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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

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number JOANN DENAPOLI CHARITABLE FOUNDATION INC 81-2009455 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 14 PERCY ROAD 617-951-9980 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending check here 02421 LEXINGTON, MA G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization. Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust X Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 2999853 . (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a)) (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net expenses per books income income 3000000. N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 238. 238 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 21 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 21. 21 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 3000259 259 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees STMT 2 1687. 1687. 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 1687 0 expenses. Add lines 13 through 23 1687. 0. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1687 Add lines 24 and 25 0 1687 27 Subtract line 26 from line 12: 2998572 · ·

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

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

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N/A

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1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
	(must agree with end-of-year figure reported on prior year's return)	1	l	0 .
2	Enter amount from Part I, line 27a	2		2998572
3	Other increases not included in line 2 (itemize)	3		0 .
4	Add lines 1, 2, and 3	4		2998572
5	Decreases not included in line 2 (itemize)	5		0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		2998572

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	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col. (b) divided by col (c))
	2015				
	2014			T -	
	2013				
	2012				
_	2011				
	Total of line 1, column (d)			2	
3	Average distribution ratio for the 5-year bathe foundation has been in existence if less	· ·	, or by the number of years	3	
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5				
5	5 Multrply line 4 by line 3				
6	Enter 1% of net investment income (1% o	f Part I, line 27b)		6	
7	Add lines 5 and 6			7	
8	Enter qualifying distributions from Part XII	, line 4		8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

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See the Part VI instructions.

		2009			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	948	- see i	nstru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		-			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			·		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1%	1				5.
of Part 1, line 27b		,		,	ŧ
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				****	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u> </u>			0.
3 Add lines 1 and 2	3				5.
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				5.
6 Credits/Payments:		1			
a 2016 estimated tax payments and 2015 overpayment credited to 2016					
b Exempt foreign organizations - tax withheld at source					ļ
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld					
7 Total credits and payments. Add lines 6a through 6d	7				0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				5.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶	11				
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	า			Yes	
any political campaign?			1a		_X_
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?			1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or	İ			
distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year?			1c		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .					!
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
managers. ▶ \$0 .					
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. [4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4b		
Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ł		
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state is	aw				
remain in the governing instrument?			6		<u>X</u>
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		ļ	7	Х	
		l	- 1	-	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		I	ı		.
MA	_			- 1	
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)		- 1			
of each state as required by General Instruction G? If "No," attach explanation		į	8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	dar	l			
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		_	9		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ST	TM'		10	Х	
		Forr	200	-DF	2016)

Pa	irt VII-A Statements Regarding Activities (continued)			1 agc
<u> </u>	The state of the s	T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		.00	'''
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
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?	13	X	
	Website address ► N/A	<u> </u>		
14	The books are in care of ► STEPHEN M.POLITI ESQ. Telephone no. ► 781-5	07-5	983	
	Located at ▶ 14 PERCY ROAD, LEXINGTON, MA ZIP+4 ▶0	2421		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<u></u>	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u> _	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country			
P	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly).	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			١.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		-	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		Α.	
	(6) Agree to pay money or property to a government official? (Exception Check "No"	ļ ;		
	if the foundation agreed to make a grant to or to employ the official for a period after		_ `	
	termination of government service, if terminating within 90 days.)	1 1		-
	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			~
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		. 1	
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			Х
2	before the first day of the tax year beginning in 2016? Taxes on failure to distribute program (section 4942) (does not apply for years the faundation was a greater operating faundation.	1c		Α,
_	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)):			,
	i. 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? Yes X No	1 1	ĩ	* ,
	If "Yes," list the years ▶ , , ,		. 1	
ŀ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			7,
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		7.	****
	statement - see instructions.)	2b		X
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•		2 1/2/2	**
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		\$3	1
	during the year?		. F	7.
t	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after		о. 5	4 , 3
	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	[-	-	1, 1
	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,			- 4
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		**************************************
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	261	د ينځ	Ja. 1
_	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose		Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		[
4945(d)(4)(A)? (see instructions)			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	,, or educational purposes, or			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	•	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instr	·		N/A	5b
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —		
expenditure responsibility for the grant?		1/A Y	es L No	
If "Yes," attach the statement required by Regulations section 53 494	, ,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	₹	
a personal benefit contract?		Y	es 🗓 No 📙	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		ļ	6b X
If "Yes" to 6b, file Form 8870	abaltar transaction 2		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax b If "Yes," did the foundation receive any proceeds or have any net income attrib		Y	·	7b
Part VIII Information About Officers, Directors, Trus		anagers Highl		/U
Paid Employees, and Contractors	tees, i ouridation in	ariagers, riigiii	,	
1 List all officers, directors, trustees, foundation managers and their	r compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
STEPHEN M.POLITI ESQ.	PRESIDENT/TRE	ASURER &	DIRECTOR	
14 PERCY ROAD	7			
LEXINGTON, MA 02421	10.00	0.	0.	0.
GEORGE W.MALLOY CPA	CLERK DIRECTO	DR	_	
20 PILGRIM LAKE TERRACE				
ORLEANS , MA 02653	0.00	0.	_ 0.	0.
	4	ļ	[[
	4			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1) If none	enter "NONE "	<u> </u>	
	(b) Title, and average	<u> </u>	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	gording to position	 	compensation	411011411003
	1			
	1			
	1			
				 _
	_			
	1	<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000				0
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IP.	art X Minimum Investment Return (All domestic foundations must complete this part. Fo	reign foundations, see i	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	334	
а	Average monthly fair market value of securities	1a	38932
b	Average of monthly cash balances	1b	960921
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	999853
е	Reduction claimed for blockage or other factors reported on lines 1a and	24/4	
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	999853
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14998.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	984855.
6	Minimum investment return. Enter 5% of line 5	6	49243
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	idations and certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	_ 1	49243.
2a	· · · · · · · · · · · · · · · · · · ·	5.	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C		2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	49238.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	49238.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	49238.
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	LA ST	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1687.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	1687.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1687.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any as of the end of 2016 a Enter amount for 2015 only b Total for prior years: , , , 3 Excess distributions carryover, if any, to 2016:	0.
2 Undistributed income, if any as of the end of 2016 a Enter amount for 2015 only b Total for prior years: Excess distributions carryover, if any, to 2016:	0.
a Enter amount for 2015 only b Total for prior years: Cool Excess distributions carryover, if any, to 2016:	
b Total for prior years: O Excess distributions carryover, if any, to 2016:	
3 Excess distributions carryover, if any, to 2016:	
3 Excess distributions carryover, if any, to 2016:	
	mit
a Eram 2011	ada wana kada
a From 2011	min and a second and a second as a second
b From 2012	
c From 2013	
dFrom 2014	
e From 2015	
f Total of lines 3a through e 0.	
4 Qualifying distributions for 2016 from	
Part XII, line 4: ►\$ N/A a Applied to 2015, but not more than line 2a	
a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior	
vears (Election required - see instructions)	
c Treated as distributions out of corpus	
(Election required - see instructions)	
d Applied to 2016 distributable amount	0.
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2016	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	
b Prior years' undistributed income. Subtract	
line 4b from line 2b	
c Enter the amount of prior years'	
undistributed income for which a notice of	
deficiency has been issued, or on which the section 4942(a) tax has been previously	
assessed 0.	
d Subtract line 6c from line 6b. Taxable	
amount - see instructions 0 .	
e Undistributed income for 2015. Subtract line	
4a from line 2a. Taxable amount - see instr.	<u> </u>
f Undistributed income for 2016. Subtract	
lines 4d and 5 from line 1. This amount must	^
be distributed in 2017	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	
8 Excess distributions carryover from 2011	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2017.	
Subtract lines 7 and 8 from line 6a 0.	
10 Analysis of line 9:	
a Excess from 2012	ĺ
b Excess from 2013	
c Excess from 2014	
d Excess from 2015	
e Excess from 2016	

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3 Grants and Contributions Paid During the	e Year or Approved for Future F	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	Amount
a Paid during the year				
NONE				
]
	ĺ			
				1
				ļ
				l
				
				1
				ı
Total			▶ 3a	(
b Approved for future payment				
NONE				
<u>-</u>				
				ı
			1	
				
			▶ 3b	

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Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclu	ded by section 512 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
•	- code		-		
å			├──		
b			 		
· ·		 	├		
d			-		
e			ļ		_
f	ļ		Ļ—.		<u> </u>
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments			<u> </u>		<u> </u>
3 Interest on savings and temporary cash			١.,		
investments			14	238	<u> </u>
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	1 - 74, 15 th	はかないと、ない質なな	1,4	" ISBN 18	工作等的第三次分配。
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			İ		
7 Other investment income					
8 Gain or (loss) from sales of assets other			†		
than inventory			18	21.	
9 Net income or (loss) from special events		 	<u> </u>		<u> </u>
10 Gross profit or (loss) from sales of inventory		 	├──		
11 Other revenue:		 	┼─┈		
		Ì			
a			├		
b	ļ		├	<u> </u>	
c			├		
d			ļ		
e			-22 V	0.50	
12 Subtotal. Add columns (b), (d), and (e)	产的特殊特别	<u>'</u> U.	酸鲱	259.	
13 Total. Add line 12, columns (b), (d), and (e)				13_	259.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	to the Acc	omplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which inco			contrit	outed importantly to the acco	mplishment of
the foundation's exempt purposes (other than	by providing for	unds for such purposes).			
			_		
					
					·
					
					

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Part XV		DENAPOLI CHARITABLE FOUNDA egarding Transfers To and Transactions a izations				age 13
1 Did th		rectly engage in any of the following with any other organization	on described in section 501(c) of	T	Yes	No
the Co	ode (other than section 501(c)(3) organizations) or in section 527, relating to political organ	izations?	1		
a Transi	fers from the reporting found	ation to a noncharitable exempt organization of:				l
(1) C	ash			1a(1)		X
(2) 0	(2) Other assets					
b Other	transactions;					
(1) S	ales of assets to a noncharita	ble exempt organization		16(1)		X
(2) P	urchases of assets from a no	ncharitable exempt organization		1b(2)		X
(3) R	tental of facilities, equipment,	or other assets		1b(3)		X
(4) R	teimbursement arrangements			1b(4)		X
(5) L	oans or loan guarantees			15(5)		Х
(6) P	erformance of services or me	mbership or fundraising solicitations		1b(6)		X
c Sharır	ng of facilities, equipment, ma	uling lists, other assets, or paid employees		1 c		X
or ser	vices given by the reporting f	"Yes," complete the following schedule. Column (b) should alloundation. If the foundation received less than fair market valuation reserved.	•		ets,	
(a)Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions and	sharing ar	rangeme	ents
_		N/A	<u></u>			
			<u></u>			
	<u> </u>					
						
						

2a	Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	ın section 501(c) of the Code (other than section 501(c)(3)) or ın section 527?

Yes	X
 103	_41

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
 N/A		
 		· · · · · · · · · · · · · · · · · ·

Sign Here

Under penalties of petiury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which the barry has any knowledge return with the preparer shown below (see instance).

Signature of officer or trustee

Date

Title

	Printrype pregarers name	Frepare 5 Signature	Date	Olieck II	FINA
		(a. 1 a.	[self- employed	Į
Paid	GEORGE W.MALLOY CPA	Clay huncles	02/14/17		P00115577
Preparer	Firm's name ► LYNCH, MALLO	DY, MARJINI, LLP		Firm's EIN ▶ 0	4-3334439
Jse Only				<u> </u>	
	Firm's address ▶ 9 BAY STATI	COURT			
	BREWSTER N	MA 02631		Phone no (5	08) 255-224

Form **990-PF** (2016)

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE	(A REVE: PER B	NUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
MAYFLOWER ADVISORS		238.		238.		
TOTAL TO PART I, LINE 3		238.		238.		_
FORM 990-PF (OTHER PROFES	SIONAL	FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN		(C) ADJUSTED NET INCOM	(D) CHARITABI E PURPOSES	
INVESTMENT MANAGEMENT FEES	1687.		0	•	168	7.
TO FORM 990-PF, PG 1, LN 16C	1687.		0	•	168	7 .
FORM 990-PF	CORPORAT	E STOCE	Κ		STATEMENT	3
DESCRIPTION			В	OOK VALUE	FAIR MARKET VALUE	
PUBLIC SECURITUES				37651.	38932	2.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B			37651.	38932	2 .
FORM 990-PF	OTHER INV	ESTMENT	rs		STATEMENT	4
DESCRIPTION		LUATION ETHOD		OOK VALUE	FAIR MARKET VALUE	
OTHER INVESTMENTS		FMV		960921.	960921	_ l•
TOTAL TO FORM 990-PF, PART I	I, LINE 13			960921.	960921	<u> </u>

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 5

NAME OF CONTRIBUTOR

ADDRESS

ESTATE OF JOANN DE NAPOLI

1 FEDERAL STREET BOSTON, MA 02110

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

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

J	OANN DENAPOLI CHARITABLE FOUNDATION INC	81-2009455			
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	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	X 501(c)(3) taxable private foundation				
	n is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	Rule See instructions			
X For an organization	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.				
Special Rules					
sections 509(a)(1 any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppol and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 itor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount in Complete Parts I and II	a, or 16b, and that received from			
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edu for 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.					
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

LHA 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)

Name of organization

Employer identification number

JUANN	DENAPOLI CHARITABLE FOUNDATION INC		2009455_	
Part I	Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	ESTATE OF JOANN DENAPOLI 1 FEDERAL STREET (SUITE 2120) BOSTON, MA 02110	sss	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Omnocash Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
623452 10-1	R-16	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)	

Employer identification number

JOANN DENAPOLI CHARITABLE FOUNDATION INC.

81-2009455

0 012121			2003133	
Part II	Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
_		-		
		\$		
(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	
		-		
		- - \$		
623453 10-18	3-16		90. 990-EZ. or 990-PF) (2016)	

Name of orga	anization		Employer identification number			
TO A NINI	DENAPOLI CHARITABLE FO	JINDATION TNC	81-2009455			
Part III	Exclusively religious, charitable, etc., con	tributions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations			
	completing Part III, enter the total of exclusively religiou	is, charitable, etc., contributions of \$1,000 or	r less for the year (Enter this info once)			
(a) No.	Use duplicate copies of Part III if addition	al space is needed				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
1 4111						
]						
						
-		(e) Transfer of gif	t			
-	Transferee's name, address, a	Relationship of transferor to transferee				
(a) No. from						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
\						
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I			- 			
	(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No.		<u></u>				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Į						
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
Γ						
22454 10-18-	16		Schedule B (Form 990, 990-F7, or 990-PF) (201			