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Form **990-PF**

EXTENDED TO FEBRUARY 15, 2018 Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For ca	len	dar year 2016 or tax year beginning APR	1, 2016	, and ending	MAR 31, 2017	
Name	of	foundation			A Employer identification	number
TH	E	FREDERICK E. WEBER CHA	RITIES CORP.		04-2133244	
		nd street (or PO box number if mail is not delivered to street	address)		B Telephone number	
_89	_	SOUTH STREET		203	(617)292-6	264
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
	_	TON, MA 02111				 1
G Che	eck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	, check here
		Final return	Amended return		2 Foreign organizations me	eting the 85% test
		Address change	Name change		Foreign organizations me check here and attach co	mputation
		type of organization: X Section 501(c)(3) ex			E If private foundation sta-	
			Other taxable private founda		under section 507(b)(1)	(A), check here
		rket value of all assets at end of year J Accounti	~	X Accrual	F If the foundation is in a	
			ther (specify)		under section 507(b)(1)	(B), check here
▶ \$		6,070,357. (Part I, colu	т		<u></u>	
Par	<u> </u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				
	2	Check The foundation is not required to attach Sch. B				
} ;	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	131,763.	131,763.		STATEMENT 1
	5a	Gross rents				
1	b	Net rental income or (loss)				
a)	6a	Net gain or (loss) from sale of assets not on line 10	67,231.			
ξĺ	b	Gross sales price for all assets on line 6a 192,519.				
Revenue	7	Capital gain net income (from Part IV, line 2)		67,231.	BECE!	/ED
_ 1	8	Net short-term capital gain				
	9	Income modifications			B DEC 05	2017 9
11	0a	Gross sales less returns and allowances	<u> </u>			2011
	b	Less Cost of goods sold			OGDEN	, UT
n	C	Gross profit or (loss)				
-	_	Other income	-255.	-255.		STATEMENT 2
	_	Total Add lines 1 through 11	198,739.	198,739.	0.	
-		Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
		Other employee salaries and wages	23,412.	0.	0.	0.
3 σ 1		Pension plans, employee benefits			 	
		Legal fees Accounting fees STMT 3	6,500.	0.	0.	0.
× 8		Accounting fees STMT 3 Other professional fees STMT 4	0,500.	23,568.	ļ <u>0•</u>	ļ·
Operating and Administrative Expense		Interest	 	43,500.	 	
atis.		Taxes STMT 5	1,875.	0.	0.	0.
istra		Depreciation and depletion	1,013.		 	0.
E 2		Occupancy	9,096.	0.	0.	0.
A S		Travel, conferences, and meetings	7,050.	<u>.</u>	•	
P 2		Printing and publications				
g 2		Other expenses STMT 6	7,997.	0.	0.	0.
E 2		Total operating and administrative		`		
Der		expenses Add lines 13 through 23	48,880.	23,568.	0.	0.
O 2	5	Contributions, gifts, grants paid	215,000.			215,000.
2		Total expenses and disbursements				
		Add lines 24 and 25	263,880.	23,568.	0.	215,000.
2	7	Subtract line 26 from line 12:				
}		Excess of revenue over expenses and disbursements	-65,141.			
		Net investment income (if negative, enter -0-)		175,171.		
	C	Adjusted net income (if negative, enter -0-)			0.	

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

			CHARITIES CORP		2133244 Page 2
Pa	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
-1	-	Cash - non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
- {		Savings and temporary cash investments	14,315.	48,809.	48,809.
- }		Accounts receivable	14,313.	40,009.	40,009
Ì	Ū	Less; allowance for doubtful accounts	j	ł	
Ì	4	Pledges receivable			
j	-	Less; allowance for doubtful accounts ▶	}	ì	
- l	5	Grants receivable			
- {	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	į	į	
l	7	Other notes and loans receivable			
ł		Less: allowance for doubtful accounts ▶			_
£	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	1,963.	2,459.	2,459
۱۶	10a	Investments - U.S. and state government obligations			
- 1	b	Investments - corporate stock			
- 1	C	Investments - corporate bonds			
ı	11	Investments - land, buildings, and equipment basis		į	
ŀ		Less accumulated depreciation			
- [12	Investments - mortgage loans			
- [13	Investments - other STMT 7	5,753,833.	5,627,780.	6,019,089
	14	Land, buildings, and equipment; basis		ļ	
- }		Less accumulated depreciation			
		Other assets (describe			
1	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	5,770,111.	5,679,048.	<u>6,070,357</u>
- 1	17	Accounts payable and accrued expenses	8,864.	6,500.	
- 1	18	Grants payable			
es	19	Deferred revenue			
= 1	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable			
_ ·	22	Other liabilities (describe			
- (0.054	6 500	
+	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	8,864.	6,500.	
- {					
က္က		and complete lines 24 through 26 and lines 30 and 31	F 761 047	F 672 F40	
ဦ	24	Unrestricted	5,761,247.	5,672,548.	
8	25	Temporarily restricted			
9	26	Permanently restricted			
<u> </u>		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31		Ì	
ō	27	Capital stock, trust principal, or current funds		ĺ	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
ASS	29	Retained earnings, accumulated income, endowment, or other funds			
ا ب	30	Total net assets or fund balances	5,761,247.	5,672,548.	
z	00	Total lict assets of fully paralless	J, 101, 241.	3,012,340.	
- }	31	Total liabilities and net assets/fund balances	5,770,111.	5,679,048.	
	\equiv	III Analysis of Changes in Net Assets or Fund Ba		370.37010.	
_	=	net assets or fund balances at beginning of year - Part II, column (a), line 3			
		st agree with end-of-year figure reported on prior year's return)	·•	11	5,761,247
		amount from Part I, line 27a		2	-65,141
		r increases not included in line 2 (itemize) ROUNDING		3	10
		lines 1, 2, and 3		4	5,696,116
		eases not included in line 2 (itemize) INVESTMENT ADV	ISOR FEES	5	23,568
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	5,672,548

Form **990-PF** (2016)

(a) List and des	cribe the k	ind(s) of property sold (e.g.	, real estate,	income	(b)	How ac	cquired (c) Date acquired	(d) Date sold
		or common stock, 200 shs	. MLC Co.)		Ď	- Dona	ation	(mo., day, yr.)	(mo., day, yr.)
12 VARIOUS ACTIVI					 		P 0	3/15/16	03/18/17
b CAPITAL GAINS	DIAT:	DENDS			}				
<u>d</u>					├─		+-		
e					_				
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (los: (e) plus (f) minus	
a 136,329.				125,28	8.				11,041.
b 56,190.	<u> </u>								56,190.
<u>c</u>	 								
<u>d</u>	 								
e Complete only for assets show	100 0310 10	column (h) and owned by t	he foundation	on 12/21/60				(Oct. (b)	
Complete only for assets snow		(i) Adjusted basis						iains (Col. (h) gair (), but not less tha	
(i) F.M.V. as of 12/31/69		as of 12/31/69		cess of col. (1) col. (1), if any				osses (from col.	
a	 								11,041.
<u>-</u> b									56,190.
C									
d									
<u>e</u>	<u>l</u>	·····							
2 Capital gain net income or (net o	apital loss	If gain, also enter If (loss), enter -0-			}	2			67,231.
3 Net short-term capital gain or (to	ss) as def								
If gain, also enter in Part I, line 8			u (0).]				
If (loss), enter -0- in Part I, line 8	3				Ш	3		N/2	1
		Section 4940(e) for					ent inco	me	
(For optional use by domestic priva	te foundati	ons subject to the section 4	1940(a) tax on	net investment ir	come	e.)			
If section 4940(d)(2) applies, leave	this part bl	ank.							
Was the foundation liable for the se	otion 4040	tay on the distributeble am	ount of any	nar in the base as	40				Yes X No
If "Yes," the foundation does not qua				•	100 /				Tes _A NO
1 Enter the appropriate amount in					ntries	 S.			
(a) Base period years		(b)			(c)			Duetr	(d) bution ratio
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	tributions	Net value of no			use assets	(col. (b) di	vided by col. (c))
2015		25	3,749.			98	5,342.		.257524
2014			0,206.				0.		.000000
2013			3,413.				0.		.000000
2012		<u> 26</u>	5,072.				0.		.000000
2011		28	2,831.	· 	_1	<u>,96</u>	<u>5,195.</u>	 	.143920
2 Total of line 1, column (d)								2	.401444
3 Average distribution ratio for the	5-vear ha	se neriod - divide the total (on line 2 by 5	or by the number	of ve	are			• 401444
the foundation has been in exist			, mio 2 by 0,	or by the namber	Or yo	ais		3	.080289
		•							
4 Enter the net value of noncharita	ıble-use as	sets for 2016 from Part X,	line 5					4	489,783.
5 Multiply line 4 by line 3								5	39,324.
) †	
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6	1,752.
# Addition 5 10								_	44 050
7 Add lines 5 and 6								7	41,076.
8 Enter qualifying distributions fro	m Part XII	, line 4						8	215,000.
If line 8 is equal to or greater tha	ın line 7, cl	heck the box in Part VI, line	1b, and comp	lete that part usin	ıga 1	% tax ı	rate.		
See the Part VI instructions.									

		133244		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - :	see instr	uctio	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 X and enter 1%	1		1,7	52.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3 Add lines 1 and 2	3		1,7	
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		1,7	
6 Credits/Payments:	-		_ 	<u> </u>
a 2016 estimated tax payments and 2015 overpayment credited to 2016				
b Exempt foreign organizations - tax withheld at source				
c Tax paid with application for extension of time to file (Form 8868)	- 1			
d Backup withholding erroneously withheld	1			
	,]		2 2	F 2
7 Total credits and payments. Add lines 6a through 6d	7		4,4	<u>52.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<u> </u>
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			95.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ 0 . Refunded ▶ Part VII-A Statements Regarding Activities	11		4	<u>95.</u>
	——		Van	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1		res	
any political campaign?		<u>1a</u>	 	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		<u>1b</u>	├ ──	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or		}	1
distributed by the foundation in connection with the activities.		1	}	
c Did the foundation file Form 1120-POL for this year?		10	ļ	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			}	1
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		}	1	1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		}	ĺ	1
managers. ▶ \$ 0 .			İ ,	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	L	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	Ĺ	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		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If "Yes," attach the statement required by General Instruction T.			{	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ĺ	}	ł
By language in the governing instrument, or			}	ł
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw	ł	}	1
remain in the governing instrument?		6	}	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
(e), and various		·	 -	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		j		
MA				}
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation		8b	x	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	dar	00	+~	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	uai	9		v
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	 	X
The daily persons become substantial continuotors during the tax year. It "Yes," attach a schedule listing their names and addresses		Form 99	O-DE	
		r Office and	J	(2010)

Form **990-PF** (2016)

X

3ь

4a

Yes X No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2016.)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

form 990-PF (2016) THE FREDERICK E. WEBER C			<u>04-21332</u>	4.4 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		C-7		1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es 🗓 No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			1 1
any voter registration drive?			s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	s X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	_))
4945(d)(4)(A)? (see instructions)		Ye	s X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		1 1
the prevention of cruelty to children or animals?		Y6	s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	fer the exceptions described i	n Regulations	İ	
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 h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		1
expenditure responsibility for the grant?		. —	s No	1 1
If "Yes," attach the statement required by Regulations section 53.4945		.,		1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			1 1
a personal benefit contract?	ouy promisino on		es X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal hanafit contract?			5b X
If "Yes" to 6b, file Form 8870.	ersonal benefit contract.		 -	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	haltar transaction?	[] v	es X No	
	· ·	١٠ الـــــــا		7b
<u>b If 'Yes,' did the foundation receive any proceeds or have any net income attribu</u> Part VIII Information About Officers, Directors, Trusto		nagara Highli		<u> </u>
Paid Employees, and Contractors	ees, roundation wa	magers, ruging	,	
List all officers, directors, trustees, foundation managers and their	compensation			
Elot di onocio, anocio, a dottoco, roundation managero and anon		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average 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 8		0.	0.	0.
		}		
		ļ		
				
		[
		ł		
		L		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(-) Company	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NANCY COOPER	EXECUTIVE DIR	ECTOR		
30 AMHERST ROAD, WELLESLEY, MA 02482	15.00	0.	0.	0.
,,		1		
	<u> </u>	 		
			1	
	 	 	 	
)	
		 	 	
			ĺ	
	L	<u> </u>		L
Total number of other employees paid over \$50,000				0
			Form	990-PF (2016)

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		133244 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	-	
	 	
	•	
Total number of others receiving over \$50,000 for professional services	L	D
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produit	al information such as the ced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
` <u> </u>		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2.	Amount
1 N/A		
<i>l</i> ————————————————————————————————————		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e 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	l 1a	494,198.
b	Average of monthly cash balances	1b	3,044.
C	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	497,242.
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	497,242.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,459.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	489,783.
6_	Minimum investment return. Enter 5% of line 5	6	24,489.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
_	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	24,489.
2a	Tax on investment income for 2016 from Part VI, line 5	} }	
þ	Income tax for 2016. (This does not include the tax from Part VI.)))	
C	Add lines 2a and 2b	2c	1,752.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,737.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,737.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	22,737.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	215,000.
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:	f {	
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	215,000.
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	1,752.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	213,248.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the	ne section

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

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corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8	7 Amounts treated as distributions out of				
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 10 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015 208,984.	1				•
may be required - see instructions) 8	· · · · · · · · · · · · · · · · · · ·		ì		
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 1,162,504. 10 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015 208,984.		0.1			
not applied on line 5 or line 7 9 Excess distributions carryover to 2017 Subtract lines 7 and 8 from line 6a 1,162,504. 10 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015 208,984.		-			
9 Excess distributions carryover to 2017 Subtract lines 7 and 8 from line 6a 1,162,504. 10 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015 208,984.	-	193.909			
Subtract lines 7 and 8 from line 6a	· · · · · · · · · · · · · · · · · · ·				
10 Analysis of line 9: a Excess from 2012		1.162.504.		l	
a Excess from 2012					
b Excess from 2013 256,500. c Excess from 2014 250,000. d Excess from 2015 208,984.	1				
c Excess from 2014 250,000. d Excess from 2015 208,984.	b Excess from 2013 256 500				
d Excess from 2015 208, 984.					
<u></u>	e Excess from 2016 192, 263.				

Part XIV Private Operating F	EDERICK E. W	EBER CHARI	ries corp.		33244 Page 10
				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		-	▶	4040(3/2) == []4	040(4)(5)
b Check box to indicate whether the foun		ig roundation described	Prior 3 years	4942(j)(3) or 4	942(j)(5) T
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(a) 2010	(8)2013	(6) 20 14	(4) 2010	(6) 10(2)
investment return from Part X for	1	}	1		
each year listed			+	 	
b 85% of line 2a	}		 	 	
c Qualifying distributions from Part XII,		ļ			
line 4 for each year listed			+	 	
d Amounts included in line 2c not	1				
used directly for active conduct of	1			1	
exempt activities			 	 	
e Qualifying distributions made directly	<u>]</u>				
for active conduct of exempt activities.	[1	
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		 		 	
alternative test relied upon:					
a "Assets" alternative test - enter:	+		•		
(1) Value of all assets					<u> </u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					}
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		1			
(1) Total support other than gross		ļ			
investment income (interest, dividends, rents, payments on					
securities loans (section				-	
512(a)(5)), or royalties)					
(2) Support from general public	}	1		1	}
and 5 or more exempt organizations as provided in	1	1			
section 4942(j)(3)(B)(III)	<u></u>	ļ	. 	↓	ļ
(3) Largest amount of support from					
an exempt organization		ļ		 	
(4) Gross investment income	<u></u>	<u> </u>		1 105 000	
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during		uctions.)			
1 Information Regarding Foundation	*				
a List any managers of the foundation what year (but only if they have contributed in the contributed in			itributions received by the	e foundation before the cl	ose of any tax
NONE	40,000,1 (0000	(-/(-/-/			
	as own 100/, or more of th	us stock of a paragration	/or an equally large parts	an of the ownership of a	anthorobin or
b List any managers of the foundation who other entity) of which the foundation has			i (or all equally large porti	on of the ownership of a	Darthership of
NONE					
2 Information Regarding Contribut	ion Grant Gift Loon	Sobolarship etc. [)roadomo:		
	only makes contributions	• • •	•	not account uncollected con	ugete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					ATEMENT 10
SEE STATEMENT 9					
b The form in which applications should	be submitted and informa	tion and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	le euch se hy goographia	al argae, charitable field	kinde of institutions or	other factors:	
a rany restrictions of littinguous off dwalt	is, such as my geographic	ai ai cas, criai ilabic ilelu:	o, raius oi msillullons, Oi	ourer racions.	

▶ 3b

Total

Form 990-PF (2016) THE FREDERICK I	E. WEBER	CHARITIES	CORP.	04-2	133244 Page 12
Part XVI-A Analysis of Income-Produc	cing Activiti	es			
Enter gross amounts unless otherwise indicated.	Unrelated	business income		y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c			+		
e			+		
f			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1 1			1	
investments ,					
4 Dividends and interest from securities	ļ		14	106,467.	25,296.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal	 		+		
property	1			ļ	
7 Other investment income			14	-255.	
8 Gain or (loss) from sales of assets other			1-1-		
than inventory			14	56,190.	11,041.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:				1	
a			 		
b	 				
c	ļ				
d			1-1-		
12 Subtotal. Add columns (b), (d), and (e)		0		162,402.	36,337.
13 Total. Add line 12, columns (b), (d), and (e)				13	1 1 1 1
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accor	mplishment of E	xempt P	urposes	
Line No. Explain below how each activity for which inco	me is reported in	column (e) of Part XVI-	A contributed	importantly to the accomp	ulishment of
the foundation's exempt purposes (other than			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	importantly to the decemp	
11 INCOME FROM PARTNERSHIP	PINVEST	MENTS USED	TO FU	ND GRANTS	
		 			
					
					
					

16) THE FREDERICK E. WEBER CHARITIES CORP. 04-2133244 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1	Did the c	organization directly or indir	ectly engage in any	of the following	ig with any other organization	on described in sect	ion 501(c) of	1 7	Yes	No
					27, relating to political organ			1		
а	Transfer	s from the reporting founda	ition to a noncharita	ble exempt or	ganization of:			1 1		
	(1) Casi	h						1a(1)		X
	(2) Othe	er assets						1a(2)		X
b	Other tra	insactions:						1 1		
	(1) Sale	es of assets to a noncharital	ble exempt organizat	tion				1b(1)		X
	(2) Puro	chases of assets from a noi	ncharitable exempt o	organization				1b(2)		X
	(3) Ren	tal of facilities, equipment,	or other assets					1b(3)		X
	(4) Rein	nbursement arrangements						1b(4)		X
	(5) Loai	ns or loan guarantees .						1b(5)		X
		formance of services or me		=			,	1b(6)		X
		of facilities, equipment, mai	-		· · · · · ·			1c		X
d					dule. Column (b) should al				ets,	
					ed less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
(-)		(d) the value of the goods,				1				
(a)L	ine no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and	sharing arr	angeme	ents
				N/A	- <i></i>					
	+-	- <i></i> -								
										
									——	
										
							- · · · - · · · · · · · · · · · · · · ·			
										
						- 				
						- 				
				 -						
										
										
						1	· 			
						+	 			
						+	- 			
2a	Is the for	indation directly or indirect	ly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described	·			
		n 501(c) of the Code (other						Yes	X	No
b		complete the following sche								
		(a) Name of org	anızatıon		(b) Type of organization		(c) Description of relations	пр		
		N/A								
		·								
						<u> </u>	 			
۵.		er penalties of perjury, I declare to pelief, it is true, correct, and corr	hat I have examined this inlete. Declaration of ore	s return, includin eparer (other tha	ig accompanying schedules and n taxpayer) is based on all inforn	statements, and to the	r has any knowledge May	the IRS d		
Sig He	וופ	1/2 R-1	7	- (ulnho	k	sho	rn with the wn below		
ne		Ormany of				PRESI	DENT L	Yes	L	J No
	Sig	nature of officer or trustee		I David	Date	Title	Obsert 7 4 700000			
		Print/Type preparer's na		Preparer's s	ignature	Date	Check if PTIN			
Pa	id	GEORGE J.					self- employed			
	nu eparer	CPA				11/16/17		1605		
	e Only	Firm's name FGEO	KGE J. RO	BEKTS,	CPA, PC		Firm's EIN ► 26 – 3	1087	12	
<u> </u>	Oilly	<u> </u>	LINT NITTE C	mp grow	CITTOD 100		 			
		Firm's address ► 35		TREET,			0 701 4) C ^	0 - 0	
		WE.	LLESLEY H	י קיודד	MA_UZ481		Phone no. 781-4:	45-2	<u> </u>	

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual,	 		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ALTERNATIVE HOUSE	NONE	DIADY TO	PROGRAM SUPPORT	
PO BOX 2100	NONE	PUBLIC	PROGRAM SUPPORT	
LOWELL, MA 01851				1,000
ASSOCIATED GRANTMAKERS	NONE	PUBLIC	PROGRAM SUPPORT	
55 COURT STREET				
BOSTON, MA 02108			 	
BEVERLY BOOTSTRAPS	NONE	PUBLIC	PROGRAM SUPPORT	
198 RANTOUL ST	,			
BEVERLY, MA 01915				1,500
DOGRAM GUTNAMONA NOTOVIDADNOAD GUNDON	l volva		DECENTAGE AND DECE	
BOSTON CHINATOWN NEIGHBORHOOD CENTER 885 WASHINGTON ST	NONE	PUBLIC	PROGRAM SUPPORT	
BOSTON, MA 02111				
BOSTON LIVING CENTER	NONE	PUBLIC	PROGRAM SUPPORT	
29 STANHOPE STREET		t		
BOSTON, MA 02108			 	
BOSTON MEDICAL CENTER ONE BOSTON MEDICAL CENTER PLACE	NONE	PUBLIC	FINANCIAL ASSISTANCE & REVOLVING FUND	
BOSTON, MA 02108		ļ	KEVODVING FOND	10,00
			}	
BOSTON RESCUE MISSION	NONE	PUBLIC	PROGRAM SUPPORT	
39 KINGSTON STREET				
BOSTON, MA 02108		 	 	
BOSTON URBAN YOUTH FOUNDATION	NONE	PUBLIC	PROGRAM SUPPORT	
530 WARREN STREET	}		1	
DORCHESTER, MA 02124		1		
BOTTOM LINE 500 AMORY STREET #3	NONE	PUBLIC	PROGRAM SUPPORT	
JAMAICA PLAIN MA 02130				4,00
BREAD AND ROSES	NONE	PUBLIC	PROGRAM SUPPORT	
58 NEWBURY STREET				
LAWERENCE MA 01840	1	1	i l	10,00

THE FREDERICK.E. WEBER CHARITIES CORP. 04-2133244

Part XV | Supplementary Information

Part XV Supplementary Information				₁
3 Grants and Contributions Paid During the			- 	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (name or positiess)	or substantial contributor	recipient	 	<u> </u>
BRIDGE FUND OF MASSACHUSETTS	NONE	PUBLIC	PROGRAM SUPPORT	
233 NEEDHAM STREET				10 000
NEWTON, MA 02481				12,000
BRIDGE OVER TROUBLE WATERS	NONE	DVIDI TO	DDOGRAM GURDORA	<u> </u>
79 JOHN F KENNEDY STREET	RONE	PUBLIC	PROGRAM SUPPORT	
CAMBRIDGE MA 02138				0
CAMBRIDGE CAMPING	NONE	PUBLIC	CAMPING	
99 BISHOP RICHARD ALLEN CIRCLE				
CAMBRIDGE, MA 02138				5,500
CAMBRIDGE COLLEGE	NONE	PUBLIC	PROGRAM SUPPORT	
1000 MASSACHUSETTS AVENUE				
CAMBRIDGE, MA 02138				
CAMBRIDGE COMMUNITY CENTER	NONE	DABTIC	PROGRAM SUPPORT	ļ
5 CALLENDER ST CAMBRIDGE MA 02138				0
CAMBRIDGE, PA 02130		 -		
CAMBRIDGE FAMILY & CHILDRENS CENTER	NONE	PUBLIC	PROGRAM SUPPORT	
929 MASSACHUSETTS AVENUE	HONE	COBLIC	FROGRAM BUTFORT	
CAMBRIDGE, MA 02138				
CAMBRIDGE YMCA	NONE	PUBLIC	PROGRAM SUPPORT	
320 MASSACHUSETTS AVENUE		1		
CAMBRIDGE, MA 02139			-	
]		
CAPE ANN FAMILIES	NONE	PUBLIC	PROGRAM SUPPORT	
302 ESSEX AVENUE		1		
GLOUCESTER, MA 01930				
CAREER COLLABERATIVE	NONE	DIIBI TO	DDUCETM GILDDUDG	
77 SUMMER STREET, 11 FLOOR	HONE	PUBLIC	PROGRAM SUPPORT	†
BOSTON, MA 02110				2,500
CASA NUEVA VIDA	NONE	PUBLIC	PROGRAM SUPPORT	
53 GLEN ROAD				}
JAMAICA PLAIN, MA 02130		<u> </u>		6,000

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
Recipient	If recipient is an individual.	Ţ	 	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
			1	
CASPAR	NONE	PUBLIC	PROGRAM SUPPORT	
P.O. BOX 45538	}			
SOMERVILLE, MA 02145	 		+	
CHILDREN'S FRIEND AND FAMILY SERVICE	NONE	PUBLIC	PROGRAM SUPPORT	
110 BOSTON STREET				
SALEM MA 01970			+	
CITY MISSIONARY SOCIETY	NONE	PUBLIC	PROGRAM SUPPORT	
14 BEACON STREET #203	•			
BOSTON, MA 02108	 			6,000
COLLEGE BOUND	NONE	DUDI TO	PROGRAM SUPPORT	
18 SAMOSET DR	NONE	PUBLIC	PROGRAM SUPPORT	
DORCHESTER, MA 02124				3,000
		1		
COMMUNITY ADVOCAY PROGRAM	NONE	DIED TO	DECODAN GUDDODE	
716 COLUMBUS PLACE #398	NONE	PUBLIC	PROGRAM SUPPORT	
ROXBURY, MA 02120		<u> </u>		
COMMUNITY COOKS	NONE	PUBLIC	PROGRAM SUPPORT	
ONE SUMMER STREET				
SOMERVILLE, MA 02143	-	 		3,000
COMMUNITY COUNSELING OF BRISTOL	NONE	PUBLIC	FINANCIAL ASSISTANCE	
COUNTY				
ONE WASHINGTON STREET				
TAUNTON, MA 02780	 	 	+	
COMMUNITY DAY WALTHAM	NONE	PUBLIC	PROGRAM SUPPORT	
34 ALDER STREET				
WALTHAM, MA 02453	-	ļ	 	·
COMMUNITY NURSE AND HOSPICE	NONE	PUBLIC	PROGRAM SUPPORT	
62 CENTER STREET				
FAIRHAVEN, MA 02719	 		+	
COMMINITARY CERTIFICA	VOVE		December gypness	
COMMUNITY SERVINGS 18 MARBURY TERRACE	NONE	PUBLIC	PROGRAM SUPPORT	
JAMAICA PLAIN, MA 02130		<u>}</u>		7,500
Total from continuation sheets				

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
		,		
COMMUNITY TEAMWORK INC	NONE	PUBLIC	PROGRAM SUPPORT	
167 DUTTON STREET		}		
LOWELL, MA 01852	 	 	+	-
COLUMNIA IN CALVO NOVOD	2007			
CRITTENTON HASTING HOUSE 11 PERTHSIRE ROAD	NONE	PUBLIC	PROGRAM SUPPORT	
BRIGHTON MA 02135		1		
DISMAS HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	
P.O. BOX 30125				
WORCESTER, MA 01603				
ELIZABETH STONE HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	
P.O. BOX 300039		}		1
JAMAICA PLAIN, MA 02130		 		
EMERGE 2464 MASSACHUSETTS AVENUE #101	NONE	PUBLIC	PROGRAM SUPPORT	
2464 MASSACHUSETTS AVENUE #101 CAMBRIDGE MA 02140				5,000
EXECUTIVE SERVICE CORP	NONE	DUDI TO	DROCESM CUDDORM	
38 CHAUNCEY STREET #802	NONE	PUBLIC	PROGRAM SUPPORT	
BOSTON, MA 02111		<u> </u>		ļ
				}
FAMILIES FIRST	NONE	PUBLIC	PROGRAM SUPPORT	
99 BISHOP ALLEN DRIVE		}		
CAMBRIDGE, MA 02139		 	 	4,000
				}
FAMILY AID	NONE	PUBLIC	PROGRAM SUPPORT	
17 EAST STREET				7 000
BOSTON, MA 02111		 		7,000
POOD FOR THE WART	MONE	DIIDI TO	DDOODAM GUDDOOT	
FOOD FOR THE WORLD 516 ESSEX ST	NONE	PUBLIC	PROGRAM SUPPORT	}
LAWERENCE MA 01841				1,000
FAMILY TO FAMILY	NONE	PUBLIC	PROGRAM SUPPORT	
14 BEACON STREET #202				
BOSTON MA 02108				1,000
Total from continuation sheets				

THE FI	REDERICK .	E. WEBER	CHARITIES	CORP.	04-2133244
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Part XV Supplementary Information				₁
3 Grants and Contributions Paid During the Y Recipient	ear (Continuation) If recipient is an individual,			ļ
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or śubstantial contributor	recipient		
FOOD BANK OF WESTERN MASSACHUSETTS 97 NORTH HATFIELD ROAD HATFIELD, MA 01038	NONE	PUBLIC	PROGRAM SUPPORT	4,000
FOOD FOR PREE COMMITTEE 11 INMAN STREET CAMBRIDGE, MA 02138	NONE	PUBLIC	PROGRAM SUPPORT	12,000
FOOD PROJECT 10 LEWIS STREET LINCOLN. MA 01773	NONE	PUBLIC	PROGRAM SUPPORT	3,000
FRIDAY NIGHT SUPPER PROJECT 351 BOYLSTON STREET BOSTON, MA 02116	NONE	PUBLIC	PROGRAM SUPPORT	4,500
FRIENDSHIP WORKS 105 CHAUNCY STREET STE 801 BOSTON, MA 02111	NONE	PUBLIC	PROGRAM SUPPORT	
GENERATIONS INCORPORATED 25 KINGSTON STREET #4F BOSTON, MA 02111	NONE	PUBLIC	PROGRAM SUPPORT	7,000
GUIDANCE CENTER 5 SACRAMENTO STREET CAMBRIDGE, MA 02138	NONE	PUBLIC	PROGRAM SUPPORT	
HALE HOUSE 273 CLARENDON ST BOSTON, MA 02116	NONE	PUBLIC	2000 PROGRAM SUPPORT	1,000
HAWC-HEALING ABUSE WORKING FOR CHANGE 27 CONGRESS STREET, STE 201 SALEM, MA 01970	NONE	PUBLIC	PROGRAM SUPPORT	2,000
HEARTH 1640 WASHINGTON STREET BOSTON MA 02118	NONE	PUBLIC	PROGRAM SUPPORT	

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor HESSCO NONE PUBLIC PROGRAM SUPPORT 1 MERCHANT STREET #106 SHARON, MA 02067 HGRM NONE PUBLIC PROGRAM SUPPORT 530 MAIN STREET ACTON MA 01720 HOME FOR LITTLE WANDERERS NONE PUBLIC PROGRAM SUPPORT 271 HUNTINGTON AVE BOSTON, MA 02115 HOUSEHOLD GOODS RECYCLING MINISTRY NONE PUBLIC PROGRAM SUPPORT 530 MAIN STREET ACTON MA 01720 10,000. HOUSING FAMILIES NONE PUBLIC PROGRAM SUPPORT 354 CROSS STREET 10,000. MALDEN, MA 02148 HOUSING SOLUTIONS NONE PUBLIC PROGRAM SUPPORT 169 SUMMER ST KINGSTON, MA 02364 1,000. INTERFAITH SOCIAL SERVICES NONE PUBLIC PROGRAM SUPPORT 105 ADAMS STREET 7,000. QUINCY, MA 02169 KIT CLARK SENIOR SERVICES NONE PUBLIC PROGRAM SUPPORT 1500 DORCHESTER AVE DORCHESTER MA 02122 LITTLE BROTHERS NONE PUBLIC PROGRAM SUPPORT 3305 WASHINGTON STREET JAMAICA PLAIN, MA 02130 MASS COALITION FOR THE HOMELESS NONE PUBLIC PROGRAM SUPPORT 15 BUBIER STREET LYNN MA 01901 5,000. Total from continuation sheets

04-2133244

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
MATCH-UP 105 CHAUNCY STREET BOSTON, MA 02111	or substantial contributor	recipient PUBLIC	PROGRAM SUPPORT	
MERRIMACK VALLEY CATHOLIC CHARITIES 221 PAWTUCKET BLVD LOWELL MA 01854	none	PUBLIC	PROGRAM SUPPORT	
MERRIMACK VALLEY FOOD BANK 735 BROADWAY STREET LOWELL, MA 01854	NONE	PUBLIC	PROGRAM SUPPORT	
MERRIMACK VALLEY HOUSING PTNR 10 KIRK STREET LOWELL, MA 01852	NONE	PUBLIC	PROGRAM SUPPORT	3,00
MISSION OF DEEDS 5 CHAPIN AVENUE READING, MA 01867	NONE	PUBLIC	PROGRAM SUPPORT	7,00
MISSION SAFE: A NEW BEGINNING 1481 TREMONT STREET ROXBURY CROSSING, MA 02120	NONE	PUBLIC	PROGRAM SUPPORT	
NUESTRA COMMUNIDAD DEVELOPMENT CORP 56 WARREN STREET SUITE 200 ROXBURY, MA 02119	NONE	PUBLIC	PROGRAM SUPPORT	
ON COMMON GROUND 153 SOUTH MAIN STREET ATTLEBORO, MA 02703	NONE	PUBLIC	PROGRAM SUPPORT	5,00
ONE FAMILY SCHOLARS 186 SOUTH STREET BOSTON, MA 02111	NONE	PUBLIC	PROGRAM SUPPORT	
OPEN PANTRY 200 CENTRAL STREET LOWELL, MA 01852	NONE	PUBLIC	PROGRAM SUPPORT	

3 Grants and Contributions Paid During the				<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (nome of business)	any foundation manager or substantial contributor	recipient		
OPERATION ABLE OF GREATER BOSTON	NONE	PUBLIC	PROGRAM SUPPORT	
31 TREMONT ST #301	}	Ì	}	
SOSTON, MA 02111		 	+	6,00
PARENT CHILD HOME PROGRAM	NONE	PUBLIC	PROGRAM SUPPORT	
0 PERTHSHIRE ROAD				
BOSTON, MA 02135				2,50
PARENTING JOURNEY	NONE	PUBLIC	PROGRAM SUPPORT	
666 SOMERVILLE AVENUE				
SOMERVILLE, MA 02143			+	2,50
PARENTS HELPING PARENTS	NONE	PUBLIC	PROGRAM SUPPORT	
LOS WATER STREET				
NATERTOWN, MA 02472			 	3,00
PARENT FAMILY HEALTH SERVICES	NONE	PUBLIC	PROGRAM SUPPORT	
237 MILLBURY ST WORCESTER MA 01610				
OKCEDIEK, MA UTUTU				
PINE STREET INN	NONE	PUBLIC	PROGRAM SUPPORT	
444 HARRISON AVE				
30STON, MA 02118			+	
PROJECT HOPE	NONE	PUBLIC	PROGRAM SUPPORT	
5 MAGNOLIA ST	Nonz		ROGIGET BOTTONT	
OXBURY, MA 02125				
RESOURCE PARTNERSHIP	NONE	PUBLIC	PROGRAM SUPPORT	
251 W. CENTRAL STREET, SUITE 31	HONE	FOREIC	PROGRAM SUFFORT	
ATICK MA 01760			+	
REPOND	NONE	DURI TO	DDOGDAN GUDDOOT	,
RESPOND P.O. BOX 555	NONE	BABTIC	PROGRAM SUPPORT	
SOMERVILLE, MA 02143		<u> </u>		6,0
SCHOOL ON WHEELS	NONE	PUBLIC	PROGRAM SUPPORT	
331 PLEASANT STREET BROCKTON MA 02301				5,0
Total from continuation sheets	l			1

3 Grants and Contributions Paid During the				
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	Condition	
COV CONSCIUTENT TO LIVED COTTO TO COV				
SCM COMMUNITY TRANSPORTATION 167 HOLLAND STREET	NONE	PUBLIC	PROGRAM SUPPORT	
SOMERVILLE, MA 02144]	1	
SELF ESTEEM	none	PUBLIC		
P. O. BOX 301155			1	
JAMAICA PLAIN, MA 02130	 	-	 	2,500
SOMERVILLE CAMBRIDGE ELDER SERVICES	NONE	PUBLIC	PROGRAM SUPPORT	
61 MEDFORD STREET			Thousan Dorrows	
SOMERVILLE, MA 02143	ļ			
SOMERVILLE CORP	NONE	PUBLIC	PROGRAM SUPPORT	
337 SOMERVILLE AVE.				
SOMERVILLE, MA 02143			 	
SOMERVILLE MENTAL HEALTH ASSOCISTION	NONE	PUBLIC	PROGRAM SUPPORT	
63 COLLEGE AVE SOMERVILLE, MA 02144				
SOUTH BOSTON NEIGHBORHOOD HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	
136 H STREET				
SOUTH BOSTON, MA 02127	 			
SOUTH SHORE COMM ACTION COUNCIL	NONE	PUBLIC	PROGRAM SUPPORT	
265 SOUTH MEADOW ROAD PLYMOUTH, MA 02360				3,000
SOUTH SHORE HOUSING	NONE	PUBLIC	PROGRAM SUPPORT	
169 SUMMER ST		1		•
KINGSTON, MA 02364	 	 		
	1			
SPRINGFIELD RESCUE MISSION	NONE	PUBLIC	PROGRAM SUPPORT	
19 BLISS STREET				
SPRINGFIELD, MA 01101	1	 		
ST ELIZABETH'S HOSPITAL	NONE	PUBLIC	FINANCIAL ASSISTANCE &	
736 CAMBRIDGE ST			REVOLVING FUND	
BRIGHTON, MA 02135	<u> </u>			
Total from continuation sheets			(_	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
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		
	1	}		
ST FRANCIS HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	{
39 BOYLSTON ST				4
BOSTON, MA 02116		<u> </u>	<u> </u>	1,000,
				1
ST JOSEPH'S FOOD PANTRY	NONE	PUBLIC	DDOCEAN CUDDODE	ļ
15 HAWTHORNE BLVD	HONE	POBLIC	PROGRAM SUPPORT	
SALEM, MA 01970				<u></u>
ST JOSEPH'S FOOD PANTRY	NONE	PUBLIC	PROGRAM SUPPORT	1
13 FRANKIN ST SALEM, MA 01970				[
SAMM, IN VI)/V		 	 	,
		·		1
STAR HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	1
323 REAR ELLIOT STREET				1
BEVERLY, MA 01915		 	 	
				l
STARLIGHT MINISTRIES	NONE	PUBLIC	PROGRAM SUPPORT	
2 SAN JUAN STREET				1
BOSTON, MA 02118	 	 		
				1
STRIVE	NONE	PUBLIC	PROGRAM SUPPORT	
651 WASHINGTON STREET				
DORCHESTER, MA 02124		ļ		
THE FOOD BANK OF WESTERN	MONE	DUDI TO	DDOGDAM GUDDODE	1
MASSACHUSETTS	NONE	PUBLIC	PROGRAM SUPPORT	ļ
PO BOX 160				
HATFIELD, MA 01038				
		}		1
MUR ROOD DROTECH	NONE	D	DDOGDAN GUDDODE	1
THE FOOD PROJECT 555 DUDLEY STREET	NONE	PUBLIC	PROGRAM SUPPORT	1
DORCHESTER MA 02125				_
THE FOOD PROJECT	NONE	PUBLIC	PROGRAM SUPPORT	
DORCHESTER, MA 02119				
	<u> </u>	1		
THE GUIDANCE CENTER	NONE	BABFIC	PROGRAM SUPPORT	
5 SACRAMENTO STREET				
CAMBRIDGE MA 02138 Total from continuation sheets		.1		
Total Hom politification Succes				

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
		}		ļ
THE KID'S FUND	NONE	PUBLIC	PROGRAM SUPPORT	1
801 MASSACHUSETTS AVE				ł
BOSTON, MA 02118		 		
				}
THE SAMARITANS	NONE	PUBLIC	PROGRAM SUPPORT	}
141 TREMONT STREET				<u> </u>
BOSTON, MA 02111	_	 	-	
UNITED SOUTH END SETTLEMENTS	none	PUBLIC	PROGRAM SUPPORT	
566 COLUMBUS AVE				
BOSTON MA 02118		 		
VICTORY PROGRAMS 965 MASS AVE	NONE	pubric	PROGRAM SUPPORT	
BOSTON, MA 02118				
WALTHAM FIELDS COMMUNITY FARM	NONE	PUBLIC	PROGRAM SUPPORT	
240 BEAVER STREET	HONE	FORBIC	PROGRAM SOFFORT	
WALTHAM, MA 02452		<u> </u>		3,000.
WEATOC INC.	NONE	PUBLIC	PROGRAM SUPPORT	
1865 COLUMBUS AVENUE				
ROXBURY, MA 02119				
WELLMET PROJECT	NONE	PUBLIC	PROGRAM SUPPORT	
130 BISHOP ALLEN DRIVE]		ļ
CAMBRIDGE MA 02139		 	 	
				•
WELLSPRING HOUSE	NONE	PUBLIC	PROGRAM SUPPORT	
302 ESSEX AVE				
GLOUCESTER, MA 01930				4,000.
WOMEN'S LUNCH PLACE	NONE	PUBLIC	PROGRAM SUPPORT	
67 NEWBURY STREET BOSTON MA 02116				5,000.
20210H, PM 02110			 	5,000.
MOMPNE OPNINCE	VONE	DIDI T.	DDOGDAM GUDDOTT	ļ
WOMENS CENTER 46 PLEASANT STREET	NONE	PUBLIC	PROGRAM SUPPORT	1
CAMBRIDGE MA 02139				1
Total from continuation sheets				

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
,				
YOUTH AND FAMILY	none	PUBLIC	PROGRAM SUPPORT	ļ
1234 HYDE PARK AVENUE #104		ļ		1
BOSTON, MA 02136-2819				
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Total from continuation sheets	<u> </u>			+

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SECU	RITIES	STA	TEMENT	1
SOURCE	GROSS AMOUNT	CAPIT. GAIN DIVIDE	S	(A) REVENUE PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTI NET INCO	
CONSTITUTION PARTNERS	17,801.	16	777.	1,024	. 1,0	24	1,0	24.
KENDALL PRIVATE								
EQUITY III METRO RE PARTNERS	5,355.	3,	809.	1,546	. 1,5	46.	1,5	46.
GLOBAL II METRO RE PARTNERS	18,257.	17,	709.	548	. 5	48.	5	48.
IV	2,895.	2,	440.	455	. 4	55.	4	55.
SIGULER GUFF BRIC OPP SIGULER GUFF	7,840.	5,	049.	2,791	. 2,7	91.	2,7	91.
DISTRESSED TIMBERVEST	7,881.	6,	598.	1,283	. 1,2	83.	1,2	83.
PARTNERS II VANGUARD CAPITAL	4,459.	3,	808.	651	. 6	51.	6	51.
STOCK	43,963.		0.	43,963	. 43,9	63.	43,9	63.
VANGUARD FIXED INCOME VANGUARD	54,206.		0.	54,206	. 54,2	06.	54,2	06.
INTERNATIONAL STOCK	25,190.		0.	25,190	. 25,1	90.	25,1	90.
VANGUARD MONEY MARKET	106.		0.	106	. 1	06.	1	06.
TO PART I, LINE 4	187,953.	56,	190.	131,763	. 131,7	63. ======	131,7	63.
FORM 990-PF		OTHER	INCO	ME		STA	TEMENT	2
				(A)	(B)		(C)	
DESCRIPTION			RE	VENUE	NET INVEST		ADJUSTE ET INCO	
METRO RE PARTNERS G	LOBAL II	-		-99.	-9	9.		0.
CONSTITUTION PARTNE				-633.	-63			0.
KENDALL PRIVATE EQU				-140.				0.
METRO RE PARTNERS I SIGULAR GUFF BRIC O				-219. 3,930.				0.
SIGULAR GUFF BRIC O SINGULAT GUFF DISTR				3,930. 753.	•			0.
TIMBERVEST PARTNERS				-3,847.				0.
TOTAL TO FORM 990-P	ד חסגם ים	. TNT 11		-255.	-25			0.

				
FORM 990-PF	ACCOUNTI	NG FEES	S1	'ATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	6,500.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 16B	6,500.	0.	0.	0.
FORM 990-PF (OTHER PROFES	SIONAL FEES	ST	'ATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISER FEES PARTNERSHIP EXPENSES	0. 0.	16,329. 7,239.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	0.	23,568.	0.	0.
FORM 990-PF	TAX	ES	Sī	'АТЕМЕМТ 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	1,875.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	1,875.	0.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Sī	'ATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES INSURANCE TELEPHONE EXCISE TAX EXPENSE	1,400. 3,361. 1,535. 1,701.	0. 0. 0.	0. 0. 0.	0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	7,997.	0.	0.	0.

FORM 990-PF	OTHER INVESTMENTS		STAT	EMENT	7
DESCRIPTION	VALUATION METHOD	BOOK VALU		FAIR MARKET VALUE	
MUTUAL FUND INVESTMENTS-SEE	FMV				
ATTACHED REAL ESTATE FUNDS-SEE ATTACHE	D FMV		86,872. 5,158,206 04,425. 201,979		
OTHER/HEDGE FUNDS-SEE ATTACHE	·	204,425. 536,483.		658,904.	
TOTAL TO FORM 990-PF, PART II	, LINE 13	5,627,7	80. 6	6,019,089.	
	LIST OF OFFICERS, D		STAT	EMENT	8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENS	
THANDA BRASSARD 22 THORNTON ROAD NEEDHAM, MA 02492	PRESIDENT 10.00	0.	0.		0.
JAY SCOLLINS 120 POKANOKET PATH WRENTHAM, MA 02092	TREASURER 5.00	0.	0.		0.
ELIZABETH AGUILO	CLERK				
47 DORCHESTER STREET SOUTH BOSTON, MA 02127	5.00	0.	0.		0.
AMY BERNSTEIN	TRUSTEE				
14 COMMONWEALTH CT APT 12 BRIGHTON, MA 02135	1.00	0.	0.		0.
TIMOTHY CRUTCHFIELD	TRUSTEE				
90A WEST CEDAR ST APT 3 BOSTON, MA 02114	1.00	0.	0.		0.
ELIZABETH GERLACH	TRUSTEE				
73 FISHER AVE NEWTON, MA 02461	1.00	0.	0.		0.
KEVIN QUEALLY	TRUSTEE				
45 WILLIAM ST SUITE 130 WELLESLEY, MA 02481	1.00	0.	0.		0.

THE FREDERICK E. WEBER CHARITIES	CORP.		04-2133244	
AMY STEIN 88 CHILTON ST CAMBRIDGE, MA 02148	TRUSTEE 1.00	0.	0.	0.
IGOR TIGUY 9 POND LN SUITE 3A CONCORD, MA 01742	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

THANDA BRASSARD, PRESIDENT 89 SOUTH STREET SUITE 203 BOSTON, MA 02111

TELEPHONE NUMBER NAME OF GRANT PROGRAM

(617)292-6264 ALL AWARDED GRANTS SEE PART XV LINE 3

FORM AND CONTENT OF APPLICATIONS

FOR GRANTS TO AGENCIES: ALL APPLICANTS MUST INCLUDE:

- 1.A COVER LETTER DESCRIBING THE AMOUNT AND PURPOSE OF THE GRANT BEING REQUESTED. A GRANTEE IS EXPECTED TO PROVIDE A REPORT ON THE USE OF THE FUNDS FOLLOWING THE END OF THE PREVIOUSLY AWARDED GRANT PERIOD. GRANT REPORTS MUST BE SUBMITTED ALONG WITH NEW REQUESTS FOR FUNDS. REPORTS SHOULD CLEARLY STATE THE GOALS AND OBJECTIVES OF THE PROJECT AND THE PROGRESS MADE TOWARD ACHIEVING THESE GOALS AND
- 2.A DETAILED PROPOSAL NARRATIVE DESCRIBING THE PROJECT OR PROGRAM TO BE FUNDED (AGM FORMAT ACCEPTED).
- 3.AS EXHIBITS:
- A COPY OF THE IRS DETERMINATION LETTER UNDER SECTION 501(C) 3
- PERSONAL RESUME OF THE PRINCIPAL ADMINISTRATOR OF THE PROJECT OR PROGRAM

ANY SUBMISSION DEADLINES

PROPOSALS MAY BE SUBMITTED AT ANY TIME AND THEIR RECEIPT WILL NOT BE ACKNOWLEDGED IN WRITING.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS ARE MADE TO 501(C)3 TAX-EXEMPT ORGANIZATIONS THAT SERVE LOW-INCOME, MINORITIES, CHILDREN, FAMILIES AND THE ELDERLY AND THAT ADDRESS CORE ISSUES OF HOUSING AND HOMELESSNESS, JOB TRAINING, EDUCATION AND SUPPORT, FOOD DISTRIBUTION AND EMERGENCY CLIENT ASSISTANCE.

THE FOUNDATION MAKES GRANTS TO FEDERALLY TAX QUALIFIED NON-PROFIT ORGANIZATIONS IN MASSACHUSETTS BENEFITTING LOW-INCOME PEOPLE.

GRANTS ARE MADE TO ORGANIZATIONS IN THE GREATER BOSTON AREA AND OTHER UNDERSERVED COMMUNITIES IN MASSACHUSETTS.

GRANTS ARE MADE TO NON-PROFIT ORGANIZATIONS FOR PROGRAM SUPPORT AND SPECIAL PROJECTS. GRANTS ARE ALSO MADE FOR CAMPERSHIPS AND EMERGENCY CLIENT ASSISTANCE FUNDS.

GRANTS ARE NOT MADE FOR CAPITAL PROJECTS OR ENDOWMENTS, ANNUAL APPEALS,

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A - 2D (CONTINUATION)

STATEMENT 10

NAME OR DESCRIPTION OF GRANT PROGRAM

ALL AWARDED GRANTS SEE PART XV LINE 3

FORM AND CONTENT OF APPLICATIONS

- C. A PROGRAM AND AGENCY BUDGET
- D. A LIST OF OTHER SOURCES OF SUPPORT FOR THE PROJECT OR PROGRAM
- E. CURRENT LIST OF BOARD MEMBERS WITH RELEVANT BACKGROUND, AFFILIATIONS AND PLACES OF RESIDENCE
- F. AUDITED FINANCIAL STATEMENTS FOR THE MOST RECENT YEAR
- G. REPORT ON LAST GRANT

RESTRICTIONS AND LIMITATIONS ON AWARDS

MEMBERSHIPS, CONFERENCES, OR RESEARCH PROJECTS UNLESS BY SPECIAL EXCEPTION.