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Return of Private Foundation

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

OMB No 1545-0052 2016

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.

Open to Public Inspection

F	or calen	dar year 2016 or tax year beginning 2/	2/2016	<u>, a</u> nd	ending	12/31/201	3
N	ame of four	ndation			A Employer	identification number	
T	HE LILY	HASEOTES BENTAS AND EFTHEMIOS J BENTAS FOR	UNDATION INC				
N	umber and	street (or PO box number if mail is not delivered to street address)	1	m/suite		<u>81-1655028</u>	
		RY WHARF		3411	B Telephone	number (see instruction	ns)
С	ity or town,	state or province, country, and ZIP or foreign postal code					_
_	oston	MA	02109			617-680-1176	
F	oreign cour	ntry name Foreign province/state/county	Foreign pos	tal code	C If exempte	on application is pendin	g, check here 🕨 🔃
_	Ch - ele	all that analy [M]					. —
G	Cneck		of a former public	charity	D 1. Foreign	organizations, check h	ere ►
		Final return Amended ret				organizations meeting	
-		Address change Name chang			4	nere and attach comput oundation status was te	
H		type of organization X Section 501(c)(3) exempt pri				7(b)(1)(A), check here	▶ □
<u>_</u>			able private found				
ı		arket value of all assets at J Accounting method	X Cash .	Accrual		dation is in a 60-month	
		year (from Part II, col (c), Other (specify)			under sect	tion 507(b)(1)(B), check	here
_		6) ► \$ 2,006,395 (Part I, column (d) must b	e on cash basis)		L		
<u> </u>	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
7		amounts in columns (b), (c), and (d) may not necessarily	expenses per books		ncome	income	purposes
ය_		equal the amounts in column (a) (see instructions))		1	* * * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·	(cash basis only)
\supseteq	1	Contributions, gifts, grants, etc , received (attach schedule)	2,006,444	11.	· * *;	* 30	*
<u>_</u>	2	Check ► ☐ if the foundation is not required to attach Sch B		, **	*	× <u>*</u>	<u> </u>
7	3	Interest on savings and temporary cash investments	19				
נ	4	Dividends and interest from securities	4,648				
Π	5a	Gross rents		+		· , , , , , , , , , , , , , , , , , , ,	·
びくれいいにいる	b	Net rental income of (ass) FIVED	<u> </u>	1			
JACAIN	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price or all assets on line 6a	# 1	1			
るる	b 7	Capital gain ne income (from Part IV, line 3)		`\ 	£		***
" (8	Net short-term capital gain	7777	17	1 /	· · · · · · · · · · · · · · · · · · ·	
_	9	Income modifications	1 1 2 3 5		***	- <u></u>	,
	10a	Gross sales less returns aero allowances	; ; ; ;	2. 11	. *	**	, , , , , , , , , , , , , , , , , , , ,
	b	Less Cost of goods sold	27 (2	/ "	, ,	, ,	λ,
	С	Gross profit or (loss) (attach schedule)		<i>:</i>	1 /		*
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	2,011,11	1			
9	າ 13	Compensation of officers, directors, trustees, etc					
Š	13	Other employee salaries and wages					
3	ฐี 15	Pension plans, employee benefits					
3	16a	Legal fees (attach schedule)					
9	b	Accounting fees (attach schedule)	<u> </u>	+			
	<u> </u>	Other professional fees (attach schedule)	 				
ì	9 17	Interest		+			
	18	Taxes (attach schedule) (see instructions)					 -
-	19	Depreciation (attach schedule) and depletion		+			
1	5 20 4 21	Occupancy Travel, conferences, and meetings		+			
7	22	Printing and publications					
1	23	Other expenses (attach schedule)	1,53	7			
	24	Total operating and administrative expenses.					
•	17 18 19 20 21 22 23 24 25 26	Add lines 13 through 23	1,53	7		ļ	1
	25	Contributions, gifts, grants paid		7%	· · · · · · · · · · · · · · · · · · ·		
Č	26	Total expenses and disbursements. Add lines 24 and 25	1,53	7			
-	27	Subtract line 26 from line 12	1		• , •		
	a	Excess of revenue over expenses and disbursements .	2,009,57		1 1		1
	b	Net investment income (if negative, enter -0-)					
	c	Adjusted net income (if negative, enter -0-)	, • , • .	**	* ' ;		

Pa	ırt'll	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year			
يعلا		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash—non-interest-bearing		10,000	10,000			
	2	Savings and temporary cash investments		269,088				
	3	Accounts receivable			200,000			
	_	Leas allowers for doubtful associate	> % × & & & -	46.2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
	4				<i>?</i> }			
	7	Pledges receivable Less allowance for doubtful accounts		······································				
	_	Grants receivable						
	5			 -				
	6	Receivables due from officers, directors, trustees, and other	:					
	_	disqualified persons (attach schedule) (see instructions)						
	7	Other notes and loans receivable (attach schedule)		ai inic.	*			
		Less ⁻ allowance for doubtful accounts						
ts	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	10a	Investments—U.S and state government obligations (attach schedule)						
-	b	Investments—corporate stock (attach schedule)		1,730,486	1,727,307			
	c	Investments—corporate bonds (attach schedule)	<u> </u>	1,7 30,400	1,727,307			
			7171					
	11	Investments—land, buildings, and equipment basis		and a fact of the state of the	/ * * * * * *			
		Less accumulated depreciation (attach schedule)						
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)						
	14	Land, buildings, and equipment basis	riili .a.il	1 3 1 2 1 2 1 2 1 2 1 2 1 2 1				
		Less accumulated depreciation (attach schedule)			~ ~ ~ ~ ~ ~			
	15	Other assets (describe)						
	16	Total assets (to be completed by all filers—see the						
		instructions Also, see page 1, item I)		2,009,574	2,006,395			
	17	Accounts payable and accrued expenses		2,000,014	2,000,000			
	18	Grants payable			, ** ·			
Liabilities	1	Deferred revenue .			1 X X			
Ξ	19				*			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			, <u>j</u>			
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)			Í.			
	22	Other liabilities (describe						
	23	Total liabilities (add lines 17 through 22)						
		Foundations that follow SFAS 117, check here			* .			
alances	Ì	and complete lines 24 through 26 and lines 30 and 31.						
Ĕ	24	Unrestricted			, , , ,			
<u>a</u>	25	Temporarily restricted			, "			
Ď	26	Permanently restricted		<u>-</u>	(* ` ` , .			
or Fund B] -0	<u> </u>			186			
3		Foundations that do not follow SFAS 117, check here						
<u></u>		and complete lines 27 through 31.	!					
S	27	Capital stock, trust principal, or current funds	ļ					
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	ļ <u>-</u>		* *			
SS	29	Retained earnings, accumulated income, endowment, or other funds		2,009,574	″** *			
X	30	Total net assets or fund balances (see instructions)		2,009,574	<u> </u>			
ē	31	Total liabilities and net assets/fund balances (see]		1			
~		instructions)		2,009,574	3 3 7			
Pa	ırt III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>					
		net assets or fund balances at beginning of year—Part II, column (a)	. line 30 (must agree	with				
•		of-year figure reported on prior year's return)	, 23 (111231 agree	1				
^				 	2 000 574			
2		amount from Part I, line 27a		2	2,009,574			
3		r increases not included in line 2 (itemize)		3	<u> </u>			
4		ines 1, 2, and 3		4	2,009,574			
5		eases not included in line 2 (itemize)		5	<u> </u>			
_6	6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6							

Part	Capital Gains an	<u>d Losses for Tax on Investr</u>	nent Income					
		he kind(s) of property sold (e.g., real estate buse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a								
b						ļ		
<u>c</u>				 		 		
<u>d</u> e				 		 		
	·	(D.D. annual allamed				<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ın or (loss) (f) mınus (g)		
a								
b								
<u>c</u>		<u> </u>						
d								
<u>е</u>		<u> </u>	<u> </u>					
	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					ol (h) gain minus		
	(i) FM V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any				ot less than -0-) or from col. (h))			
a		 	 					
<u>-</u> -								
С						· · · · · · · · · · · · · · · · · · ·		
d								
е			<u> </u>					
2	Capital gain net income or	r (not canital loce) 1 -	also enter in Pai), enter -0- in Par)	2			
3	Net short-term capital gair	n or (loss) as defined in sections	•	·				
	If gain, also enter in Part I	, line 8, column (c) (see instructio	ns) If (loss), ente	er -0- in 🚶 📗	Ì			
	Part I, line 8 .			<u></u>	3			
Part	V Qualification Und	der Section 4940(e) for Red	uced Tax on N	<u>let Investment</u>	Income			
Was t		ve this part blank section 4942 tax on the distributa qualify under section 4940(e) Do			e period?	Yes X No		
1		ount in each column for each year			g any entries			
	(a)	(b)	, 555 415 11154 455	(c)		(d)		
Cal	Base period years endar year (or tax year beginning in	Adjusted qualifying distribution	s Net value o	of noncharitable-use as		stribution ratio divided by col (c))		
	2015					0 000000		
	2014					0 000000		
	2013					0 000000		
	2012					0 000000		
	2011				- - - - - - - - - - 	0 000000		
2	Total of line 1, column (d)				2	0 000000		
3		for the 5-year base period—divid	e the total on line	2 by 5, or by the		0 000000		
_		dation has been in existence if les		, .,,	3	0 000000		
	·		·					
4	Enter the net value of non	charitable-use assets for 2016 fro	om Part X, line 5		4			
5 Multiply line 4 by line 3								
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			6			
7	Add lines 5 and 6				7			
^		one from Dort VII. lime 4						
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ons from Part XII, line 4 ater than line 7, check the box in F	Part VI, line 1b, a	nd complete that p	eart using a 1% ta	x rate See the		

Part_\	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)							
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)		2 3	, , , , , , , , , , , , , , , , , , ,				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u></u>				
	here ▶ ☐ and enter 1% of Part I, line 27b		*					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	N. A.	**					
	Part I, line 12, col (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
3	Add lines 1 and 2							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-							
6	Credits/Payments Credits/Payments	11 🔊	(' '	*				
а								
b	Exempt foreign organizations—tax withheld at source	: 7 2 43.	?	٠³ ,				
С	Tax paid with application for extension of time to file (Form 8868)	*	\$,				
d	Backup withholding erroneously withheld 6d 6d		*	.* "				
7	Total credits and payments Add lines 6a through 6d			<u> </u>				
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			<u></u>				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax Refunded 11			L				
	/II-A Statements Regarding Activities	V 353 Y 12		· ·				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No				
	participate or intervene in any political campaign?	1a		X				
b	, , , , , , , , , , , , , , , , , , , ,							
	Instructions for the definition)?							
	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			458 \$				
_		1c	,	x				
c d	and the second of the second o							
u	(1) On the foundation ►\$ (2) On foundation managers ►\$	<i>3</i> .	10	1 1				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	11 1	. 1					
·	on foundation managers > \$	\$ + \$# "s	* %	. .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×				
_	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	134						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х				
	If "Yes," attach the statement required by General Instruction T	ا کــــــــــــــــــــــــــــــــــــ		~ ·				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		3	٠				
	By language in the governing instrument, or	× 1 <		`				
	● By state legislation that effectively amends the governing instrument so that no mandatory directions that	~	8	ŧ. `				
	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					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	;	43 *	,				
	MA		<i>;</i>					
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	8b	X	<u> </u>				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	3	*					
	or 4942(J)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If	_						
	"Yes," complete Part XIV	9	_X					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40						
	names and addresses .	10	X	<u> </u>				

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X	L
14	The books are in care of ► LILY H BENTAS Telephone no ► 617-680-	1176		
1-7	Located at ► 3 BATTERY WHARF UNIT 3411 BOSTON MA ZIP+4 ► 02109	11/0		
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			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If	*		4
Doet	"Yes," enter the name of the foreign country VII-B Statements Regarding Activities for Which Form 4720 May Be Required	₹ ··		L
rait			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		ies	INO
1a	During the year did the foundation (either directly or indirectly)		8	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	,5¢	ž.	
	disqualified person?	, i	,	
	(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?	* *2	44	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			٠
	the benefit or use of a disqualified person)?	" "		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	* ,	3	
	foundation agreed to make a grant to or to employ the official for a period after	<u> </u>		
	termination of government service, if terminating within 90 days)	, 4,	§	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		N1/ A	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	**	,	
Ū	were not corrected before the first day of the tax year beginning in 2016?	1c	i	Х
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))	*,	٠,	>
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?	* \		
	If "Yes," list the years 20 , 20 , 20 , 20	.* .*`		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	, i		2
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	N/A	^
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	~,	INA	
•	► 20 , 20 , 20 , 20			*
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	r s		
	at any time during the year?			
b	if "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		ļ	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	;		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse		- {	
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	á.	NI/A	
4-	foundation had excess business holdings in 2016)	3b	N/A	
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		<u>X</u>
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	{	Х
		990	NDC	

Part	VIES Statements Regarding Activities	tor W	hich Form 4	4720 N	lay Be Re	quire	d (contin	ued)			
5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to in			section	4945(e))?		Yes	X No	* \$ \$ \$ \$	***	,
	(2) Influence the outcome of any specific public ele directly or indirectly, any voter registration drive		see section 49	955), or	to carry on	ı	Yes	X No		.* *	٠,
	(3) Provide a grant to an individual for travel, study,	, or othe	er sımılar purp	oses?			Yes	X No	3. 5.04	E	
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	charıtal	ble, etc , orga	ınızatıoı	n described	ın	Yes	X No	\$	v > ₂	
	(5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to child						Yes	X No	1		
b	If any answer is "Yes" to 5a(1)-(5), did any of the tr	transactions fail to qualify under the exceptio				eptions	describe	d ın	· ,	, ^	
	Regulations section 53 4945 or in a current notice r	regardır	ng disaster as	sistand	e (see instr	uctions)?		5b	N/A	
С							☐ Yes	► □ □ No			,
6a	because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums						res	☐ NO	2.3	****	
-	on a personal benefit contract?	, ao, an c	outy or manor	ouy, to p	ouy promiui		☐ Yes	X No	1	1	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit of							_	6b		X Ì
	If "Yes" to 6b, file Form 8870									^ <	
7a b								X No	7b	N/A	, ,
Pari	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors										
1	List all officers, directors, trustees, foundation r										
	(a) Name and address	hours per week devoted to position		(If r	mpensation not paid, nter -0-)	emplo	Contributions byee benefit erred compe	plans	(e) Expense accou other allowances		
	BENTAS	PRESIDENT DIRE									
	TERY WHARF BOSTON, MA 02109	2 00									
	S VINIOS	TREASURER DIRE									
	TERY WHARF BOSTON, MA 02109 ARIE VINIOS	VICE	2 00 PRES DIREC								
	TERY WHARF BOSTON, MA 02109	VICE	2 00								
											
2	Compensation of five highest-paid employees ("NONE."	other ti	han those in	cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
	NONE.		(b) Title, and a	verage	<u> </u>		(d) Contribu				
	(a) Name and address of each employee paid more than \$50,000		hours per w	eek	(c) Comper	sation	employee plans and c compens	deferred	(e) Expe	nse aco allowan	
NONE											
								ļ			
Total	number of other employees paid over \$50,000							•			
, otal	number of other employees paid over 400,000				 -				000		

Pai	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
		
		
Tota	number of others receiving over \$50,000 for professional services	
		<u>, , , , , , , , , , , , , , , , , , , </u>
	IX-A Summary of Direct Charitable Activities	
	he foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of nizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	THE ORGANIZATION WAS FORMED IN 2016 AND FUNDED AT YEAR END THE ORGANIZATION INTENDS	
	O DISTRIBUTE INCOME AND OTHER FUNDS TO QUALIFIED CHARITIES AS ALLOWD BY LAW AND IT'S	
	BY-LAWS BEGINNING IN 2017	
2		
_		-
3		
4		
•		
Pa	t IX-B Summary of Program-Related Investments (see instructions)	
De	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE IN 2016	
_		
2		
All	ther program-related investments. See instructions	-
3	• •	
•		
Tota	Add lines 1 through 3	

Form **990-PF** (2016)

Form 990-PF (2016)

Page 8

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundati	ons,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,		
	purposes		
а	Average monthly fair market value of securities	1a	157,028
b	Average of monthly cash balances .	1b	25,372
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	182,400
е	Reduction claimed for blockage or other factors reported on lines 1a and	.**	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	182,400
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	2,736
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	179,664
6_	Minimum investment return. Enter 5% of line 5 . MIR Prorated - Short Year	6	8,220
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part))	
1	Minimum investment return from Part X, line 6	11	8,220
2a	Tax on investment income for 2016 from Part VI, line 5	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
b	Income tax for 2016 (This does not include the tax from Part VI)		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,220
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,220
6	Deduction from distributable amount (see instructions)	6	8,220
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1,6	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	, **	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	nether the four	ndation
	qualifies for the section 4940(e) reduction of tax in those years		

raru	Undistributed income (see instructions	5)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	, , , , ,	/ * * * * *	, , ,,	
2	Undistributed income, if any, as of the end of 2016	3 , 1 3 3	11 1		,
а	Enter amount for 2015 only			*** *** ***	
b	Total for prior years 20, 20, 20	* *, \$.		N ., P 'A '.	÷
3	Excess distributions carryover, if any, to 2016				20 30
а	From 2011 .				* ,
b	From 2012				
С	From 2013				
d	From 2014				* :
е	From 2015				3
f	Total of lines 3a through e				.*
4	Qualifying distributions for 2016 from Part XII,				· * .
	line 4 ▶ \$				* **
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years				* *
	(Election required—see instructions)				<u> </u>
C	Treated as distributions out of corpus (Election				* *
	required—see instructions)				
d	Applied to 2016 distributable amount	, 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	N O A A		
е	Remaining amount distributed out of corpus				×,
5	Excess distributions carryover applied to 2016	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	(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:				*
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	*	* * * * * * * * * * * * * * * * * * *	**	*
ь	Prior years' undistributed income Subtract				*
_	line 4b from line 2b				* *
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				* * *
d	Subtract line 6c from line 6b Taxable			73. 180 1	* ,
ŭ	amount—see instructions				* * * * * * * * * * * * * * * * * * * *
e	Undistributed income for 2015 Subtract line		*(7 *(** ***	***
Ū	4a from line 2a Taxable amount—see	* ** **			
	instructions				
f	Undistributed income for 2016 Subtract lines	,		2 Záz	
	4d and 5 from line 1. This amount must be				
	distributed in 2017 .				
7	Amounts treated as distributions out of corpus				, ,
	to satisfy requirements imposed by section				'}·
	170(b)(1)(F) or 4942(g)(3) (Election may be			, 5	
	required—see instructions)		<u> </u>		
8	Excess distributions carryover from 2011 not		5		
	applied on line 5 or line 7 (see instructions)		†	* * * *	
9	Excess distributions carryover to 2017.		, 3	, , , , ,	
	Subtract lines 7 and 8 from line 6a		\$,	4, 3	
10	Analysis of line 9			· · · · · · · · · · · · · · · · · · ·	
а	Excess from 2012			4° %	
b	Excess from 2013			* * * *	
C	Excess from 2014			* * *	
d	Excess from 2015		3	. ,	
_ е_	Excess from 2016	* * *	<u>*</u>	Ľ·•	*

Form 9	90-PF (2016) THE LILY HASEOTES	BENTAS AND EFT	HEMIOS J BENT	AS FOUNDATION	INC - 81-165	55028 Page 10
Part	XIV Private Operating Foundat	ions (see instruc	tions and Part V	/II-A, question 9)		
1a	If the foundation has received a ruling o	r determination lett	er that it is a priva	te operating		
	foundation, and the ruling is effective for	r 2016, enter the da	ate of the ruling	. •	6/17/	2016
b	Check box to indicate whether the foundation	n is a private operat	ing foundation descr	ribed in section	X 4942(J)(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
-	line 4 for each year listed			,		
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
-	for active conduct of exempt activities					
	Subtract line 2d from line 2c		l		ļ	
3	Complete 3a, b, or c for the					,
_	alternative test relied upon					
а	"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	5,480				5,480
С	"Support" alternative test—enter					
•	(1) Total support other than gross					
	investment income (interest,			Į į		
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)			Į į	,	
	(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					
	(4) Gross investment income .				7 7	
Part		n (Complete this	s part only if th	e foundation ha	d \$5,000 or mor	e in assets at
-	any time during the year—	see instructions	s.)			
1	Information Regarding Foundation M	anagers:				
а	List any managers of the foundation wh					foundation
	before the close of any tax year (but on	ly if they have cont	ributed more than	\$5,000) (See section	on 507(d)(2))	
LILY I	H_BENTAS					
b	List any managers of the foundation wh					n of the
	ownership of a partnership or other enti	ty) of which the fou	indation has a 10%	6 or greater interest		
NON	E					
2	Information Regarding Contribution,	Grant, Gift, Loan,	Scholarship, etc.	, Programs:		
	Check here ► 🗵 if the foundation or					
	unsolicited requests for funds If the fou	-	s, grants, etc (see	instructions) to ind	ividuals or organiza	ations
	under other conditions, complete items					
а	The name, address, and telephone nun	nber or e-mail addr	ess of the person t	to whom application	s should be addres	ssed
						
b	The form in which applications should be	e submitted and in	formation and mat	terials they should ii	nclude	
			_			
С	Any submission deadlines					
	Any restrictions or limitations on awards	s such as by geogr	aphical areas cha	aritable fields, kinds	of institutions, or o	 ther
u	factors	, sac., ao ay googi	عادات المحادث المحادث	abio nordo, mindo	o. mondations, or o	
						

Part	XV Supplementary Information (continuous)	nued)				
3_	Grants and Contributions Paid During t		ed for Fut	ure Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution		Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution		1
а	Paid during the year					
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	Total			•	3a	
b	Approved for future payment					
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			1			
			1			
		1		1		
	Total			<u> </u>	3b	
				<u>_</u>	~~	

Form 990-PF (2016) -

Analysis of Income-Producing Activities Part XVI-A Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (a) (b) (c) (d) function income Amount Business code Exclusion code Amount (See instructions) 1 Program service revenue C đ f g Fees and contracts from government agencies 2 Membership dues and assessments Interest on savings and temporary cash investments 14 19 Dividends and interest from securities 14 4,648 5 Net rental income or (loss) from real estate Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue a 11 b d 12 Subtotal Add columns (b), (d), and (e) 4.667 13 Total. Add line 12, columns (b), (d), and (e) 13 4,667 (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the ▼ accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Form 990-PF (2016)

Part	XVII	Information Exempt Org	Regarding Transf	ers to and trans	sactions and	ı Kela	itionsnip	s witr	Nonchar	itable		
1	Did t		rectly or indirectly eng	lage in any of the fol	lowing with an	v othe	r organizat	ion des	cribed	7	Yes	No
•		•	e Code (other than sec		_	-	-		CIDCU		103	140
		cal organizations?	•	out of the the		00000	021, 1010			1		
а	•	_	orting foundation to a	noncharitable exem	ot organization	n of						
_	(1) C	•			F9					1a(1)	1	Х
	• •	ther assets		·						1a(2)		$\frac{\dot{x}}{x}$
b		r transactions								1 = 1 = 1		<u> </u>
	(1) S	ales of assets to	a noncharitable exemp	ot organization						1b(1)	-	Х
			ets from a noncharitable	_	on					1b(2)		X
			equipment, or other as	• •						1b(3)		X
	(4) F	Reimbursement ar	rangements							1b(4)		X
	(5) L	oans or loan guar	rantees							1b(5)		Х
	(6) F	erformance of se	ervices or membership	or fundraising solici	tations					1b(6)		Χ
С			quipment, mailing lists,							1c		Χ
d			he above is "Yes," comp									
	value	of the goods, other	er assets, or services giv	en by the reporting fo	undation. If the	founda	ation receive	ed less t	han fair marl	ket _.		
	value		or sharing arrangement									
(a) Line	no	(b) Amount involved	(c) Name of noncha	aritable exempt organizati	on (d) Descri	otion of transfe	ers, trans	actions, and sha	aring arrar	gement	ts
			ļ									
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			<u> </u>									
2a b	desc	cribed in section 5	ctly or indirectly affiliate 501(c) of the Code (oth following schedule	ed with, or related to ler than section 501	, one or more (c)(3)) or in sec	tax-exection 5	empt organ 27?	iization	s [] Yes	X N	0
		(a) Name of organ		(b) Type of or	ganization			(c) Des	cription of relation	onship		
						L						
			elare that I have examined this retu tion of preparer (other than taxpaye					owledge a	nd belief, it is true,			
Sign	COIR	ect, and complete declarat	topol preparer (other than taxpaye	er) is based on all illiogradion of	willcii preparei nas a	ZIIY KIIOWI	ouge			RS discuss		
Here	<u> </u>		2 Nonda	0/18/11	_ /_					reparer shouctions)?		No
	Sı	nature of officer of tru		Date	Title		Deta					<u> </u>
Paid		Print/Type preparer		Preparer's signature	CED III O	DΛ	Date		Check 🔲 ıf	PTIN		
Prep	arer							P0001	4842			
Use (Firm's name	E R ALGER AND CO				Firm's E		165693			
'		Firm's address	PO BOX 7179, CUM	BEKLAND, KI 0286	4			Phone r	10 4UT-3	333 <u>-0</u> 30	U	

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.irs.gov/form990.

OMB No 1545-0047

2016

Employer identification number

THE LILY HASEOTES BEN	ITAS AND EFTHEMIOS J BENTAS FOUNDATION INC	81-1655028
Organization type (check of	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 found	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
• •	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instruction contributions.	
Special Rules		
regulations under s 13, 16a, or 16b, ar	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or and that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Contributions of the amount on (ii) Form 990, Part VIII, line 1h, or (iii) Form 990-EZ, line 1	r 990-EZ), Part II, line f the greater of (1)
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rec the year, total contributions of more than \$1,000 exclusively for religious, char onal purposes, or for the prevention of cruelty to children or animals. Complete	ritable, scientific,
contributor, during contributions totale during the year for General Rule app	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received received the year, contributions exclusively for religious, charitable, etc., purposes, but ed more than \$1,000. If this box is checked, enter here the total contributions to an exclusively religious, charitable, etc., purpose. Don't complete any of the pulses to this organization because it received nonexclusively religious, charitable more during the year.	no such hat were received parts unless the
Caution: An organization t 990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Sch must answer "No" on Part IV, line 2, of its Form 990, or check the box on line l	nedule B (Form 990, 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)

Name of organization
THE LILY HASEOTES BENTAS AND EFTHEMIOS J BENTAS FOUNDATION INC

Employer identification number 81-1655028

Part I	Contributors (See instructions). Use duplicate copi	es of Part I if additional space is i	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LILY H BENTAS 3 BATTERY WHARF UNIT 3411 BOSTON MA 02109 Foreign State or Province Foreign Country	\$ 2,006,444	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupation Payroll Payroll Payroll Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroli Noncash (Complete Part II for noncash contributions)

Name of organization
THE LILY HASEOTES BENTAS AND EFTHEMIOS J BENTAS FOUNDATION INC

Employer identification number 81-1655028

art II	Noncash Property (See instructions) Use duplicate	e copies of Part II if additional space	e is needed
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES	-	
		\$ 996,444	12/27/2016
No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ \$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- \$	

Name, of org	ganization IASEOTES BENTAS AND EFTHEMIOS	I BENTAS FOUNDAT	ION INC	Employer identification number 81-1655028
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the y. Use duplicate copies of Part III if additional entry is a contribution of \$1,000 or less.	, contributions to or e year from any one is completing Part III, ear (Enter this inform	ganizations desc contributor. Com enter the total of e	ribed in section 501(c)(7), (8), or aplete columns (a) through (e) and exclusively religious, charitable, etc.
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held
	Transferee's name, address, ar		sfer of gift Relatio	nship of transferor to transferee
(a) Na	For Proy Country			
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held
	Transferee's name, address, a		sfer of gift	nship of transferor to transferee
(a) No. from Part I	For Prov Country (b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held
		(e) Tran	sfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
	For Prov Country			
(a) No. from Part I	(b) Purpose of gift	(c) U:	se of gift	(d) Description of how gift is held
	Transferacio namo address a		nsfer of gift	nship of transferor to transferee
	Transferee's name, address, a		Relatio	יייייייייייייייייייייייייייייייייייייי
	For Day, County			·

Part I, Line 23 (990-PF) - Other Expenses

	1,537			
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 INVESTMENT MANAGEMENT FEES	1,537			

Part II, Line 10b (990-PF) - Investments - Corporate Stock

			1.730.486		100,121,1
	Num Shares/	Book Value	Book Value	FMV	FMV
Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year

1

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

L		"Y"							Avg Hrs			Expense
	Nama	f Ritempee	Street	Č	State	State Zip Code	Foreign Country	Title	Per Week	Per Week Compensation	Benefits	Account
	į	SSIIISOO II	3 BATTERY W		MA 0	02109		PRESIDENT DIRECTOR	2 00			,
-	SOINIS VINIOS		4 BATTERY WHARF	BOSTON	MA	02109	Andrew Andrews and Andrews and Andrews and Andrews and Andrews Andrews and Andrews Andrews Andrews Andrews Andrews	TREASURER DIRECTOR	2 00	A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
7	ZACHARIE VINIOS		4 BATTERY WHARF	BOSTON	MA .	02109		VICE PRES DIRECTOR	2 00	2 2		=
ຕ				and the second s		***************************************	The state of the s					

LILY HASEOTES BENTAS AND EFTHEMIOS J BENTAS FOUNDATION INC

FORM 990-PF December 31, 2016 81-1655028

PART VII-A, LINE 10
SUBSTANTIAL CONTRIBUTORS

EFTHEMIOS AND LILY H. BENTAS 3 BATTERY WHARF #3411 BOSTON, MA 02109

2016 DONATION OF CASH AND SECURITIES

\$2,006,444



Account Number 6554-7489

Statement Period December 1-31, 2016

	This Period	;	Year to Date	Year to Date
Income Summary Federally Tax-Exempt	Federally Tax-Exempt	Federally Taxable	Federally Taxable Federally Tax-Exempt Federally Taxable	Federally Taxable
Deposit Accounts Interest	00'0	2.63	0.00	18.66
Cash Dividends	00'00	1,803.92	0.00	4,647,90
Total Income, Annual Control of the	Total Income, Assessment of the Control of the Cont	1,808.55	00.0	£

Investment Detail - Cash and Deposit Accounts

Market Sept. 1991. The second of the second	Market Value Ma	
THE THE PART OF TH	8C'SS SC'SS SC	
CZ/900/69Z	الا التراحية	
	The state of the s	,
269,087,83	269,087.	

Investment Detail - Equities

Market Value	19,912.10		
Market Value	117.1300		
Quantity	170.000		
Guar	ACCENTURE PLC F	CLASS A	SYMBOL: ACN

CONTRACTOR OF THE SECOND OF THE SECOND SECON



Account Number 6554-7489

Statement Period December 1-31, 2016 FILE SECTION OF COMMENCE TO SECTION OF THE SECTION OF COMMENTS

Investment Detail - Equities (continued) And surveys and action of the continued of the temperature of the continued of the c

Equities (continued)	Quantity	Market Price	
	120,000	102.9500	Warket Value
ALLERGAN PLC F SYMBOL: AGN	80.0000	210.0100	16,800.80
ALPHABET INC. CLASS A SYMBOL: GOOGL	25.0000	792,4500	19,811.25
ALTRIA GROUP INC SYMBOL: MO	4,670.0000	67.6200	315,785.40
AMERICAN EXPRESS CO SYMBOL: AXP	200,000	74.0800	Accided Dividend: 2,848.70
AMGEN INCORPORATED SYMBOL: AMGN	70.000	146.2100	10,234.70
APPLE INC SYMBOL: AAPL	110.0000	115.8200	12,740.20
BANK OF AMERICA CORP SYMBOL: BAC	1,000.0000	22,1000	22,100.00
CANADIAN NATL RAILWY F SYMBOL: CNI	130.0000	67.4000	8,762.00
CARNIVAL CORP F SYMBOL: CCL	260.0000	52.0600	13,535.60
CBS CORP CLASS B SYMBOL: CBS	450.0000	63.6200	28,629.00
;			Accrued Dividend: 81.00

Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement

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Investment Detail - Equities (continued)

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Equities (continued)	Quantity	Market Price	Market Value
CISCO SYSTEMS INC SYMBOL: CSCO	630,000	30,2200	19,038,60
CITIGROUP INC SYMBOL: C	300.000	59.4300	17,829.00
CVS HEALTH CORP SYMBOL: CVS	280.0000	78,9100	22,094.80
DEVON ENERGY CORP SYMBOL: DVN	340.0000	45,6700	15,527,80
DIAGEO PLC F UNSPONSORED ADR 1 ADR REPS 4 ORD SHS SYMBOL: DEO	170.0000	103.9400	17,669.80
DOW CHEMICAL COMPANY SYMBOL: DOW	160,0000	57.2200	9,155.20 Accrued Dividend: 73.60
DUNKIN BRANDS GROUP SYMBOL: DNKN	3,765.0000	52,4400	197,436.60
EATON CORP PLC F SYMBOL: ETN	380,000	0060'29	25,494.20
FACEBOOK INC CLASS A SYMBOL: FB	210.0000	115.0500	24,160.50
GENERAL DYNAMICS CO SYMBOL: GD	80.0000	172.6600	13,812.80

Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement.

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Account Number 6554-7489

Statement Period December 1-31, 2016

Investment Detail - Equities (continued)

Equities (continued)		Market Price	Moving V
00	320,000	31,6000	Accrised Dividend 75 80
GENERAL MOTORS CO SYMBOL: GM	320.0000	34,8400	11,148.80
GILEAD SCIENCES INC SYMBOL: GILD	325,0000	71.6100	23,273.25
GOLDMAN SACHS GROUP SYMBOL: GS	80.0000	239.4500	19,156.00
HONEYWELL INTL INC SYMBOL: HON	160.0000	115,8500	18,536.00
JOHNSON & JOHNSON SYMBOL: JNJ	180.0000	115.2100	20,737.80
JPMORGAN CHASE & CO SYMBOL: JPM	290.0000	86.2900	25,024.10
KIMBERLY-CLARK CORP SYMBOL: KMB	150.0000	114,1200	17,118.00 Accrised Dividend: 138.00
KROGER COMPANY SYMBOL: KR	340.0000	34.5100	11,733.40
MERCK & CO INC SYMBOL: MRK	180.0000	58.8700	10,596.60 Accrised Dividend: 84 60
MICROSOFT CORP SYMBOL: MSFT	230.0000	62.1400	14,292.20

Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement

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Account Number 6554-7489

Statement Period December 1-31, 2016

Investment Detail - Equities (continued)

Equities (continued)	Quantity	Market Price	Market Value
MOSAIC CO SYMBOL: MOS	750.000	29.3300	Table to the state of the state
PEPSICO INCORPORATED SYMBOL: PEP	100.0000	104.6300	10,463.00 Accrued Dividend: 75.25
PFIZER INCORPORATED SYMBOL: PFE	290.0000	32,4800	19,163.20
PHILIP MORRIS INTL SYMBOL: PM	175,000	91,4900	16,010.75 Accrued Dividend: 182.00
PROCTER & GAMBLE SYMBOL: PG	100.0000	84,0800	8,408.00
QUEST DIAGNOSTIC INC SYMBOL: DGX	100.0000	91,9000	9,190.00
REGENERON PHARMS INC SYMBOL: REGN	30,000	367,0900	11,012.70
ROYAL DUTCH SHELL F ADR 1 ADR REPS 2 ORD SHS SYMBOL: RDSB	270.0000	57,9700	15,651.90
SCHLUMBERGER LTD F SYMBOL: SLB	180,0000	83.9500	15,111.00 Accrued Dividend: 90.00
T ROWE PRICE GROUP SYMBOL: TROW	220,0000	75.2600	16,557.20
TARGET CORPORATION SYMBOL: TGT	100.0000	72.2300	7,223.00

Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement



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Schwab One® Account of LILY H & EFTHEMIOS J BENTAS **FOUNDATION INC**

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Statement Period December 1-31, 2016

Investment Detail - Equities (continued)

Equities (continued)	Quantity	Market Price	
Г	160,0000		5,800,00
1 ADR REPS 1 ORD SHS SYMBOL: TEVA			
TORONTO DOMINION BNK F SYMBOL: TD	100.0000	49.3400	4,934.00
UNITED CONTL HLDGS SYMBOL: UAL	6,500.0000	72.8800	473,720.00
VISA INC CLASS A SYMBOL: V	160.0000	78.0200	12,483.20
WALT DISNEY CO SYMBOL: DIS	210.0000	104.2200	21,886.20 Accrued Dividend: 163.80
WASTE MANAGEMENT INC SYMBOL: WM	160.000	70.9100	11,345.60
(0	80.0000	86,5100	6,920.80
Total Equities 1.20 (1.20)	26,160.0000	A CONTRACTOR OF THE PROPERTY O	1,727,306.55
		Total A	Total Accrued Dividend for Equities: 3,813.75

Fotal Investment Detail 1,996,394.38

Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement

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