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Form **990-PF** Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

For calandar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number WAGNER FOUNDATION #0746800 20-6079941 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number NUTTER MCCLENNEN FISH LLP POB 51400 617-439-2498 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 02205 BOSTON,, MA G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \(\textbf{X} \) Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: F If the foundation is in a 60-month termination. (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 116696340. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome Contributions, gifts, grants, etc., received 15029846. N/A 2 Check Inf the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 7194 7194 STATEMENT 1891368. 1862816. Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 1963985. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 2129711. 1963985 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications <u>OGNEN LIT</u> b Less Cost of goods sold c Gross profit or (loss) -306160. 11 Other income -336160 STATEMENT 18586233 12 Total Add lines 1 through 11 3497835. Compensation of officers, directors, trustees, etc 0. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 4 18000. 13500. 4500. STMT 2250. 5 3000. **b** Accounting fees STMT 750. c Other professional fees STMT 6 29846. 29846. Administrative 17 Interest STMT 7 117864 18 Taxes 29174. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 163027. STMT 650611. 487584 23 Other expenses Operating 24 Total operating and administrative expenses. Add lines 13 through 23 819321 532508 198123. 4049500 4049500. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 4868821 532508 Add lines 24 and 25 4247623. 27 Subtract line 26 from line 12: 13717412 a Excess of revenue over expenses and disbursements 2965327. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

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

Form 990-PF (2016)

Pa	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-wear amounts only		Beginning of year	End of year			
			(a) Book Value	(b) Book Value	(c) Fair Market Value		
		Cash - non-interest-bearing	299.	10500.			
	2	Savings and temporary cash investments	5904421.	16281036.	16281036.		
	3	Accounts receivable ►			_		
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
ļ	7	Other notes and loans receivable					
	•	Less: allowance for doubtful accounts ▶					
6	R	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges					
AS.		Investments - U.S. and state government obligations	···				
- 1		Investments - corporate stock STMT 9	33436103.	35678120.	470260E1		
		Investments - corporate bonds	33430103.	330/0120.	47036851.		
İ.							
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
		Investments - mortgage loans	50050054	E0065050	50065050		
		Investments - other STMT 10	52279374.	<u>53367953.</u>	53367953.		
- 1	14	Land, buildings, and equipment: basis					
		Less accumulated depreciation					
1		Other assets (describe)					
l.	16	Total assets (to be completed by all filers - see the					
_		instructions. Also, see page 1, item I)	91620197.	<u> 105337609.</u>	116696340.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
εg	19	Deferred revenue					
<u>≅</u> 2	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable					
ے ₂	22	Other liabilities (describe ▶)					
2	23_	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
Ī		and complete lines 24 through 26 and lines 30 and 31.					
8 2	24	Unrestricted					
E 2		Temporarily restricted					
B 2		Permanently restricted					
ᅙ '		Foundations that do not follow SFAS 117, check here			1		
∄		and complete lines 27 through 31.					
٥	27	Capital stock, trust principal, or current funds	0.	0.			
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Ø I		Retained earnings, accumulated income, endowment, or other funds	91620197.	105337609.	1		
et		F	91620197.	105337609.	1		
ž	30	Total net assets or fund balances	91020197.	105557609.			
۔ ا		Tabel Pak Water and and accept from the language	01 (201 07	105225600			
3	91	Total liabilities and net assets/fund balances	91620197.	105337609.	L		
Pa	rt	Analysis of Changes in Net Assets or Fund Ba	lances				
4 T	ata!	not accepte or fund halanges at haginging of year. Port II. achieve (-) live 0	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	U		01600105		
-		t agree with end-of-year figure reported on prior year's return)			91620197.		
		amount from Part I, line 27a		2	13717412.		
		increases not included in line 2 (itemize)		3	0.		
		ines 1, 2, and 3		4	105337609.		
		eases not included in line 2 (itemize)		5	0.		
6 To	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	ımn (b), line 30	6	105337609.		
					Form 990-PF (2016)		

#0746800

20-6079941

2-story brick warehouse; or common stock, 200 shs. MLC Co.)		`P-F	How acquired P - Purchase D - Donation		(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1 <u>a</u>								
b SEE ATTACHED	STATEMENTS							
<u>C</u>						· · · · · · · · · · · · · · · · · · ·		<u> </u>
d e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) (e) pli	Gain or (loss us (f) minus) (g)
<u>a</u>								
b								
<u>c</u>								
<u>d</u>				_				406000
e 2129711.		1 1 1 1 1	16572	6.				1963985
Complete only for assets showin	ng gain in column (h) and owned	1			•	(I) Gains (Col. (h) gain not less tha	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ccess of col. (1) col. (j), if any			Losse	s (from col. (h))
<u>a</u>				\dashv				
<u>b</u>								
<u>c</u>				-				
d								1062005
<u>e</u>				_	1			1963985
Capital gain net income or (net ca	$\{f \text{ gain, also e } f \text{ if (loss), ente} \}$	nter in Part I, line r -0- in Part I, line	7 7	} _	2			1963985
Net short-term capital gain or (los		i) and (6):						
If gain, also enter in Part I, line 8,	column (c).							
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e)	tan Didalah	N		3		N/A	
f section 4940(d)(2) applies, leave the Vas the foundation liable for the sec f "Yes," the foundation does not qua	tion 4942 tax on the distributable lify under section 4940(e). Do no	t complete this pa	art.				<u> </u>	Yes X No
Enter the appropriate amount in	each column for each year; see t	he instructions be	fore making any ei	ntries.				
(a) Base period years Calendar year (or tax year beginni			Net value of no				Dıstrıl (col. (b) dı	(d) oution ratio vided by col. (c))
2015		5006194.			<u>433690</u>			.047983
2014		4673834.			<u>036204</u>			.058160
2013		3265993.			228121			.04518
2012		4118551.			<u>136667</u>			.08017
2011		<u>3578755.</u>		5	<u> 299372</u>	3.	1	.06753
2 Total of line 1, column (d)				:		2		.29903
Average distribution ratio for the the foundation has been in existe		otal on line 2 by 5,	or by the number	of year	S	3		.05980
Enter the net value of noncharitat	ole-use assets for 2016 from Part	t X, line 5				. 4		94722183
Multiply line 4 by line 3	· · · · · ·					5		5665050
Enter 1% of net investment incon	ne (1% of Part I, line 27b)					6		29653
Add lines 5 and 6				٠		7		5694703
Enter qualifying distributions from	n Part XII, line 4		·			8		4247623
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI,	line 1b, and comp	olete that part using	g a 1%	tax rate.			

	<u>-607994</u>		Page 4
Part VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see inst	<u>ructio</u>	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		<u> 593</u>	07.
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3 Add lines 1 and 2		593	07.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	†———	593	07.
6 Credits/Payments:			<u> </u>
a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 93548.			
b Exempt foreign organizations - tax withheld at source	}		
c Tax paid with application for extension of time to file (Form 8868)	ŀ		
d Backup withholding erroneously withheld 6d	İ		
	!	035	48.
	 	<u> </u>	40.
· · · · · · · · · · · · · · · · · · ·	 		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9	 	245	41
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	 	342	41.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax 34241 - Refunded 11			<u>0.</u>
Part VII-A Statements Regarding Activities		Vac	TN ₀
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
any political campaign?	. 18		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	11	<u> </u>	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published o	<i>r</i>		1
distributed by the foundation in connection with the activities	l	- [
c Did the foundation file Form 1120-POL for this year?	. 10	2	<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	İ		
(1) On the foundation. ► \$ O. (2) On foundation managers. ► \$ O.	}	1	Ì
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	İ		
managers. ► \$O.		Ì	Ì
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		X
If "Yes," attach a detailed description of the activities.	!		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	l		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	;	X_
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A 4		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	,	X_
If "Yes," attach the statement required by General Instruction T.			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		- 1	ŀ
By language in the governing instrument, or	}	Ì	ł
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		-	•
remain in the governing instrument?	6	: }	x
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		
		- -	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
MA		-	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation	81	x	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	- OI	' ^	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	.	х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STM			<u> </u>
Did any persons become substantial contributions during the tax year. If "Yes," attach a schedule listing their names and addresses STAT.		90-PF	(2015)
	FUI III 9	JU-1	(2010)

Pa	irt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	_11_		<u>X</u>
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X_	
	Website address ► N/A			
14	The books are in care of ▶ NUTTER, MCCLENNEN & FISH, LLP Telephone no. ▶617-43			
	Located at ► SEAPORT WEST 155 SEAPORT BLVD, BOSTON, MA ZIP+4 ►02	210	<u>-26</u>	04_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. ▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	l	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
D	foreign country	i		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	Na
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	}		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	ļ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	[['	
	for the benefit or use of a disqualified person)?	-		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	1		
	termination of government service, if terminating within 90 days.)	1		
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	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			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	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)):	İ		ŀ
a	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		l	
	before 2016?		1)
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			ļ
	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	├ ─	ļ
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No		1	[
		1		
D	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			İ
	Form 4720, to determine if the foundation had excess business holdings in 2016.) N/A	3b		
A a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	x
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70	\vdash	 -
_	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		х
			0-PF	(2016)
				, ,

WAGNER FOUNDATION				_
Form 990-PF (2016) #0746800	4700 14 . D. F		<u> 20-607994</u>	11 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	tequirea (continu	ued)	
5a During the year did the foundation pay or incur any amount to:	40.457. \\0	г, "	(Te).,	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		s X No	.
any voter registration drive?		• • =	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	****	L YE	S LAL NO	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		s X No	
4945(d)(4)(A)? (see instructions)			S LAL NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or i		s X No	li
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the evcentions described i	•	3 (22) 110	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	iii riegulations	N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check h		••		-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?			s No	
If "Yes," attach the statement required by Regulations section 53.494		.,,==		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			1	
a personal benefit contract?	F=, promiding on		s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			ib X
If "Yes" to 6b, file Form 8870.		•		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	'b
Part VIII Information About Officers, Directors, Trust		nagers, Highly	/	_
Paid Employees, and Contractors	·			
1 List all officers, directors, trustees, foundation managers and their	•			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
HERBERT S. WAGNER III	TRUSTEE			
PO BOX 51400		_	_	_
BOSTON, MA 02205	0.00	0.	0.	0.
	TRUSTEE			
PO BOX 51400				•
BOSTON, MA 02205	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	<u> </u>	·····
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	dovoted to position		domponadan	
	1			
	"			
		1	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Total number of other employees paid over \$50,000				0

WAGNER FOUNDATION #0746800		-60799 41 Page 7
Part VIII. Information About Officers, Directors, Trustees Paid Employees, and Contractors (continued)	s, Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If	none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include in number of organizations and other beneficiaries served, conferences convened, research 1 N/A	ch papers produced, etc.	Expenses
I N/A		-
2		-
3		
4		-
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the N/A	1e tax year on lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
		-

0.

Total, Add lines 1 through 3

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#0746800

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	49938987.
b	Average of monthly cash balances	1b	5292567.
C	Fair market value of all other assets	1c	40933099.
d	Total (add lines 1a, b, and c)	1d	96164653.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	96164653.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1442470.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	94722183.
6_	Minimum investment return. Enter 5% of line 5	6	4736109.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	4736109.
2a	Tax on investment income for 2016 from Part VI, line 5	-	17301031
b	Income tax for 2016. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	59307.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4676802.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4676802.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4676802.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	1217622
a	, , , , , , , , , , , , , , , , , , , ,	1a	4247623.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	· · · · · · · · · · · · · · · · · · ·
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required).	3a	
	Cash distribution test (attach the required schedule)	3b	4047600
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4247623.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4247623.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.		

Form **990-PF** (2016)

Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	Оогрио	7 Gal 3 prior to 2013	2010	
line 7				4676802.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 962801.				
b From 2012 1580877.				
c From 2013				
d From 2014 763481.				
e From 2015				
f Total of lines 3a through e	3307159.			
4 Qualifying distributions for 2016 from	-			-
Part XII, line 4: \blacktriangleright \$ 4247623.				•
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)	· · ·	0.		
c Treated as distributions out of corpus			-	
(Election required - see instructions)	0.			4047600
d Applied to 2016 distributable amount				4247623.
e Remaining amount distributed out of corpus	0.			420170
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	429179.			429179.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2877980.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	,	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	•	0.	-	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	,]	
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.	*		0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		<u> </u>	
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	533622.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	2344358.			ļ
10 Analysis of line 9:				
a Excess from 2012 1580877.				
b Excess from 2013				
c Excess from 2014 763481.				
d Excess from 2015				
A Eveness from 2016		İ	1	1

foundation, and the ruling is effective for 2					
b Check box to indicate whether the foundat			P	4942(j)(3) or 49)42(j)(5)
<u></u>	Tax year	ing loundation described	Prior 3 years	4942(])(3) 01 43	142()/(3)
2 a Enter the lesser of the adjusted net	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(4) 2010	(6) 2010	(0) 2011	(0) 20.0	(0)
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			<u> </u>		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:				İ	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			- -		
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)		 	-		
(3) Largest amount of support from					
an exempt organization			1		
(4) Gross investment income			id the day malation	had 65 000 ar m	ero in cocoto
Part XV Supplementary Inform			r ir the foundation	nad \$5,000 or m	ore in assets
at any time during th	e year-see ins	tructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation who			ntributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed mo	re than \$5,000). (See	section 507(a)(2).)			
SEE STATEMENT 12					
b List any managers of the foundation who			n (or an equally large portion	on of the ownership of a p	partnership or
other entity) of which the foundation has a	a 10% or greater inter	rest.			
NONE					
2 Information Regarding Contributio	n, Grant, Gift, Loa	n, Scholarship, etc., F	Programs:		
Check here 🕨 🗓 If the foundation onl				not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc. (s	ee instructions) to inc	dividuals or organizations	under other conditions, co	omplete items 2a, b, c, an	d d
a The name, address, and telephone number	er or e-mail address o	f the person to whom app	olications should be address	ssed:	
		· h - · · · · · · · · · · · · · · whi			
b The form in which applications should be	submitted and inform	nation and materials they	should include.	·	
a the form in which applications should be	Japiniacoa and imorn	action and materials mey	ongala molado,		
c Any submission deadlines:					
6 Any Submission acadmics.					
d Any restrictions or limitations on available	euch as by asserant	ical areas, charitable field	e kinde of inetitutions or	other factors	
d Any restrictions or limitations on awards,	Such as by geograph	icai areas, citaritadie field:	อ, หแบนอ บา เมอนเนนเบมอ, ปม	ouidi lautura,	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year BOSTON CHILDRENS HOSPITAL NONE PUBLIC SUPPORT OF THE BOSTON 300 LONGWOOD AVE INVESTMENT CONFERENCE BOSTON MA 02115 50000. BOYS AND GIRLS CLUBS OF BOSTON NONE PUBLIC OPEN DOOR CAMPAIGN 50 CONGRESS ST. SUITE 730 BOSTON MA 02109 500000. BRIDGE OVER TROUBLED WATERS NONE PUBLIC ANNUAL GALA AND 47 WEST ST AUCTION ON BEHALF OF BOSTON MA 02111 SEAN MCGRAIL 10000, CAMBRIDGE HISTORICAL SOCIETY NONE PUBLIC GENERAL FUND 159 BRATTLE STREET CAMBRIDGE MA 02138 5000. CAMP HARBORVIEW FOUNDATION NONE PUBLIC GENERAL FUND 200 CLARENDON ST BOSTON MA 02116 50000 SEE CONTINUATION SHEET(S) Total **▶** 3a 4049500. b Approved for future payment NONE Total <u>3b</u>

Form 990-PF (2016)

Part XVI-A Analysis of Income-Producing Activities

•					
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b	<u></u>				
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments		_ _			
3 Interest on savings and temporary cash	}				
investments			14	7194.	
4 Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	1891368.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income		_	14	-306160.	
8 Gain or (loss) from sales of assets other					
than inventory			18	1963985.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	1				
11 Other revenue:					
a					
b					
C					
d	1 1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0).	3556387.	0
13 Total Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	me is reported ii	n column (e) of Part XV	I-A contributed		olishment of
					 -
					

)-PF (2016) #0746	800			20-6079941	Page 13
Part >	Information Re Exempt Organ	egarding Transfers To izations	and Transactions ar	nd Relationships Wit	h Noncharitable	e
1 Did	the organization directly or indir	rectly engage in any of the follow	ring with any other organization	n described in section 501(c) o	of	Yes No
the	Code (other than section 501(c))(3) organizations) or in section 5	527, relating to political organia	zations?	İ	}
a Trai	nsfers from the reporting founda	ation to a noncharitable exempt o	organization of:			
(1)	Cash				1a(1)	X
(2)	Other assets				1a(2)	X_
b Oth	er transactions:					
(1)	Sales of assets to a noncharital	ble exempt organization			15(1)	X_
(2)	Purchases of assets from a nor	ncharitable exempt organization			1b(2)	X
(3)	Rental of facilities, equipment,	or other assets			1b(3)	X
(4)	Reimbursement arrangements				1b(4)	X
	Loans or loan guarantees				1b(5)	Х
		embership or fundraising solicitat	tions		1b(6)	X
• •		ailing lists, other assets, or paid e	•		1c	X
	= -	"Yes," complete the following sch		avs show the fair market value		
		oundation. If the foundation recei				,
		other assets, or services received		on any danadation of onaring	arrangoment, onow in	
(a) Line no		(c) Name of noncharitab		(d) Description of transfers,	transactions, and sharing ar	rangements
(4)2	(2) mount mound	N/A		(u) Description of Valishers,	ualisactions, and sharing a	Tangements
		N/A		 		
	 					
	- 	 		 	· · · · · · · · · · · · · · · · · · ·	
				 	·	 -
	 			 		
		 		 		
	 	 				
		 		<u> </u>		
	 		_ 			
						
	 	<u> </u>				
				<u></u>		
in s		ity affiliated with, or related to, on ir than section 501(c)(3)) or in se edule.	• •	ations described	Yes	X No
	(a) Name of org		(b) Type of organization	(c) Descript	ion of relationship	
	N/A					
						
						
						
Sign Here		that I have examined this return, including including the Declaration of preparer (other the				ie preparer (see instr.)?
	Print/Type preparer's na			Date Check	If PTIN	
	Trino Type proparer 3 ha	ino inchalcis	,	self- emple	 '	
Paid	100	017 1	0 L 1	10/27/17 Sen- emple	-	1172
Prepa	rer (IMED MOOT ENTERS			P00567	
Use C		TER MCCLENNEN	& FISH'LLP	Firm's Ell	$V \triangleright 04-21065$	005
USE C		12 DODE 17757 455	271 DODE			
		APORT WEST 155				0500
	<u>B</u> O	STON, MA 02210	-2604	Phone no		
					Earm QQ (0-PF (2016)

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

Department of the Treasury Internal Revenue Service

Name of the organization

WAGNER FOUNDATION

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

#	10746800 20-6079941
Organization type (check	
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt chantable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	X 501(c)(3) taxable private foundation
• •	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	non filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or my one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(any one contrib	cion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 utor, 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 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 contributory year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, the prevention of cruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, ente purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box er here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively able, etc., contributions totaling \$5,000 or more during the year \$\bigsim \frac{1}{2} \int \f
but it must answer "No" certify that it doesn't me	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 990-PF, Part I, line 2, to et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (201

Name of organization
WAGNER FOUNDATION
#0746800

Employer identification number

20-6079941

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	HERBERT S., III & CHARLOTTE R WAGNER P.O BOX 51400 BOSTON, MA 02205	\$ <u>15029846</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Omnicash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

WAGNER FOUNDATION #0746800

Employer identification number

20-6079941

Part II	Noncash Property (See instructions). Use duplicate copies of Part	Il if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		&	

623454 10-18-16

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

20-6079941

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate. (d) Date sold (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a FPA CREST FUND 01/02/12/12/20/16 P b MATTHEWS KOREA FUND P 01/0<u>2/12|12/07/</u>16 C T ROWE PRICE EQUITY INCOME FD P 01/02/12/12/13/16 d FPA CRESCENT FUND P 01/0<u>2/16|12/20/16</u> e T ROWE PRICE EQUITY INCOME FD P 01/02/16|12/20/16 f BAUPOST VALUE PARTNERS LP P 01/01/16 12/31/16 g BAUPOST VALUE PARTNERS LP 01/01/12/12/31/16 P h HAWKEYE CAPITAL INSTUTIONAL 01/01/16 12/31/16 P HAWKEYE CAPITAL INSTUTIONAL P 01/01/12|12/31/16 | COLUMBUS HILL PARTNERS LP 01/01/1612/31/16 P k COLUMBUS HILL PARTNERS LP P <u>01/01/12|12/31/16</u> I DELONIX ONSHORE FUND LP 01/01/16|12/31/16 P m ABRAMS CAPITAL PARTNERS 01/01/1612/13/16 LP P 01/01/1212/31/16 n ABRAMS CAPITAL PARTNERS P 01/01/1612/31/16 O CORMORANT GLOBAL HEALTHCARE FD LP P (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 422651 422651. a 50558. 50558. b 506506. 506506. C 3194. 3194. d 18374. 18374. е 415478. 415478. 64834. 64834. g 54138. 54138. h 56660. -56660. 1 39921. 39921. 138436. 138436. k 2452. 2452. 203156. 203156. m 113017. 113017. n 45287. -45287. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 422651. a 50558. b 506506. C 3194. ď 18374. е 415478. f 64834. Q 54138. h -56660. 39921. 138436. k 2452. 203156. m 113017. n -45287. 0 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 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) Gains (excess of col. (h) gain over col. (k) but not less than "-0-") a b -63 c 44
(i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) but not less than "-0-") a
(i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any but not less than "-0-") a
b 52 c 44
b 52 c 44
<u>c</u>
d I
е
q
h
i
k
m
n
0
2 Capital gain net income or (net capital loss) . { If gain, also enter in Part I, line 7 } 2 1963

N/A

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

3434500.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient CAMPAIGN FOR CATHOLIC SCHOOLS NONE PUBLIC LOWER MILLS CAMPUS 66 BROOKS DRIVE RENOVATIONS BRAINTREE, MA 02184 125000. CHARLES RIVER CONSERVANCY NONE PUBLIC GENERAL FUND 4 BRATTLE ST CAMBRIDGE MA 01238 5000. FULL FRAME INITIATIVE NONE PUBLIC GENERAL FUND 308 MAIN ST STE 2A GREENFIELD MA 01301 5000. INNER CITY SCHOLARSHIP FUND NONE PUBLIC GENERAL FUND 260 FRANKLIN STREET SUIT 630 BOSTON MA 02110 100000. INSTITUE OF CONTEMPORARY ART BOSTON NONE TOWARD BUILDING THE PUBLIC 100 NORTHERN AVE MUSEUM'S COLLECTION BOSTON, MA 02210 AND THE ESTABLISHMENT OF THE ACQUISITION CIRCLE & SPONSORSHIP 235000, ISABELLA STEWART GADNER MUSEUM NONE PUBLIC GENERAL FUND 280 FENWAY BOSTON MA 02115 62500. JUSTINE MEE LIFE FUND FOR THE EMERALD NONE PUBLIC PARK SPONSORSHIP AND NECK ADOPT A HERITAGE TREE 125 THE FENWAY PROGRAM BOSTON MA 02115 25000. MARANYUNDO SCHOOL NONE PUBLIC CAMPAIGN FOR THE NEXT 130 RUMFORD AVE SUITE 116 DECADE OF EXCELLENCE NEWTON, MA 02466 60000. MT AUBURN HOSPITAL NONE PUBLIC AUBURN HOSPITAL'S MAH 330 MOUNT AUBURN ST PARTY OF THE YEAR CAMBRIDGE MA 02138 25000. PARTNERS IN HEALTH NONE PUBLIC SUPPORT THE ESTA OF 888 COMMONWEALTH AVE 3RD FL THE OPHELIA M DAHL BOSTON, MA 02215 ENDOWMENT FD AT PIH AND TRANSFORMING HEALTH CARE FOR WOMEN 1515000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient RED SOX FOUNDATION NONE PUBLIC GENERAL FUND AND 4 YAWKEY WAY SUPPORT OF THE FENWAY BOSTON, MA 02114 TO THE RUNWAY 85000. INITIATIVE NONE ROOT CAPITAL PUBLIC SUPPORT FOR THE WOMEN 675 MASS AVE, 8TH FL. IN AGRICULTURE CAMBRIDGE, MA 02139 INITIATIVE 250000. SILVER LINING MENTORING NONE PUBLIC GENERAL FUND 727 ATLANTIC AVE 3RD FLOOR 5000. BOSTON, MA 02111 ST. PETER SCHOOL NONE PUBLIC GENERAL FUND 96 CONCORD AVE CAMBRIDGE MA 02138 50000. SUMMER SEARCH BOSTON NONE PUBLIC GENERAL FUND 500 AMORY STREET JAMAICA PLAIN, MA 02130 50000. THE BOSTON FOUNDATION NONE PUBLIC SPECIAL DESIGNATION TO 75 ARLINGTON STREET THE FREE FOR ALL FUND BOSTON MA 02116 50000, THE JIMMY FUND NONE RADIO THELETHON " RED PUBLIC 10 BROOKLINE PLACE WEST 6TH FLOOR SOX CHALLANGE" BROOKLINE, MA 02445 10000. THE NEW ENGLAND PARTROITS CHARITABLE NONE PUBLIC GENERAL FUND FOUNDATION 1 PATROITS PLACE FOXBOROUGH, MA 02035 10000. VIA ART FUND NONE PUBLIC GENERAL FUND 83 NEWBURY ST BOSTON, MA 02116 25000. WIDE HORIZONS FOR CHILDREN NONE PUBLIC IN SUPPORT OF TRAVIS 38 EDGE HILL ROAD RHODES WALTHAM MA 02451 50000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient WONDERMORE NONE PUBLIC GENERAL FUND 398 WALNUT ST NEWTON, MA 02460 5000. YEAR-UP-BOSTON NONE PUBLIC THE OPPORTUNITY CAMPAIGN 93 SUMMER STREET #5 BOSTON, MA 02110 500000. GREATER BOSTON ARTS FUNDERS NONE LEADERSHIP CONFERENCE PUBLIC 80 BOYLSTON ST BOSTON, MA 02116 2000. CRITTENTION WOMEN'S UNION NONE PUBLIC ANNUAL FUND 10 PETHSHIRE RD BRIGHTON, MA 02135 5000. EOUAL JUSTICE INITIATIVE NONE PUBLIC ANNUAL FUND 122 COMMERCE ST 100000. MONTGOMERY, LA 36104 FOOD PROJECT NONE PUBLIC FUNDRAISING EFFORTS OF 555 DUDLEY ST LINDA MCQUILLAN DORCHESTER MA 02125 10000. HOPE ON A STRING NONE GENERAL PUBLIC SEAPORT BLVD BOSTON MA 02100 25000. SCHOLAR ATHLETES NONE PUBLIC JOHN FISH AND AND IN 57 MAGAZINE ST RECOGNITION FUND ROXBURY MA 02119 10000. SEED GLOBAL HEALTH NONE PUBLIC SUPPORT OF REBECCA 20 ASHBURTON PLACE NORDHAUS BOSTON, MA 02108 10000. STEPPINGSTONE FOUNDATION NONE PUBLIC UNRESTRICTED FIGT IN ONE APPLETON ST RECOGNITION OF THE BOSTON, MA 02116 FUNDRAISING EFFORT OF BRIAN CONWAY 25000. Total from continuation sheets

WAGNER FOUNDATION #0746800

20-6079941

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - INSTITUE OF CONTEMPORARY ART BOSTON
TOWARD BUILDING THE MUSEUM'S COLLECTION AND THE ESTABLISHMENT OF THE
ACQUISITION CIRCLE & SPONSORSHIP OF ICA GALA
NAME OF RECIPIENT - PARTNERS IN HEALTH
SUPPORT THE ESTA OF THE OPHELIA M DAHL ENDOWMENT FD AT PIH AND
TRANSFORMING HEALTH CARE FOR WOMEN AND CHILD IN HAITI

FORM 990-PF INTER	EST ON SAVINO	GS AND TEMPOR	ARY CASH IN	VESTMENTS	STATEMENT 1
SOURCE	(A) REVENUE PER BOOK		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
FEDERATED GOV'T OBI	LIGATION	71	0.4	7104	
FUND		.9 4. ———————	719 4.		
TOTAL TO PART I, L	INE 3	71	.94.	7194.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
ABRAMS CAPTIAL PARTNERS LP ABRAMS CAPTIAL PARTNERS LP MUNI	433571.	0.	433571.	43357	1.
INT	3623.	0.	3623.		0.
BAUPOST VALUE PARTNERS LP BAUPOST VALUE PARTNERS LP MUNI	115279.	0.	115279.	11527	9.
INT	2542.	0.	2542.	(0.
COLUMBUS HILL LLP COLUMBUS HILL LLP	222590.	0.	222590.	22259	0.
MUNI INT CORMORANT GLOBAL	19352.	0.	19352.	(0.
HEALTHCARE DELONIX ON SHORE	9056.	0.	9056.	905	6.
FUND LP DIVIDENDS AND	467.	0.	467.	46'	7.
INTEREST FARMSTEAD PARTNERS	768266.	0.	768266.	76826	6.
LP FARMSTEAD PARTNERS	125425.	0.	125425.	12542	5.
LP MUNI INT HAWKEYE CAPITAL	979.	0.	979.	(0.
INST. LP	138281.	0.	138281.	13828	1.
HAWKEYE CAPITAL INST. LP MUNIINT MASON CAPITAL	2056. 49881.	0.	2056. 49881.		0. 1.
TO PART I, LINE 4	1891368.	0.	1891368.	186281	6.
				: 	

	OTHER I	NCOME		STATEMENT	
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM) Æ
ABRAMS CAPITAL PARTNER LP SE	 C 1231	33353.	33353.		
ABRAMS CAPITAL PARTNER LP SE COLUMBUS HILL PARTNER LP SE COLUMBUS HILL PARTTNER LP SE	1231 C 1256	-600.	-600		
CONTRACTS & STRADDLES		-244480.	-244480.		
BAUPOST VALUE PARTNERS LP		-112068.	-112068.		
BAUPOST VALUE PARTNERS LP SE	C 1256	95332.	95332.		
HAWKEYE		9087.	9087.		
COLUMBUS HILL PARTTNER LP SE CONTRACTS & STRADDLES BAUPOST VALUE PARTNERS LP BAUPOST VALUE PARTNERS LP SE HAWKEYE MASON CAPITAL LP INC SEC 125 COLUMBUS HILL PARTNER LP ORD INCOME COLUMBUS HILL PARTNER LP SEC	6 OINARY	58558.	58558.		
INCOME		-69853.	-69853.		
INCOME COLUMBUS HILL PARTNER LP SEC MASON CAPITAL LP SECTION 988 FARMSTEAD PARTNERS LP BAUPOST VALUE PARTNERS LP SE	988	26754.	26754.		
MASON CAPITAL LP SECTION 988	}	19273.	19273.		
FARMSTEAD PARTNERS LP		63182.	63182.		
BAUPOST VALUE PARTNERS LP SE	C 1231	26688.	26688.		
CORMORANT GLOBAL HEALTHCARE	FUND LP	10000	40000		
SEC 998		10883.	10883.		
DELONIA ONGRODE EIND ID 1356	•	043.	023.		
DELONIA ONGRODE ELIMD ID GEGG	00	-2400. 10E	-2400. 10E		
ARRAMS CARTUAL RADUND IN SECS	1256	_2031	193.		
ABRAMS CAPITAL PARTNER LL LP 1256		-2031.	-2031.		
ABRAMS CAPTUAL PARTNER LL LE	•	42969	42969		
CORMORANT GLOBAL HEALTHCARE	FUND LP	-157761	-157761.		
COLUMBUS HILL PARTNER LP SWA	P INC	-78280	-78280		
MASON CAPITAL LP INC SWAP IN	iC	-8555.	-8555.		
MASON CAPITAL LP INC		-48399.	-48399.		
CORMORANT GLOBAL HEALTHCARE SEC 998 FED INT ON REFUND DELONIX ONSHORE FUND LP 1256 DELONIX ONSHORE FUND LP SEC9 ABRAMS CAPITAL PARTNER LL LP FED REFUND ABRAMS CAPITAL PARTNER LL LP CORMORANT GLOBAL HEALTHCARE COLUMBUS HILL PARTNER LP SWA MASON CAPITAL LP INC SWAP IN MASON CAPITAL LP INC ABRAMS CAPITAL PARTNER LPSEC ABRAMS CAPITAL PARTNER LPSEC ABRAMS CAPITAL PARTNER LP SE MTM	988 C 475	1447.	1447.		
MTM		-11.	-11.		
TOTAL TO FORM 990-PF, PART I	, LINE 11 ==	-306160.	-336160.		
FORM 990-PF	LEGAL	FEES		TATEMENT	4
	(A)	(B)	(C)	(D)	
DESCRIPTION	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITAE PURPOSE	
NUTTER MCCLENNEN & FISH LLP	18000.	13500	•	450	00.

ACCOUNTI	NG FEES	STATEMENT 5		
(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES	
3000.	2250.		750.	
3000.	2250.		750.	
THER PROFES	SIONAL FEES	S	PATEMENT 6	
(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
210. 113. 16.	0. 0. 0.		29423. 210. 113. 16. 84.	
29846.	0.		29846.	
TAX	ES	S	гатемент 7	
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
429.	0.		0. 0. 0.	
	(A) EXPENSES PER BOOKS 3000. 3000. 3000. THER PROFES (A) EXPENSES PER BOOKS 29423. 210. 113. 16. 84. 29846. TAX (A) EXPENSES PER BOOKS 80000. 29174. 429. 517.	EXPENSES NET INVEST- PER BOOKS MENT INCOME 3000. 2250. 3000. 2250. THER PROFESSIONAL FEES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 29423. 0. 210. 0. 113. 0. 16. 0. 84. 0. 29846. 0. TAXES (A) (B) EXPENSES NET INVEST- MENT INCOME 80000. 0. 29174. 29174. 429. 0. 517. 0.	(A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 3000. 2250. 3000. 2250. OTHER PROFESSIONAL FEES (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 29423. 0. 210. 0. 113. 0. 16. 0. 84. 0. 29846. 0. TAXES (A) (B) (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (B) (C) ADJUSTED NET INCOME (B) (C) ADJUSTED NET INCOME (C) ADJUSTED NET INCOME (A) (B) (C) ADJUSTED NET INCOME (B) (C) ADJUSTED NET INCOME	

FORM 990-PF	OTHER E	XPENSES	STATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES	
MASS FORM PC ANNUAL FILING					
FEE	500.			500.	
COLUMBUS HILL PARTNERS LP	197285.	147964.		49321.	
ABRAMS CAPITAL PARTNERS LP	145431.	109073.		36358	
HAWKEYE CAPITAL INST LP INV					
INTEREST EXPENSE	27517.	20638.		6879	
HAWKEYE CAPITAL INST LP INV					
EXPENSE	47804.	35853.		11951.	
COLUMBUS HILL PARTNERS LP					
INV INT	39876.			9969.	
BAUPOST VALUE PARTNERS, LP	40245.	30184.		10061	
MASON CAPITAL LP INVEST INC					
EXPENSE	60659.	45494.		15165	
FARMSTEAD PARTNERS LP INV					
INT	14438.	10829.		3609	
FARMSTEAD PARTNERS LP INV					
EXP	52105.	39079.		13026	
CORMORANT GLOBAL HELATHCARE	22422	4.686.6			
FD LP	22128.			5532	
DELONIX	2623.	1967.		656.	
TO FORM 990-PF, PG 1, LN 23	650611.	487584.		163027	
FORM 990-PF	CORPORAT	E STOCK 		STATEMENT	
DESCRIPTION		вос	OK VALUE	FAIR MARKET VALUE	
FPA CRESCENT FUND			10013973.	10855451	
T ROWE PRICE EQUITY INCOME F	מאוז		8521137.	10241108	
VANGUARD VALUE INDEX FUND	-112		7429469.	11792557	
MATTHEWS KOREA FUND			726557.	670751	
OAKMARK INTERNATIONAL FUND			8488959. 8488959		
DELONIX ONSHORE FUND LP			498025.	4988025	
DECTAL CHORDING LOND DI					
TOTAL TO FORM 990-PF, PART I	I. LINE 10B		35678120.	47036851	
	-,				

FORM 990-PF	OTHER	INVESTM	ENTS		STATEMENT	10
DESCRIPTION		VALUAT METHO		BOOK VALUE	FAIR MARKE VALUE	T
HAWKEYE CAPITAL INST LP		COST	, –	4634650.	46346	50
COLUMBUS HILL PARTNERS LP		COST		9679248.	96792	
ABRAMS CAPITAL PARTNERS LP		COST		13890804.	138908	
MASON CAPITAL LP		COST		2199084.	21990	
BAUPOST VALUE PARTNERS LP		COST		16103842.	161038	
FARMSTEAD PARTNERS LP		COST	1	3107273.	31072	73.
CORMORANT GLOBAL HEALTHCARE FI	D LP	COSI	•	3753052.	37530	52.
TOTAL TO FORM 990-PF, PART II	, LINE	13	_	53367953.	533679	53.
FORM 990-PF LIST OF		NTIAL CO		PORS	STATEMENT	11
NAME OF CONTRIBUTOR		ADDRESS				
HERBERT S. WAGNER	-	P O BOX	E1400			
HERDERI D. WAGNER		BOSTON,)5		
CHARLOTTE R. CRAMER WAGNER		P O BOX BOSTON,	-)5		
		- LINE DATION M		3	STATEMENT	12

NAME OF MANAGER

HERBERT S. WAGNER III CHARLOTTE R. CRAMER WAGNER