## 990-PF

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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

		lendar year 2016 or tax year beginning of foundation				, 2016,	and ending			<u>, 20</u>
								A	Employer identif	
		ARD BANGS KELLEY AND ELZA KE					- <del></del> -	_		-6039660
ľ	lumbe	er and street (or P O box number if mail is not delivered	to street a	ddress)	1		Room/suite	В	Telephone numb	er (see instructions)
	<b>.</b> .	NODELL MAIN CERTER								
_		NORTH MAIN STREET				<del></del>			50	08-775-3117
•	ity or	town, state or province, country, and ZIP or foreign pos	tai code					_	If exemption applica	
	COTT	MIL VADMOUMIL MA 00.664						٦	pending, check her	
		TH YARMOUTH, MA 02664 ck all that apply:   Initial return	1 -	Γ				4		
u	Crie	F-1		1		of a former p	ublic charity	У   Р	1 Foreign organiza	
		Final return Address change			nded ret				2 Foreign organiza 85% test, check l	
	Cho	ck type of organization: X Section 501(	01/21 01/		e chang			$\dashv$	computation .	▶ □
ï	-	ection 4947(a)(1) nonexempt charitable trust			•			E	If private foundation	n status was terminated
1						ivate foundat ash X Acc		$\dashv$		b)(1)(A), check here .
•		I —	unting n		a: C	ash XAcc	ruai	F		in a 60-month termination
			ther (spe		be on cas	sh hasia l		-	under section 507(	b)(1)(B), check here .
2		Analysis of Revenue and Expenses (The				SII DaSIS /		Ш.		(d) Disbursements
	u 1 t	total of amounts in columns (b), (c), and (d)		evenue enses		(b) Net inve		(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions) )	0,1	books		incom	ne		income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	-	70	9,150.		+			(oddir bddia offiy)
	2	Check I If the foundation is not required to			.,		-			
į	3	attach Sch B					<del> </del>			
	4	Dividends and interest from securities		165	5,869.	16	5,107.			STMT 1
	5a	Gross rents								
ē		Net gain or (loss) from sale of assets not on line 10		136	5,458.					
Revenue	b	Gross sales price for all assets on line 6a 3, 207, 964.								
eve	7	Capital gain net income (from Part IV, line 2) .				13	6,458.	·		
Ě	8	Net short-term capital gain								
	9	income modifications								
	10a	Gross sales less returns and allowances								
	b	Less Cost of goods sold .	VED.							
	C	Gross profit or (loss) (attach schedule ECE)	VED							
	11	Other income (attach schedule)		3						
_	12	Total. Add lines 1 through	2017		1,477.	30	1,565.			
S	13	Compensation of officers, directors trustees, etc		12	0,400.					20,400
<b>xpenses</b>	14	Other employee salaries and wages Pension plans, employee benefits	1. UT							
per	15		11.5.1		L		<del></del>			<del></del> :-
X	16a	Legal fees (attach schedule)					-			
<b>Ve</b>	b	Accounting fees (attach schedule) Other professional fees (attach schedule)		3/	1,699.	2	4,699.			
ati	t 17	Interest		٠.ر	<u>. , , , , , , , , , , , , , , , , , , ,</u>		<del></del>			-
str	18	Taxes (attach schedule) (see instructions). 6.		1 (	0,901.		1,612.			
Ę	19	Depreciation (attach schedule) and depletion.			- 1 - 0	<del></del>	-, -, -,			
dп	20	Occupancy								
۲	21	Travel, conferences, and meetings			1,058.					1,058
au	b c 17 18 19 20 21 22 23 24	Printing and publications		_	564.					564
Ē	23	Other expenses (attach schedule) STMT. 7.			70.					70
ati	24	Total operating and administrative expenses.								
ě		Add lines 13 through 23		6	7,692.	3	6,311.			22,092
ŏ	25	Contributions, gifts, grants paid			5,325.					275,325
	26	Total expenses and disbursements Add lines 24 and 25		343	3,017.	3	6,311.			297,417
	27	Subtract line 26 from line 12								
į	а	Excess of revenue over expenses and disbursements $\ \ .$		38	3,460.					
		Net investment income (if negative, enter -0-)				26	5,254.			
	C	Adjusted net income (if negative, enter -0-)				l	ļ			1

JSA For Paperwork Reduction Act Notice, see instructions.
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Form 990-PF (2016)

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Form 990-PF (2016) 04-6039660

Part II	Ralanca Shacta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	En	d of year
-	Balance Sneets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-beari	ng			
2		cash investments			
3	Accounts receivable		_		
	Less allowance for doul	btful accounts ▶			
4	Pledges receivable ▶_				
	Less allowance for doub	btful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
	disqualified persons (att	ach schedule) (see instructions)			
7	Other notes and loans re	eceivable (attach schedule) 🕨			
	Less allowance for doul	- 1			
8 tt	Inventories for sale or us	se			
Assets	Prepaid expenses and d	eferred charges			
<b>∛</b> 10a	Investments - U S and state	government obligations (attach schedule)			
Ь	Investments - corporate	stock (attach schedule)	5,907,815.	5,962,13	8. 6,754,853
c	Investments - corporate	bonds (attach schedule)			
11	Investments - land, building and equipment basis	Js, ▶		***************************************	
	Less accumulated deprecia (attach schedule)	ation 🕨			
12		loans	1-5	77 . d d.	
13		ach schedule)			
14	Land, buildings, and equipment basis	<b>&gt;</b>			
	Less accumulated deprecia (attach schedule)	ation		-	
15	Other assets (describe	· 1		* ****	
16		completed by all filers - see the	- 1		
		age 1, item I)	5,907,815.	5,962,13	8. 6,754,853
17		ccrued expenses			
18					
				-	
<b>≟</b> 20		rs, trustees, and other disqualified persons.			
Liabilities 20 21 22 22 22 22 22 22 22 22 22 22 22 22		otes payable (attach schedule)		· · · ·	=
:5 22		e <b>&gt;</b> )			
	, , , , , , , , , , , , , , , , , , , ,	- ,			
23	Total liabilities (add line	es 17 through 22)		NO	NR
		low SFAS 117, check here . >			
Sa		24 through 26 and lines 30 and 31.			
8alances 25	_				
B 25			*		
100		· · · · · · · · · · · · · · · · · · ·			
		not follow SFAS 117, ►X			
ᄺ		plete lines 27 through 31.			
ō 27		cipal, or current funds	5,907,815.	5,962,13	8
Net Assets or Fund 22 22 23 31 32 32 32 32 32 32 32 32 32 32 32 32 32	•	r land, bldg , and equipment fund	5,50,,013.	3/302/13	<del>-</del>
SS 29		lated income, endowment, or other funds			_
<b>4</b> 30	=	d balances (see instructions)	5,907,815.	5,962,13	8
31		net assets/fund balances (see	5,50,,013.		<del>-</del>
_			5,907,815.	5,962,13	8
Part II		nges in Net Assets or Fund Bala		3,702,13	<u> </u>
		balances at beginning of year - Part		nust agree with	
		d on prior year's return)			5,907,815.
		line 27a			38,460.
		ded in line 2 (itemize) ► ENTRY TO REFI			38,400. 3 15,863.
					5,962,138.
	reases not included in				5,302,130.
		alances at end of year (line 4 minus li	ine 5) - Part II, column (h		

Page 3

	List and describe the kind(s) of propostory brick warehouse, or common s	•	shs MLC Co )	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a PUBLICLY TRA	<u> </u>			D Donation		
<b>b</b>	DED DECORTIES			<u> </u>		
e						
(e) Gross sales price	(f) Depreciation allow (or allowable)	ed	(g) Cost or other basis plus expense of sale		(h) Gain or (los (e) plus (f) minu	
a 3,207,96	4.		3,071,506.			136,458.
b		_				
C						
d						
e						
Complete only for a	ssets showing gain in column (h) and	d owned by	y the foundation on 12/31/69	(1)	Gains (Col (h) ga	in minus
(i) F M V. as of 12/31/	69 (j) Adjusted basis as of 12/31/69		(k) Excess of col (ı) over col (յ), ıf any		(k), but not less the Losses (from col	nan -0-) <b>or</b>
a		1		•		136,458.
b						
С						
d						
е						
Net short-term ca If gain, also ente	<u>.</u> <u>.</u>	sections 1 (see inst	ructions). If (loss), enter -0- in $\}$	3	,	136,458.
	oplies, leave this part blank.	ha diatrib	utable amount of any year in the ba		42	Yes X No
	does not qualify under section 4			ase peno		] les [_X] No
1 Enter the appropr	late amount in each column for	each year	r; see the instructions before makin	ig any en	tries.	
(a) Base period years Calendar year (or tax year begin	(b) Adjusted qualifying distribu	utions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
2015		,928.	6,717,667.		.55. (5) 4.11404 57	0.041522
2014		,338.	6,669,108.	_		0.039636
2013		,605.	6,235,250.			0.048852
2012		,183.	4,893,442.			0.074627
2011		,270.	5,657,243.	_		0.041764
				2		0.246401
			e the total on line 2 by 5, or by the			
number of years	he foundation has been in existe	ence if les	ss than 5 years	3		0.049280
4 Enter the net value	e of noncharitable-use assets fo	r 2016 fr	om Part X, line 5	4	6,	<u>287,392.</u>
5 Multiply line 4 by	line 3			5		309,843.
6 Enter 1% of net in	evestment income (1% of Part I,	line 27b)		6		2,653.
7 Add lines 5 and 6				7		312,496.
	to or greater than line 7, check		ın Part VI, line 1b, and complete		t using a 1% ta	297,417. ex rate. See the
ISA	<del></del>		<del></del>			000 PE (*****

Capital Gains and Losses for Tax on Investment Income

Form 990-PF (2016)

Х

X

8b

10

**b** If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"

Pari	Statements Regarding Activities (continued)			
11	and the four and the foundation, allowing of mandaty, own a controlled citity within the		Yes	No
40		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► kelleyfoundation.org			
14	The books are in care of ▶ SEE STATEMENT 8 Telephone no. ▶			
	Located at ▶ZIP+4 ▶			
15		• • •	▶	· 🔲
40	and enter the amount of tax-exempt interest received or accrued during the year	$\overline{}$	Yes	No
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		163	
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Dor	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Vaa	NI-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			1.
	the benefit or use of a disqualified person)?Yes X No			4
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the			ŧ
	foundation agreed to make a grant to or to employ the official for a period after			
_	termination of government service, if terminating within 90 days)			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	41		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			v
_	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
				1
<b>.</b>	If "Yes," list the years ▶,,,,,,,,,,,,,, Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			.1
	The state of the s			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	2b		Х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
·	The provisions of section 4-5-2(a)(2) are being applied to any of the years listed in 2a, list the years liefe.			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ь	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2016 )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			فتعا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х
	1, , , , , , , , , , , , , , , , , , ,		A DE	

orm 9	90-PF (2016)		04-60	39 <u>660</u>		Page 6
Par	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Req	uired (continued)		
5a	During the year did the foundation pay or incur any amount	unt to				
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	n 4945(e))?	. Yes X No	,	
	(2) Influence the outcome of any specific public ele	<del>-</del>				
	directly or indirectly, any voter registration drive?		•		,	
	(3) Provide a grant to an individual for travel, study, or o					
	(4) Provide a grant to an organization other than a			. — —		
	section 4945(d)(4)(A)? (see instructions)	· · · · · · ·				
				•	·	
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children			• — —		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				li l	
	Regulations section 53 4945 or in a current notice regar	•	*		5b	
	Organizations relying on a current notice regarding disas	ter assistance check	here			
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax		
	because it maintained expenditure responsibility for the	grant?		Yes No	,	
	If "Yes," attach the statement required by Regulations sed	tion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	ids, directly or indire	ectly, to pay premiur	ns		
	on a personal benefit contract?	•			,   !	
ь	Did the foundation, during the year, pay premiums, direc				6ь	X
_	If "Yes" to 6b, file Form 8870.	.,,,				
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tay	chalter transaction?	Yes X No		
	If "Yes," did the foundation receive any proceeds or have	•				
	Information About Officers, Directo					
	and Contractors		_			
1	List all officers, directors, trustees, foundation ma					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens other all	
	( I MIDDING TO	devoted to position	enter -0-)	and deferred compensation		
	L. MURPHY, JR.	ADMINISTRATIVE M				
243 8	OUTH STREET, PO BOX M, HYANNIS, MA 02601	2	20,400.	-0-		-0-
	<del></del>					
					·	
_				ļ		
			_			
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instruction	ns). If n	one, enter
	"NONE."			1 (4) C		
(0)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit		se account,
(4)	realitie and address of each employee paid more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation	other all	owances
NOT Z	PPLICABLE		<del></del>			
	5 1 3 1 C 1 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-0-	-0-		-0-
	<del></del>				_	
			-			
_					i	
		1	I	1		

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emplo	oyees,
3 Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
EASTERN BANK	_	
605 BROADWAY, LF 42, SAUGUS, MA	INVESTMENT MANAGER	34,699 <u>.</u>
	_	
		<del> </del>
	-	
		-
	-	
		1
Total number of others receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat organizations and other beneficiaries served, conferences convened, research papers produced, etc.	istical information such as the number of	Expenses
1CAPE COD HEALTHCARE FOUNDATION INC.		
RENOVATION		
		45,000
2CAPE COD REGIONAL SUBSTANCE ABUSE PREVENTION INITIA	TIVE	
SUBSTANCE ABUSE PREVENTION		50,000
3CAPE COD TIMES NEED FUND, INC		50,000
OPERATING SUPPORT		
		40,000
4CAPE COD CHALLENGER CLUB		
OPERATING SUPPORT		
		15,000
Part IX-B Summary of Program-Related Investments (see instructions)		T .
Describe the two largest program-related investments made by the foundation during the tax year on line	nes 1 and 2	Amount
1 <u>NONE</u>	<del></del>	
2	, , , , , , , , , , , , , , , , , , ,	<del></del>
All other program-related investments See instructions		
3 NONE		
Total. Add lines 1 through 3		+
Total. Add lines 1 through 3	<u> </u>	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	6,383,139.
b	Average of monthly cash balances	1b	NONE
c	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	6,383,139.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	6,383,139.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions),	4	95 <u>,747.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,287,392.
6	Minimum investment return. Enter 5% of line 5	6	314,370.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	314,370.
2a	Tax on investment income for 2016 from Part VI, line 5	-	31,1,3,0.
Z a b	Income tax for 2016. (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	5,30 <u>5</u> .
3	Distributable amount before adjustments Subtract line 2c from line 1	3	309,065.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	309,065.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	309,065.
		<u> </u>	0037003.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	Ĭ	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	297,417.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	297,417.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
_	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	297,417.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	_ ·	<del></del>
	qualifies for the section 4940(e) reduction of tax in those years.		

Form **990-PF** (2016)

Pai	t XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7				309,065.
2	Undistributed income, if any, as of the end of 2016				
а	Enter amount for 2015 only			NONE	
	Total for prior years 20 14 ,20 ,20 ,20		NONE		<del></del>
	Excess distributions carryover, if any, to 2016				
	From 2011				
	4 700				
	From 2013				
	From 2015 NONE				
	Total of lines 3a through e	78,290.			
	Qualifying distributions for 2016 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2015, but not more than line 2a			NONE	
ь	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	110111			
	required - see instructions)	NONE			207 417
	Applied to 2016 distributable amount	NONE			297,417.
	Remaining amount distributed out of corpus   Excess distributions carryover applied to 2016 .	11,648.			11,648.
5	(If an amount appears in column (d), the same	11,040.			11,010.
	amount must be shown in column (a) ) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	66,642.			<u>.</u>
ь	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		
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)		NONE		
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e	Undistributed income for 2015 Subtract line		110112		
	4a from line 2a Taxable amount - see instructions			NONE	
					<u> </u>
T	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2017				NONE
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	MONT			
_	required - see instructions)	NONE			
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	NONE		ļ	
۵	Excess distributions carryover to 2017.	HOILE			
,	Subtract lines 7 and 8 from line 6a	66,642.			
10	Analysis of line 9.	•			
	Excess from 2012 64,862.				
t	Excess from 2013 1,780.				
	Excess from 2014 NONE				
	Excess from 2015 NONE				
_	Excess from 2016 NONE				Form <b>990-PF</b> (2016)
					FORTH 3337FT (2010)

Par	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	iting	
	foundation, and the ruling	is effective for 2016, ent	ter the date of the ruling		▶	
b	Check box to indicate v	vhether the foundation	is a private operating t	foundation described in	section 4942	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(5, 15.2.
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a				-	
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
e	Qualifying distributions made	ļ				
	directly for active conduct of exempt activities Subtract line					
3	2d from line 2c					
•	alternative test relied upon					
a	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					<del>-</del>
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
-	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
c	line 6 for each year listed "Support" alternative test - enter					
_	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income					
Pai				only if the foundat	tion had \$5,000	or more in assets at
4		uring the year - see				
1	Information Regarding	_		e than 2% of the tots	al contributions rece	eived by the foundation
_	before the close of any					
	NONE					
b		the foundation who	own 10% or more o	f the stock of a corp	oration (or an equa	Illy large portion of the
	ownership of a partner	ship or other entity) of	f which the foundation	has a 10% or greater	interest.	
	NONE					
_			0111			
2	Information Regarding			-		
						and does not accept or organizations under
	other conditions, comp			ants, etc. (see mistrac	tions, to marviduals	or organizations under
а	The name, address, an			person to whom app	lications should be a	addressed:
	SEE STATEMENT	*		, , , , , ,		
b	The form in which app		bmitted and information	on and materials they	should include:	·-
	SEE ATTACHED ST	PATEMENT FOR L	NE 2			
	<del></del>	_				
С	Any submission deadli					
	SEE ATTACHED S'	PATEMENT FOR L	INE 2			
h	Any restrictions or li	imitations on awards	such as by geogr	anhical areas charite	able fields kinds s	of institutions, or other
u	factors:	audius	, addit as by yeogra	apinicai aieas, ciidilla	ibie Helus, KIIIUS (	n madiculons, or other
	SEE ATTACHED S	TATEMENT FOR L	INE 2			

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Duri	ng the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 15				275,325.
			1	
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·	<u></u>	▶ 3a	275,325.
a Approved to Hatare payment				
PLEASE SEE ATTACHED SCHEDULE				
Total	1		<b>▶</b> At	_
Total	<u> </u>		▶ 3b	L

rt XVI-A er gross ar	mounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
Ū	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
riogianis B	service revenue			<del></del>		(See instructions )
. —						
d						
e						
f						
g Fees a	ind contracts from government agencies					
Members	hip dues and assessments					<del></del>
	savings and temporary cash investments -			14	165 060	
	and interest from securities			14	165,869.	
	l income or (loss) from real estate			1		
	inanced property					
	ebt-financed property • • • • • • • • • • • • • • • • • • •					
	estment income · · · · · · · · · · · · · · · · · · ·		<del></del>	<del> </del>		
	ss) from sales of assets other than inventory			18	136,458.	
	ne or (loss) from special events · · ·					
	of tor (loss) from sales of inventory.					
•	renue a					
·						
i						
<b></b>						
				+		
Total. Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu	ilations)			302,327.	302,3
Total. Ade workshe	d line 12, columns (b), (d), and (e) . eet in line 13 instructions to verify calcu  Relationship of Activities	ilations) to the A	ccomplishment of E	xempt Pur	poses	
Total. Ade workshe	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Total. Ade workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Total. Ade workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Total. Add	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Total. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Total. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
Fotal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe t XVI-E	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
Fotal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
otal. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to
Total. Add workshe	d line 12, columns (b), (d), and (e) .  eet in line 13 instructions to verify calcu  Relationship of Activities  Explain below how each activity	ilations) i <b>to the A</b> y for whicl	ccomplishment of E h income is reported at purposes (other than	in column (	poses  e) of Part XVI-A contribu	uted importantly to

Form 990-PF (20	16)				04-6039660	Page 1:
Part XVII	Information Regarding Exempt Organizations	Transfers	To and	Transactions	and Relationships	With Noncharitable

1	in sect organia	ion 501(c) of the Co zations?	de (other than	section 501(c)(3) or	rganizations) or	h any other organization described in section 527, relating to political		Yes	No
a		ers from the reporting	_				10/11		х
									X
h		ner assets transactions:					. 1a(2)		
U			-b				15/1)		<u>x</u> _
									X
									X
		, , ,	•						X
							· —		X
									X
c									X
			-			ile Column (b) should always sho		fair m	
•						tion. If the foundation received les			
						alue of the goods, other assets, or			
(a) Lı	ne no	(b) Amount involved		oncharitable exempt orga	1	i) Description of transfers, transactions, and si			
						<del></del>			
							•		
		****							
						•			
							-		
	-								
	describ	•	of the Code (o	•	•	more tax-exempt organizations action 527?	Y	es 🗔	X No
		(a) Name of organizatio	n	(b) Type of o	rganization	(c) Description of relati	onship		
		_							
Sigr				ined this return, including a taxpayer) is based on all inform	nation of which prepare	May the	edge and IRS discu	iss this	return below
Her		nature of officer or trustee		Date	Title	(see instruc	tions)?	Yes	No
Paic		Print/Type preparer's na		Preparer's signature		Date Check if			
		MATTHEW J GA		1.020/ver7	(Jareny)	05/08/2017 self-employed		1459	<u>60</u>
_	parer		<u>NST &amp; YOUN</u>		U	Firm's EIN ► 34	-6565	<u> 596</u>	
Use	Only		0 CLARENDO	ON STREET					
		<u>BC</u>	STON, MA		02116		926-6		
							Form 99	0-PF	(2016)

### Schedule B

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

Department of the Treasury
Internal Revenue Service
Name of the organization

### **Schedule of Contributors**

OMB No 1545-0047

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

ivame or the organization		Employer identification number
EDWARD BANGS KELLEY	AND ELZA KELLEY FND, INC.	04-6039660
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
	vered by the <b>General Rule</b> or a <b>Special Rule</b> . (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See
General Rule		
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction intributions	
Special Rules		
regulations under sei 13, 16a, or 16b, and	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1, ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)
contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rene year, total contributions of more than \$1,000 exclusively for religious, chall purposes, or for the prevention of cruelty to children or animals. Complete	naritable, scientific,
contributor, during th contributions totaled during the year for ai <b>General Rule</b> applies	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that refer year, contributions exclusively for religious, charitable, etc., purposes, but more than \$1,000. If this box is checked, enter here the total contributions in exclusively religious, charitable, etc., purpose. Don't complete any of the part to this organization because it received nonexclusively religious, charitable more during the year	t no such s that were received parts unless the e, etc., contributions
990-EZ, or 990-PF), but it must	sn't covered by the General Rule and/or the Special Rules doesn't file Schet answer "No" on Part IV, line 2, of its Form 990; or check the box on line Hetertify that it doesn't meet the filing requirements of Schedule B (Form 990)	of its Form 990-EZ or on its
For Description and Description And Music	and the Instructions for Form 200, 200 FZ as 200 PF	P. (F 000 000 F7 000 PF) (004 C

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

Name of or	ganızatıon	1					
EDWARD	BANGS	KELLEY	AND	FLZA	KELLEY	FND.	TNC

Employer identification number 04-6039660

Part I	Contributors (See instructions). Use duplicate cop	ies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	DOREEN BILEZIKIAN	\$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NONA VALIVNAS	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
3	BRIAN O'MALLEY	\$\$	Person X Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DICK NEITZ	\$ 200.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	EILEEN MISKELL	\$100.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_	JANET TAYLOR	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC.

Employer identification number 04-6039660

Part I	Contributors (See instructions). Use duplicate cop	pies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	JEFFEREY D BILEZIKIAN	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	KAREN L BISSONNETTE	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9_	MATTHEW COLE	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_10_	MILTON PENN	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_11_	ROBERT TALERMAN	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	DAVID SAMPSON	\$   	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization			Employer identification number
EDWARD BANGS KELLEY	<u>Y AND ELZA KELLEY FND</u>	, INC.	04-6039660

Part I	Contributors (See instructions). Use duplicate cop	ies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	SUZANNE MCAULIFFE	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	ANASTASIA WELSH PERRINO	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	DAVID PENFIELD	\$ \$ 350.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	HENRY L MURPHY JR	\$\$	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	JOEL CROWELL	\$   \$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	PETER MEYER	\$250	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC.

Employer identification number 04-6039660

Part I	Contributors (See instructions). Use duplicate copi	es of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	ROBERT MILLS	\$ 250.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
20_	STEPHEN MALAQUIAS	\$ 50	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_21_	SUSAN FAY GLYNN	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	JOHN CURLEY JR	\$750.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	HAMILTON SHEPLEY	\$ 500	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_24_	KELLI ORAVA	\$\\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC.

Employer identification number 04-6039660

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 25 JOHN DREW Person **Payroll** 250. Noncash (Complete Part II for noncash contributions) (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 26 MICHAEL LAUF Person **Payroll** 250. Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 27 JUDY SCAZA Person **Payroll** 200. Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 28 MICHAEL LACH Person **Payroll** 100. Noncash (Complete Part II for noncash contributions) (a) (d) (b) (c) No. Name, address, and ZiP + 4 **Total contributions** Type of contribution 29 CHARLES ROBINSON Person **Payroll** 250. Noncash (Complete Part II for noncash contributions.) (a) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 30 E. JOEL PETERSON Person **Payroll** 1,000. Noncash (Complete Part II for noncash contributions.)

Name of o	rganization	1					
EDWARD	BANGS	KELLEY	AND	ELZA	KELLEY	FND.	TNC

**Employer identification number** 

04-6039660 Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 31 M CHRISTOPHER MURPHY Person **Payroll** 500. Noncash (Complete Part II for noncash contributions) (a) (d) (b) (c) Type of contribution No. **Total contributions** Name, address, and ZIP + 4 32 ROBERT HIRSCHMAN Person **Payroll** 500. Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 33 JOSHUA NICKERSON Person **Payroll** 1,000. Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Name, address, and ZIP + 4 Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

NET INVESTMENT INCOME	1, 24, 24, 24, 24, 24, 24, 24, 24, 24, 24
REVENUE AND EXPENSES PER BOOKS	1, 247. 1, 247. 408. 603. 2, 374. 1, 170. 1, 170.
DESCRIPTION 	A T & T INC ABBVIE INC ALLSTATE CORP ANGEN INC ANALOG DEVICES ANHEUSER BUSCH 5.6% 03/01/2017 APPLE BARK AMERICA CORP BECTON DICKINSON CO BECTON DICKINSON CO 3.125% 11/08/2021 BLACKROCK INC. BRISTOL MYERS SQUIBB CO. BROADCOM CORPORATION CL A 2.7% 11/01/201 CARDINAL HEALTH, INC. CARDINAL HEALTH, INC. CARDINAL HEALTH, INC. CISCO SYSTEMS INC CISCO SYSTEMS CONCOPPILLIPS CO

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FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

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REVENUE AND EXPENSES PER BOOKS	388	726	3,166.	0 0	·	2 0	35	Ω	വ	12	വ	> ?	444.	7	, 93	$\sim$	,11	04	. 0	Ц	4		J M L	7,750.	ο α	7	28	2438885
DESCRIPTION	FEDERAL HOME LOAN BANK 1.75% 12/14/2018 FEDEX CORPORATION	FORD MOTOR CO	GENERAL ELEC CO	CO CO	HEWLETT-PACKARD CO 2.75% 01/14/2019	HOME DEPOT INC HONEYWELL, INT'T, INC	INTEL CORP	IONAL PAPER CO	SHARES I SHARES E	SHARES TIPS BOND ETF	NVESTMENT GRA	SHAKES BARCLAIS /-I(	SHARES BARCLAYS	SHARES FLOATING RATE	J P MORGAN CHASE & CO	JOHNSON & JOHNSON	KIMBERLY CLARK CORP	LOCKHEED MARTIN CORP	MASCO CORP	MERCK & CO INC. NEW	METLIFE INC.		BLIGATION		η η	3.33° 04/2//201 12/15/2017		EEE757 689L 05/08/2017 18:05:15

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FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

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- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

	$f NET \ INVESTMENT$	INCOME	1 1 1 1 1	4,334.	1,831.	4,348.	1,652.	152.	693.		1,340.	294.	438.	888.	476.	165,107.	H H H H H H H
REVENUE	$rac{ extsf{AND}}{ extsf{EXPENSES}}$	PER BOOKS	1 1 1 1 1 1	4,334.	1,831.	4,348.	1,652.	152.	693.	762.	1,340.	294.	438.	888.	476.	165,869.	
		DESCRIPTION		WISDOMTREE HIGH DIVIDEND FUND	WISDOM TREE	WISDOM TREE EUROPE HEDGED EQUITY	XCEL ENERGY, INC.	XILINX, INC.	XILINX, INC. 3% 03/15/2021	EATON CORP PLC	INVESCO LTD.	SEAGATE TECH PUBLIC LIMITED CO	ACE LID	CHUBB LTD	ROYAL CARIBBEAN CRUISES, LTD.	TOTAL	

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NET INVESTMENT INCOME	34,699. 34,699. ===================================
REVENUE AND EXPENSES PER BOOKS	34,699. 34,699. ===================================
DESCRIPTION	LEGAL FEES - PRINCIPAL (ALLOCA TOTALS

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NET INVESTMENT INCOME		1,612.
REVENUE AND EXPENSES PER BOOKS		10,901.
DESCRIPTION	FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

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STATEMENT

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FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF

NAME: EAS

EASTERN BANK

C/O LORI EVANS

ADDRESS: 33 ENTERPRISE STREET, SUITE 10

DUXBURY, MA 02332

TELEPHONE NUMBER: (508)923-2805

EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV - LINES 2a - 2d

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RECIPIENT NAME:

DEWITT DAVENPORT, VP AND AMINISTRATIVE MANAGER

ADDRESS:

20 NORTH MAIN STREET

SOUTH YARMOUTH, MA 02664

FORM, INFORMATION AND MATERIALS:

PLEASE SEE ATTACHED SAMPLES

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

PLEASE SEE ATTACHED BROCHURE

EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: CAPE COD TIMES NEEDY FUND, INC RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: 40,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WILD CARE, INC **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 5,000. RECIPIENT NAME: TUFTS UNIVERSITY RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: 7,500. RECIPIENT NAME: TRANSITIONS CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ...... 10,000. EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: THE HOXIE CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: THE FAMILY PANTRY OF CAPE COD RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: SOCIETY OF ST. VINCENT DE PAUL **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE 10,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: SHEA'S YOUTH BASKETBALL ASSN RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ...... 10,000. EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a ~ CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NAUSET REGIONAL MIDDLE SCHOOL RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ...... 4,000. RECIPIENT NAME: JFK HYANNIS MUSEUM FOUNDATION RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 12,500. RECIPIENT NAME: HOMELESS PREVENTION COUNCIL RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE 10,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: FALMOUTH ACADEMY FDN RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ..... 5,000. EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: CULTURAL CENTER OF CAPE COD **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 7,500. RECIPIENT NAME: COTUIT CENTER FOR THE ARTS RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,325. RECIPIENT NAME: COMMUNITY HEALTH CENTER OF CAPE COD RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: CHILD AND FAMILY SERVICES RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ..... 2,500. EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CAPE COD CHALLENGER CLUB **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 15,000. RECIPIENT NAME: ART FOUNDATION OF CAPE COD **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 5,000. RECIPIENT NAME: BIG BROTHERS/BIG SISTERS OF CAPE CAPE COD & ISLANDS ADDRESS: 75 FEDERAL STREET 8TH FLOOR BOSTON, MA 02110 RELATIONSHIP: NONE PURPOSE OF GRANT: MENTORING FRIENDSHIPS WITH ADULT VOLUNTEERS FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 12,500. EDWARD BANGS KELLEY AND ELZA KELLEY FND, INC. 04-6039660 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CAPE COD HEALTHCARE FOUNDATION CAPE COD HOSPITAL ADDRESS: 27 PARK STREET HYANNIS, MA 02601 RELATIONSHIP: NONE PURPOSE OF GRANT: HEALTH CARE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 45,000. RECIPIENT NAME: CAPE COD REGIONAL SUBSTANCE ABUSE PRVENTION INITIATIVE RELATIONSHIP: NONE PURPOSE OF GRANT: SUBSTANCE ABUSE PREVENTION FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 50,000. TOTAL GRANTS PAID: 275,325. 

# EDWARD BANGS KELLEY AND ELZA KELLEY FOUNDATION, INC. -04-6039660

### **FORM 990-PF**

### PART VIII·1

Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

(A) <u>Name and Address</u>	(B) Title and Avg. Hours Per Week Devoted to Position	(C) Contributions to Employee Benefit Plans	(D) Expense Account, Other <u>Allowances</u>	(E) Compensation ( <u>if any)</u>
OFFICERS  Joel G. Crowell, Jr.  President PO Box 62 270 Sesuit Neck Rd. East Dennis, MA 02641	As Required	None	None	None
DeWitt Davenport Vice President & Administrative Manager 20 North Main Street South Yarmouth, MA 02664	As Required	None	None	None
Robert A. Talerman Treasurer & Clerk 34 Wild Goose Way Centerville, MA 02632	As Required	None	None	None
BOARD OF DIRECTORS  Jeffrey Bilezikian 29 Adams Avenue Watertown, MA 02472	As Required	None	None	None
Karen L. Bissonnette 7 Coleridge Drive Falmouth, MA 02540	As Required	None	None	None
Matthew H. Cole Cape Associates, Inc. P.O. Box 1858 North Eastham, MA 02651	As Required	None	None	None

Joel G. Crowell, Jr. Cape Cod Cooperative Bank 25 Benjamin Franklın Way Hyannis, MA 02601	As Required	None	None	None
John Curley, Jr. Curley Direct 15 Fruean Avenue South Yarmouth, MA 02664	As Required	None	None	None
DeWitt Davenport 20 North Main Street South Yarmouth, MA 02664	As Required	None	None	None
John Otis Drew P. O. Box 487 Hyannisport, MA 02647	As Required	None	None	None
Elizabeth Gawron Helping our Women (HOW) 34 Conwell Street Provincetown, MA 02657	As Required	None	None	None
Suzanne Fay Glynn Glynn Law Offices 49 Locust Street Falmouth, MA 02541	As Required	None	None	None
Suzanne McAuliffe 71 Thacher Shore Road Yarmouthport, MA 02675	As Required	None	None	None
Peter Meyer Cape Cod Times 319 Main Street Hyannis, MA 02601	As Required	None	None	None
Robert F. Mills 21 Emma Oakley Mills Way Mashpee, MA 02649	As Required	None	None	None
M. Christopher Murphy DePaola, Begg & Associates 220 West Main Street Hyannis, MA 02601	As Required	None	None	None
Richard W. Neitz Neitz Real Estate 34 North Main Street South Yarmouth, MA 02664	As Required	None	None	None

Brian O'Malley, MD 30 Shank Painter Road Provincetown, MA 02657	As Required	None	None	None
David Penfield, MD 114 4 <sup>th</sup> Street Wellfleet, MA 02667	As Required	None	None	None
E. Joel Peterson 300 Mill Road Falmouth, MA 02540	As Required	None	None	None
David P. Sampson 791 Sandwich Road Bourne, MA 02532	As Required	None	None	None
Hamilton N. Shepley 216 Thornton Drive Hyannis, MA 02601	As Required	None	None	None
Robert A. Talerman 34 Wild Goose Way Centerville, MA 02632	As Required	None	None	None
Janet Taylor P.O. Box 97 East Orleans, MA 02643	As Required	None	None	None
HONORARY DIRECTORS				
Mary Louise Montgomery Rowland Farm 114 Ramsay Hill Road Walpole, NH 03608	As Required	None	None	None

# EDWARD BANGS KELLEY AND ELZA KELLEY FOUNDATION, INC. 04-6039660

### PART XV - SUPPLEMENTARY INFORMATION

3. Grants and Contributions Paid During the Year or Approved for Future Payment

No recipient or individual named below has any relationship to the Foundation Manager or Substantial Contributor

### **2016 GRANTS**

a. Paid during the year

RECIPIENT	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Cape Cod Regional Substance Abuse Prevention Initiative Tax ID 51-0140462	Paid In Full	Substance Abuse Prevention	\$50,000 00
The Hoxie Center at Sagamore Beach Tax ID: 30-0750207	Paid In Full	ADA Compliant Ramp	\$5,000 00
Big Brothers Big Sisters of Cape Cod & the Islands Tax ID: 04-2074462	Paid In Full	One to One Mentoring for Youth Mentoring	\$12,500.00
John F Kennedy Hyannis Museum Foundation Tax ID. 20-0177247	Paid In Full	JFK Hyannis Museum Modernization Project	\$12,500.00
Community Health Center of Cape Cod Tax ID: 04-3370560	Paid in Full	Bourne Facility Expansion Project	\$7,500 00
Tufts University Tax ID 042-103634	Paid in Full	Green Infrastructure for Water Quality Restoration in Cape Cod Bay, Barnstable County	\$7,500.00
Cotuit Center for the Arts Tax ID 04-3223784	Paid in Full	Cotuit Summer Camp	\$1,325 00
Falmouth Academy Tax ID 042-620156	Paid in Full	Performing Arts Center at Falmouth Academy	\$5,000 00
Cape Cod Foundation Tax ID: 51-0140462	Paid in Full	Professional Nonprofit Leadership Development Pilot Program	\$5,000.00
Nauset Regional Middle School Tax ID 46-1292038	Paid in Full	Therapy Dog in the Nauset Regional Middle School	\$4,000 00
Cape Cod Challenger Club Tax ID: 54-2180163	Paid In Full	After School Care Program for Children and Young Adults who have Physical and or Developmental and Intellectual Disabilities.	\$15,000 00
Homeless Prevention Council Tax ID: 04-3104858	Paid In Full	Support for Lower Cape Individuals and Families at Risk of Homelessness	\$10,000.00

RECIPIENT	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Transitions Center Tax ID 41-2275864	Paid in Full	Building2gether: Remodeling of their new location	\$10,000 00
Arts Foundation of Cape Cod Tax ID 04-2961772	Paid in Full	ArtsCapeCod org website	\$5,000.00
Wild Care Inc. Tax ID 04-3234724	Paid in Full	Wild Care Internship Program	\$5,000.00
Child and Family Services Tax ID 04-2104754	Paid in Full	Art Project Hope	\$2,500 00
The Family Pantry of Cape Cod Tax ID. 22-3079904	Paid in Full	Shop for the Hungry Capital Building Project	\$10,000 00
Cultural Center of Cape Cod Tax ID 04-3553295	Paid in Full	Tools for Learning - Photography, digital arts studio and additional materials for its recording studio	\$7,500 00
St Anthony's Conference of the Society of St Vincent de Paul Tax ID. 13-5562362	Paid in Full	Housing Assistance in Falmouth	\$10,000.00
Shea's Youth Basketball Association Tax ID: 45-4409593	Paid in Full	2016/2017 Shea's YBA Winter Basketball Program	\$10,000 00
Major Crisis Relief Fund of the Cape Cod Times Needy Fund Tax ID: 22-2480332	Paid in Full	Major Crisis Relief Fund	\$20,000 00
Cape Cod Times Needy Fund, Inc Tax ID: 22-2480332	Paid in Full	Housing Stability for Vulnerable Residents of Cape Cod	\$20,000 00
Cape Cod Foundation CCH/CCCC BSN Scholarship Program Tax ID 51-0140462	Paid in Full	Scholarship Program to BSN candidates enrolled in the UMass Boston/Cape Cod Community College Nursing Program	\$40,000 00
		TOTAL 2016 GRANTS PAID	\$275,235

b. Grants approved for future payment. These grants will be paid out of the income received during the year the grant is paid.

RECIPIENT	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
			\$00
			\$.00

### **SCHOLARSHIPS**

a. Paid during the year

RECIPIENT Name and Address	Foundation Status of Recipient	Purpose of Grant or Contribution	<u>Amount</u>
None			\$0.00
		TOTAL 2016 SCHOLARSHIPS	\$0.00

### b. Approved for future payment

RECIPIENT Name and Address	Foundation Status of Recipient	Purpose of Grant or Contribution	<u>Amount</u>
None			\$0 00
		TOTAL SCHOLARSHIPS TO BE PAID IN 2016	\$0.00

### EASTERN BANK EDWARD BANGS KELLEY AND ELZA KELLEY FOUNDATION, INC.

		BOOK VALUE	MARKET VALUE
<u>CUSIP</u>	SECURITY NAME	(AS OF 12/31/16)	(AS OF 12/31/16)
00206R102	AT&TINC	\$59,617.67	\$71,322.81
00287Y109	ABBVIE INC	\$56,274.19	\$60,553.54
020002101	ALLSTATE CORP	\$32,203.25	\$36,541.16
02079K107	ALPHABET, INC. CL C	\$7,295.05	\$20,839.14
02079K305	ALPHABET, INC. CL A	\$25,466.26	\$57,056.40
023135106	AMAZON.COM, INC	\$44,405.34	\$41,242.85
031162100	AMGEN INC	\$43,345.11	\$41,669.85
032654105	ANALOG DEVICES	\$84,224.68	\$110,963.36
035229DB6	ANHEUSER BUSCH 5.6% 03/01/2017	\$75,134.25	\$75,519.00
037833100	APPLE	\$85,600.25	\$127,170.36
054937107	BB&T CORP.	\$50,062.05	\$59,480.30
060505104	BANK AMERICA CORP	\$45,811.65	\$66,454.70
075887109	BECTON DICKINSON CO	\$15,217.16	\$33,110.00
075887BA6	BECTON DICKINSON CO 3.125% 11/08/2021	\$126,231.25	\$128,153.75
09247X101	BLACKROCK INC.	\$99,298.27	\$104,267.96
110122108	BRISTOL MYERS SQUIBB CO.	\$65,380.38	\$66,329.40
111320AE7	BROADCOM CORPORATION CL A 2.7% 11/01/2018	\$104,000.00	\$98,745.00
14149Y108	CARDINAL HEALTH, INC.	\$64,661.08	\$80,534.43
151020104	CELGENE CORPORATION	\$13,518.14	\$45,605.50
151020AK0	CELGENE CORPORATION 2.3% 08/15/2018	\$125,937.50	\$125,763.75
166764100	CHEVRON CORP	\$112,947.96	\$128,175.30
17275R102	CISCO SYSTEMS INC	\$48,121.83	\$54,970.18
17275RAR3	CISCO SYSTEMS INC 2.125% 03/01/2019	\$50,125.00	\$50,659.00
172967HD6	CITIGROUP 3.875% 10/25/2023	\$121,022.55	\$118,493.70
20030N101	COMCAST CORP NEW CL A	\$46,858.88	\$49,646.95
20825C104	CONOCOPHILLIPS	\$52,969.73	\$44,173.34
216871AC7	COOPER U S INC. 6.1% 07/01/2017	\$90,445.50	\$92,014.20
22160K105	COSTCO WHOLESALE CORP, NEW	\$26,612.80	\$41,308.38
233203629	DFA INTERNATIONAL SMALL CO PORTFOLIO	\$75,734.78	\$69,329 02
254687106	WALT DISNEY PRODUCTIONS	\$18,526.94	\$46,586.34
260543103	DOW CHEMICAL CO	\$54,887.00	\$67,176.28
26441C204	DUKE ENERGY CORP NEW	\$68,480.44	\$73,971.86
291011104	EMERSON ELEC CO	\$90,796.46	\$89,646.00
30231G102	EXXON MOBIL CORP	\$33,306.68	\$34,118.28
30303M102	FACEBOOK CL A	\$45,921.60	\$52,232.70
314211103	FEDERATED INVESTORS INC CL B	\$37,243.76	\$37,471.00
31428X106	FEDEX CORPORATION	\$25,067.86	\$52,880.80
369604103	GENERAL ELEC CO	\$116,598.08	\$138,660.80
391164100	GREAT PLAINS ENERGY, INC.	\$37,867.11	\$38,563.50
406216101	HALLIBURTON CO	\$42,990.26	\$62,149.41
428236BY8	HEWLETT-PACKARD CO 2.75% 01/14/2019	\$126,600.00	\$126,238.75
436440101	HOLOGIC	\$34,591 45	\$36,910.40
437076102	HOME DEPOT INC	\$79,070.61	\$110,213.76
438516106	HONEYWELL INT'L INC.	\$22,430.55	\$40,199.95
460146103	INTERNATIONAL PAPER CO	\$33,286.34	\$41,917.40
464286608	I SHARES I SHARES EMU INDEX FUND	\$109,855.59	\$111,619.60
464287176	I SHARES TIPS BOND ETF	\$60,034.03	\$58,622.06
464287481	I SHARES RUSSELL MIDCAP GROWTH	\$88,689.81	\$87,845.78
46625H100	J P MORGAN CHASE & CO	\$118,481.51	
478160104	JOHNSON & JOHNSON	\$90,818.48	
494368103	KIMBERLY CLARK CORP	\$77,513.38	
501044101	KROGER CO	\$47,086.54	\$46,519.48
	Page 1 of 2	•	

Page 1 of 2

### EASTERN BANK EDWARD BANGS KELLEY AND ELZA KELLEY FOUNDATION, INC.

		<b>BOOK VALUE</b>	MARKET VALUE
<u>CUSIP</u>	SECURITY NAME	(AS OF 12/31/16)	(AS OF 12/31/16)
539830109	LOCKHEED MARTIN CORP	\$45,325.62	\$51,237.70
574599106	MASCO CORP	\$26,404.35	\$42,307.56
58933Y105	MERCK & CO INC. NEW	\$22,165.44	\$36,263.92
59156R108	METLIFE INC.	\$47,003.93	\$53,566.66
594918104	MICROSOFT	\$76,526.98	\$86,126.04
60934N849	FEDERATED GOV'T OBLIGATION TAX MANAGED FUND # 637	\$71,200.84	\$71,200.84
61166WAT8	MONSANTO CO 2.75% 07/15/2021	\$99,800.00	\$99,979.00
61174X109	MONSTER BEVERAGE CORP	\$39,502.75	\$36,048.42
617446448	MORGAN STANLEY	\$21,774.44	\$51,545.00
617446H51	MORGAN STANLEY 5.55% 04/27/2017	\$51,445.50	\$50,662.00
64110DAC8	NETAPP INC 2% 12/15/2017	\$50,825.00	\$50,138.50
654106103	NIKE INC. CL B	\$43,721.17	\$36,241.79
674599105	OCCIDENTAL PETROLEUM CORP	\$40,349.29	\$39,817.57
681919106	OMNICOM GROUP	\$60,867.75	\$66,981.57
693506107	P P G INDUSTRIES	\$32,022.63	\$29,280.84
704326107	PAYCHEX INC	\$42,194.06	\$49,921.60
70450Y103	PAYPAL HLDGS INC	\$38,735.56	\$44,837.92
713448108	PEPSICO INC	\$60,340.10	\$71,253.03
717081103	PFIZER INC	\$58,549.31	\$58,301.60
742718109	PROCTER & GAMBLE CO	\$87,410.01	\$96,776.08
744573106	PUBLIC SVC ENTERPRISE GROUP	\$39,961.24	\$41,993.16
78464A417	SPDR BLOOMBERG BARCLAYS	\$81,356.97	\$75,779.55
79466L302	SALESFORCE.COM	\$37,719.31	\$46,826.64
806857108	SCHLUMBERGER LTD	\$24,599.78	\$27,031.90
808513AG0	CHARLES SCHWAB 3.225% 09/01/2022	\$129,102.50	\$127,890.00
81369Y407	SPDR CONSUMER DISCRETIONARY SECTOR	\$48,971.51	\$57,305.60
81369Y605	SPDR FINANCIAL INDEX	\$62,474.22	\$61,031.25
81369Y803	SPDR TECHNOLOGY IDX	\$47,068.55	\$59,241.00
842587CJ4	SOUTHERN CO 2.45% 09/01/2018	\$51,218.50	\$50,513.50
855244109	STARBUCKS CORP	\$19,805.10	\$39,585.76
871829107	SYSCO CORP	\$38,167.45	\$46,566.17
887317303	TIME WARNER INC	\$39,791.73	\$43,728.09
911312106	UNITED PARCEL SERVICE	\$48,028.17	\$54,912.56
91324PCN0	UNITEDHEALTH GROUP, INC. 3.35% 07/15/2022	\$77,250.00	\$77,273.25
922042858	VANGUARD EMERGING MARKETS ETF	\$48,320.04	\$46,478.22
92343V104	VERIZON COMMUNICATIONS INC	\$93,530.54	\$119,357.68
92343VBC7	VERIZON COMMUNICATIONS INC 3.5% 11/01/2021	\$104,745.00	\$103,217.00
92826C839	VISA, INC	\$17,474.89	\$44,783.48
931427108	WALGREENS BOOTS ALLIANCE INC	\$13,444.09	\$33,766.08
949746101	WELLS FARGO & CO	\$114,189.22	\$122,674.86
94974BFQ8	WELLS FARGO & CO 2.15% 01/15/2019	\$125,781.25	\$125,687.50
97717X552	WISDOM TREE	\$42,587.29	
97717X701	WISDOM TREE EUROPE HEDGED EQUITY	\$73,711.06	
98389B100	XCEL ENERGY, INC.	\$23,840.02	\$36,914.90
983919AH4	XILINX, INC. 3% 03/15/2021	\$103,480.00	\$101,252.00
G29183103	EATON CORP PLC	\$49,052.58	\$49,445.33
V7780T103	ROYAL CARIBBEAN CRUISES, LTD.	\$81,635.67	\$84,337.12
7 / / 001 103	ROTAL CAMBBEAN CROIDES, DID.		
		\$5,962,138.45	\$6,754,853.33