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

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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is atwww vs.gov/form990pf

	For c	alen	dar year 2016 or tax year beginning		, and ending		
•	Nan	ne of	foundation	A Employer identification	number		
	J.	AN	CI FOUNDATION	04-3506575			
	Num	ber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	8	W.	HITNEY DRIVE			781-431-97	88
			own, state or province, country, and ZIP or foreign p COLN, RI 02865	ostal code		C If exemption application is p	ending, check here
			all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
			Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
			Address change	Name change		check here and attach co	omputation
	H_C	٦.	type of organization X Section 501(c)(3) ex		.	E If private foundation sta	
	<u> </u>			Other taxable private foundating method X Cash	Accrual	under section 507(b)(1)	. ,
			, I —	her (specify)	Accidai	F If the foundation is in a under section 507(b)(1)	
	(II.		Part II, col. (c), line 16) 170 , 053 . (Part I, colu		asis)	under section 507(b)(1)	((b), check here
1		rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
,	. 42	***	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)
•		1	Contributions, gifts, grants, etc., received	242,018.		N/A	
		2	Check If the foundation is not required to attach Sch. B	·			
		3	Interest on savings and temporary cash investments	2.	2	•	STATEMENT 1
(<u>~</u>	ĺ	4	Dividends and interest from securities				
20%		5a	Gross rents				
(S)		b	Net rental income or (loss)				
⊗ 3	•	6a	Net gain or (loss) from sale of assets not on line 10	90,867.	·····		
ي	Revenue	b	Gross sales price for all assets on line 6a 166,640.			3 4 m V)	30.
*	ě	7	Capital gain net income (from Part IV, line 2)		90,867		
	ш	8	Net short-term capital gain			ISI MAR	
L.		9	Income modifications Gross sales less returns				Œ
Ź		10a	and allowances)EN UL
SCANNED MAR			Less Cost of goods sold	 		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
K			Gross profit or (loss)	 			
		11 12	Other income Total. Add lines 1 through 11	332,887.	90,869	 	
		13	Compensation of officers, directors, trustees, etc	0.	0		0.
		14	Other employee salaries and wages			 	<u> </u>
		15	Pension plans, employee benefits				
	ses		Legal fees				
	ě	i e	Accounting fees STMT 2	1,550.	775	•	775.
	Exp		Other professional fees				
	<u>×</u>		Interest				
	Operating and Administrative Expens	18	Taxes STMT 3	50.	0	•	50.
	nist	19	Depreciation and depletion				
	Ē	20	Occupancy				<u></u> _
	Ă	21	Travel, conferences, and meetings			 	<u> </u>
	au	22	Printing and publications .			-	ļ
	ing	23	Other expenses	<u> </u>		 	
	erat	24	Total operating and administrative	1 600	775		825.
	Ö	2-	expenses. Add lines 13 through 23	1,600. 72,000.	113	•	72,000.
		25	Contributions, gifts, grants paid	12,000.	<u>.</u>	 	12,000.
		26	Total expenses and disbursements. Add lines 24 and 25	73,600.	775		72,825.
		27	Subtract line 26 from line 12	, , , , , , , ,		1	, 2,023.
		l	Excess of revenue over expenses and disbursements	259,287.			
			Net investment income (if negative, enter -0-)		90,094	•	
		l	Adjusted net income (if negative, enter -0-)	7		N/A	3

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	Т	Τ	
•	(must agree with end-of-year figure reported on prior year's return)	1		461.
2	Enter amount from Part 1, line 27a	2	T	259,287.
3	Other increases not included in line 2 (itemize)	3	T	0.
4	Add lines 1, 2, and 3	4	Ī	259,748.
5	Decreases not included in line 2 (itemize) ► SEE STATEMENT 4	5	Τ	89,695.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	T	170,053.

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31 Total liabilities and net assets/fund balances

461

170,053

Part IV	Capital Gains	and Lo	sses for Tax on In	vestment	Income							
	(a) List and desci 2-story brick wa	nbe the ki rehouse,	nd(s) of property sold (e g or common stock, 200 shs	, real estate, MLC Co)		(b) P	How ac - Purc - Dona	nase	(c) Date (mo , d	acquired ay, yr)	(d) Date sold (mo , day, yr)	
1a SALE	OF PUBLIC	SECU	JRITIES					D				
b						<u> </u>						
<u> </u>				 		<u> </u>						
<u>d</u>						├					 	
е		(f) I	Depreciation allowed	(a) Cos	st or other basis				(h) G	ain or (loss		
(e) G	ross sales price	(1)	(or allowable)		xpense of sale					(f) minus	(g)	
<u>a</u>	166,640.				<u>75,77</u>	3.					90,867.	
<u>b</u>												
d						_						
е												
Complet	e only for assets showin	g gain in	column (h) and owned by t	the foundation	on 12/31/69			(1)	Gains (C	ol (h) gain	minus	
(i) F M	V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (ı), ıf any			col		not less tha (from col. (
a					<u></u>						90,867.	
b												
C												
<u>d</u>												
<u>e</u>												
2 Capital ga	un net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2_				90,867.	
3 Net short	-term capital gain or (los	s) as defi	ned in sections 1222(5) an			1						
If gain, al	so enter in Part I, line 8,			()		Ì				/-		
If (loss), (enter -0- in Part I, line 8		ection 4940(e) for	Dadinand	Tour on No.	ال	3			N/A	<u> </u>	
Was the four If "Yes," the f	oundation does not qual	ion 4942 ify under:	ank tax on the distributable am section 4940(e) Do not co nn for each year, see the in	mplete this pa	rt .						Yes X No	
- Litter tille	(a)	1	(b)	ISTRIBUTIONS BOI	oro making any c	(c)			\top		(d)	
Calendar y	Base periód years rear (or tax year beginnir	ng in)	Adjusted qualifying dist	tributions	Net value of no			use assets			oùtion ratio vided by col. (c))	
	2015			6,136.			1	7,503				
	2014			9,560.				2,142			8.109475	
	2013	_		6,561.				3,316			14.010288	
	2012		18	8,178. 9,550.				$\frac{9,422}{0.782}$			4.773426	
	2011	1	19	9,330.	-			9,783	;├──		6.700131	
2 Total of h	ne 1, column (d)								2		43.085179	
	listribution ratio for the 5 ation has been in exister	-	se period - divide the total o than 5 years	on line 2 by 5,	or by the number	of ye	ars		3		8.617036	
4 Enterthe	net value of noncharitab	ie-use as:	sets for 2016 from Part X, I	line 5					4		28,698.	
5 Multiply li	ne 4 by line 3								5_	L	247,292.	
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		901.					
7 Add lines 5 and 6					7	! 	248,193.					
8 Enter qua	lifying distributions from	n Part XII.	line 4		_				8	i	72,825.	
If line 8 is		•	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax ı	rate				
300 1110 1											Form 990-DE (2016)	

orm			3506			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 -	see i	nstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	1	į			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			1,8	02.
	of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	1	ĺ			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	L			0.
	Add lines 1 and 2	3		_	1,8	02.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			_	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,8	02.
	Credits/Payments					
	2016 estimated tax payments and 2015 overpayment credited to 2016	ŧ	į			
	Exempt foreign organizations - tax withheld at source		ĺ			
	Tax paid with application for extension of time to file (Form 8868)	1	Ė			
	Backup withholding erroneously withheld 6d	ŧ	į			
	Total credits and payments Add lines 6a through 6d	7	ĺ			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				54.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1,8	56.
-	.	10				
	Enter the amount of line 10 to be Credited to 2017 estimated tax	11				
	rt VII-A Statements Regarding Activities					
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes	No
	any political campaign?			1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	,		1b		X
	If the answer is "Yes" to $1a$ or $1b$, attach a detailed description of the activities and copies of any materials publishe					
	distributed by the foundation in connection with the activities.					
r	Did the foundation file Form 1120-POL for this year?			10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
٠	(1) On the foundation \blacktriangleright \$ O . (2) On foundation managers \blacktriangleright \$ O .					
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
•	managers > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If "Yes," attach a detailed description of the activities					
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
•	If "Yes," attach the statement required by General Instruction T				-	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	Х	
	, , , , , , , , , , , , , , , , , , , ,					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	RI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
_	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar				
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Fo	rm 99 0)-PF	(2016)

F	Statements Regarding Activities (continued)					
			Yes	No		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			v		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>		
12	12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?					
40	If "Yes," attach statement (see instructions)	12	X	<u>X</u> _		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Δ_	L		
14	Website address ► N/A The books are in care of ► BRUCE J BETTIGOLE, TRUSTEE Telephone no ► 781-43	31_9	788			
14	Located at \triangleright C/O GRC, 20 WALNUT STREET, WELLESLEY, MA ZIP+4 \triangleright 02		, 00			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	. 101		$\overline{\Box}$		
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No		
	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					
Pa	art 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		
18	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?					
	(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?		1	1		
	(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"					
	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)			<u> </u>		
			•			
L	or if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16				
	Organizations relying on a current notice regarding disaster assistance check here	-"-	·········			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected					
٠	before the first day of the tax year beginning in 2016?	10		Х		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation					
	defined in section 4942(j)(3) or 4942(j)(5))		:			
2	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			[
	before 2016? Yes X No					
	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) (relating to incorrect					
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			ļ.		
	statement - see instructions) N/A	2b		ļ		
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>					
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time					
	during the year? Yes X No					
	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after					
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,					
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3ь		†		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X		
	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 rennardy before the first day of the fax year beginning in 2016?	[Ab]		x		

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Total. Add lines 1 through 3

All other program-related investments. See instructions

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	indations, see	instructions.)
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]	0.
	Average of monthly cash balances	1b	<u>0.</u> 29,135.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	10	29,135.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	7 ₂ }	0.
3	Subtract line 2 from line 1d	3	29,135.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	437.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	28,698.
6	Minimum investment return. Enter 5% of line 5	6	1,435.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part)	nd certain	-
1	Minimum investment return from Part X, line 6	1	1,435.
	Tax on investment income for 2016 from Part VI, line 5		
	Income tax for 2016 (This does not include the tax from Part VI)	1	
	Add lines 2a and 2b	2c	1,802.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
	art XII Qualifying Distributions (see instructions)	, , , , , , , , , , , , , , , , , , ,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	72,825.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	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	72,825.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	72,825.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,	1			^
line 7				0.
2 Undistributed income, if any, as of the end of 2016			o .	
a Enter amount for 2015 only		<u></u>		
h Total for prior years	1	0.		
3 Excess distributions carryover, if any, to 2016				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1 100 000	1			
10000				
105 005	1			
170 450				
165 061	1			
	913,878.			
f Total of lines 3a through e	913,070.			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶\$ 72,825.				
			о.	
a Applied to 2015, but not more than line 2a	·····			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				0.
d Applied to 2016 distributable amount	72,825.			V •
e Remaining amount distributed out of corpus	72,023.			0.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			U •
6 Enter the net total of each column as indicated below:			!	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	986,703.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable	1			
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2016 Subtract	1			
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			-	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	198,062.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	788,641.			
10 Analysis of line 9				
a Excess from 2012 186, 207.	1		Ì	
b Excess from 2013 185, 895.			Į.	
c Excess from 2014 178, 453.			,	
d Excess from 2015 165, 261.	,		,	
8 Excess from 2016 72,825.		,		5 000 PE (0046)

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	OUNDATION				506575 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating	ļ		
foundation, and the ruling is effective fo	r 2016, enter the date of t	he ruling	▶		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0045	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					<u> </u>
c Qualifying distributions from Part XII,					
line 4 for each year listed					<u> </u>
d Amounts included in line 2c not					
used directly for active conduct of]		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities]		
Subtract line 2d from line 2c	<u> </u>				
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					1
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					1
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross	,]		
investment income (interest,	;				
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)	,)	Ì]
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)]	<u></u>	
(3) Largest amount of support from					
an exempt organization					<u> </u>
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	nore in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundatio	•				
a List any managers of the foundation wh			ributions received by t	the foundation before the cl	ose of any tax
year (but only if they have contributed in	iore than \$5,000) (See S	ection 507(a)(2))			
NONE					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large po	rtion of the ownership of a	partnership or
NONE	s a 10 % of greater interes)			
	an Crant Cift Land	Cabalanahin ata Da			
2 Information Regarding Contributi Check here ► X if the foundation o				o not appent uncollected re-	augusta for funda. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num					
a the hame, address, and telephone ham	uei ui e-iliali audiess ui t	ne person to whom appn	cations should be add	1162260	
b The form in which applications should b	e submitted and informat	tion and materials they st	nould include		
c Any submission deadlines					
	ouch so bu constant	Name of the state	lundo of restat Arre	av athan factors	
d Any restrictions or limitations on awards	s, such as by geographica	u areas, charitable fields,	kinds of institutions,	or other factors	
		·			5 000 DE (00.40)

3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MERICAN RED CROSS	NONE	PUBLIC CHARITY	GENERAL ASSISTANCE	
05 GANO STREET				
PROVIDENCE, RI 02906				2,500
BLACKSTONE VALLEY ADVOCACY CENTER	NONE	PUBLIC CHARITY	CIVIC/EDUCATIONAL	
PO BOX 5643				
PAWTUCKET, RI 02862			-	1,000
	NONE	PUBLIC CHARITY	RESEARCH & EDUCATIONAL	
PO BOX D PROVIDENCE, RI 02912			ACTIVITIES	25 000
FROVIDENCE, KI 02312				25,000
	NONE	PUBLIC CHARITY	HOMELESS SERVICES	
160 BROAD STREET PROVIDENCE, RI 02903				5 000
PROVIDENCE, RI 02903				5,000
	NONE	PUBLIC CHARITY	ASSISTANCE TO INDIGENT	
GREAT ROAD LINCOLN, RI 02865			FAMILIES	10,000
	TINUATION SHEE	ET(S)	> 3a	72,000
b Approved for future payment				
NONE				
NONE				
		Ĩ	1	

Part XVI-A	Analysis of Income-Producing Activities
------------	---

	Unrelated	business income	Evelue	ed by section 512, 513, or 514	
There gross amounts unless otherwise indicated	(a) Business code	(b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code		
ab	_		1		
))		1-1		
· ·	l l				
e			\dagger		
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash					
investments	1 1		14	2.	
Dividends and interest from securities					
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal			\sqcap		
property					
Other investment income					
Gain or (loss) from sales of assets other			1 - 1		
than inventory			18	90,867.	
Net income or (loss) from special events					·
Gross profit or (loss) from sales of inventory					
Other revenue					
a	_		1_1		
b	_				
c	_				
d	_		\sqcup		
e			ļ ļ		
2 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.	L	90,869.	0
3 Total Add line 12, columns (b), (d), and (e)				13	90,869
see worksheet in line 13 instructions to verify calculations	<u>;) </u>				
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of Ex	kempt	Purposes	
ing No. — Evaluar halou haur anah sahush fay ushah		column (a) of Dod VVII A		utad consederable to the second	- Dishmant of
Line No Explain below how each activity for which the foundation's exempt purposes (other t			CONTRID	uted importantly to the accom	тризлитент от
the foundation 3 exempt purposes (other t	nan by providing land	15 for Such parposes;			
					
				 	
					
					
					
	· 				
					
					
					
					
					
				 	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash 1a(1) X 1a(2) (2) Other assets **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 16(2) X (3) Rental of facilities, equipment, or other assets 16(3) Х 1b(4) (4) Reimbursement arrangements X 1b(5) (5) Loans or loan guarantees X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (b) Type of organization (c) Description of relationship (a) Name of organization N/A Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr.)? Sign Here X Yes TRUSTEE Signature of office or trustee Title Print/Type preparer's name PTIN Premarer's signature self- employed Paid DEBORAH A. HOPKINS P00167843 **Preparer** Firm's EIN ▶ 05-0409384 Firm's name ► KAHN, LITWIN, RENZA & Use Only Firm's address ▶ 951 NORTH MAIN STREET Phone no 401-274-2001 PROVIDENCE, RI 02904 Form 990-PF (2016)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2016

Name of the organizatio	Employer identification number								
J	04-3506575								
Organization type (check	Organization type (check one).								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule To ran organization filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.									
Special Rules									
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't 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									
	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (I								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

JANCI FOUNDATION

04-3506575

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	JEFFREY WEISS & NANCY FREEMAN 8 WHITNEY DRIVE LINCOLN, RI 02865	\$\$.	Person X 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 Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person 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 Oncash Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
,		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Employer identification number

JANCI FOUNDATION

04-3506575

Part II	Noncash Property (See instructions) Use duplicate copies of R	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
			990, 990-EZ, or 990-PF)

lame of orga	nization		Employer identification number		
JANCI I	FOUNDATION		04-3506575		
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, chantable, etc., contributions of \$1,000 o	d in section 501(c)(7), (8), or (10) that total more than \$1,000 for		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-					
-		(a) Transfer of sile			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-					
-	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
\[\begin{align*} \\ \\ \\ \end{align*}					

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient PAWS NEW ENGLAND NONE PUBLIC CHARITY GENERAL ASSISTANCE 5 FREEDOM STREET PLYMOUTH, MA 02360 1,000. RHODE ISLAND SPCA NONE PUBLIC CHARITY PROVIDE SHELTER TO 186 AMARAL STREET HOMELESS ANIMALS RIVERSIDE, RI 02915 2,500. RI COMMUNITY FOOD BANK NONE PUBLIC CHARITY ASSISTANCE TO INDIGENT 200 NIANTIC AVENUE FAMILIES PROVIDENCE, RI 02907 25,000. 28,500. Total from continuation sheets

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE NET I	(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
WELLS FARGO		2.	2.	
TOTAL TO PART I, LINE 3		2.	2.	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING	1,550.	775.		775.
TO FORM 990-PF, PG 1, LN 16B	1,550.	775.		775.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
RHODE ISLAND AG FEE	50.	0.		50.
TO FORM 990-PF, PG 1, LN 18	50.	0.		50.
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND	BALANCES	STATEMENT 4
DESCRIPTION				AMOUNT
PERMANENT DIFFERENCE ON SALE	89,695.			
TOTAL TO FORM 990-PF, PART II	89,695.			