKELEY ST BOSTON,MA 02116	N/A	PC	PROGRAM SUPPORT	5,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ESPERANZA ACADEMY INC 198 GARDEN ST LAWRENCE,MA 01840	N/A	PC	PROGRAM SUPPORT	10,000
THE FOOD PROJECT INC 10 LEWIS ST LINCOLN,MA 01773	N/A	PC	PROGRAM SUPPORT	7,500
FRIENDS OF THE CHILDREN- BOSTON INC 555 AMORY ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
THIRD SECTOR NEW ENGLAND 89 SOUTH ST BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
HORIZONS AT DEDHAM COUNTY DAY SCHOOL 90 SANDY VALLEY RD DEDHAM,MA 02026	N/A	PC	PROGRAM SUPPORT	7,500
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
OUR RESTORATIVE JUSTICE 175 CABOT ST 100 LOWELL, MA 01854	N/A	PC	PROGRAM SUPPORT	10,000
RAISING A READER MASSACHUSETTS 9 HAMILTON PL BOSTON,MA 02108	N/A	PC	PROGRAM SUPPORT	10,000
SI SE PUEDE INC 675 ESSEX ST LAWRENCE,MA 01841	N/A	PC	PROGRAM SUPPORT	10,000
SQUASHBUSTERS 795 COLUMBUS AVE ROXBURY,MA 02120	N/A	PC	PROGRAM SUPPORT	10,000
ST MARY'S CENTER FOR WOMEN AND CHILDREN 90 CUSHING AVE DORCHESTER,MA 02125	N/A	PC	PROGRAM SUPPORT	7,500
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	, Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
UP WITH MUSIC INC 1213 SALEM ST NORTH ANDOVER,MA 01845	N/A	PC	PROGRAM SUPPORT	6,500
WEST END HOUSE BOYS & GIRLS CLUB 105 ALLSTON STREET ALLSTON,MA 02134	N/A	PC	PROGRAM SUPPORT	15,000
826 BOSTON INC 3035 WASHINGTON ST ROXBURY,MA 02119	N/A	PC	PROGRAM SUPPORT	10,000
ASSOCIATED GRANT MAKERS INC 133 FEDERAL ST 802 BOSTON,MA 02110	N/A	PC	PROGRAM SUPPORT	60,100
BEYOND SOCCER INC 60 ISLAND ST LAWRENCE,MA 01840	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 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	A mount	
a Paid during the year					
BOSTON AREA RAPE CRISIS CENTER INC 99 BISHOP ALLEN DR CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	10,000	
CAMBRIDGE COMMUNITY CENTER INC 5 CALLENDER ST CAMBRIDGE, MA 02139	N/A	PC	PROGRAM SUPPORT	10,000	
CASTLE SQUARE TENANTS ORGANIZATION INC 476 TREMONT ST BOSTON,MA 02116	N/A	PC	PROGRAM SUPPORT	7,500	
EASTON CHILDREN'S MUSEUM INC 9 SULLIVAN AVE NORTH EASTON,MA 02356	N/A	PC	PROGRAM SUPPORT	7,000	
HOUSING FAMILIES INC 919 EASTERN AVE MALDEN,MA 02148	N/A	PC	PROGRAM SUPPORT	7,500	
Total	Total				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Recipient	If recipient is an individual,	1	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
HYDE SQUARE TASK FORCE 351 CENTRE ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
SAMARITANS INC 41 WEST ST BOSTON, MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
SOCIEDAD LATINA INC 1530 TREMONT ST ROXBURY,MA 02120	N/A	PC	PROGRAM SUPPORT	10,000
TRANSITION HOUSE INC 136 BISHOP ALLEN DR CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	10,000
YOUTH AND FAMILIES ENRICHMENT SERVICES 1234 HYDE PARK AVE HYDE PARK,MA 02136	N/A	PC	PROGRAM SUPPORT	10,000
Total	1,393,600			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
EDVESTORS 140 CLARENDON ST BOSTON,MA 02116	N/A	PC	PROGRAM SUPPORT	27,500
THEATRE ESPRESSO INC 43 BOYNTON ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	7,500
ACTOR'S SHAKESPEARE PROJECT INC 191 HIGHLAND AVE 2B SOMERVILLE, MA 02143	N/A	PC	PROGRAM SUPPORT	10,000
THE BASE 11 WALNUT PARK ROXBURY,MA 02119	N/A	PC	PROGRAM SUPPORT	8,000
BOYS & GIRLS CLUB OF BROCKTON INC 233 WARREN AVE BROCKTON, MA 02301	N/A	PC	PROGRAM SUPPORT	15,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recurrent to an individual | Foundation | Rurners of grant or Amount

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS & GIRLS CLUB OF LYNN INC 25 N COMMON ST LYNN,MA 01902	N/A	PC	PROGRAM SUPPORT	5,000
BROOKVIEW HOUSE INC 2 BROOKVIEW ST 1 DORCHESTER,MA 02124	N/A	PC	PROGRAM SUPPORT	15,000
ELIOT SCHOOL OF FINE AND APPLIED ARTS 24 ELIOT ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	10,000
GENERATIONS INCORPORATED 25 KINGSTON ST BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
METROLACROSSE INC 209 GREEN ST JAMAICA PLAIN,MA 02130	N/A	PC	PROGRAM SUPPORT	5,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
N/A	PC	PROGRAM SUPPORT	10,000
N/A	PC	PROGRAM SUPPORT	12,500
N/A	PC	PROGRAM SUPPORT	10,000
N/A	PC	PROGRAM SUPPORT	10,000
N/A	PC	PROGRAM SUPPORT	10,000
	show any relationship to any foundation manager or substantial contributor  N/A  N/A  N/A	show any relationship to any foundation manager or substantial contributor  N/A  PC  N/A  PC  N/A  PC  N/A  PC	show any relationship to any foundation manager or substantial contributor  N/A  PC  PROGRAM SUPPORT  N/A  PC  PROGRAM SUPPORT  N/A  PC  PROGRAM SUPPORT  PROGRAM SUPPORT  PROGRAM SUPPORT  PROGRAM SUPPORT  PROGRAM SUPPORT

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor			
a Paid during the year				
YOUTH DEVELOPMENT ORGANIZATION 15 UNION ST 563 LAWRENCE,MA 01840	N/A	PC	PROGRAM SUPPORT	15,000
BREAKTHROUGH CAMBRIDGE 459 BROADWAY CAMBRIDGE,MA 02138	N/A	PC	PROGRAM SUPPORT	15,000
ESSEX COUNTY COMMUNITY FOUNDATION 175 ANDOVER ST DANVERS,MA 01923	N/A	PC	PROGRAM SUPPORT	20,000
CHELSEA COLLABORATIVE 318 BROADWAY CHELSEA,MA 02150	N/A	PC	PROGRAM SUPPORT	15,500
ENGLISH AT LARGE INC 800 CUMMINGS PARK DR 5550 WOBURN,MA 01801	N/A	PC	PROGRAM SUPPORT	7,500
Total		· · · · ·	▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
HULL LIFESAVING MUSEUM INC 1117 NANTASKET AVE HULL,MA 02045	N/A	PC	PROGRAM SUPPORT	10,000
NORTH SHORE COMMUNITY DEVELOPMENT COALITION 96 LAFAYETTE STREET SALEM,MA 01970	N/A	PC	PROGRAM SUPPORT	7,500
SHELTER MUSIC BOSTON 243 SYLVIA STREET ARLINGTON,MA 02476	N/A	PC	PROGRAM SUPPORT	5,000
LAWRENCE COMMUNITY WORKS 168 NEWBURY ST LAWRENCE,MA 01841	N/A	PC	PROGRAM SUPPORT	10,000
ASIAN TASK FORCE AGAINST DOMESTIC VIOLENCE PO BOX 120108 BOSTON,MA 02112	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Paciniant

If recipient is an individual Foundation Purpose of grant or Amount

Recipient	If recipient is an individual, show any relationship to	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor			
a Paid during the year				
CAREER COLLABORATIVE INC 77 SUMMER ST BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
COMMUNITY LEGAL SERVICES & COUNSELING CENTER INC 1 WEST ST CAMBRIDGE, MA 02139	N/A	PC	PROGRAM SUPPORT	12,500
LAWRENCE FAMILY DEVELOPMENT & EDUCATION FUND INC 34 WEST STREET LAWRENCE, MA 01841	N/A	PC	PROGRAM SUPPORT	12,500
COMPASS WORKING CAPITAL INC 89 SOUTH ST STE 804 BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
MUJERES UNIDAS AVANZANDO 54 CLAYTON ST 1 DORCHESTER,MA 02122	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
(	or substantial contributor			
a Paid during the year				
ASIAN AMERICAN CIVIC ASSOCIATION INC 87 TYLER ST BOSTON, MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
ASIAN WOMEN FOR HEALTH INC 83 WALLACE ST SOMERVILLE,MA 02144	N/A	PC	PROGRAM SUPPORT	7,500
BUDGET BUDDIES INC 114 TURNPIKE RD 2D CHELMSFORD,MA 01824	N/A	PC	PROGRAM SUPPORT	10,000
FAMILY NURTURING CENTER OF MASSACHUSETTS 200 BOWDOIN ST DORCHESTER,MA 02122	N/A	PC	PROGRAM SUPPORT	10,000
HOME SPACE INC 1030 ELLICOTT ST BUFFALO,NY 14209	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)				
a Paid during the year				
JERICHO ROAD LAWRENCE INC 3 GREAT POND RD NORTH ANDOVER,MA 01845	N/A	PC	PROGRAM SUPPORT	8,000
QUINCY ASIAN RESOURCES INC 1509 HANCOCK ST 209 QUINCY,MA 02169	N/A	PC	PROGRAM SUPPORT	10,000
BRIDGE FUND OF MASSACHUSETTS 233 NEEDHAM ST NEWTON,MA 02464	N/A	PC	PROGRAM SUPPORT	15,000
BRIDGE OVER TROUBLED WATERS INC 47 WEST ST BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	10,000
CASA ESPERANZA INC 245 EUSTIS ST BOSTON,MA 02119	N/A	PC	PROGRAM SUPPORT	15,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual | Foundation | Purpose of grant or | Amount

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HARBORCOV INC 148 SHAWMUT ST CHELSEA,MA 02150	N/A	PC	PROGRAM SUPPORT	12,500
INTERFAITH SOCIAL SERVICES INC 105 ADAMS ST QUINCY,MA 02169	N/A	PC	PROGRAM SUPPORT	10,000
LOVIN' SPOONFULS INC 367 WESTERN AVE BOSTON,MA 02135	N/A	PC	PROGRAM SUPPORT	10,000
MASSACHUSETTS AFFORDABLE HOUSING ALLIANCE 1803 DORCHESTER AVE DORCHESTER,MA 02124	N/A	PC	PROGRAM SUPPORT	10,000
REACH BEYOND DOMESTIC VIOLENCE INC PO BOX 540024 WALTHAM, MA 02454	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual Foundation Purpose of grant or Amount

Recipient	If recipient is an individual,		Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
BOSTON AREA GLEANERS INC 240 BEAVER ST WALTHAM, MA 02452	N/A	PC	PROGRAM SUPPORT	17,500
BREAD & ROSES HOUSING INC 15 UNION ST LAWRENCE,MA 01840	N/A	PC	PROGRAM SUPPORT	15,000
BREAD & ROSES INC 15 UNION ST LAWRENCE, MA 01840	N/A	PC	PROGRAM SUPPORT	10,000
CASA MYRNA VAZQUEZ INC 38 WAREHAM ST 2ND FL BOSTON,MA 02118	N/A	PC	PROGRAM SUPPORT	10,000
THE CHARITY GUILD INC 501 MAIN ST BROCKTON,MA 02301	N/A	PC	PROGRAM SUPPORT	10,000
Total			▶ 3a	1,393,600

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Recipient	If recipient is an individual, show any relationship to any foundation manager	status of recipient	contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
DOVE INC PO BOX 690267 QUINCY,MA 02269	N/A	PC	PROGRAM SUPPORT	15,000
EMH RECOVERY INC 678 N MAIN ST BROCKTON,MA 02301	N/A	PC	PROGRAM SUPPORT	15,000
MASSACHUSETTS COALITION FOR THE HOMELESS 73 BUFFUM ST LYNN,MA 01902	N/A	PC	PROGRAM SUPPORT	7,500
FRIENDS OF BOSTON HOMELESS INC 12 WISE ST BOSTON,MA 02130	N/A	PC	PROGRAM SUPPORT	7,500
ON THE RISE INC 341 BROADWAY CAMBRIDGE, MA 02139	N/A	PC	PROGRAM SUPPORT	5,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment | Payment

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (nome of business)	or substantial contributor	·		
a Paid during the year				
WOMEN'S EDUCATIONAL CENTER INC 46 PLEASANT ST CAMBRIDGE, MA 02139	N/A	PC	PROGRAM SUPPORT	5,000
HEARTH INC 1640 WASHINGTON ST BOSTON,MA 02118	N/A	PC	PROGRAM SUPPORT	10,000
MISSION OF DEEDS 6 CHAPIN AVE READING,MA 01867	N/A	PC	PROGRAM SUPPORT	15,000
THE NEIGHBORHOOD DEVELOPERS 4 GERRISH AVE CHELSEA,MA 02150	N/A	PC	PROGRAM SUPPORT	15,000
LOCAL INITIATIVES SUPPORT CORPORATION 75 KNEELAND ST BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	60,000
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
COMMUNITY ARTS CENTER INC 119 WINDSOR ST 6 CAMBRIDGE,MA 02139	N/A	PC	PROGRAM SUPPORT	50,000
EDUCATIONAL DEVELOPMENT GROUP INC 434 MASSACHUSETTS AVE BOSTON,MA 02118	N/A	PC	PROGRAM SUPPORT	50,000
SILVER LINING MENTORING 727 ATLANTIC AVE BOSTON,MA 02111	N/A	PC	PROGRAM SUPPORT	36,000
GRANADA HOUSE 70 ADAMSON ST ALLSTON,MA 02134	N/A	PC	PROGRAM SUPPORT	500
HALEY HOUSE INC 23 DARTMOUTH ST BOSTON,MA 02116	N/A	PC	PROGRAM SUPPORT	500
Total			▶ 3a	1,393,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or A mount

a Paid during the year	Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
	<b>a</b> Paid during the year				

<b>a</b> Paid during the year					
JUSTICE RESOURCE INSTITUTE 160 GOULD ST STE 300	N/A	PC	PROGRAM SUPPORT	500	
NEEDHAM.MA 02494					

Total.

<b>a</b> Paid during the year				
JUSTICE RESOURCE INSTITUTE 160 GOULD ST STE 300	N/A	PC	PROGRAM SUPPORT	500
NEEDHAM MA 02494				

1,393,600

TY	2015	Accounting	<b>Fees</b>	Schedule

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As Filed Data -

Name: CLIPPER SHIP FOUNDATION INC

**EIN:** 04-2687384

 Category
 Amount
 Net Investment Income
 Adjusted Net Income
 Disbursements for Charitable Purposes

 ACCOUNTING SERVICES
 12,875
 0
 12,875

DLN: 93491255001047

TY 2015 Investments - Other Schedule	
Name: CLIPPER SHIP FOUNDATION INC	

DLN: 93491255001047

<b>EIN</b> : 04-2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	22,282,383	22,282,383
GMO FORESTRY FUND 8-B LP	AT COST	199,663	199,663

TY 2015 Legal Fees Schedule	

Name: CLIPPER SHIP FOUNDATION INC

1,879

	<b>EIN:</b> 04-2687	7384	
Category	Amount	Net Investment	Ad

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LEGAL SERVICES

**Adjusted Net** Income

Disbursements for Charitable Purposes

1.879

DLN: 93491255001047

0

DLN: 93491255001047

Name: CLIPPER SHIP FOUNDATION INC. **EIN:** 04-2687384

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
FEDERAL EXCISE TAX RECEIVABLE	343		
DEFERRED EXCISE TAXES ON UNREALIZED GAINS	4,418		
PREPAID EXCISE TAXES		18,721	18,721

TY 2015 Other Decreases Schedule					
	Name: (	CLIPPER SHIP FOU	UNDATION INC		

**EIN:** 04-2687384

Description

DLN: 93491255001047

**Amount** 

1,066,988

42,051

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UNREALIZED LOSS ON INVESTMENTS

BOOK/TAX REPORTING DIFFERENCES DUE TO K-1

## **TY 2015 Other Expenses Schedule**

Name: CLIPPER SHIP FOUNDATION INC

**FIN:** 04-2687384

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	1,402	0		1,402
POSTAGE	1,885	0		1,885
BANK CHARGES	170	0		170
REGISTRATION AND FILING FEES	265	0		265
WEBSITE HOSTING	125	0		125

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Name: CLIPPER SHIP FOUNDATION INC. **EIN:** 04-2687384

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 PASSTHROUGH FROM GMO FORESTRY FUND 8-B LP	-7,245	-7,245	-7,245

DLN: 93491255001047

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491255001047

## **TY 2015 Other Professional Fees Schedule**

Name: CLIPPER SHIP FOUNDATION INC

Category Amount		Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT	2,566	2,566		0
GRANT ADMINISTRATION	84,711	0		84,711
CONSULTANT	1,000	0		1,000

TY 2015 Taxes Schedule		

Name: CLIPPER SHIP FOUNDATION INC

**EIN:** 04-2687384

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Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	22,409	0		0

DLN: 93491255001047