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Form **990-PF**

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

OMB No 1545 0052

Department of the Treasury Internal Revenue Service

➤ 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.

2016

	evenue Service Information about Fo	orm 990-PF and its separate	instructions is at www.i	rs.gov/form990pf.	Open to Public Inspection
For cal	endar year 2016 or tax year beginning	, 2016	, and ending	,	
	NUS FOUNDATION			A Employer identification 26-6400729	
	ONTVALE ROAD ON, MA 02459		_	B Telephone number (see 617-969-51)	
				C If exemption application	on is pending, check here 🕨 🗌
G Che	ck all that apply Initial return Final return	Initial return of a form Amended return	ner public charity	D 1 Foreign organizations,	<u> </u>
H Che	Address change X Section 50	Name change 1(c)(3) exempt private t	foundation	2 Foreign organizations here and attach compi	meeting the 85% test, check tation
I Fair	Section 4947(a)(1) nonexempt charitable		private foundation	E If private foundation s under section 507(b)(1	
	n Part II, column (c), line 16)	Other (specify)		F If the foundation is in	a 60-month termination
Part I		(a) Revenue and	(b) Net investmen	under section 507(b)(1 t (c) Adjusted net	
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces sarily equal the amounts in column (a) (see instructions))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, ciffs, grants, etc., received (attach schedule) 2 Check I if the foundation is not required to attach Sch	1,848,425.			
	3 Interest on savings and temporary cash investments	240.	24	0. 24	0
	4 Dividends and interest from securities	89,051.	44,12		
	5 a Gross rents b Net rental income			R	EUFIVED O
R	b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10	-25,983.		2 a	10 2017
Ë	b Gross sales price for all 3,040,214.	25, 505.			
	7 Capital gain net income (from Part IV, line 2)		1,497,63		ODEN LIT
E N U	Net short-term capital gain Income modifications			10, 42	750214, 01
Ĕ	10 a Gross sales less returns and				
	allowances b Less Cost of	<u></u>			
	goods sold Gross profit or (loss) (attach schedule)	 			
	11 Other income (attach schedule)				
	SEE STATEMENT 1		-5,64		
	12 Total Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	1,906,091.	1,536,36	5. 99,71	8.
	14 Other employee salaries and wages			- 	
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule) SEE ST 2	500.	50	0. 50	0.
M	b Accounting fees (attach sch) c Other professional fees (attach sch) SEE ST 3	15.070	15.07		
o Ń	c Other professional fees (attach sch) SEE ST 3	15,272. 118.	15,27	2. 15,27	<u>Z.</u>
P S E T	18 Taxes (attach schedule)(see instrs) SEE STM 4	69,354.	37	7. 37	7.
R R A A T T	19 Depreciation (attach	3373011		· · · · · · · · · · · · · · · · · · ·	
1 1	schedule) and depletion 20 Occupancy				
N V G E	21 Travel, conferences, and meetings		-		
A E N X	22 Printing and publications				
D P	23 Other expenses (attach schedule) SEE STATEMENT 5	52.	5:	2 5	2.
EXPENSES	24 Total operating and administrative				<u> </u>
Š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV	85,296.	16,20	1. 16,20	1.
S E S	26 Total expenses and disbursements Add lines 24 and 25	338,500. 423,796.	16,20	1. 16,20	338,500 1. 338,500
	27 Subtract line 26 from line 12	423, 190.	10,20	10,20	330,300.
	a Excess of revenue over expenses and disbursements	1,482,295.			
	b Net investment income (if negative, enter 0-)		1,520,16		
	C Adjusted net income (if negative, enter 0-)			83,51	7.

Page 2

Par	Ш	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year			f year
		(See instructions)	(a) Book Value	(b) Book Valu	e	(c) Fair Market Value
	1	Cash — non-interest-bearing				
	2	Savings and temporary cash investments	1,905,205.	3,289,6	94.	3,290,694.
	3	Accounts receivable				
] _	Less allowance for doubtful accounts	ļ			<u> </u>
	4	Pledges receivable				
	_	Less. allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			!	
	7	Other notes and loans receivable (attach sch)	·	-		
A	-	Less allowance for doubtful accounts				
S	8	Inventories for sale or use				
A S E T	9	Prepaid expenses and deferred charges				
s	10 a	Investments – U.S. and state government obligations (attach schedule)	1,212,173.	1,176,5	52.	1,167,488.
		Investments — corporate stock (attach schedule)				
		: Investments — corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments - other (attach schedule) STATEMENT 7	1,064,052.	1,197,4	79.	1,197,478.
	14	Land, buildings, and equipment basis ►				
		Less: accumulated depreciation (attach schedule)				
		Other assets (describe ►)				
		Total assets (to be completed by all filers — see the instructions. Also, see page 1, item l)	4,181,430.	5,663,7	25.	5,655,660.
Ĺ	17	Accounts payable and accrued expenses				
A B I	18	Grants payable				
P	19	Deferred revenue				
L	20	Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule)				
Ţ	ì	Other liabilities (describe)				
Ė	1	`	 			
_ <u>E</u>	23	Total liabilities (add lines 17 through 22)	0.		0.	
	Ì	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
ΝF	24	Unrestricted				
E U T N	25	Temporarily restricted				
D	26	Permanently restricted				
A B A L A N	ı	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
ΕL	27	Capital stock, trust principal, or current funds				
ŚΝ̈́	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
o E	29	Retained earnings, accumulated income, endowment, or other funds	4,181,430.	5,663,7	25.	
ŔŠ	30	Total net assets or fund balances (see instructions)	4,181,430.	5,663,7	25.	
	31	Total liabilities and net assets/fund balances (see instructions)	4,181,430.	5,663,7	25	
Par	<u> </u>	Analysis of Changes in Net Assets or Fund Balanc		3,003,1	<u> 2</u> J .	L
				roo with		
1	end-	l net assets or fund balances at beginning of year – Part II, colu of-year figure reported on prior year's return)	amn (a), line 30 (must ag	ree with	1	4,181,430.
2		r amount from Part I, line 27a		ł	2	1,482,295.
3		increases not included in line 2 (itemize)		Ì	3	
4		lines 1, 2, and 3			4	5,663,725.
5		ases not included in line 2 (itemize)			5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), lı	ne 30	6	5,663,725.

-,-	(a) List and describe 2-story brick wareh	the kind(s) of property sold (e.g., rouse; or common stock, 200 shares		b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SEE STATEMENT 8			D O Marion		
ŀ)					
	:					·
	<u></u>					
	<u> </u>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) m	
		ring gain in column (h) and owned b	by the foundation on 12/31/6	9	(I) Cours (Col.	(h)
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(I) Gains (Col gain minus col (k), b an -0-) or Losses (fr	ut not less
ā						
ŀ)					
	l					
	<u> </u>					
2	Capital gain net income or (ne		enter in Part I, line 7 er -0- in Part I, line 7	2	1	.,497,638
3	Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6)			
	If gain, also enter in Part I, linin Part I, line	e 8, column (c) (see instructions) If	(loss), enter -0-	3		10,427
		r Section 4940(e) for Reduce				
(For	optional use by domestic private f	oundations subject to the section 4940	(a) tax on net investment inco	me)		
If se	ction 4940(d)(2) applies, leave t	this part blank				
14/00	the foundation liable for the co.	etion 4042 toy on the distributable o	mount of any year in the he	an normad?	∏Yes	√ No
		ction 4942 tax on the distributable a ilify under section 4940(e) Do not o		se periou	Lies	X No
		each column for each year, see the in-		entries.		
		(b)	(c)	T	(d)	
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets	Distribution (col (b) divided	
	2015	77,000.	3,030	, 132.		0.02541
	2014	122,726.	2,102			0.058367
	2013	55,000.		, 488.		0.057084
	2012	75,000.	1,033		·	0.072564
	2011	176,190.	1,098	,852.		0.160340
2	Total of line 1, column (d)			2		0.373766
3		ne 5-year base period — divide the t n has been in existence if less than		3		0.07475
4	Enter the net value of nonchar	ntable-use assets for 2016 from Par	t X, line 5	4		1,364,882
5	Multiply line 4 by line 3			5		326,288
	Enter 1% of net investment in				1	
6		come (1% of Part I, line 27b)		6	ļ	15,202
6 7	Add lines 5 and 6	come (1% of Part I, line 27b)		7		
				_		15,202 341,490 338,500

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see ins	struction	15)		
Ìa	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				Ī
	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,	1	30	0,403	
	check here. ► and enter 1% of Part I, line 27b				Ī
С	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-)	2		0	
3	Add lines 1 and 2	3	31	0,403	_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4		0	-
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	3	0,403	-
6	Credits/Payments				Ī
a	2016 estimated tax pmts and 2015 overpayment credited to 2016 da 32,635.				
b	Exempt foreign organizations — tax withheld at source 6b				ı
С	Tax paid with application for extension of time to file (Form 8868). 6c 32,000.				ı
d	Backup withholding erroneously withheld 6 d				ı
7	Total credits and payments Add lines 6a through 6d	7	6	4,635	-
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	3			_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	3		0	-
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0	3,	4,232	-
11	Enter the amount of line 10 to be Credited to 2017 estimated tax > 34,232. Refunded > 11	1		0	-
Par	Statements Regarding Activities				_
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Y	es No	_
	participate or intervene in any political campaign?		1 a	X	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b	Х	
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				ı
	Did the foundation file Form 1120-POL for this year?		1 c	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•			I
_	(1) On the foundation	0.	- 13		ı
е	foundation managers. > \$ 0.				L
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	Х	-
	If 'Yes,' attach a detailed description of the activities				Ê
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			- 1	ı
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	Х	_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X	_
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N/A	_
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			ĺ	ı
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				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	Х	
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	X	
8 a	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 <i>General Instruction G</i> ? If 'No,' attach explanation		8 b	X	•
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete P	142(j)(5) Part XIV	9	X	Í
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			1	_
	and addresses		10	<u>x</u>	_
BAA		Fc	orm 990-P	F (2016)	

Par	t VII-A	Statements Regarding Activities (continued)			
11	At any tii within the	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No X
12	Did the fo advisory	oundation make a distribution to a donor advised fund over which the foundation or a disqualified person had privileges? If 'Yes,' attach statement (see instructions)	12	<u>.</u>	х
13		oundation comply with the public inspection requirements for its annual returns and exemption applications.	on ² 13	X	
14	Website	=		E-1-0-	
14	Located		<u>617-969-</u>	2108	
15	Section 4	4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	- - <u>N</u> /	′Ā ⁻	- 🗆 -
	and ente	r the amount of tax-exempt interest received or accrued during the year	5		N/A
16		ne during calendar year 2016, did the foundation have an interest in or a signature or other authority over a curities, or other financial account in a foreign country?	16	Yes	No X
		instructions for exceptions and filing requirements for FinCEN Form 114 If 'Yes,' name of the foreign country ►	- * -		
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
		n 4720 if any item is checked in the 'Yes' column, unless an exception applies.	- \$ - 1 A	Yes	No
1 a	During th	ne year did the foundation (either directly or indirectly)	#. To 5.	基	de la
	(1) Enga	age in the sale or exchange, or leasing of property with a disqualified person?	X No	7	\$ -
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?	X No		
		ish goods, services, or facilities to (or accept them from) a disqualified person? . Yes	X No		3
		compensation to, or pay or reimburse the expenses of, a disqualified person?	X No		
	(5) Trans for th	sfer any income or assets to a disqualified person (or make any of either available ne benefit or use of a disqualified person)?	X No		ing P in Person Person
	(6) Agre- found of go	e to pay money or property to a government official? (Exception. Check 'No' if the dation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days).	X No .		2 2
ł	If any an Regulation	swer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in one section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1	b N	/A
	Organiza	ations relying on a current notice regarding disaster assistance check here .		·	. ,
C	Did the for that were	oundation engage in a prior year in any of the acts described in 1a, other than excepted acts, and corrected before the first day of the tax year beginning in 2016?	1	C	X
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply for years the foundation was a perating foundation defined in section 4942(j)(3) or 4942(j)(5))			A. A.
ā	and 6e, f	nd of tax year 2016, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2016? Yes	χNο		1
	11 165, 1	list the years ► 20 , 20 , 20			
Ł	(relating	e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to listed, answer 'No' and attach statement — see instructions)	2	b N	75. /A
	-	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	150	2 64.5	
	•	, 20 , 20 , 20			1
2 -		oundation hold more than a 2% direct or indirect interest in any business			3
36	enterpris	e at any time during the year? Yes	X No		100 m
ł	or disqua	did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation alified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved ommissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or ipse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to be if the foundation had excess business holdings in 2016)		b N	/A
_			- 3	- 1	<u> </u>
4 a	Did the for charitable	oundation invest during the year any amount in a manner that would jeopardize its e purposes?	4	a	X
ı	Did the f	oundation make any investment in a prior year (but after December 31, 1969) that could	ું છે . કેંક્સ્ક્રે	4	
	leopardize	e its charitable purpose that had not been removed from jeopardy before the first day of ear beginning in 2016?	4	b	X

Form 990 PF (2016) GALENUS FOUNDATION			26-640	00729	Page 6
Part VILE Statements Regarding Activit		1 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	∏Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	_		☐ Yes X	No	
(3) Provide a grant to an individual for travel,			Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charitable, etc., organi s)	zation described	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?		No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excepting disaster assistance	otions	5 b	N/A
Organizations relying on a current notice rega	irding disaster assistand	ce check here	▶ 📋		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg.	sibility for the grant?		N/A Yes	No	
6 a Did the foundation, during the year, receive at on a personal benefit contract?			∐Yes X	No G	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ily, on a personal bene	fit contract?	6 b	X
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				No 7h	
Part VIII Information About Officers, D				N/A 7b	
and Contractors	ncctors, rrustees,	i oundation manag	jers, riiginiy r ala E	pioyees,	
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allow	
LAURA F. LANGER	TRUSTEE	0.	0.		0.
_98_MONTVALE_ROAD NEWTON, MA 02459	1.00				
ROBERT S. LANGER	TRUSTEE	0.	0.		0.
98 MONTVALE ROAD	1.00				•
NEWTON, MA 02459					
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 — see instructio	ns). If none, enter 'NONE		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense a other allow	ccount, /ances
NONE					
				ľ	
					
		<u> </u>			
	}				
					
]	
	<u> </u>		<u> </u>		
Total number of other employees paid over \$50,000			<u></u>	L	0
BAA	TEEA0306L 12	2/16/16		Form 990-PF	(2016)

Part VIII Information About Officers, Directors, Trustees, Foundaries and Contractors (continued)	tion Managers, Highly Paid E	imployees,
3 Five highest-paid independent contractors for professional services (see inst	ructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Table purpher of others recovered over \$50,000 for exclosured over the		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc	nformation such as the number of	Expenses
1 N/A		
2		
3		
4		-
Part IX-B Summary of Program-Related Investments (see instruction	ons)	
Describe the two largest program-related investments made by the foundation during the ta	ax year on lines 1 and 2.	Amount
1		
77		
N/A 2		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0.
BAA		Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	70,	
a Average monthly fair market value of securities	1 a	2,214,105.
b Average of monthly cash balances	1 Ь	2,217,247.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	4,431,352.
e Reduction claimed for blockage or other factors reported on lines 1a and	1	
1c (attach detailed explanation) 1e 0.	• * •	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	4,431,352.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	66,470.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,364,882.
6 Minimum investment return. Enter 5% of line 5	6	218,244.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► and do not complete this part.)	ting fo	oundations
1 Minimum investment return from Part X, line 6	1	218,244.
2a Tax on investment income for 2016 from Part VI, line 5 2a 30, 403.		
b Income tax for 2016 (This does not include the tax from Part VI).		
c Add lines 2a and 2b.	2 c	30,403.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	187,841.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	187,841.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	187,841.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	- 5	
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	338,500.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 	3 a	
b Cash distribution test (attach the required schedule).	3ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	338,500.
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	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	338,500.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	ındatıor	1
BAA		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,				107.041
Ine 7 2 Undistributed income, if any, as of the end of 2016				187,841.
a Enter amount for 2015 only			0.	
b Total for prior years 20 , 20 , 20	ļ	0.		
3 Excess distributions carryover, if any, to 2016			 	
a From 2011 121, 267.				
b From 2012 23, 324.			İ	
c From 2013 27, 943.				•
d From 2014 126,000.				
e From 2015				
f Total of lines 3a through e.	298,534.			
4 Qualifying distributions for 2016 from Part				
XII, line 4 * \$ 338,500.				
a Applied to 2015, but not more than line 2a			0.	
 Applied to undistributed income of prior years (Election required – see instructions) 		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2016 distributable amount			· · · · · · · · · · · · · · · · · · ·	187,841.
e Remaining amount distributed out of corpus	150,659.			10770111
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the				
same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	449,193.			
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 instructions			0.	
f Undistributed income for 2016 Subtract lines				
4d and 5 from line 1. This amount must be				•
distributed in 2017 7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions)	0.			
				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	121,267.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	327,926.			
10 Analysis of line 9	321,320.	 		
a Excess from 2012 23, 324.				
b Excess from 2013. 27, 943.				
c Excess from 2014 126, 000.	1			
d Excess from 2015]		
e Excess from 2016 150, 659.		l		
BAA				Form 990-PF (2016)

BAA

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	 		
SEE STATEMENT 9				ĺ
		}		
]]		
	į	}		
		1		
		1		
		1 1		
]]		ļ
		1		:
Total			► 3a	338,500
b Approved for future payment				
				1
Total			► 3b	

	Analysis of Income-Producing	Activities				
Enter gross	s amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	(e)
1 Dro	220/22 22/22	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
-	ram service revenue		 	code	· · · · · · · · · · · · · · · · · · ·	
a	_ 		-			
b		 -		 		
·						
d		ļ		+		
é						
† <u></u>		ļ				
-	and contracts from government agencies					
	bership dues and assessments					
	st on savings and temporary cash investments				240.	
-	ends and interest from securities				89,051.	
	ental income or (loss) from real estate					
	financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	r investment income					
	r (loss) from sales of assets other than inventory					25,983.
	ncome or (loss) from special events					
10 Gross	s profit or (loss) from sales of inventory					
11 Other	r revenue					
a <u>PAS</u>	STHROUGH INCOME			1	-5,642.	
b						
c						
d						
е						
12 Subto	otal Add columns (b), (d), and (e)				83,649.	-25,983.
13 Total	. Add line 12, columns (b), (d), and (e)				. 13	57,666.
(See works	sheet in line 13 instructions to verify calculate	ions)			•	
Part XXVI	B Relationship of Activities to the	e Accompl	ishment of Exem	pt Purpose	es	
Line No.	Explain below how each activity for which is accomplishment of the foundation's exemp	income is repo	orted in column (e) of	Part XVI-A c	ontributed important	y to the
▼	accomplishment of the foundation's exemp	t purposes (o	ther than by providing	funds for su	ch purposes). (See ii	ństructions)
N/A	<u> </u>					
			· -			
		_				
						
					<u> </u>	
						
	<u> </u>	_				
						
						
						
						
						
						
						

Form 990-PF (2016) GALENUS FOUNDATION 26-640072 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempt Organiz	zations									
describ	organization directly ed in section 501(c) o to political organizat	of the Code (of	engage in ther than	any of the fo section 501(ollowing wit (c)(3) organ	h any oth nizations)	ner organizatio or in section !	on 527,		Yes	No
_	rs from the reporting		a nonch	arıtable exem	not organiza	ation of				ŀ	
(1) Cas		,			.p				1 a (1)	X
• •	er assets								1 a ($\frac{X}{X}$
• • •	ransactions										1
	es of assets to a non	charitable eve	empt orga	noization					1b(1)	X
` '	chases of assets from		, –		ion				1 b (<u>-</u> +	X
` '	ntal of facilities, equip			ipt organizat	1011				1b(- +	X
• •	mbursement arrange		1 455015						1b(X
• • •	ins or Ioan guarantee								1b(X
	formance of services		un or fund	draising solic	itations				1b(X
` '	of facilities, equipme		•	•		205			10		X
Containing	or racinges, equipm	one, maning no	313, 01101	assets, or pr	aid citiploy						<u></u>
d If the are the goo any tran	nswer to any of the a ds, other assets, or s nsaction or sharing a	above is 'Yes,' services given irrangement, sl	complete by the re how in co	the followin porting found olumn(d) the	g schedule dation If th value of the	Column e founda e goods,	(b) should alwation received lother assets, a	ays show the fa ess than fair m or services rec	air market va arket value eived	alue of in	
(a) Line no	(b) Amount involved	(c) Name o	of noncharit	able exempt orga	anızatıon	(d)	Description of tran	isfers, transactions	, and sharing a	rrangemen	ts
N/A											
	_									_	
										_	
											
											
		 		 							
describ	oundation directly or ed in section 501(c) of complete the followi	of the Code (o	ated with ther than	, or related to section 501(o, one or m (c)(3)) or in	nore tax-e section	exempt organiz 527?	zations		es X]No
(a) Name of organizati	ion	(b) Type of o	rganızatıon		(c) Description o	f relationshi	р	
N/A											
								· <u>-</u>			
Under	penalties of pedury, I declare to , and complete Declaration	that I have examined	this return,	including accompa	anying schedule	and statem	ents, and to the best	of my knowledge an	d belief, it is true		
Sign Here	James James	r di preparei donei	, / -	ter 1	Au 16	•	RUSTEE	leage	May t this re prepa	he IRS disc eturn with the rer shown pstructions	he below
Sign	ature of officer or trustee	TY	1 1	Date	0	7	e			X Yes	No
	Print/Type preparer's nar	me	P	reparer's signatu	re		Date	Check	if PTIN		
Paid	NELSON J. CO	OSTA		10,-			08/16/20	self-employed	_ [27606	
Preparer		LAW OFFICE	E OF M	EIEMAN &	COSTA		I		4-292341		
Use Only		70 WELLS A			COSIA			J	<u> </u>	. •	
USE Only	_	EWTON CEN		MA 02459	-3333			Phone no (617) 969	a_0500	1
	ı IN	TENTOIN CEIN	ATER, I	.m. 02439	<u> </u>			1. 110.10 10			
BAA									rorm	990-PF	(2010)

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

Schedule of Contributors

2016

Department of the Treasury Internal Revenue Service

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

Employer identification number

OMB No 1545-0047

Name of the organization GALENUS FOUNDATION 26-6400729 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 2 of Part I
Name of org	anization US FOUNDATION	' '	r identification number 400729
	Contributors (see instructions) Use duplicate copies of Part I if additional space		100723
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT AND LAURA LANGER 98 MONTVALE ROAD NEWTON, MA 02459	\$ <u>18,925.</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ROBERT AND LAURA LANGER 98 MONTVALE ROAD NEWTON, MA 02459	\$162,000.	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ROBERT AND LAURA LANGER 98 MONTVALE ROAD NEWTON, MA 02459	\$189,000.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ROBERT AND LAURA LANGER 98 MONTVALE ROAD NEWTON, MA 02459	\$ <u>580,100</u> .	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	ROBERT AND LAURA LANGER 98 MONTVALE ROAD NEWTON, MA 02459	\$4 <u>95,200.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ROBERT AND LAURA LANGER		Person Payroll

98 MONTVALE ROAD

NEWTON, MA 02459

234,200.

Payroll

Noncash

(Complete Part II for noncash contributions.)

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	2 of 2 of Part l
Name of org	anization JS FOUNDATION	' '	er identification number 400729
	Contributors (see instructions) Use duplicate copies of Part I if additional spa		400123
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ROBERT AND LAURA LANGER		Person Payroll
	98 MONTVALE ROAD	\$169,000.	Noncash X
	NEWTON, MA 02459		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$ 	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash Complete Part II for noncash contributions)
BAA	TEEA0702L 08/09/16	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)

Page

1 to

2 of Part II

Name of organization

GALENUS FOUNDATION

Employer identification number 26-6400729

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,000 SHARES OF SELECTA BIOSCIENCES		
		\$18,925.	12/19/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	50,000 SHARES OF CURIS		
		\$162,000.	_11/10/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	15,000 SHARES OF MOMENTA		
		\$ 189,000.	11/09/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	10,000 SHARES OF ALKERMES	-	
<i>3</i>		\$580,100.	11/09/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	10,000 SHARES OF ALKERMES		
≟-		\$ <u>495,200.</u>	9/16/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	20,000 SHARES OF MOMENTA		
U	L	-{	

Page

2 to

2 of Part II

GÀLENUS FOUNDATION

Employer identification number 26-6400729

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	ace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	25,000 SHARES OF INVIVO		
		\$169,000.	9/16/16_
(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
		\$	
BAA	Sche	dule B (Form 990, 990-EZ	, or 990-PF) (2016)

1 of Part III

1 to 1 of Par Employer identification number 26-6400729

	the following line entry. For organizations c	the year from any one contributor. Completing Part III, enter the total of exclusive (Enter this information once See instructional space is needed		olete columns (a) through (e) and vely religious, charitable, etc , ons) > \$N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gıft is held		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ntionship of transferor to transferee		

2016	FEDERAL STATEMENTS	PAGE 1
CLIENT 1	GALENUS FOUNDATION	26-6400729
8/15/17 STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		12 13PM
PASSTHROUGH INCOME	(A) (B) NET REVENUE INVESTMENT INCOME \$ -5,642. TOTAL \$ -5,642. \$ 0.	(C) ADJUSTED NET INCOME \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES		
FILING FEE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTEI PER BOOKS INCOME NET INCOM \$ 500. \$ 500. \$ 50 TOTAL \$ 500. \$ 500. \$ 50	
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
ACCOUNT FEES (FIDELITY 1711 ACCOUNT FEES (FIDELITY 1712 CUSTODIAL FEES (C.S.) MANAGEMENT FEE (D.B)	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTEI PER BOOKS INCOME NET INCOM \$ 5,874. \$ 5,874. \$ 5,87 1,767. 1,767. 1,767. 1,767 1,821. 1,821. 1,821. 1,82 5,810. 5,810. 5,810. 5,81 TOTAL \$ 15,272. \$ 15,272. \$ 15,27	ME PURPOSES 74. 67. 21. 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES		
D.B. FOREIGN TAX PAID FIDELITY FOREIGN TAX PAID UNITED STATES TREASURY UNITED STATES TREASURY UNITED STATES TREASURY (201	96. 96. 96. 9 57,113. 8,455. 4) 3,409.	

2016	FEDERAL STA	ATEMENTS	PAGE 2
CLIENT 1	GALENUS FO	UNDATION	26-6400729
8/15/17 STATEMEN FORM 990- OTHER EX	-PF, PART I, LINE 23		12 13PM
DB (0993)	(A EXPENSI PER BOO PER 1099 INVESTMENT EXPENSES \$ TOTAL \$	ES INVESTMENT	(C) (D) ADJUSTED CHARITABLE ET INCOME PURPOSES 52. 52. 52.
	NT 6 -PF, PART II, LINE 10A -NTS - U.S. AND STATE GOVERNMENT OBLI		BOOK FAIR MARKET
	NICIPAL OBLIGATIONS SCHWAB 5466 1712	METHOD V COST \$ COST 1,	ALUE VALUE 0. \$ 0. 176,552. 1,167,488. 176,552. \$ 1,167,488.
STATEMEN FORM 990- INVESTME	NT 7 -PF, PART II, LINE 13 :NTS - OTHER		BOOK FAIR MARKET ALUE VALUE
FIDELITY OTHER SEC		COST \$	0. \$ 0.
DEUTSCHE MORGAN ST FIDELITY	BANK FANLEY	•	0. 0. 0. 0. 197,479. 1,197,478.
	NT 8 -PF, PART IV, LINE 1 GAINS AND LOSSES FOR TAX ON INVESTME (A) DESCRIPTION RLES SCHWAB (5466) STCG	ENT INCOME (B) HOW ACQUIRED PURCHASED	(C) DATE (D) DATE ACQUIRED SOLD VARIOUS VARIOUS

2016		FEDER	AL STAT	EMENTS	;		PAGE 3
CLIENT 1	CLIENT 1 GALENUS FOUNDATION					26-6400729	
8/15/17							12 13PM
FORM 990-F	T 8 (CONTINUED) PF, PART IV, LINE 1 AINS AND LOSSES	FOR TAX ON I	NVESTMENT	T INCOME			
10 50,0 11 35,0	00 SHARES OF AL 00 SHARES OF CU	RIS INC MENTA PHARM	EUTICS	(B) ACQU DONA DONA DONA DONA DONA	IRED Z TED TED TED	(C) DATE ACQUIRED 9/20/2011 VARIOUS VARIOUS 1/01/2000	(D) DATE SOLD VARIOUS 11/10/2016 VARIOUS 9/16/2016
GI ITEM SX 1 25 2 31 3 5 4 10 5 2 6 7 7 9 8 30 9 10 10 16 11 41	(E) (F) (OSS DEPREC. ALLOWED 8,096. 6,725. 0,173. 6,127. 0,810. 5,422. 0,202. 1,329. 80174. 1,429. 5,440. 4,287.	(G) COST BASIS 258,122. 316,800. 55,601. 124,775. 1. 59,541. 96,121. 306,812. 324,800. 1. 1.	(H) GAIN (LOSS) -26755,42818,648. 20,809. 15,8815,9195,483. 755,374. 161,428. 415,439. 164,286.	(I) FMV 12/31/69	(J) ADJ. BAS	(K) EXCESS	(L) GAIN (LOSS) \$ -26. -75. -5,428. -18,648. 20,809. 15,881. -5,919. -5,483. 755,374. 161,428. 415,439. 164,286.

STATEMENT 9 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
CORNELL UNIVERSITY 410 THURSTON AVENUE ITHICA NY 14850	NONE	PC	EDUCATION	\$ 10,000.
CONTROLL. REL. SOCIETY 3340 PILOT KNOB ROAD ST. PAUL MN 55121	NONE	PC	EDUCATION	2,000.
BREM FOUNDATION 2150 PENNSYLVANIA AVENUE WASHINGTON DC 20037	NONE	PC	CANCER RESEARCH	1,000.
AMERICAN CHEMICAL SOCIETY 19 MILL ROAD HARVARD MA 01451	NONE	PC	EDUCATION	25,000.
LANDMARK COLLEGE 19 RIVER ROAD SOUTH PUTNEY VT 05346	NONE	PC	EDUCATION	50,000.

2016 FEDERAL STATEMENTS						PAGE 4
CLIENT 1	GALENUS FOUNDATION					26-6400729
3/16/17						12:11PN
STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEA	.R					
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRAN'			AMOUNT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE., BLDG 4-204 CAMBRIDGE MA 02139	NONE	PC	RESEARCH		\$	250,000
COMPASSION & CHOICES P.O. BOX 101810 DENVER CO 80250	NONE	PC	EDUCATION			500
				TOTAL	\$	338,500