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OMB No 1545-0052

Form 990-PF Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. 2016

Open to Public Inspection

| For | caler | ndar year 2016, or tax year beginning 01-01-20 | 16 , aı | nd en | ding 12-31- | 2016 | |
|-------------------------|----------|--|------------------------------------|-------|--------------------------|---|---|
| | | ndation SERVICES FUND | | | A Employer ıd | entification numbe | r |
| | | | | | 04-3517737 | | |
| | | street (or P O box number if mail is not delivered to street address) COTT STREET | Room/suite | | B Telephone nu | mber (see instruction | ns) |
| City | or town | , state or province, country, and ZIP or foreign postal code | | | (508) 793-0373 | 3 | |
| | | , state or province, country, and ZIP or loreign postal code R, MA 01605 | | | C If exemption | application is pending | g, check here |
| G Ch | eck al | l that apply $igsqcup$ Initial return $igsqcup$ Initial return of a f | former public charity | | D 1. Foreign or | ganızatıons, check he | ere 💄 🔲 |
| | | Final return Amended return | | | | rganizations meeting k here and attach coi | |
| | | Address change Name change | | | , | undation status was t | · · · |
| | , | pe of organization $lacksquare$ Section 501(c)(3) exempt private f i 4947(a)(1) nonexempt charitable trust \Box Other taxable | | | | n 507(b)(1)(A), chec | |
| | | | ✓ Cash ☐ Accru | ادر | F If the found: | ation is in a 60-month | termination - |
| of y | ear (f | rom Part II, col (c), \$ 745,494 | | iai | | n 507(b)(1)(B), checl | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | (a) Revenue and | | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | (a) Revenue and expenses per books | (b) | Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 150,000 | | | | |
| | 2 | Check ► ✓ If the foundation is not required to attach | | | | | |
| | 3 | Interest on savings and temporary cash investments | 725 | | 725 | | |
| | 4 | Dividends and interest from securities | 17,940 | 1 | 17,940 | | |
| | 5a | Gross rents | | | | | |
| a . | b | Net rental income or (loss) | | | | | |
| IKIE | 6a | Net gain or (loss) from sale of assets not on line 10 | 16,462 | | | | |
| Reverkie | b | Gross sales price for all assets on line 6a 418,074 | | | | | |
| ă | 7 | Capital gain net income (from Part IV, line 2) | | | 16,462 | | |
| | 8 9 | Net short-term capital gain | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less Cost of goods sold | | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | | | | | |
| | 12 | Total. Add lines 1 through 11 | 185,127 | | 35,127 | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0 | | 0 | | 0 |
| | 14 | Other employee salaries and wages | | | | | |
| es | 15 | Pension plans, employee benefits | | | | | |
| ens | 16a | Legal fees (attach schedule) | | | | | |
| dx: | Ь | Accounting fees (attach schedule) | 20. 1 | | | | |
| /e | С | Other professional fees (attach schedule) | 11,227 | | 11,227 | | 0 |
| Administrative Expenses | 17 | Interest | ♥ 556 | | 360 | | 0 |
| ıstı | 18 | Taxes (attach schedule) (see instructions) | 9 556 | 1 | 360 | | |
| <u> </u> | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Ad | 20 21 | Occupancy | | | | | |
| pul | 22 | Printing and publications | | | | | |
| Operating and | 23 | Other expenses (attach schedule) | | | | | |
| atır | 24 | Total operating and administrative expenses. | | | | | |
| ber | | Add lines 13 through 23 | 11,783 | | 11,587 | | 0 |
| 0 | 25 | Contributions, gifts, grants paid | 134,274 | | | | 134,274 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 146,057 | | 11,587 | | 134,274 |
| | 27 | Subtract line 26 from line 12 | | | | | , |
| | а | Excess of revenue over expenses and disbursements | 39,070 | | | | |
| | ь | Net investment income (If negative, enter -0-) | | | 23,540 | | |
| | С | Adjusted net income(if negative, enter -0-) | | | | | |
| or | Daner | work Reduction Act Notice, see instructions | <u> </u> | | at No. 11289) | / Ган | m QQN-DF (2016) |

422,205

17,682

142,546

634,848

278.719

356,129

634,848

634,848

444,710

16,677

145,774

673,918

278,719

395,199

673,918 673,918

2

3 4

5

6

634,848

39,070

673,918

673,918 Form **990-PF** (2016)

0

518,685

16,041

144,107

745,494

Investments—corporate stock (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶ □

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg , and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶ _

Investments—mortgage loans

Less accumulated depreciation (attach schedule) ▶ _____

Total assets (to be completed by all filers—see the

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) > ____

b

C

11

12

13

14

15

16

17

18

19

20 21

22

23

24

28 29

31 Part III

Liabilities

lances

Bal 25

Fund 26

ŏ

Assets 27

Net 30

| | (a) he kınd(s) of property sold (e g , re house, or common stock, 200 shs | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|---|---------------------------------|--|---|---|
| 1 a WELLS FARGO | | | Р | | |
| b WELLS FARGO | | | Р | | |
| c WELLS FARGO | | | Р | | |
| d CAPITAL GAINS DIVIDEN | DS | | Р | | |
| e | | | | | |
| (-) | (f) | | (g) | (| h) |
| (e) Gross sales price | Depreciation allowed | | other basis | | r (loss) |
| • | (or allowable) | plus expe | ense of sale | (e) plus (f |) minus (g) |
| | 7,425 | | 123,271 | | -5,846 |
| | 1,425 | | 269,516 | | 14,909 |
| c 16 | 5,026 | | 8,825 | | 7,201 |
| d | 198 | | | | 198 |
| e | | | | | |
| Complete only for assets | showing gain in column (h) and ow | ned by the foundation | on 12/31/69 | (| I) |
| (i) | (j) | | (k) | | h) gain minus |
| FMV as of 12/31/69 | Adjusted basis | | of col (ı) | , , , , , | less than -0-) or om col (h)) |
| | as of 12/31/69 | over col | (j), if any | Losses (III | |
| a | | | | | -5,846 |
| b | | | | | 14,909 |
| <u>c</u> | | | | | 7,201 |
| d | | | | | 198 |
| е | | If gain, also enter in P | | | |
| • - | ain or (loss) as defined in sections : | | · | 3 | 16,462 |
| Part V Qualification U | nder Section 4940(e) for Re | educed Tax on Net | Investment Inc | come | |
| | ivate foundations subject to the sec | | | | |
| , or opinional acc by dominions p. | | | | - / | |
| if section 4940(d)(2) applies, le | ave this part blank | | | | |
| if "Yes," the foundation does no | e section 4942 tax on the distributal t qualify under section 4940(e) Do | not complete this part | | | es 🔽 No |
| | ount in each column for each year, | see instructions before | making any entries | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | le-use assets | (d) Distribution rat (col (b) divided by c | |
| 2015 | 142,721 | | 653,948 | | 0 218245 |
| 2014 | 136,001 | | 699,847 | | 0 194330 |
| 2013 | 113,321 | | 736,940 | | 0 153772 |
| 2012 | 97,226 | | 726,943 | | 0 133746 |
| 2011 | 160,189 | | 809,705 | | 0 197836 |
| 2 Total of line 1, column (d |) | | 2 | | 0 897929 |
| 3 Average distribution ratio | for the 5-year base period—divide | the total on line 2 by 5, | , or by the | | |
| | dation has been in existence if less | | 3 | | 0 179586 |
| | icharitable-use assets for 2016 fron | • | | | 696,095 |
| | 1 | | 5 | | 125,009 |
| | nt income (1% of Part I, line 27b) | | 6 | | 235 |
| | | | | | 125,244 |
| | ons from Part XII, line 4 , | | | | 134,274 |
| If line 8 is equal to or gre- instructions | ater than line 7, check the box in Pa | art VI, line 1b, and com | plete that part usin | g a 1% tax rate Se | e the Part VI |
| IIISU UCUOIIS | | | | Fo | orm 990-PF (2016) |

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|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued) | Employees, |
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N | ONE". |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NONE | |
| | |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | 0 |
| Part IX-A Summary of Direct Charitable Activities | _ |
| List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc | Expenses |
| 1 | |
| | |
| | |
| 2 | |
| | |
| | |
| 3 | |
| | |
| | |
| 4 | |
| | |
| Part IX-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 | |
| | |
| | |
| 2 | |
| | |
| All other program-related investments See instructions | |
| 3 | |
| Total. Add lines 1 through 3 | D |
| Iotal. Add lines 1 through 3 | Form 990-PF (2016) |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

3a 3h

4

5

134,274

134.274

134.039

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235

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

1

2

3

4

34,570

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0

(d)

2016

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| Form 990-PF (20 | 016) | |
|-----------------|----------------------|--------------------|
| Part XIII | Undistributed Income | (see instructions) |

b Total for prior years

a From 2011.

b From 2012. c From 2013. . .

d From 2014.

e From 2015.

f Total of lines 3a through e.

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

b Excess from 2013. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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) 8 Excess distributions carryover from 2011 not

indicated below:

4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

121.102

62,709

77.905

102.719 110,996

> 62.709 77,905

102.719

110.996

99.704

(a)

Corpus

475.431

99.704

575,135

121.102

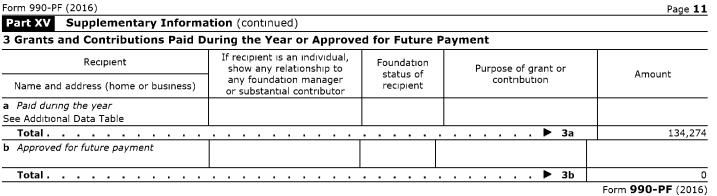
454,033

0

(b)

Years prior to 2015

(c)



| inter gross amounts unless otherwise indicated | | Unrelated bus | siness income | Excluded by section | (e) Related or exempt | |
|--|--|---------------------------------------|-----------------------------------|-----------------------------------|--------------------------|--------------------------------------|
| _ | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | and contracts from government agencies | | | | | |
| | rship dues and assessments store | | | | | |
| ınvestr | ments | | | 14 | 725 | |
| | ds and interest from securities | | | 14 | 17,940 | |
| | tal income or (loss) from real estate financed property. | | | | | |
| | ebt-financed property | | | | | |
| | ntal income or (loss) from personal property | | | | | |
| Other in | nvestment income | | | | | |
| | r (loss) from sales of assets other than | | | 40 | 15.452 | |
| | ory | | | 18 | 16,462 | |
| | rofit or (loss) from sales of inventory | | | | | |
| O. I. | evenue a | | | | | |
| Other r | | | | | | |
| b | | | | | | |
| c | | | | | | |
| c | | | | | | |
| c d e Subtota Total. / | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio | ns) | | | 35,127 3 | |
| c d Subtota Total. / ee worksh | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Beet in line 13 instructions to verify calculations. | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
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| b c d Subtota Total. / e worksh art XVI ne No. | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |
| b c d e Subtota Total. / e worksh art XVI | Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex | ns) e Accomplishr income is reported | ment of Exempled in column (e) of | pt Purposes FPart XVI-A contribut | ted importantly to | 35,12 |

| orm 9 | 90-PF (2 | 2016) | | | | | | | | | | | Pa | ge 1 3 |
|--------------|-----------|--|------------------|---------|--------------|--------------------------|--------|------------------------|-----------------------|---|--------------------------|------------|------------|---------------|
| Pari | XVII | Information Re Exempt Organi | | ransi | fers To a | and Transac | tion | s and I | Relatio | nships With No | ncharit | able | | |
| | | anization directly or in ode (other than sectio | | | | | | | | | ion 501 | | Yes | No |
| a Tra | nsfers f | om the reporting foun | dation to a n | oncha | ırıtable ex | empt organizat | ion c | of | | | | | | |
| (1 | Cash. | | | | | | | | | | | 1a(1) | | No |
| (2 |) Other | assets | | | | | | | | | | 1a(2) | | No |
| b Oth | ner trans | actions | | | | | | | | | | | | |
| (1 | Sales | of assets to a nonchar | table exemp | t orga | nızatıon. | | | | | | | 1b(1) | | No |
| (2 |) Purcha | ases of assets from a r | oncharitable | exem | pt organiz | zation | | | | | | 1b(2) | | No |
| (3 |) Renta | of facilities, equipmen | nt, or other a | ssets. | | | | | | | | 1b(3) | | No |
| (4 |) Reimb | ursement arrangemen | ts | | | | | | | | | 1b(4) | | No |
| (5 |) Loans | or loan guarantees. | | | | | | | | | | 1b(5) | | No |
| (6 |) Perforr | nance of services or m | embership oi | r fund | raising so | licitations | | | | | | 1b(6) | | No |
| c Sh | arıng of | facılıtıes, equipment, n | nailing lists, o | other . | assets, or | paid employee | s. | | | | • | 1c | | No |
| of | he good | er to any of the above s, other assets, or ser saction or sharing arra | vices given b | y the | reporting | foundation If t | the fo | oundatior goods, ot | n receive her asse | ed less than fair ma ets, or services rece | irket valu eived | e | | |
| (a) Lin | e No | (b) Amount involved | (c) Name of | noncha | arıtable exe | mpt organization | - | (d) Desc | ription of | transfers, transaction | s, and sha | rıng arrar | ngemen | ts |
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| de | cribed i | dation directly or indire | Code (other | | • | • | | | _ | | [| Yes | ☑ N | 0 |
| DIT | res, co | mplete the following so (a) Name of organization | | | (1 | b) Type of organı | zatıon | n | | (c) Description | n of relation | onship | | |
| | | | | | ` | | | | _ | | | | | |
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| | | | | | | | | | | | | | | |
| | | r penalties of perjury, knowledge and belief | | | | | | | | | | | | |
| Sign Here | which | n preparer has any kno ***** | | | | 2017-11-01 | | | **** | | May the II | RS discus | s this r | eturn |
| | - | ignature of officer or t | rustee | | | Date | | Tıt | :le | | with the p (see instr | · — | | |
| | | Print/Type preparer's | name | Prep | arer's Sıgı | nature | | Date | | Check if self- | PTIN | P00545 | 132 | _ |
| | | | | 1 | | | | | | employed ▶ 📙 | | . 55545 | | |

DAVID G EATON CPA 2017-11-01 Paid Preparer | Firm's name ▶ BOLLUS LYNCH LLP Firm's EIN ▶04-3037870 **Use Only** Firm's address ▶ 89 SHREWSBURY STREET Phone no (508) 755-7107 WORCESTER, MA 01604

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

| a Paid during the year | | | | |
|---|------|-----------|-----------|-------|
| 15-40 CONNECTION 53 OTIS STREET WESTBOROUGH, MA 01581 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| AMERICAN HEART ASSOCIATION 20 SPEEN ST FRAMINGHAM, MA 01701 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| ASM 31 STATE ST4TH FLOOR | NONE | 501(C)(3) | COMMUNITY | 300 |

| ASM 31 STATE ST4TH FLOOR BOSTON, MA 02109 | NONE | 501(C)(3) | COMMUNITY | 300 |
|--|------|-----------|-----------|-------|
| BECKER COLLEGE GOLF TOURNAMENT 61 SEVER STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | EDUCATION | 2,000 |
| BOY SCOUTS OF AMERICA - MOHEGAN | NONE | 501(C)(3) | COMMUNITY | 5,000 |

| BECKER COLLEGE GOLF TOURNAMENT 61 SEVER STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | EDUCATION | 2, |
|--|------|-----------|-----------|----|
| BOY SCOUTS OF AMERICA - MOHEGAN COUNCIL 19 HARVARD STREET | NONE | 501(C)(3) | COMMUNITY | 5, |

| - | | | | 424.274 |
|--|------|-----------|-----------|---------|
| BOY SCOUTS OF AMERICA - MOHEGAN COUNCIL 19 HARVARD STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 5,000 |
| 61 SEVER STREET WORCESTER, MA 01609 | | | | |

| WORCESTER, MA 01609 Total | | 124 274 |
|------------------------------|--|---------|
| COUNCIL 19 HARVARD STREET | | |

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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 show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

| a Falu during the year | | | | |
|--|------|-----------|-----------|-------|
| BOYS AND GIRLS CLUB OF WORCESTER 65 TAINTER STREET WORCESTER, MA 01610 | NONE | 501(C)(3) | COMMUNITY | 2,200 |
| BURNCOAT HIGH SCHOOL 179 BURNCOAT STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | COMMUNITY | 2,000 |
| CAMP PUTNAM 141 RUTHERFORD ROAD NEW BRAINTREE, MA 01531 | NONE | 501(C)(3) | COMMUNITY | 300 |

| WORCESTER, MA 01606 | | | | |
|--|------|-----------|-----------|-----|
| CAMP PUTNAM 141 RUTHERFORD ROAD NEW BRAINTREE, MA 01531 | NONE | 501(C)(3) | COMMUNITY | 300 |
| CATHOLIC CHARITIES 10 HAMMOND STREET WORCESTER, MA 01610 | NONE | 501(C)(3) | COMMUNITY | 500 |

250

| WORCESTER, MA 01610 | | | | |
|---|------|-----------|-----------|--|
| CENTRAL MASS HOUSING ALLIANCE 6 INSTITUTE ROAD | NONE | 501(C)(3) | COMMUNITY | |

WORCESTER, MA 01609 Total . 134,274

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1,500

| CENTRAL MASS LYME FOUNDATION 210 PARK ST SUITE 143 WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY HEALTH | |
|--|------|-----------|------------------|--|
| CHILDRENS FRIEND 21 CEDAR STREET | NONE | 501(C)(3) | COMMUNITY | |

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

| CHILDRENS FRIEND 21 CEDAR STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 1,250 |
|---|------|-----------|-----------|-------|
| COMMUNITY LEGAL AID 405 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |

| COMMUNITY LEGAL AID 405 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |
|---|------|-----------|-----------|-----|
| DISMAS HOUSE PO BOX 30125 WORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | 500 |
| | | | | |

| DISMAS HOUSE PO BOX 30125 WORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | 500 |
|--|------|-----------|-----------|-----|
| EDWARD ST CHILD SERVICES 50 PORTLAND STREET | NONE | 501(C)(3) | COMMUNITY | 250 |

| WORCESTER, MA 01603 | | | | |
|---|------|-----------|-----------|-----|
| EDWARD ST CHILD SERVICES 50 PORTLAND STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 250 |

| 1101(025121()181 01005 | | | | |
|--------------------------|------|-----------|-----------|--|
| EDWARD ST CHILD SERVICES | NONE | 501(C)(3) | COMMUNITY | |
| 50 PORTLAND STREET | | | | |
| WORCESTER, MA 01608 | | | | |

За

| 50 PORTLAND STREET NORCESTER, MA 01608 | | |
|---|------|-------------|
| Total | | 134,274 |

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 show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|-------------------------------------|--|-----------|-----------|-----|
| a Paid during the year | | | | |
| FAMILY HEALTH CENTER OF WORCESTER | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER PO BOX 20205 WORCESTER, MA 016020205 | | | | |
|--|------|-----------|-----------|--|
| GIRLS INC 125 PROVIDENCE STREET WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | |

| GIRLS INC 125 PROVIDENCE STREET WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | |
|--|------|-----------|-----------|--|
| EREMIAH'S INN 1059 MAIN STREET VORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | |

| · · · · · · · · · · · · · · · · · · · | | | | |
|---|------|-----------|-----------|-----|
| JEREMIAH'S INN 1059 MAIN STREET WORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | 250 |
| JESSE BURKETT LITTLE LEAGUE PO BOX 20790 WEST SIDE STATION | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER, MA 01003 | | | | |
|--|------|-----------|-----------|-----|
| JESSE BURKETT LITTLE LEAGUE PO BOX 20790 WEST SIDE STATION WORCESTER, MA 01602 | NONE | 501(C)(3) | COMMUNITY | 500 |
| MA AUDUBON SOCIETY | NONE | 501(C)(3) | COMMUNITY | 500 |

| PO BOX 20790 WEST SIDE STATION WORCESTER, MA 01602 | NONE | 301(C)(3) | COMMONITY | 500 |
|---|------|-----------|-----------|-----|
| MA AUDUBON SOCIETY 414 MASSASOIT ROAD | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER, MA 01602 | | | | |
|---|------|-----------|-----------|---|
| MA AUDUBON SOCIETY 414 MASSASOIT ROAD WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 5 |

| MA AUDUBON SOCIETY 414 MASSASOIT ROAD WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 500 |
|---|---------|-----------|-----------|-----|
| T-4-1 | 124 274 | | | |

| 414 MASSASOIT ROAD WORCESTER, MA 01604 | | |
|---|------|-------------|
| Total | | 134,274 |

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 show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

| (| or substantial contributor | | | |
|---|----------------------------|-----------|-----------|-------|
| a Paid during the year | | | | |
| VETERANS INC 69 GROVE STREET WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 2,500 |

| WORCESTER, MA 01605 | | (-)(-) | | _, |
|---|------|-----------|-----------|----|
| MCAULEY NAZARETH HOME FOR BOYS 77 MULBERRY STREET LEICESTER, MA 01524 | NONE | 501(C)(3) | COMMUNITY | 25 |

| MCAULEY NAZARETH HOME FOR BOYS 77 MULBERRY STREET LEICESTER, MA 01524 | NONE | 501(C)(3) | COMMUNITY | 250 |
|---|------|-----------|-----------|-----|
| MECHANICS HALL 321 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |

| LEICESTER, MA 01524 | | | | |
|---|------|-----------|-----------|-----|
| MECHANICS HALL 321 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |
| MLK 670 WEST BOYLSTON STREET | NONE | 501(C)(3) | COMMUNITY | 850 |

| NATE (TT) (COLLOC) OF WORKESTER | NONE | E04 (0) (0) | country. | 500 |
|---|------|-------------|-----------|-----|
| MLK 670 WEST BOYLSTON STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | COMMUNITY | 850 |
| WORCESTER, MA 01608 | NONE | 301(0)(3) | COMMONITY | 300 |

| MLK 670 WEST BOYLSTON STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | COMMUNITY | 850 |
|---|------|-----------|-----------|-----|
| NATIVITY SCHOOL OF WORCESTER 67 LINCOLN ST | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER, MA 01606 | | | | |
|--|------|-----------|-----------|-----|
| NATIVITY SCHOOL OF WORCESTER 67 LINCOLN ST WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 500 |

| NATIVITY SCHOOL OF WORCESTER 67 LINCOLN ST WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 5 |
|--|------|-----------|-----------|---|
| | | | | |

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| 67 LINCOLN ST WORCESTER, MA 01605 | None | 301(0)(3) | 300 |
|--------------------------------------|------|-----------|-------------|
| Total | | | 134.274 |

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 show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

| , | or substantial contributor | | | |
|--|----------------------------|-----------|-----------|-------|
| a Paid during the year | | | | |
| NORMAN ROCKWELL MUSEUM 9 GLENDALE ROAD STOCKBRIDGE, MA 01262 | NONE | 501(C)(3) | COMMUNITY | 100 |
| OAK HILL CDC 74 PROVIDENCE ST WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 5,000 |

| OAK HILL CDC 74 PROVIDENCE ST WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 5,000 |
|--|------|-----------|-----------|-------|
| PRESERVATION WORCESTER 10 CEDAR STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 5,000 |
| QCC FOUNDATION | NONE | 501(C)(3) | EDUCATION | 1,000 |

| 10 CEDAR STREET WORCESTER, MA 01609 | | | | · |
|---|------|-----------|-----------|-------|
| QCC FOUNDATION 670 WEST BOYLSTON STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | EDUCATION | 1,000 |
| REFUGEE APOSTOLATE 242 CANTERBURY STREET | NONE | 501(C)(3) | COMMUNITY | 250 |

| QCC FOUNDATION 670 WEST BOYLSTON STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | EDUCATION | 1,00 |
|--|------|-----------|-----------|------|
| REFUGEE APOSTOLATE 242 CANTERBURY STREET WORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | 25 |

| QCC FOUNDATION 670 WEST BOYLSTON STREET WORCESTER, MA 01606 | NONE | 501(C)(3) | EDUCATION | 1 |
|---|------|-----------|-----------|---|
| REFUGEE APOSTOLATE 242 CANTERBURY STREET | NONE | 501(C)(3) | COMMUNITY | |

| - | | | | 434 374 |
|--|------|-----------|-----------|---------|
| REFUGEE APOSTOLATE 242 CANTERBURY STREET WORCESTER, MA 01603 | NONE | 501(C)(3) | COMMUNITY | 250 |
| WORCESTER, MA 01606 | | | | |

| WORCESTER, MA 01603 | | |
|---------------------|------|-------------|
| Total | | 134,274 |

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 show any relationship to status of contribution

| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
|--|--|-----------|-----------|-------|
| a Paid during the year | | | | |
| RELIANT MEDICAL 100 FRONT STREET 6TH FLOOR WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 5,000 |

| 100 FRONT STREET 6TH FLOOR WORCESTER, MA 01608 | | | | |
|--|------|-----------|-----------|-------|
| SKYLINE TECHNOLOGY FUND 1 SKYLINE DR WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| ST JOHN'S BENEET FOOD FOR THE | NONE | E01/C)/2) | COMMUNITY | E00 |

| 1 | | | | | |
|---|--|------|-----------|-----------|-----|
| | ST JOHN'S BENEFIT-FOOD FOR THE POOR 545 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |
| | WORCESTER, MA 01605 | | | | |

| POOR 545 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 500 |
|--|------|-----------|-----------|-----|
| SUTTON LIONS CLUB PO BOX 714 SUTTON, MA 01590 | NONE | 501(C)(3) | COMMUNITY | 250 |
| THE BARTON CENTER 30 ENNIS ROAD | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER, MA 01608 | | | | |
|--|------|-----------|-----------|-----|
| SUTTON LIONS CLUB PO BOX 714 SUTTON, MA 01590 | NONE | 501(C)(3) | COMMUNITY | 250 |
| THE BARTON CENTER 30 ENNIS ROAD NORTH OXFORD, MA 01537 | NONE | 501(C)(3) | COMMUNITY | 500 |

| SUTTON LIONS CLUB PO BOX 714 SUTTON, MA 01590 | NONE | 501(C)(3) | COMMUNITY | |
|--|------|-----------|-----------|--|
| THE BARTON CENTER 30 ENNIS ROAD NORTH OXFORD, MA 01537 | NONE | 501(C)(3) | COMMUNITY | |

| SUTTON, MA 01590 | | | | <u> </u> |
|---|------|-----------|-----------|----------|
| THE BARTON CENTER 30 ENNIS ROAD NORTH OXFORD, MA 01537 | NONE | 501(C)(3) | COMMUNITY | |
| Total | | | | 134,274 |

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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 show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

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| a Paid during the year | | | | |
|--|------|-----------|-----------|--------|
| THE BRIDGE OF CENTRAL MA 4 MANN STREET WORCESTER, MA 01602 | NONE | 501(C)(3) | COMMUNITY | 300 |
| THE ECOTARIUM 222 HARRINTON WAY WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| THE HANOVER THEATER | NONE | 501(C)(3) | COMMUNITY | 25,000 |

| | I | | | |
|--|------|-----------|-----------|----|
| THE HANOVER THEATER 2 SOUTHBRIDGE STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 25 |
| THE MERCY CENTER 25 W CHESTER STREET | NONE | 501(C)(3) | COMMUNITY | |

| THE CHANE AND A ATTUE | | E04 (0) (0) | 001414 | |
|--|------|-------------|-----------|--|
| THE MERCY CENTER 25 W CHESTER STREET WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | |
| WORCESTER, MA 01008 | | | | |

| THE MERCY CENTER 25 W CHESTER STREET WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | |
|--|------|-----------|-----------|--|
| THE SHINE INITIATIVE | NONE | 501(C)(3) | COMMUNITY | |

500

2,500

| THE SHINE INITIATIVE 9 LEOMINSTER CONNECTOR LEOMINSTER, MA 01453 | NONE | 501(C)(3) | COMMUNITY | 2, |
|--|------|-----------|-----------|---------|
| Total | | | | 134,274 |

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 show any relationship to status of contribution any foundation manager recipient

| Name and address (home or business) | or substantial contributor | | | |
|---|----------------------------|-----------|--------|-------|
| a Paid during the year | | | | |
| UMASS MEMORIAL FOUNDATION 333 SOUTH STREET | NONE | 501(C)(3) | HEALTH | 5,500 |

| UMASS MEMORIAL FOUNDATION 333 SOUTH STREET SHREWSBURY, MA 01545 | NONE | 501(C)(3) | HEALTH | 5,500 |
|---|------|-----------|-----------|--------|
| UNITED WAY OF CM 484 MAIN STREET | NONE | 501(C)(3) | COMMUNITY | 11,000 |

| SHREWSBURY, MA 01545 | | | | |
|---|------|-----------|-----------|--------|
| UNITED WAY OF CM 484 MAIN STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 11,000 |
| VNA CARE NETWORK & HOSPICE 120 THOMAS STREET | NONE | 501(C)(3) | COMMUNITY | 1,000 |

| WORCESTER, MA 01608 | | | | |
|--|------|-----------|-----------|-------|
| VNA CARE NETWORK & HOSPICE 120 THOMAS STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| WORCESTER ART MUSEUM | NONE | 501(C)(3) | COMMUNITY | 1,000 |

| VNA CARE NETWORK & HOSPICE 120 THOMAS STREET WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
|--|------|-----------|-----------|-------|
| WORCESTER ART MUSEUM 51 SALISBURY STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 1,000 |

| | | | 1 | |
|--|------|-----------|-----------|-------|
| WORCESTER ART MUSEUM 51 SALISBURY STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 1,000 |
| WORCESTER COUNTY FOOD BANK | NONE | 501(C)(3) | COMMUNITY | 500 |

| WORCESTER, MA 01609 | | | | |
|--|------|-----------|-----------|-----|
| WORCESTER COUNTY FOOD BANK 474 BOSTON TURNPIKE ROAD | NONE | 501(C)(3) | COMMUNITY | 500 |

| | l . | | | |
|--|------|-----------|-----------|----|
| WORCESTER COUNTY FOOD BANK 474 BOSTON TURNPIKE ROAD SHREWSBURY, MA 01545 | NONE | 501(C)(3) | COMMUNITY | 50 |

134,274

Total .

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Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

| a Paid during the year | | | | |
|---|-----------|-----------|-----------|-------|
| WORCESTER EDUCATION COLLABORATIVE 484 MAIN STREET SUITE 300 WORCESTER, MA 01608 | NONE 0 | 501(C)(3) | COMMUNITY | 2,500 |
| | | | | |

| WORCESTER, MA 01606 | | | | |
|---|------|-----------|-----------|-------|
| WORCESTER PUBLIC LIBRARY 3 SALEM SQUARE WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 1,500 |
| WORCESTER RESEARCH BUREAU INC | NONE | 501(C)(3) | COMMUNITY | 500 |

| 3 SALEM SQUARE WORCESTER, MA 01608 | NONE | 301(C)(3) | COMMONIT | 1,500 |
|--|------|-----------|-----------|-------|
| WORCESTER RESEARCH BUREAU INC 500 SALISBURY STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 500 |
| WORCESTER YOUTH CENTER | NONE | 501(C)(3) | COMMUNITY | 250 |

| 500 SALISBURY STREET WORCESTER, MA 01609 | IVONE | 301(0)(3) | COMMONIT | 300 |
|--|-------|-----------|-----------|-----|
| WORCESTER YOUTH CENTER 326 CHANDLER STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 250 |

| Val. 1110 04 D. 111717171011 077777 | | ===(=>(=> | | 4.00 |
|--|------|-----------|-----------|------|
| WORCESTER YOUTH CENTER 326 CHANDLER STREET WORCESTER, MA 01609 | NONE | 501(C)(3) | COMMUNITY | 25 |
| | | | | |

| 326 CHANDLER STREET WORCESTER, MA 01609 | | | | |
|---|------|-----------|-----------|-------|
| YOU INC 81 PLANTATION STREET WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 1,000 |

134,274

Total .

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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 show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year YWCA - CENTRAL MA 1 SALEM SQUARE NONE 501(C)(3) COMMUNITY 9,084 WORCESTER, MA 01608 ARTS WORCESTER - COLLECTOR NONE 501(C)(3) COMMUNITY 1,000 **SPONSORSHIP** 660 MAIN ST

| WORCESTER, MA 01610 | | | | |
|--|------|-----------|-----------|-------|
| NEW SPIRIT CAMPER SCHOLARSHIP FUND 40 RIVERVIEW TERRACE SPRINGFEILD, MA 01108 | NONE | 501(C)(3) | COMMUNITY | 250 |
| WORCESTER BRAVEHEARTS 39 JOLMA ROAD WORCESTER, MA 01604 | NONE | 501(C)(3) | COMMUNITY | 5,000 |
| WORCESTER COMMUNITY ACTION | NONE | 501(C)(3) | COMMUNITY | 100 |

| 39 JOLMA ROAD WORCESTER, MA 01604 | | | | -, |
|---|------|-----------|-----------|---------|
| WORCESTER COMMUNITY ACTION COUNCIL 484 MAIN ST 400 WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 100 |
| Total | | | | 134,274 |

За

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 show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 100

| AUBURN, MA 01501 THE FIRST TWENTY | NONE | 501(C)(3) | COMMUNITY | 1 |
|-----------------------------------|------|-----------|-----------|---|
| 400 WASHINGTON ST | NONE | 501(C)(3) | COMMUNITY | |
| - ' | | | | |

| THE FIRST TWENTY 109 CONWAY AVENUE NARBERTH, PA 19072 | NONE | 501(C)(3) | COMMUNITY | 1,440 |
|--|------|-----------|-----------|-------|
| CHRISTOPHER HOUSE 10 MARY SCANO DR WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 250 |
| WORKESTER REGIONAL TOURISM | NONE | E01/C)/3) | COMMUNITY | 2 500 |

| CHRISTOPHER HOUSE 10 MARY SCANO DR WORCESTER, MA 01605 | NONE | 501(C)(3) | COMMUNITY | 250 |
|---|------|-----------|-----------|-------|
| WORCESTER REGIONAL TOURISM VISITORS CORP 446 MAIN ST STE 200 WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 2,500 |

| WORCESTER REGIONAL TOURISM VISITORS CORP 446 MAIN ST STE 200 WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 2,500 |
|---|------|-----------|-----------|-------|
| WORCESTER EDUCATION DEVELOPMENT FOUNDATION | NONE | 501(C)(3) | EDUCATION | 1,500 |

| 446 MAIN ST STE 200 WORCESTER, MA 01608 | | | | |
|---|------|-----------|-----------|-------|
| WORCESTER EDUCATION DEVELOPMENT FOUNDATION 210 PARK AVE STE 224 WORCESTER, MA 01609 | NONE | 501(C)(3) | EDUCATION | 1,500 |

| WURCESTER, MA U1608 | | | | |
|---|------|-----------|-----------|-------|
| WORCESTER EDUCATION DEVELOPMENT FOUNDATION 210 PARK AVE STE 224 WORCESTER, MA 01609 | NONE | 501(C)(3) | EDUCATION | 1,500 |
| | | | | |

| DEVELOPMENT FOUNDATION 210 PARK AVE STE 224 WORCESTER, MA 01609 | | 2,00 |
|---|------|-------------|
| | | 134,274 |

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 show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MOHAWK HUDSON HUMANE SOCIETY NONE 501(C)(3) COMMUNITY 250 3 OAKLAND AVE MENANDS, NY 12204

| WORCESTER ECONOMIC DEVELOPMENT ADVANCEMENT FUND 446 MAIN ST 200 WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 2,500 |
|--|------|-----------|-----------|--------|
| ROTARY FOUNDATION 446 MAIN ST 16TH FLR WORCESTER, MA 01608 | NONE | 501(C)(3) | COMMUNITY | 10,000 |
| WORCESTER AREA BUSINESS EDUCATION FOUNDATION 446 MAIN ST 200 | NONE | 501(C)(3) | EDUCATION | 2,500 |

WORCESTER, MA 01608

Total . 134,274 3a

| TY 2016 In | vestments Corporat | e Bonds Sche | edule | |
|------------|--------------------|--------------|-------|--|
| | | | | |

EIN: 04-3517737 Name of Bond

Name: COGHLIN SERVICES FUND

End of Year Book Value

16,677

End of Year Fair Market Value

16,041

DLN: 93491319006297

CORPORATE BONDS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

| TY 2016 In | vestments Corpo | orate Stock Sche | dule | |
|------------|-----------------|------------------|------|--|
| | | | | |

DLN: 93491319006297

Name: COGHLIN SERVICES FUND

EIN: 04-3517737

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|------------------|---------------------------|----------------------------------|
| CORPORATE STOCKS | 444,710 | 518,685 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319006297 | | |
|--|-----------------------|---------------------|--|--|
| TY 2016 Investments Government Obligations Schedule | | | | |
| | | | | |
| Name: | COGHLIN SERVICES FUND | | | |
| EIN: | 04-3517737 | | | |
| US Government Securities - End of Year Book Value: | 20,956 | | | |
| US Government Securities - End of Year Fair Market Value: | 20,860 | | | |
| State & Local Government Securities - End of Year Book Value: | 0 | | | |
| State & Local Government Securities - End of Year Fair Market Value: | 0 | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319006 | 297 |
|--------------------------------------|-----------------|------------------|-----|
| TY 2016 Investments - Other S | Schedule | | |
| Name: (| COGHLIN SERVICE | ES FUND | |

| EIN: U4-351//3/ | | | |
|------------------------|-----------------------|------------|----------------------------------|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| MUTUAL FUNDS | AT COST | 145,774 | 144,107 |

| efile GRAPHIC print - DO NOT PROCES | S As Filed Data | DLN: 93491319006297 | | |
|--|-----------------|--------------------------|------------------------|---------------------------------|
| TY 2016 Other Professional Fees Schedule | | | | |
| | | | | |
| Name: COGHLIN SERVICES FUND | | | | |
| EIN: 04-3517737 | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable |
| | | | | Purposes |

11,227

11,227

CONSULTING EXPENSE

```
efile GRAPHIC print - DO NOT PROCESS | As Filed Data -
                                                                       DLN: 93491319006297
TY 2016 Reduction Explanation Statement
                         Name: COGHLIN SERVICES FUND
                           EIN: 04-3517737
                   Explanation: SEE FOOTNOTES
```

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491319006297 |
|--------------------------------------|---------------|--------------------------|------------------------|---|
| TY 2016 Taxes Schedule | | | | |
| | | | | |
| Name: COGHLIN SERVICES FUND | | | | |
| EIN: 04-3517737 | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| FOREIGN TAX WITHHELD | 360 | 360 | | 0 |
| ANNUAL REPORT | 70 | 0 | | 0 |
| FEDERAL TAXES | 126 | 0 | | 0 |