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Form **.990-PF**

EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

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

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OMB No 1545-0052

		nt of the Treasury venue Service ▶ Do not enter ▶ Information about For	social sec m 990-PF	urity numbers or and its separate	n this form as instructions	s it may be m is at WWW. <i>Ir</i> :	ade public s. <i>gov/form990pf.</i>	Open to Public Inspection
For	cale		26,	2016	, and e		DEC 31, 2016	
Na	me o	f foundation					A Employer identificatio	n number
_1	ΉE	HARBORONE FOUNDATION					81-2658653	3
		and street (or PO box number if mail is not delivered to stree OAK STREET	address)	-		Room/suite	B Telephone number 508-895-13	347
		own, state or province, country, and ZIP or foreign p	ostal code			·	C If exemption application is	
		CKTON, MA 02301 (all that apply: X Initial return		nıtıal return of a f	ormer nublic		D 1. Foreign organization	s check here
•	711001	Final return		Amended return	ormer public i	Marity		
_		Address change		lame change			2 Foreign organizations m check here and attach c	eeting the 85% test, omputation
H		type of organization: X Section 501(c)(3) e.ection 4947(a)(1) nonexempt charitable trust			-4		E If private foundation sta	
LE		arket value of all assets at end of year J Account			X Acc	rual	under section 507(b)(1	
		· 1 —	ther (speci		LII ACO	uui	F If the foundation is in a under section 507(b)(1	1 1
	\$	8 , 410 , 952 . (Part I, colu	mn (d) mi	ust be on cash	basis)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	art I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)		evenue and ises per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	4,8	319,500.			N/A	
	2	Check If the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments		245.		245.		STATEMENT 1
	4	Dividends and interest from securities		 -				
		. Gross rents । Net rental income or (loss)						
	١.	Net gain or (loss) from sale of assets not on line 10			<u></u>			
Revenue	ь	Gross sales price for all						
eve	7	Capital gain net income (from Part IV, line 2)				0.		
<u> </u>	8	Net short-term capital gain						
	9	Income modifications Gross sales less returns and allowances						
	10a	and allowances Less Cost of goods sold	 					
		Gross profit of (loss)				<u></u>	<u> </u>	
	11	Other income AUU 2 3 2017 [17]	-					
	12	Total. Add [nes 1 through 11	4,8	319,745.		245.		
	13	Compensation of officers, directors, trustees, letc		0.		0.		0.
	14	Other employee salaries and wages Pension plans, employee benefits	-					
es		Legal fees STMT 2		4,275.		0.		0.
ens	b	Accounting fees						
Expense	C	Other professional fees						
tive	17	Interest						
stra	18	Taxes						
ığ.	19 20	Depreciation and depletion Occupancy						
Adn	21	Travel, conferences, and meetings		3,190.		0.		0.
and Administrative	22	Printing and publications						
ŋ	23	Other expenses STMT 3		1,431.		0.		0.
Operating	24	Total operating and administrative		0 000		0		
-8	25	expenses. Add lines 13 through 23		8,896.		0.		- 0.
		Contributions, gifts, grants paid Total expenses and disbursements		U.				0.
	- "	Add lines 24 and 25		8,896.		0.		0.
_	27	Subtract line 26 from line 12:					-	
	a	Excess of revenue over expenses and disbursements	4,8	10,849.				
		Net investment income (if negative enter -0-)				245.	77.73	
_	C	Adjusted net income (if negative, enter -0-)					N/A	<u> </u>

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

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Fo	m 99	0-PF (2016) THE HARBORONE FOUNDATIO			2658653 Page 2			
ΓE	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of				
<u>:</u>	==	Colomii snoulo de loi end di year amounis oniy	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing						
	2	Savings and temporary cash investments		931,280.	931,280.			
	3	Accounts receivable						
		Less: allowance for doubtful accounts						
	4	Pledges receivable						
		Less: allowance for doubtful accounts						
	1	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons	· · · · · · · · · · · · · · · · · · ·					
	7	Other notes and loans receivable						
	1	Less: allowance for doubtful accounts						
ets.	1	Inventories for sale or use						
Assets		Prepaid expenses and deferred charges						
٩		Investments - U.S. and state government obligations						
	b	Investments - corporate stock STMT 4	0.	7,454,603.	7,454,603.			
	C	Investments - corporate bonds						
	11	Investments - land buildings and equipment basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other						
	14	Land, buildings, and equipment: basis						
		Less accumulated depreciation						
		Other assets (describe STATEMENT 5)	0.	25,069.	25,069.			
	16	Total assets (to be completed by all filers - see the			0 440 050			
_	<u> </u>	instructions. Also, see page 1, item I)	0.	8,410,952.	8,410,952.			
		Accounts payable and accrued expenses						
	18	Grants payable						
es	19	Deferred revenue						
≝	20	Loans from officers, directors, trustees, and other disqualified persons						
Liabilities	ı	Mortgages and other notes payable						
_	22	Other liabilities (describe)						
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow SFAS 117, check here						
Ø	l	and complete lines 24 through 26 and lines 30 and 31.						
Ce		Unrestricted						
aga.		Temporarily restricted						
Net Assets or Fund Balance	26	Permanently restricted						
Š	l	Foundations that do not follow SFAS 117, check here						
ž	ĺ	and complete lines 27 through 31.						
ţ		Capital stock, trust principal, or current funds	0.	0.				
SSe	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
Ϋ́	Į.	Retained earnings, accumulated income, endowment, or other funds	0.	8,410,952.				
ž	30	Total net assets or fund balances	0.	8,410,952.				
		Table Cabillation and make acceptational belonger	0.	<u>8,410,952.</u>				
=		Total liabilities and net assets/fund balances		0_4_1.0_,_5_3.2				
P	art	Analysis of Changes in Net Assets or Fund B	alances					
. 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)							
		amount from Part I, line 27a		2	4,810,849.			
		increases not included in line 2 (itemize) UNREALIZED (GAIN/LOSS ASC	3 3	3,600,103.			
		ines 1, 2, and 3		4	8,410,952.			
		eases not included in line 2 (itemize)		5	8 410 952			
E	[otal	net accets or fund halances at end of year /line 4 minus line 5) - Part II co	tumn (h) lina 20	ا ۾ ا	ж д н н ч ч ч ч			

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See the Part VI instructions.

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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Part VI Excise Tax Based on Investment Income (Section 494	l0(a), 4940(b), 4940(e), or	4948 - see	instru	ctio	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and e	enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if ne	cessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► ☐ and enter 1%	1 1			5.
of Part I, line 27b				_	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, col. (b).	1 1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. 0		2			0.
3 Add lines 1 and 2	,	3			5.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	Simolo simolo o y	5			5.
6 Credits/Payments:		 			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a				
b Exempt foreign organizations - tax withheld at source	6b	-			
c Tax paid with application for extension of time to file (Form 8868)	6c	-			
d Backup withholding erroneously withheld	6d	-}			
		- -,			o.
7 Total credits and payments. Add lines 6a through 6d	- the d	7			<u> </u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	acnea	8			5.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	.	9			<u> </u>
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 legis	slation or did it participate or interven	e ın		Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ises (see instructions for the definitio	n)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of any materials publis	shed or			
distributed by the foundation in connection with the activities				. :	
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year:				
(1) On the foundation. > \$ 0 . (2) On foundation managers	s. > \$ 0 .	•			
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax imposed on foundation	_			
managers ▶ \$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to the l	RS?		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 chang	es		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		A/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	>		5		X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ather:				
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the stat	e law	i i		
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," cor	molete Part II col (c) and Part X	V	7	X	
	inplote vare in, ser (e), and vare v	•	<u> </u>		
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ans) ►				
MA			1	'	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	<u>พากบางโรกัสเพียงัยาไกเ</u> รียงเกิบสายไ		8b	Х	
	action 4042(i)(2) or 4042(i)(5) for an	ondar.	00	41	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendaryear 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV					X -
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				_	$\frac{X}{X}$
The any persons become substantial commutators during the lax year of trees, attach a scheduling the lax year of the rest.	ule listing their names and addresses	۴.	10 orm 99 0)_DE	
		Γŧ	ハー・コンし	/-rr	(2010)

Part VII-A Statements Regarding Activities (continued)			
	<u> </u>	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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?	13	X	
Website address ► WWW.HARBORONE.COM/ABOUT-US/COMMUNITY/HARBORONE-FO			
14 The books are in care of ► MAUREEN WILKINSON Telephone no. ► 508 – 8			
Located at ► 770 OAK STREET, BROCKTON, MA	2301		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	
and enter the amount of tax-exempt interest received or accrued during the year	N	/A	_
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		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
foreign country			
Part 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
1a During the year did the foundation (either directly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			İ
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ŀ		ĺ
(5) Transfer any income or assets to a disqualified person (or make any of either available			l
for the benefit or use of a disqualified person)?			l
(6) Agree to pay money or property to a government official? (Exception. Check "No"			l
If the foundation agreed to make a grant to or to employ the official for a period after			l
termination of government service, if terminating within 90 days.)			ĺ
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			l
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			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2016?	1c		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)):	i		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
before 2016? Yes X No		l	
If "Yes," list the years \blacktriangleright ,,,,,,,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		- 1	
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.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
-			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1		
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 disqualified persons after		l	
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	_		
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
Form 4720, to determine if the foundation had excess business holdings in 2016)	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
F	orm 990	-PF	2016

3						
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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be f	Required (continu	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	4945(e))?	Ye	s X No			
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire					
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes)	☐ Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section]]		
4945(d)(4)(A)? (see instructions)		Ye	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		}	1 1		
the prevention of cruelty to children or animals?						
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described	ın Regulatıons		1 1		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5 b		
Organizations relying on a current notice regarding disaster assistance check hi	er e		▶∟」∣			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ıned		1 1		
expenditure responsibility for the grant?	$\boldsymbol{\nu}$	I/A	es L No			
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			[[
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			1 1		
a personal benefit contract?		Ye	es X No	1 1		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u></u>	6b X		
If "Yes" to 6b, file Form 8870						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b _		
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	anagers, Highly	У			
Paid Employees, and Contractors						
1 List all officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Expense		
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other		
	to position	enter -0-)	compensation	allowances		
SEE STATEMENT 6		0.	0.	0.		
OBE STATEMENT 0		 -	<u>-</u>			
		 				
			Ì	•		
		 				
		1	ļ	1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	enter "NONE."				
() Name and address of each ampleyed paid more than \$50,000	(b) Title, and average hours per week	4) Componentian	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other		
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances		
NONE						
			Ì			
		ļ				
		<u> </u>				
=						
			— <u></u>			
			<u> </u>			
Total number of other employees paid over \$50,000			▶ 1	0		

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
L		<u>-</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		 _
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
	For	m 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, 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	5,256,574.
b	Average of monthly cash balances	1b	5,256,574. 839,113.
C	Fair market value of all other assets	1c	25,069.
d	Total (add lines 1a, b, and c)	1d	6,120,756.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,120,756.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	91,811.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,028,945.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	206,473.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Mınımum investment return from Part X, line 6	1	206,473.
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	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	206,468.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	206,468.
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	206,468.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
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:		
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	0.
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	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	pualifies fo	r the section

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Part XIII	Undistributed	Income	(see instructions)
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	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				206,468.
line 7				200,400.
2 Undistributed income, if any as of the end of 2016			0.	
a Enter amount for 2015 only				
b Total for prior years:		0.		
, , , , , , , , , , , , , , , , , , ,				
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014 e From 2015				
f Total of lines 3a through e	0.1			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 0.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
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	0.			
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			0.	
4a from line 2a. Taxable amount - see instr.			1	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				206,468.
be distributed in 2017				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions) 8 Excess distributions carryover from 2011		· 	a	
not applied on line 5 or line 7	0.	,		
Subtract lines 7 and 8 from line 6a	0.	.		
10 Analysis of line 9.				
a Excess from 2012				
b Excess from 2013	1			
c Excess from 2014				
d Excess from 2015				
e Excess from 2016		<u> </u>		Form 000 DE (0040)
				Form 990-PF (2016)

3 Grants and Contributions Paid During to				
3 Grants and Contributions Paid During to Recipient	If recipient is an individual	Payment		
Name and address (home or business)	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
a Paid during the year	or substantial contributor	recipient		
a raid duffing the year				
NONE				
	i			
Total			▶ 3a	0
b Approved for future payment				
NONE				
· · · · · · · · · · · · · · · · · · ·				
<u> </u>				
-				-
Total			▶ 3b	o rm 990-PF (2016

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated l	usiness income		y section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	
å	- 				
c					
d	-		- - -		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	245.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate;					
a Debt-financed property	<u> </u>				
b Not debt-financed property	<u> </u>		_+		
6 Net rental income or (loss) from personal	1			Ì	
property	ļ		_+_+-		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b	_				
C	_				
d	_				
e	_		0.	245.	
12 Subtotal Add columns (b), (d), and (e)			<u></u>	<u></u>	245
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.	1			13	
					
Part XVI-B Relationship of Activities	s to the Accon	nplishment of	Exempt P	urposes	
Line No. Explain below how each activity for which in	ncome is reported in c	olumn (e) of Part XV	/I-A contributed	importantly to the accomp	olishment of

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	•
	<u></u>	
	 	·
<u></u>		
		
		<u></u>
	· 	 _
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Form 990-PF (2	016) THE H	ARBORONE	FOUNDA	TION		81-265	8653	Page 13	
Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relationsh	nips With Noncha	ritable		
1 Did the or			of the followin	g with any other organizat	on described in section	on 501(c) of	7 Y	es No	
				7, relating to political orga		,			
	from the reporting found]]		
(1) Cash		-		•			1a(1)	X	
(2) Other	assets						1a(2)	X	
b Other tran									
(1) Sales	of assets to a noncharita	ble exempt organiza	ition				16(1)	x	
	nases of assets from a no						1b(2)	X	
(3) Renta	ıl of facılıtıes, equipment,	or other assets	_				1b(3)	X	
	bursement arrangements						1b(4)	X	
(5) Loans	s or loan guarantees						1b(5)	X	
(6) Perfo	rmance of services or me	mbership or fundrai	ısıng solıcıtatıo	ns			1b(6)	X	
c Sharing of	f facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees			1c	X	
d If the answ	ver to any of the above is	"Yes," complete the	following sche	dule. Column (b) should a	lways show the fair m	arket value of the goods,	other assets	5,	
or service:	s given by the reporting fo	oundation. If the fou	ndation receive	ed less than fair market val	ue in any transaction	or sharing arrangement, s	show in		
column (d	i) the value of the goods,	other assets, or serv	vices received.						
(a)Line no	(b) Amount involved	(c) Name o	f noncharitable	e exempt organization	(d) Description	(d) Description of transfers, transactions, and sharing arrange			
	·		N/A						
								<u>-</u>	
	·	<u></u>							
				- <u></u>					
				or more tax-exempt organ	izations described	_			
	501(c) of the Code (other)(3)) or in sect	ion 527?		L	Yes	X No	
b If "Yes," co	omplete the following sch				,				
	(a) Name of org	anization		(b) Type of organization	 	c) Description of relations			
	N/A				ļ				
					<u> </u>				
					 				
					 				
				<u> </u>	<u></u>				
				ig accompanying schedules an n taxpayer) is based on all infor		has any knowledge	ay the IRS disc turn with the pr	cuss this	
Sign				10 hulin	<u> </u>	s <u>h</u>	<u>own</u> below (se	e instr)?	
Here	<u> </u>	villinson		<u> </u>	TREASU	RER	XYes	└── No	
Sign	nature of officer or trustee		= -Dronn=	Date	Title	Chock L if LDTI			
	Print/Type preparer's na	ime	Preparer's s	•	- -Date	Check PTIN		 -	
D-:-	D		8/10/2017	self- employed	00005				
Paid	DAVID MARS			Bhy	1		00365		
Preparer	Firm's name ► RSM	OS LLP		Firm's EIN ► 42-0	/1432	5			
Use Only	Firm's oddings to 0.0	ATE: 25-		 					
	Firm's address ► 80 CITY SQUARE					648 6	10 00	0.0	
	BOSTON, MA 02129-3742					Phone no. 617 – 9	12-90	<u> </u>	

Form **990-PF** (2016)

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY	CASH :	INVESTMENTS	STATEMENT	1
SOURCE	REVE	(A) REVENUE PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
BANK DEPOSITS INTEREST		245.		245.		
TOTAL TO PART I, LINE 3		245.		245.		
FORM 990-PF	LEGAL	FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I		(C) ADJUSTEI NET INCOM		
LEGAL FEES	4,275.		0	•		0.
TO FM 990-PF, PG 1, LN 16A	4,275.		0			0.
10 IM 330 II, IG I, IM 10II	4,273.	===		•		
FORM 990-PF	OTHER E	XPENSE:		•	STATEMENT	
FORM 990-PF		(1 NET II	S B)	(C) ADJUSTEI	(D) CHARITA	3 BLE
FORM 990-PF DESCRIPTION	OTHER E (A) EXPENSES	NET II MENT	S B) NVEST-	(C) ADJUSTEI NET INCOM	(D) CHARITA	3 BLE
FORM 990-PF DESCRIPTION SOFTWARE LICENSE EXPENSE	OTHER E (A) EXPENSES PER BOOKS	NET II MENT	S B) NVEST- INCOME	(C) ADJUSTEI NET INCOM	(D) CHARITA	3 BLE ES
FORM 990-PF	(A) EXPENSES PER BOOKS 1,431.	NET II MENT	S B) NVEST- INCOME 0	(C) ADJUSTEI NET INCOM	(D) CHARITA	3 BLE ES
FORM 990-PF DESCRIPTION SOFTWARE LICENSE EXPENSE TO FORM 990-PF, PG 1, LN 23	OTHER E (A) EXPENSES PER BOOKS 1,431. 1,431.	NET II MENT	S B) NVEST- INCOME 0	(C) ADJUSTEI NET INCOM	(D) CHARITA ME PURPOS	3 BLE ES 0.
FORM 990-PF DESCRIPTION SOFTWARE LICENSE EXPENSE TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	OTHER E (A) EXPENSES PER BOOKS 1,431. 1,431.	NET II MENT	S B) NVEST- INCOME 0	(C) ADJUSTEI NET INCOM	(D) CHARITA ME PURPOS STATEMENT FAIR MARKE	3 BLE ES 0. 0. 4

FORM 990-PF		OTHER ASSETS		STAT:	EMENT 5	
DESCRIPTION		BEGINNING OF YR BOOK VALUE	END OF YEAD BOOK VALUE		FAIR MARKET VALUE	
PREPAID MAINTENANCE CONTRACTS		0.	25,0	69.	25,069.	
TO FORM 990-PF, PART II, LINE	15	0.	25,0	69.	25,069.	
		FOUNDATION MAN		STAT	EMENT 6	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
JENNIFER WHITE 770 OAK STREET BROCKTON, MA 02301		PRESIDENT 1.00	0.	0.	0.	
MAUREEN WILKINSON 770 OAK STREET BROCKTON, MA 02301		TREASURER AND	SECRETARY 0.	0.	0.	
JOSEPH F. CASEY 770 OAK STREET BROCKTON, MA 02301		DIRECTOR 1.00	0.	0.	0.	
JEFFREY RUSSELL 770 OAK STREET BROCKTON, MA 02301		DIRECTOR 1.00	0.	0.	0.	
PATRICIA WILLIAMS 770 OAK STREET BROCKTON, MA 02301		DIRECTOR 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE	GE 6	, PART VIII	0.	0.	0.	