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2016

OMB No 1545-0052

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

Open to Public Inspection

or	caler	ndar year 2016, or tax year beginning 01-01-20)16 , a	nd ending 12-3	L-2016	
		indation AF FOUNDATION		A Employer	identification numbe	er
		B PERKINS ET AL TRUSTEES		04-3536671		
		street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone	number (see instructio	ons)
L	WC 230	CONGRESS ST 12FL		(617) 523-65	31	
		, state or province, country, and ZIP or foreign postal code A 02110	•	C If exemption	on application is pendir	ng, check here
	1011, 11					" ▶ ⊔
G C	neck al		former public charity		organizations, check h	▶ ⊔
		☐ Final return ☐ Amended return			organizations meeting eck here and attach co	
		☐ Address change ☐ Name change	•	E If private	foundation status was	terminated
_	,	pe of organization Section 501(c)(3) exempt private 4947(a)(1) nonexempt charitable trust Other taxable		under sec	tion 507(b)(1)(A), che	ck here
			Cash Accru	F If the four	ndation is in a 60-mont	th termination
of	year <i>(f</i>	rom Part II, col (c), \$ 1,494,385			cion 507(b)(1)(B), chec	
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	expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))	books			(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				
	2	Check ► ✓ If the foundation is not required to attach				
	_	Sch B			74	
	3	Interest on savings and temporary cash investments Dividends and interest from securities	20,728		74	
	5a	Gross rents	20,728	20,7		
	b	Net rental income or (loss)				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	61,433	1	+	
Revenue	ь	Gross sales price for all assets on line 6a 199,955				
ž	7	Capital gain net income (from Part IV, line 2)		61,4	33	
	8	Net short-term capital gain				
	9	Income modifications			+	
	10a b	Gross sales less returns and allowances Less Cost of goods sold	<u> </u>		+	
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	82,221	. 82,2		
	13	Compensation of officers, directors, trustees, etc	1,905	1,3	33	572
	14	Other employee salaries and wages				
Š	15	Pension plans, employee benefits				
nse	16a	Legal fees (attach schedule)				
<u>g</u>	ь	Accounting fees (attach schedule)	1,041	1,0	41	C
Operating and Administrative Expenses	c	Other professional fees (attach schedule)	5,664	4,6	54	1,000
Ĭ	17	Interest				
Stra Stra	18	Taxes (attach schedule) (see instructions)	1,854	2	50	C
Ξ	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
₹	21	Travel, conferences, and meetings				
Ē	22	Printing and publications				
<u>5</u>	23	Other expenses (attach schedule)	45	5	10	35
rat	24	Total operating and administrative expenses.				
<u>8</u>		Add lines 13 through 23	10,509)8	1,607
_	25	Contributions, gifts, grants paid	172,500) 		172,500
	26	Total expenses and disbursements. Add lines 24 and 25	183,009	7,3	08	174,107
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-100,788	\$ 		
	ь	Net investment income (if negative, enter -0-)		74,9	27	
	c	Adjusted net income(if negative, enter -0-)				
	Danar	work Deduction Act Notice are instructions	1	C-1 N 4433		000 BE (2215)

766,090

791.390

791.390

791,390

791,390

635,944

690,702

690.702

690,702

690,702

2

3

4

5 6 791,390

-100,788

690,702

690,702

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100

1.439.627

1,494,385

Investments—U S and state government obligations (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 do not follow SFAS 117, check here ▶ ✓

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

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

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

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) -

Temporarily restricted

	5
	6
	7
S	8
Assets	9
Ą	10a
	b
	c

11

12

13

14

15

16

17

18

19 20

21

22

23

24

25

28

29

30

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net

2

3

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Part IV	Capital Gains and L	osses for Tax on Investment	Income			
	List and describe the kin 2-story brick warehouse	(a) d(s) of property sold (e g , real esta , or common stock, 200 shs MLC C	ite, o)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUB	LICLY TRADED SECURITEIS			Р		
b						
С						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basıs ense of sale	Gain ò	h) ir (loss)) minus (g)
a	199,955			138,522		61,433
b						
С						
d						
e Com				12/21/60		
Con		ng gain in column (h) and owned by (i)		(k)		l) h) gain minus
F	(i) M V as of 12/31/69	Adjusted basis as of 12/31/69	Excess	of col(ı) (յ), ıf any	col (k), bùt not	less than -0-) or om col (h))
a						61,433
b						
<u> </u>						
d						
<u>е</u>		l If gau	n, also enter in P	art I line 7		
2 Ca	pital gain net income or (ne		ss), enter -0- in F		2	61,433
3 Ne	t short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6)			_
	gaın, also enter ın Part I, lın Part I, lıne 8	e 8, column (c) (see instructions) I	f (loss), enter -0	· }[3	
Part V	Qualification Under	Section 4940(e) for Reduce	d Tax on Net	Investment Inc	ome	
(For option	nal use by domestic private	foundations subject to the section 4	940(a) tax on ne	t investment incom	e)	
If section 4	1940(d)(2) applies, leave th	ıs part blank				
		on 4942 tax on the distributable am fy under section 4940(e) Do not co		in the base period?	☐ Y	es 🗹 No
1 Ente	er the appropriate amount i	n each column for each year, see in	structions before	making any entries		

(c)

Net value of noncharitable-use assets

1,583,365

1,588,488

1,458,952

1,326,135

1,278,056

2

4

5

6

7

(d)

Distribution ratio

(col (b) divided by col (c))

0 077333

0 125752

0 083339

0 038627

0 094016

0 419067

0 083813

1,495,833

125,370

126,119

174,107

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749

(a)

Base period years Calendar

year (or tax year beginning in)

2015 2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

7 Add lines 5 and 6 . . .

(b)

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

122,446

199,756

121,587

51,225

120,158

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

17 765 60 00, 1116 7 01117 007 0						1 1
7a At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trar	nsaction? Yes	No	
b If yes, did the foundation receive ar	ny pro	ceeds or have any net in	come attributable to the	transaction?	7b	
Part VIII Information About (and Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, Highly Paid En	nployees	,
1 List all officers, directors, truste	es, fo	undation managers an	d their compensation	(see instructions).		
(a) Name and address	(I	Title, and average hours per week o) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		nse account, r allowances
ELIZABETH H COE	TRUS	TEE	0	0		0
551 HARLEMVILLE ROAD HILLSDALE, NY 12529	1 00					
WILLIAM B PERKINS	TRUS	TEE	1,905	0		0
230 CONGRESS STREET BOSTON, MA 02110	1 00		·			
2 Compensation of five highest-pa	id en	ployees (other than th	ose included on line 1	_see instructions). If nor	ne, enter '	`NONE."
(a) Name and address of each employee pa more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation		nse account, allowances
NONE						_
Total number of other employees paid ov	er \$5	0,000		· · · · · •		0
		·			Form 99	0-PF (2016)
						, ,

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Part VIII Information About Officers, Directors, Trustees, Foundation Managand Contractors (continued)	ers, Highly Paid Employees,
3 Five highest-paid independent contractors for professional 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
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc	such as the number of Expenses
1 N/A	0
2	
3	<u> </u>
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	
1 N/A 2	0
-	
All other program-related investments See instructions 3	
<u> </u>	
Total. Add lines 1 through 3	▶ 0 Form 990-PF (2016)
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Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

2

3

4

5

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

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

За 3b

4

5

174,107

174.107

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749 173,358

Page 9

74.043

74.043

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Forr	n 990-PF (2	016)	
P	art XIII	Undistributed Income (see instruc	tions)
1	Distributab	le amount for 2016 from Part XI, line 7	

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part

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).

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

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

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

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

9 Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. .

d Excess from 2015. .

e Excess from 2016. .

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 -see instructions 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:

same amount must be shown in column (a))

2 Undistributed income, if any,a Enter amount for 2015 only.b Total for prior years 20____

From 2011. . . .

e From 2015.

b From 2012. . . . **c** From 2013. . . .

XII, line 4 > \$

d From 2014. .

r 2016 from Part XI, line 7	
any, as of the end of 2016	
only	
20	

56,255

50,515 122,732

44,672

50,515

122.732

44.672

100.064

(a)

Corpus

274,174

100.064

374,238

56.255

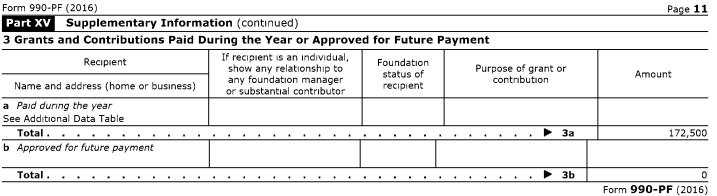
317,983

(b)

Years prior to 2015

(c)

2015



1 Program service revenue a	Part XVI-A Analysis of Income-Producing	Activities				rage 12
Program service revenue Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions) Business code Amount Exclusion code Amount (See instructions)	Enter gross amounts unless otherwise indicated		usiness income			Related or exempt
b c d d d d d d d d d d d d d d d d d d	_					
d	b					
g Fees and contracts from government agencies 2 Membership dues and assessments						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments	g Fees and contracts from government agencies					
4 Dividends and interest from securities	3 Interest on savings and temporary cash			14	60	
a Debt-financed property	4 Dividends and interest from securities					
6 Net rental income or (loss) from personal property 7 Other investment income	a Debt-financed property					
8 Gain or (loss) from sales of assets other than inventory						
Inventory						
10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). 14 See worksheet in line 13 instructions to verify calculations) 15 Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	inventory			18	61,433	
b c d d d d d d d d columns (b), (d), and (e).	10 Gross profit or (loss) from sales of inventory					
d						
e						
13 Total. Add line 12, columns (b), (d), and (e)	e					
(See worksheet in line 13 instructions to verify calculations.) Part XVI-B Line No. Line No. Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				· · · · · · · · · · · · · · · · · · ·	
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	(See worksheet in line 13 instructions to verify calculation	ons)				
	Line No. Explain below how each activity for which the accomplishment of the foundation's explain the second secon	income is report	ed in column (e) o	of Part XVI-A contribu		
	·					
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Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable
Exempt Organizations

М	GI G AV		Exempt Organi	zations											
1			ation directly or in (other than section								on described in sect organizations?	ion 501		Yes	No
а	Transfer	s from	the reporting foun	dation to a n	oncha	arıtable ex	empt organizati	on d	of						
	(1) Cas	sh											1a(1)		No
	(2) Oth	ner ass	ets										1a(2)		No
b	Other tra	ansactı	ons												
	(1) Sal	es of a	ssets to a nonchar	ıtable exemp	t orga	anızatıon.							1b(1)		No
	(2) Pur	chases	of assets from a r	noncharitable	exem	npt organiz	zation						1b(2)		No
	(3) Rer	ntal of	acılıtıes, equipmer	nt, or other a	ssets.								1b(3)		No
	(4) Rei	mburse	ement arrangemer	ts									1b(4)		No
			oan guarantees.										1b(5)		No
	(6) Perf	orman	e of services or m	embership oi	fund	lraising so	licitations						1b(6)		No
	_		ities, equipment, r			=							1c		No
d											ways show the fair				
											d less than fair mai ts, or services rece		е		
	,					(.,		5						
(a)	Line No	(b)	Amount involved	(c) Name of	nonch	arıtable exe	mpt organization	_	(d) Descrip	tion of	transfers, transactions	, and sha	rıng arra	ngemen	ts
								₩							
								_							
								\vdash							
								\vdash							
								_							
								₩							
_								<u> </u>							
2a			on directly or indire									_	٦	□	
				•	than	section 50	01(c)(3)) or in s	ecti	on 5277.	•		L	∟ Yes	✓ N	0
b	If "Yes,"	•	ete the following s			1 4	L) T6	_ 4	. 1		(-) D	61-1-			
		(a) Name of organization	on		- (b) Type of organiz	ation	1		(c) Description	n or relatio	nsnip		
	Un	nder pe	nalties of perjury,	I declare tha	t I ha	ve examır	ed this return, i	nclu	uding accom	ıpanyı	ng schedules and s	tatement	s, and	to the	best
					orrect	, and com	plete Declaration	on o	f preparer (other	than taxpayer) is b	ased on	all infor	mation	n of
	9"	nicn pre ****	eparer has any kno 	wieage			1					NA 4l TI	OC 4		
He	ere 👠	****	**				2017-05-02		****	**		May the If with the p			
		Signa	ture of officer or t	rustee			Date		Title			(see ınstr)? 🗹 Y	es 🗆 N	io
		Π_			_										
		Pr	nt/Type preparer's	name	Prep	arer's Sigi	nature		Date		Check if self-	PTIN			
											employed ▶ □		P00133	963	
D:	nid		MARY JEAN MOUG	HAN											
		<u>, </u>													
	epare se Onl		n's name ► LOR	ING WOLCOT	T & C	OOLIDGE	TRUST LLC					Firm's E	IN ▶27	-33965	808
U:	e UIII		n's address ▶ 23	0 CONGRESS	SSTR	FFT									
		[]										Phone n	o (617) 522-4	5521
			ВС	OSTON, MA	02110	2437						i none n	0 (01/	, ,23-0	<u>.</u>

Form 990PF Part XV Line 3 - Grant	s 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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BROCKTON NEIGHBORHOOD HEALTH CENTER 63 MAIN STREET BROCKTON, MA 02301	NONE	PC	GENERAL	50
CAMBRIDGE CAMPING 99 BISHOP ALLEN DRIVE CAMBRIDGE, MA 02139	NONE	PC	GENERAL	100
THE CHARITY GUILD INC PO BOX 4856 BROCKTON, MA 02303	NONE	PC	GENERAL	2,500
CISA ONE SUGARLOAF STREET SOUTH DEERFIELD, MA 01373	NONE	PC	GENERAL	10,000
CITY SPROUTS 25 RIVER STREET CAMBRIDGE, MA 02139	NONE	PC	GENERAL	7,000
EQUAL PO BOX 435 BARRE, MA 01005	NONE	PC	GENERAL	3,000
THE FARMING SCHOOL 488 MORRE HILL ROAD ATHOL, MA 01331	NONE	PC	GENERAL	10,000
GAINING GROUND 12 POND LANE CONCORD, MA 01742	NONE	PC	GENERAL	6,000
GARDENING THE COMMUNITY PO BOX 90774 SPRINGFIELD, MA 01139	NONE	PC	GENERAL	10,000
GROWING PLACES GARDEN PROJECT 325 LINDELLAVE LEOMINSTER, MA 01453	NONE	PC	GENERAL	5,000
HULL LIFESAVING MUSEUM PO BOX 221 HULL, MA 02045	NONE	PC	GENERAL	5,000
LLOYD CENTER FOR THE ENVIRONMENT 430 POTOMSKA ROAD DARTMOUTH, MA 02748	NONE	PC	GENERAL	100
MANY HANDS SUSTAINABILITY CENTER 411 SHELDON RD BARRE, MA 01005	NONE	PC	GENERAL	3,500
MAY INSTITUTE 41 PACELLA PARK DRIVE RANDOLPH, MA 02368	NONE	PC	GENERAL	100
NEW ENGLAND WILDLIFE CENTER 500 COLUMBIAN STREET SOUTH WEYMOUTH, MA 02190	NONE	PC	GENERAL	2,500
Total				172,500

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 NOFA 411 SHELDON RD NONE PC **GENERAL** 5,000 BARRE, MA 01005 NONE NORTHEAST ORGANIC FARMING **GENERAL** 10,000 ASSOCIATION INTERSTATE COUNCIL 411 SHELDON RD BARRE, MA 01005 NORTHEAST ORGANIC FARMING NONE **GENERAL** 2,500 ASSOCIATION OF MASSACHUSETTS 411 SHELDON RD BARRE, MA 01005 NORTHEAST ORGANIC FARMING NONE PC **GENERAL** 20,000 ASSOCIATION OF NEW YORK 1423 HATHAWAY DRIVE FARMINGTON, NY 14425 PC REGIONAL ENVIRONMENTAL COUNCIL NONE **GENERAL** 10,000 PO BOX 255 WORCESTER, MA 01613 PC SEEDS OF SOLIDARITY NONE **GENERAL** 10,000 165 CHESTNUT HILL ROAD ORANGE, MA 01364 THE CARROT PROJECT NONE PC **GENERAL** 10,000 2 BELMONT TERRACE SOMERVILLE, MA 02143 THE FOOD PROJECT 10 LEWIS STREET NONE PC **GENERAL** 5,000 LINCOLN, MA 01773 THEMOVE 34 LINWOOD STREET NONE PC **GENERAL** 50 ROXBURY, MA 02119 PC URBAN FARMING INSTITUTE NONE **GENERAL** 10,000 34 LINWOOD STREET ROXBURY, MA 02119 PC WALTHAM FIELDS COMMUNITY FARM NONE **GENERAL** 20,000 240 BEAVER ST WALTHAM, MA 02452 PC WALTHAM LAND TRUST PO BOX 541120 NONE **GENERAL** 100 WALTHAM, MA 02454 YOUTHCONNECT SUMMER NONE PC **GENERAL** 5,000 1 FAIRLAWN DRIVE WORCESTER, MA 01602 172,500 Total . .

За

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TY 2016 Accounting Fo	ees Scho	edule			
	Name:	GREEN L	EAF FOUNDATION		
		WILLIAM	B PERKINS ET AL	TRUSTEES	
	EIN:	04-3536	671		
Category	Ame	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LORING, WOLCOTT & COOLIDGE TRUST LLC		1,041	1,041		0

TY 2016 General Explanation Attachment

Name: GREEN LEAF FOUNDATION

WILLIAM B PERKINS ET AL TRUSTEES

EIN: 04-3536671

General Evolunation Attachmen

General E	хріанаціон	Attachmer	IL .
Identifier	Return Reference	Explanation	
1		PART VIII LINE 1(B)	990PF STATEMENTPART VIII OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERSAND THEIR COMPENSATION AND HOURS SPENT PER WEEK HOURS SPENT THE TIME SPENT BY THE TRUSTEE/S MANAGING THE AFFAIRS OF THEFOUNDATION VARIES FROM WEEK TO WEEK AND YEAR TO YEAR FOR990PF REPORTING PURPOSES, AN ESTIMATE OF 1 TO 3 HOURS PERWEEK HAS BEEN INDICATED THE TRUSTEE/S ARE PROFESSIONALFIDUCIARIES WHO MANAGE A NUMBER OF TRUST/FOUNDATIONRELATIONSHIPS AND WHO EMPLOY ACCOUNTING, SUPPORT AND TAXCOMPLIANCE STAFF TO ASSIST WITH THE ADMINISTRATION OF SAIDRELATIONSHIPS THE 1 TO 3 HOUR TIME NOTED REFLECTS ANESTIMATE OF THE TIME SPENT BY THE NAMED TRUSTEE/S AS WELL ASTHEIR AGENTS OR EMPLOYS THE ACTUAL TIME SPENT MAY DIFFERFROM THE ESTIMATE IN ANY GIVEN WEEK/YEAR THE TRUSTEES FEES NOTED ALSO INCLUDES AN INVESTMENT ADVISORY COMPONENT WHICH IS BASED IN PART ON THE FOUNDATION INVESTMENTASSETS AND WHICH VARIES FROM QUARTER TO QUARTER BASED ONFAIR MARKET VALUE

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TY 2016 Investments Corporate Stock Schedule

Name: GREEN LEAF FOUNDATION

WILLIAM B PERKINS ET AL TRUSTEES

EIN: 04-3536671

Name of Stock	End of Year Book Value	End of Year Fair Market Value	
500 SHS JOHNSON & JOHNSON	25,054	57,605	
1,000 SHS MICROSOFT CORP	24,030	62,140	
750 SHS AUTOMATIC DATA PROCESSING	28,643	77,085	
875 SHS STRYKER CORP	23,376	104,834	
1050 SHS APPLE INC	19,705	121,611	
2,000 SHS CHURCH & DWIGHT	27,788	88,380	
800 SHS RECKITT BENCKISER GROUP	38,606	68,070	
1,875 SHS NOVOZYMES A/S B	31,487	64,765	
1000 SHS FISERV INC	25,018	106,280	
400 SHS DEERE & CO	30,071	41,216	
1000 SHS MASTERCARD INC	23,621	103,250	
1,000 SHS TJX COMPANIES INC	27,212	75,130	
700 SHS UNITED NATURAL FOODS	30,315	33,404	
850 SHS COGNIZANT TECHNOLOGY SOLUTIONS	25,454	47,626	
250 SHS CUMMINS INC	24,427	34,168	
425 SHS INTUIT	25,516	48,709	
950 SHS STARBUCKS CORP	25,209	52,744	
875 SHS NOVO-NORDISK A/S ADR	24,704	31,378	
750 SHS JARDINE MATHESON HOLDINGS LTD	41,335	41,438	
430 CELGENE CORPORATION	29,998	49,773	
205 GILEAD SCIENCES	20,115	14,680	
40 ALPHABET INC CLASS C	7,715	30,873	
40 ALPHABET INC CLASS A	7,736	31,698	
220 DANAHER CORP	15,167	17,125	
150 THERMO FISHER SCIENTIFIC INC	20,326	21,165	
270 FORTIVE CORP	13,316	14,480	

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TY 2016 Other Expenses Schedule					
Name:	GREEN LEAF FO	UNDATION			
	WILLIAM B PERKINS ET AL TRUSTEES				
EIN: 04-3536671					
Other Expenses Schedule				,	
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
COMMONWEALTH OF MASSACHUSETTS ANNUAL REPORT PC	35	0		35	
AGENT FEE	10	10		0	

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TY 2016 Other Increases Schedule						
Name:	GREEN LEAF F	OUNDATION				
	WILLIAM B PE	RKINS ET AL TRUSTEES				
EIN:	04-3536671					
De	escription		Amount			
VOIDED CHECK. CHARITY HAS CLOSED				100		

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TY 2016 Other Professional Fees Schedule					
I					
Name: GREEN LEAF FOUNDATION					
WILLIAM B PERKINS ET AL TRUSTEES					
EIN: 04-3536671					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LWC FIDUCIARY ADVISORS	4,664	4,664		0	
LORING, WOLCOTT & COOLIDGE TAX PREP FEE	1,000	0		1,000	

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TY 2016 Taxes Schedule					
				!	
Name:	Name: GREEN LEAF FOUNDATION				
	WILLIAM B PERKINS ET AL TRUSTEES				
EIN: 04-3536671					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FOREIGN TAXES	260	260	1	0	
2015 FEDERAL EXCISE TAX BAL DUE	194	0		0	
2016 ESTIMATED FEDERAL EXCISE TAX	1,400	0		0	