DLN: 93491319015337

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

		ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016	
		ındatıon e Family Foundation			A Employer Id	entification numbe	er
c/c	BGA F	amily Office			04-3558239		
		d street (or P O box number if mail is not delivered to street address) Park Drive Suite 1150	Room/suite		B Telephone nu (617) 948-3808	mber (see instructio	ns)
		n, state or province, country, and ZIP or foreign postal code 02210	. L			application is pendir	ng, check here
					1		- ▶ ∟
G Ch	neck al	l that apply □ Initial return □ Initial return of a	former public charity		_	ganizations, check h	▶ ∟
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change				rganizations meeting k here and attach co	
1 C	neck ty	rpe of organization ✓ Section 501(c)(3) exempt private	foundation			undation status was	
_		a 4947(a)(1) nonexempt charitable trust \square Other taxable			under sectio	n 507(b)(1)(A), che	ck nere
			☑ Cash ☐ Accru	al	F If the founda	ation is in a 60-mont	h termination
		from Part II, col (c), •\$ 14,183,418 (Part I, column (d) must	be on cash basis)		under sectio	n 507(b)(1)(B), che	ck here 🕨 🗀
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)	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	5,996,572				
	2	schedule) Check if the foundation is not required to attach					
	3	Sch B					
	4	Dividends and interest from securities	174,619		174,619		
	5a	Gross rents	,		,		
	ь	Net rental income or (loss)					
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	-542,459				
Revenue	b	Gross sales price for all assets on line 6a					
Re	7	Capital gain net income (from Part IV, line 2)			4,781,219		
	8	Net short-term capital gain			, ,		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	439,398		0		
	12	Total. Add lines 1 through 11	6,068,130		4,955,838		
	13	Compensation of officers, directors, trustees, etc	С		0		ı
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
Ē	16a	Legal fees (attach schedule)					
ΕX	b	Accounting fees (attach schedule)					
e e	_ c	. , ,					
Operating and Administrative Expenses	17 18	Interest	30,500	-	500		
<u> </u>	19	Taxes (attach schedule) (see instructions)	30,300				
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications					
<u>5</u>	23	Other expenses (attach schedule)	10,261		7,421		
at⊪	24	Total operating and administrative expenses.					
be		Add lines 13 through 23	40,761		7,921		1
0	25	Contributions, gifts, grants paid	392,802				392,80
	26	Total expenses and disbursements. Add lines 24 and 25	A22 F43		7 024		202.00
	27	Subtract line 26 from line 12	433,563	+	7,921		392,80
	a	Excess of revenue over expenses and	5,634,567				
	ь	disbursements Net investment income (if negative, enter -0-)			4,947,917		
	c	Adjusted net income(if negative, enter -0-)			.,, , , + ,		
			<u> </u>	I			

0

1,002,914

6,121,137

8,111,902

8,111,902

8,111,902

8,111,902

2,744,116

10,656,966

14,183,418

14,183,418

14,183,418

14,183,418

2

3

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6

8,111,902

5,634,567

14,183,418

14,183,418 Form 990-PF (2016)

436,949

782,336

2,744,116

10,656,966

14,183,418

782,336

Assets 9 10a b С

11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

2

3

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

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) -

Permanently restricted . .

Temporarily restricted

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

Part IV	Capital Gains and L	osses for Tax on Investment	t Income				
		(a) nd(s) of property sold (e g , real esta e, or common stock, 200 shs MLC C		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1a See A	dditional Data Table						
b							
С							
d							
е							
G	(e) Gross sales price			(g) other basıs ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See A	dditional Data Table						
b							
С							
d							
е							
Comp	olete only for assets show	ring gain in column (h) and owned by	the foundation	on 12/31/69	(I)	
FM	(i) 1 V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(i) (j), if any	col (k), but not	h) gain minus less than -0-) or om col (h))	

Page 3

		(F	l l	(-) [(-) (3)	
а	See Additional Data Table					
b						
С						
d						
e						
	Complete only for assets show	ving gain in column (h) and owned	by the foundation on 12/31/69		(1)	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) Losses (from col (h))		
а	See Additional Data Table					
b						
С						
d						
e						
2	Capital gain net income or (n		aın, also enter ın Part I, line 7 oss), enter -0- ın Part I, line 7	2	4,781,219	
3	Net short-term capital gain o	r (loss) as defined in sections 1222	(5) and (6)			
	If gain, also enter in Part I, li in Part I, line 8	ne 8, column (c) (see instructions)	If (loss), enter -0-	3		
Part	V Qualification Unde	r Section 4940(e) for Reduc	ced Tax on Net Investment I	ncome		

Complete only for assets		(1)				
(i)	(j) Adjusted basis	(k) Excess of col(ı)	,	Gains (Col (h) gain minus col (k), but not less than -0-) or		
F M V as of 12/31/69	as of 12/31/69	over col(j), if any		Losses (from col (h))		
a See Addıtıonal Data Table						
b						
С						
d						
e						
_		If gain, also enter in Part I, line 7				
2 Capital gain net income	or (net capital loss)	If (loss), enter -0- in Part I, line 7	2	4,781,219		
3 Net short-term capital o	ain or (loss) as defined in sections :	1222(5) and (6)	· -	1,751,215		
· •	t I, line 8, column (c) (see instruction	, , , , ,	,			
in Part I, line 8			} 3			
			, –	-		
Part V Qualification U	Inder Section 4940(e) for Re	educed Tax on Net Investmer	t Incom	ne		
(For optional use by domestic pi	rivate foundations subject to the sec	ction 4940(a) tax on net investment	ncome)			
If section 4940(d)(2) applies, le	ave this part blank					
		ble amount of any year in the base p	eriod?	∐ Yes 🗹 No		
If "Yes," the foundation does no	t qualify under section 4940(e) Do	not complete this part				
1 Enter the appropriate am	ount in each column for each year,	see instructions before making any	entries			
(a) Base period years Calendar	(b)	(c)		(d) Distribution ratio		
year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	(cc	b) (b) divided by col (c))		
2015	728,503	7,613,820		0 095682		
2014	377,968	8,308,777		0 045490		
2012	262 025	4 607 050		0.077307		

2012 365,400 5,519,926 0 066197 2011 586,850 4,578,347 0 128179 0 412945 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the 3 0 082589 number of years the foundation has been in existence if less than 5 years 4 13,480,989 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 **5** Multiply line 4 by line 3 5 1,113,381 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 49,479 7 **7** Add lines 5 and 6 . 1,162,860

8 Enter qualifying distributions from Part XII, line 4 8 392,802 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 instructions Form **990-PF** (2016)

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Pā	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	IONE".
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	VE	
Tota	al number of others receiving over \$50,000 for professional services	0
Pa	art IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of Inizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	N/A	0
2		
3		
4		
Pa	art 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	N/A	0
2	N/A	0
	All other program-related investments. See instructions	
	al. Add lines 1 through 3	<u>0</u> 0
		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

3a 3h

4

5

392.802

392.802

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Amounts set aside for specific charitable projects that satisfy the

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

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.

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).

3

4

5

392.802

182,289

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(d)

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Part XIII	Undistributed Income (see instruc	tions)					

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Part XIII	Und

b Total for prior years Excess distributions carryover, if any, to 2016 From 2011.

1 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.

- **b** From 2012.
- 121,612
- c From 2013. . . d From 2014. e From 2015.
- 147.829 f Total of lines 3a through e. 4 Qualifying distributions for 2016 from Part

(Election required—see instructions). c Treated as distributions out of corpus (Election

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) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

d Excess from 2015. . . e Excess from 2016. . .

b Excess from 2013. . c Excess from 2014. . . .

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:

- 375,858 XII, line 4 🕨 \$

(a)

Corpus

1.008.839

182,289

826,550

181.251

645,299

363.540

121.612 147,829

375.858

(b)

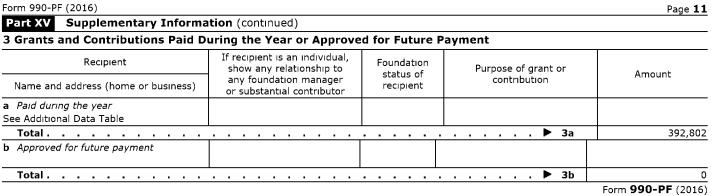
Years prior to 2015

(c)

2015

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years

same amount must be shown in column (a))



m 990-P	Analysis of Tuesans Duadysins					
art XVI	-A Analysis of Income-Producing	Activities		1		(-)
er gross:	amounts unless otherwise indicated	,	Isiness income	Excluded by sectio		(e) Related or exemp function income
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions
	and contracts from government agencies					
Interes	st on savings and temporary cash					
Dividen	ds and interest from securities			14	174,619	
	inanced property.					
b Not de	ebt-financed property					
Net re	ntal income or (loss) from personal property					
	vestment income			14	1,012	
	r (loss) from sales of assets other than			18	-542,459	
	ome or (loss) from special events			10	342,433	
Gross p	rofit or (loss) from sales of inventory					
Other re						
	ax Difference			18	438,386	
~						
d e						
d e Subtota	Add columns (b), (d), and (e).		C		71,558	
d e Subtota Total. /	Add line 12, columns (b), (d), and (e)			1	71,558 3	71,558
d e Subtota Total. A se worksh	Add columns (b), (d), and (e).	ns)		1		
d e Subtota Total. A e worksh	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh art XVI ne No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. Relationship of Activities to the Explain below how each activity for which	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
de Subtota Total. A worksh Irt XVII	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
de Subtota Total. A worksh Irt XVI ne No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
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d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A 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 calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI ne No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	
d e Subtota Total. A e worksh irt XVI ne No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculation. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contrib	3uted importantly to	

Page **13**

ŀ	art XVI	Exempt Organ		1 01131	icis IU a	iliu II alisac	01	is and Ne	iatio	iisiiips Witii Noi	iciiaiit	JUIC		
1		rganization directly or i Code (other than secti									on 501		Yes	No
а	Transfers	from the reporting fou	ndation to a n	oncha	arıtable exe	empt organizat	on (of		-				
	(1) Cash											1a(1)		No
	(2) Othe	er assets									г	1a(2)		No
b	Other tra	nsactions												
	(1) Sale	s of assets to a noncha	rıtable exemp	t orga	inization.						. [1b(1)		No
	(2) Purc	chases of assets from a	noncharitable	exem	npt organiz	ation					[1b(2)		No
	(3) Rent	tal of facilities, equipme	nt, or other a	ssets.								1b(3)		No
		nbursement arrangeme									.	1b(4)		No
	. ,	ns or loan guarantees.										1b(5)		No
		rmance of services or r	•		_						.	1b(6)		No
	_	of facilities, equipment,			-						· [1c		No
d		swer to any of the abov ods, other assets, or se												
		ansaction or sharing arr												
			1											
(a)	Line No	(b) Amount involved	(c) Name of	noncha	aritable exer	mpt organization	+	(d) Descrip	tion of	transfers, transactions,	, and shari	ng arra	ngemen	ts
							-							
2a	Is the fou	ındatıon directly or indi	rectly affiliated	d with	, or related	d to, one or mo	re t	ax-exempt	organ	zations				
	described	in section 501(c) of th	e Code (other	than	section 50	1(c)(3)) or in s	ecti	on 527?			\sqsubset	Yes	✓ N	0
b	If "Yes," o	complete the following :	schedule											
		(a) Name of organizat	ion		(b) Type of organiz	zatioi	n e		(c) Description	of relation	iship		
	Und	der penalties of perjury,	. I declare tha	t I hav	ve examin	ed this return.	ınclı	udina accom	npanvi	ng schedules and st	atements	s. and	to the l	best
	of r	my knowledge and belie	f, it is true, co											
	9""	ich preparer has any kn	owledge		ı									
He	ere 👠	*****				2017-11-13		****	**		May the IR with the pr			
		Signature of officer or	trustee			Date		Title			see instr)			
		_						1			,			
		Print/Type preparer	s name	Prepa	arer's Sıgn	ature		Date		Check if self-	PTIN			
										employed ▶ □	F	00210	893	
D-	id	Alfred C Torrisi						2017-11	-13	employed P				
	iid Tanara	CPAMSTCFP												
	epare	printing matrice and	anson Heath 8	& Com	npany PC						Fırm's EI	N ▶ 04	-29580	48
US	e Only		0 New Englan	d Buer	iness Cent	er Dr								
				a Dusi	mess cell	C. D.					Dhono no	(602	\ 627.7	1600
		Α	107 Andover, MA 01810								Phone no	(003	, 02/-2	1000

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 274 Q2 HOLDINGS 2013-03-01 2016-11-19 1973 Q2 HOLDINGS 2013-03-01 2016-11-09 242 WAYFAIR 2011-06-21 2016-11-11 1690 WAYFAIR 2011-06-21 2016-11-11 6007 ZAYO 2012-06-29 2016-08-31 39793 ZAYO 2012-06-29 2016-08-31 4593 ZAYO 2012-06-29 2016-08-31 2016-03-15 2520 Q2 HOLDINGS 2013-03-01 2566 Q2 HOLDINGS 2013-03-01 2016-08-25 28423 SABRE 2007-03-28 2016-01-15 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 7,735 1,913 5,822 55,697 13,772 41,925 8,451 8,451 59,014 12,472 46,542 172,508 13,635 158,873 1,142,770 90,322 1,052,448 131,901 10,425 121,476 53,290 19,026 34,264 73,715 19,399 54,316 710,056 170,822 539,234 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 5,822 41,925 8,451 46,542 158,873 1,052,448 121,476 34,264 54,316 539,234

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 1947 WAYFAIR 2011-06-21 2016-03-04 1935 WAYFAIR 2011-06-21 2016-05-19 3229 WAYFAIR 2011-06-21 2016-08-24 29929 ZAYO 2012-06-29 2016-02-16 40385 ZAYO 2012-06-29 2016-05-09 49174 ZAYO 2012-06-29 2016-07-18 4754 MTG INV TR IN 2015-01-01 2016-05-25 3106 AMERICAN CAP AGY CORP 2015-01-01 2016-05-25 3636 AMERICAM CAP MTG INV 2015-01-01 2016-05-25 5070 APOLLO RESIDENTAL MORTGAGE 2015-01-01 2016-05-25 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 85,987 14,369 71,618 76,526 12,472 64,054 122,839 20,797 102,042 682,345 68,431 613,914 1,072,828 92,161 980,667 1,396,093 115,366 1,280,727 89,454 66,238 -23,21659,259 85,226 -25,967 56,858 85,307 -28,449 67,776 98,440 -30,664 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 71,618 64,054 102,042 613,914 980,667 1,280,727 -23,216 -25,967 -28,449 -30,664

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 5270 CHERY HILL MTG INVCORP 2015-01-01 2016-05-25 7046 CYS INVTS INC 2015-01-01 2016-05-25 5572 NEW RESIDENTIAL MORTGAGE INVTCORP 2015-01-01 2016-05-25 8569 TWO HBRS INVT CORP 2015-01-01 2016-05-25 13050 CREDIT SUISSE X-LINKS 2015-03-04 2016-12-02 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-01-31 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-02-29 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-03-31 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-04-30 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-05-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 80,305 101,744 -21,439 57,138 92,716 -35,578 74,832 70,917 3,915 72,784 90,972 -18,188 264,390 410,298 -145,908 50 74 -24 68 50 -18 61 84 -23 57 74 -17 60 82 -22 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -21,439 -35,578 3,915 -18,188 -145,908 -24 -18 -23 -17 -22

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-06-30 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-07-31 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-08-31 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-09-30 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-10-31 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-11-30 ISHARES GOLD TRUST PRINCIPAL 2013-02-06 2016-12-31 631 WAYFAIR 2011-06-21 2016-08-11 841 WAYFAIR 2011-06-21 2016-02-26 841 WAYFAIR 2011-06-21 2016-03-02 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 70 56 -14 77 62 -15 63 80 -17 60 77 -17 59 77 -18 61 88 -27 80 55 -25 23,711 4,716 18,995 34,472 6,286 28,186 33,648 6,286 27,362 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -14 -15 -17 -17 -18 -27 -25 18,995 28,186 27,362

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold How acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 841 WAYFAIR 2011-06-21 2016-05-11 841 WAYFAIR 2011-06-21 2016-05-17 BGA HORIZON FUND K-1 Р 2015-01-01 2016-12-31 Capital Gains Dividends Р Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (q) 31,950 6,286 25,664 32,437 6,286 26,151 195.880 -195.88099 99 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any 25,664 26,151

-195,880 99

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 Big Brothers Big Sisters of Palm Beach & Exempt Charitable 1,000 Martin Counties 5033 SE Federal Highway Stuart, FL 34997 Boch Center 270 Tremont Street Exempt Charitable 10,000

Boston, MA 02116		·		,
Boston Symphony Orchestra Symphony Hall 301 Mass Ave Boston, MA 02115	N/A	Exempt	Charitable	1,000
Buzzards Bay Coalition 114 Front Street New Bedford, MA 02740	N/A	Exempt	Charitable	26,000

City Year 285 Columbus Ave N/A Exempt Charitable

1,000

Boston, MA 02116 Total . .

392,802 3a

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 Cure Alzheimers Fund N/A exempt Charitable 10,000 34 Washington St Suite 300 Wellesley Hills, MA 02481 N/A Charitable 1,000 Cystic Fibrosis Foundation Exempt 4550 Montgomery Ave Suite 1100

N Bethesda, MD 02814				
Dartmouth Natural Resources Trust 404 Elm Street Dartmouth, MA 02748	N/A	exempt	Charitable	25,000
Harvard University 124 Mount Auburn Street Cambridge, MA 02138	N/A	Exempt	Charitable	100,000

N/A Charitable 1,000 Exempt

Hobe Sound Community Chest

11450 Southeast Dixie Highway Hobe Sound, FL 33455

Total . 392,802

3a

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				
Jupiter Island Medical Clinic Inc 100 Estrada Square Hobe Sound, FL 33455	N/A	Exempt	Charitable	1,000
Jupiter Medical Center Foundation	N/A	Exempt	Charitable	10,000

11000 000111071 00 100				
Jupiter Medical Center Foundation 1210 South Old Dixie Highway Jupiter, FL 33458	N/A	Exempt	Charitable	
Massachusetts General Hospital	N/A	Evemnt	Charitable	

Jupiter, FL 33458				
Massachusetts General Hospital 100 Charles River Plaza Suite 600 Boston, MA 02114	N/A	Exempt	Charitable	161,052

100 Charles River Plaza Suite 600 Boston, MA 02114	IN/A	Exempt	Charitable	161,032
New Bedford Whaling Museum 18 Johnny Cake Highway New Bedford, MA 02740	N/A	Exempt	Charitable	1,000

New Bedford Whaling Museum 18 Johnny Cake Highway New Bedford, MA 02740	N/A	Exempt	Charitable	1,000
New England Aquarium Central Wharf	N/A	Exempt	Charitable	1,000

392,802

18 Johnny Cake Highway New Bedford, MA 02740				
New England Aquarium Central Wharf Boston, MA 021103399	N/A	Exempt	Charitable	1,

New Bedford, MA 02740				
New England Aquarium Central Wharf Boston, MA 021103399	N/A	Exempt	Charitable	1

Total .

3a

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 Ocular Immunology & Livertis Foundation | N/A Evemnt Charitable 1,000

5 Cambridge Center 8th Floor Cambridge, MA 02142	N/A	Exempt	Спаптале	
Our Sisters' School PO Box 7269	N/A	Exempt	Charitable	

New Bedford, MA 02742				
Pan MA Challenge 77 Fourth Ave Needham, MA 02494	N/A	Exempt	Charitable	1,250
President And Fellows of Harvard	N/A	Exempt	Charitable	30,000

1,000

Needham, MA 02494		Exempt	Chartable	±,.
President And Fellows of Harvard University 124 Mount Auburn Street	N/A	Exempt	Charitable	30,

President And Fellows of Harvard University 124 Mount Auburn Street Cambridge, MA 02138	N/A	Exempt	Charitable	30,000
Teach For America	N/A	Exempt	Charitable	2,500

Cambridge, MA 02138				
Teach For America 315 West 36th Street 7th Floor New York, NY 10018	N/A	Exempt	Charitable	2,500

each For America 15 West 36th Street 7th Floor lew York, NY 10018	N/A	Exempt	Charitable	2,

Teach For America	N/A	Exempt	Charitable	2
315 West 36th Street 7th Floor New York, NY 10018		·		
11011 10111/111 20020				

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Recipient 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 The Soldiers Fund N/A Exempt Charitable 1,500 711 Atlantic Ave Lower Level Boston, MA 02111 N/A Charitable The Trustees of Reservations Exempt 1,000 572 Essex Street

Beverly, MA 01915				
United Way of Massachusetts 245 Summer Street Suite 1401 Boston, MA 02210	N/A	Exempt	Charitable	2,500
Urban Improv 670 Center St Jamica Plain, MA 02130	N/A	Exempt	Charitable	1,000

N/A Exempt Charitable 1,000

Wednesday's Child POBox 136 Weston, MA 02493

Total

392,802 3a

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 9349131901533					
TY 2016 All Other Program Related Investments Schedule							
•	The Foots of Foots Foots						
Name:	The Frisbie Family Found	ation					
	c/o BGA Family Office						
EIN:	04-3558239						
	Category	Amount					
N/A		(

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319015337
TV 2016 Investments Corners	to Stock Schodulo	
TY 2016 Investments Corporate	te Stock Schedule	
Name:	The Frisbie Family Foundation	
	c/o BGA Family Office	

EIN: 04-3558239					
Name of Stock		End of Year Book Value	End of Year Fair Market Value		
ISHARES Gold Trust		257,610	257,610		
JPM Chase & Co Alerian MLP		524,726	524,726		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319015337				
TY 2016 Investments Government Obligations Schedule						
Name:	The Frisbie Family Foundation					
	c/o BGA Family Office					
EIN:	04-3558239					
US Government Securities - End of Year Book Value:	2,744,116					
US Government Securities - End of Year Fair Market Value:	2,744,116					
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: 93491319015337
TY 2016 Investments - Other S		
Name:	The Frisbie Family	Foundation

1,639,749

1,639,749

Maille.	THE Trisble Fairing Foundation
	c/o BGA Family Office
EIN:	04-3558239

Greenlight Masters Offshore

EIN: 04-35582				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
Battery AIF Corp	FMV	7,012,480	7,012,480	
BGA Horizon Fund, LLC	FMV	182,095	182,095	
BGA Horizon Fund, LLC Distribution Receivable	FMV	47,314	47,314	
BGA Focus Fund	FMV	1,775,328	1,775,328	

FMV

efile GRAPHIC print - DO NOT PROCESS	As Filed Data - DLN: 93491319015337				
TY 2016 Other Expenses Scho	edule				
Name	: The Frisbie Fam	nly Foundation			
	c/o BGA Family Office				
EIN: 04-3558239					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Investment Expenses	124	124		0	
Portfolio Deductions from Pass-Thrus	7,278	7,278		0	
Professional Fees	2,840	0		0	
Other Deductions from Pass-Thrus	19	19		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319015337
TY 2016 Other Income Schedul	e	

Name: The Frisbie Family Foundation

c/o BGA Family Office

EIN: 04-3558239

0.1.	 -	 	_	~ -	i	

diei filcome Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
Nontaxable Distribution (Return of Capital)	1,012	0	1,012			
Book/Tax Difference	438,386		438,386			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319015337		
TY 2016 Other Increases Schedule					
Name:	The Frisbie Fa	mily Foundation			
ı	c/o BGA Famil	y Office			
EIN:	04-3558239				
De	escription		Amount		
Change in Unrealized Holding Gain/Loss			436,949		

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data	-	DLI	N: 93491319015337
TY 2016 Taxes Schedu	ıle				
		The Frisbie F c/o BGA Fan 04-3558239	•		
Category	Ar	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
State Tax		500	500		0
Federal Taxes		30,000	0		0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319015337						
Schedule B	Schedu	le of Contributors	5	OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	F)					
Name of the organizat The Frisbie Family Found			Employ	yer identification number		
c/o BGA Family Office	31011		04-355	8239		
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) or	ganization				
	4947(a)(1) nonexempt charm	table trust not treated as a	private foundation			
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private fou	indation				
	4947(a)(1) nonexempt chard	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private fou	ndation				
•	ation filing Form 990, 990-EZ, or 990-P r property) from any one contributor Cc		-	• ,		
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 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 290-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 290-EZ, or 990-PF)						
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 0-PF	Cat No 30613X	Schedule B (Fori	m 990, 990-EZ, or 990-PF) (2016)		

Name of organization
The Frisbie Family Foundation

Employer identification number

o BGA Fa	ramily Foundation imily Office	04-35582	04-3558239		
Part I	Contributors (see Instructions) Use duplicate copies of Part I if additional	I space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	See Additional Data Table	\$	Person Payroll Noncash		
			(Complete Part II for noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s ———	Person Payroll Noncash (Complete Part II		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	for noncash contribution) (d) Type of contribution		
		s	Person Payroll Noncash (Complete Part II for noncash		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution		
		\$	Person Payroll Noncash		
			(Complete Part II for noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s ———	Person Payroll Noncash		
			(Complete Part II for noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash		
			(Complete Part II for noncash contribution)		

Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)		Page 3
Name of org The Frisbie F C/o BGA Fam	amily Foundation		Employer identification number
Part II	Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed		04-3558239
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)) (d) Date received
	See Additional Data Table	_\$	_
(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
		_\$	_
		·	 '

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat The Frisbie Family Fo c/o BGA Family Offic	oundation		Employer identification number 04-3558239
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu of exclusively religious, chari- actions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	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
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	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	` ,	Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Additional Data

Software ID:

Software Version:

EIN: 04-3558239

Name: The Frisbie Family Foundation

c/o BGA Family Office

Form 990 Schedule B, 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	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1	\$ 98,077	Person ☐ Payroll ☐ Noncash ✔
	Boston, MA02210		(Complete Part II for noncash contribution)
<u>2</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1	\$ 173,173	Person ☐ Payroll ☐ Noncash ☑
	Boston, MA02210		(Complete Part II for noncash contribution)
<u>3</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	<u> </u>	Person ☐ Payroll ☐ Noncash ☑
			(Complete Part II for noncash contribution) Person
4	Richard Frisbie C/o BGA 1 Marina Park Drive Suite 1	<u> </u>	Payroll ☐ Noncash ☑
	Boston, MA 02210		(Complete Part II for noncash contribution)
<u>5</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 274,884	Person ☐ Payroll ☐ Noncash ✓ (Complete Part II for noncash contribution)
<u>6</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 9,735	Person Payroll Noncash (Complete Part II for noncash contribution)

Offit 550 Scheduk	e B, Part I - Contributors (see Instructions) Use duplicate (copies of Part I if additional sp	ace is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	Beacon Street Investment Partners LLC		Person
<u>-</u>	c/o BGA 1 Marina Park Drive Suite 1		Payroll 🗌
		\$ 615,056	Noncash 🗹
	Boston, MA02210		(Complete Part II for noncash contribution)
	Beacon Street Investment Partners LLC		Person 🗌
<u>8</u>			Payroll 🗌
	c/o BGA 1 Marina Park Drive Suite 1	\$ 504,419	Noncash 🔽
	Boston, MA02210		(Complete Part II for noncash contribution)
	Beacon Street Investment Partners LLC		Person
9			Payroll
	c/o BGA 1 Marina Park Drive Suite 1	\$ 75,830	Noncash ☑
	Boston, MA02210		
			(Complete Part II for noncash contribution)
	Beacon Street Investment Partners LLC		Person 🗌
<u>10</u>	<u> </u>		Payroll 🔲
	c/o BGA 1 Marina Park Drive Suite 1	\$ 47,628	Noncash 🗹
	Boston, MA02210		(Complete Part II for noncash contribution)
	Beacon Street Investment Partners LLC		Person 🗍
<u>11</u>			Payroll
	c/o BGA 1 Marina Park Drive Suite 1	\$ 802,588	Noncash 🗹
	Boston, MA02210		(Complete Part II for noncash contribution)
			Person 🔲
<u>12</u>	Richard Frisbie		Payroll 🗌
	c/o BGA 1 Marina Park Drive Suite 1	\$ 9,045	Noncash 🗹
	Boston, MA02210		(Complete Part II for noncash contribution)

orm 990 Schedule B, 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	
<u>13</u>	Richard Frisbie C/o BGA 1 Marina Park Drive Suite 1 Boston, MA 02210	\$ 15,784	Person Payroll Noncash (Complete Part II for noncash contribution)	
<u>14</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 295,283	Person Payroll Oncash (Complete Part II for noncash contribution)	
<u>15</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 8,509	Person	
<u>16</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 7,884	contribution) Person Payroll Noncash (Complete Part II for noncash contribution)	
<u>17</u>	Richard Frisbie c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 306,711	Person Payroll Complete Part II for noncash contribution	
<u>18</u>	Beacon Street Investment Partners LLC c/o BGA 1 Marina Park Drive Suite 1 Boston, MA02210	\$ 67,152	Person	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Beacon Street Investment Partners LLC		Person 🗌
<u>19</u>			Payroll \square
	c/o BGA 1 Marina Park Drive Suite 1	\$ 1,103,718	, ⊡ Noncash ☑
	Boston, MA02210		
			(Complete Part II for nonce contribution)
	Beacon Street Investment Partners LLC		Person 🗍
<u>20</u>			Payroll 🗌
	c/o BGA 1 Marına Park Drıve Suite 1	\$ 108,225	Noncash ☑
	Boston, MA02210		(Complete Part II for nonca
			contribution)
	beacon Street Investment Partners LLC		Person
21	c/o BGA 1 Marina Park Drive Suite 1		Payroll 🗌
	C/O BGA I Marina Park Drive Suite I	\$ 64,869	Noncash 🗹
	Boston, MA02210		(Complete Part II for nonca
			contribution)
22	Beacon Street Investment Partners LLC		Person 🗌
_	c/o BGA 1 Marina Park Drive Suite 1		Payroll 🗌
	<u> </u>	\$ 1,151,412	Noncash 🗹
	Boston, MA 02210		(Complete Part II for nonca
	beacon Street Investment Partners LLC		contribution)
23	bedeen select investment i didicis lee		Person
_	c/o BGA 1 Marina Park Drive Suite 1	£ 56 773	Payroll 🗌
	Paston MA02210	\$ 56,773	Noncash 🗹
	Boston, MA02210		(Complete Part II for nonca
	Beacon Street Investment Partners LLC		contribution) Person
<u>24</u>			
	c/o BGA 1 Marina Park Drive Suite 1	\$ 59,420	Payroll 🗌
	Boston, MA02210		Noncash 🗹
	503ton, PIA02210		(Complete Part II for nonca

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Type of contribution Νo. Name, address, and ZIP + 4 Total contributions Beacon Street Investment Partners LLC Person <u>25</u> Payroll c/o BGA 1 Marina Park Drive Suite 1 \$ 35,234 Noncash 🔽 Boston, MA02210 (Complete Part II for noncash contribution) Beacon Street Investment Partners LLC Person 26 Payroll c/o BGA 1 Marina Park Drive Suite 1 \$ 31,945 Noncash 🗹 Boston, MA02210 (Complete Part II for noncash contribution) Beacon Street Investment Partners LLC Person 27 Payroll c/o BGA 1 Marina Park Drive Suite 1 \$ 32,168 Noncash 🗹 Boston, MA02210 (Complete Part II for noncash contribution) Beacon Street Investment Partners LLC Person 28 Payroll c/o BGA 1 Marina Park Drive Suite 1 \$ 23,874 Noncash 🗹 Boston, MA02210 (Complete Part II for noncash contribution)

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of 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
1	3,909 shares Sabre Corp	\$ 98,077	2016-01-15
2	7,649 Shares Zayo	<u> </u>	2016-02-16
<u>3</u>	257 Shares Wayfair	<u> </u>	2016-03-04
<u>4</u>	267 Shares Q2	<u> </u>	2016-03-15
<u>5</u>	10,303 Shares Zayo	\$ 274,884	2016-05-09
<u>6</u>	245 Shares Wayfair	\$ 9,735	2016-05-19
7	24,514 Shares Sabre	<u>\$ 615,056</u>	2016-01-15
<u>8</u>	22,280 Shares Zayo	\$ 504,419	2016-02-16
9	1690 Shares Wayfaır	\$ 75,830	2016-03-04
<u>10</u>	2,253 Shares Q2	\$ 47,628	2016-03-15

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (see instructions) 11 30,082 Shares Zayo \$ 802,588 2016-05-09 12 314 Shares Q2 \$ 9,045 2016-08-25 <u>13</u> 411 Shares Wayfair \$ 15,784 2016-08-24 14 10,379 Shares Zayo 2016-07-18 \$ 295,283 <u>15</u> 2016-11-11 242 Shares Wayfair \$ 8,509 16 274 Shares Q2 \$ 7,884 2016-11-09 <u>17</u> 10,600 Shares Zayo \$ 306,711 2016-08-31

2016-05-19

2016-07-18

2016-08-24

\$ 67,152

\$ 1,103,718

\$ 108,225

<u>18</u>

<u>19</u>

20

1,690 Shares Wayfair

38,795 Shares Zavo

2,818 Shares Wayfair

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No. from Part I Description of noncash property given Date received (see instructions) 21 2,252 Shares Q2 \$ 64,869 2016-08-25 22 39,793 Shares Zayo \$ 1,151,412 2016-08-31 23 1,973 Shares Q2 \$ 56,773 2016-11-09 24 1,690 Shares Wayfair \$ 59,420 2016-11-11 25 2016-03-02 841 Shares Wayfair \$ 35,234 26 841 Shares Wayfair \$ 31,945 2016-05-11 27 841 Shares Wayfair \$ 32,168 2016-05-16 28 2016-08-11 631 Shares Wayfair \$ 23,874