EXTENDED TO MAY 15, 2018

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

		nt of the Treasury	► Do not enter: Information about Fore	social security numbers or n 990-PF and its separate	ithis form as it may be ma instructions is at www.irs	ade public. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Open to Public Inspection
		ndar year 2016 or tax yea	ar beginning JUL	1, 2016	, and ending	JUN 30, 2017	
Na	me o	f foundation				A Employer identification	number
_		TH FAMILY T					
			L. MURPHY JR		05-6091467		
		·	r if mail is not delivered to street	Room/suite	B Telephone number		
-		MAIN STREE		401-782-44	88		
			ountry, and ZIP or foreign p	ostal code		C If exemption application is po	ending, check here
		EFIELD, RI	02879				
G (ineci	call that apply:	_ Initial return ☐ Final return	Amended return	ormer public charity	D 1. Foreign organizations	, cneck nere
		-	Address change	Name change	,	Foreign organizations me check here and attach con	eting the 85% test,
H 1	heck	k type of organization;		empt private foundation		1	
		ection 4947(a)(1) nonexer		Other taxable private found:	ation OM	E If private foundation stat under section 507(b)(1)	
			t end of year J Accounti		Accrual	F If the foundation is in a 6	
		Part II, col. (c), line 16)	· —	her (specify)		under section 507(b)(1)	
	\$	1,09	3,249. (Part I, colu	mn (d) must be on cash i	basis.)		
P	art I	Analysis of Revenue a	ind Expenses lumns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amou	unts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grai				ļ	
	2	Check X if the foundate			<u> </u>		
	-3	Interest on savings and temp		20 017	20 017	20.017	G T T T T T T T T T T T T T T T T T T T
	4	Dividends and interest fr	rom securities	30,017.	30,017.	30,017.	STATEMENT 1
•	1.	Gross rents			<u> </u>	RECEIVEL	
	١	Net rental income or (loss)	f accepts and on loca 10	36,065.		The second secon	ŤØ
Jue	6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all 229, 224.			30,003.		8 IAN 0 3 ZUI	
Revenue	7	Capital gain net income (fron			36,065.	(I)	<u> </u>
æ	8	Net short-term capital ga			3070000	OG0E544J.	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					i
	C	Gross profit or (loss)					
	11	Other income		66.000	66 000	40 564	
_	12	Total. Add lines 1 throu		66,082.	66,082.	40,561.	
	13	Compensation of officers, di		28,000.	14,000.	14,000.	0.
	14	Other employee salaries Pension plans, employee	•				
es		Legal fees	STMT 2	5,110.	5,110.	0.	0.
ens	b	Accounting fees	STMT 3	5,500.	5,500.	0.	0.
χĎ	ء ا	Other professional fees	U		2,200.		
Ve	17	Interest					
Operating and Administrative Expenses	18	Taxes	STMT 4	42.	42.	0.	0.
nist	19	Depreciation and depleti	on				
Ę	20	Occubancy					
Ă	21	Travel; conferences, and					· · · · · · · · · · · · · · · · · · ·
æ	22	Printing and publications		150	150	`	
ting	23	Other expenses Total operating and adr	STMT 5	150.	150.	0.	0.
era	24	ANT		38,802.	24 002	14 000	0
Ö	25	expenses. Add lines 13 Contributions, gifts, gran	•	66,098.	24,802.	14,000.	66,098.
	1	Total expenses and dis	·	00,000			00,000.
	-•	Add:lines 24 and 25		104,900.	24,802.	14,000.	66,098.
	27	Subtract line 26 from lin	e 12:				
	a	いし Excess of revenue over expe	enses and disbursements	<38,818.	<u>></u>		
	b	Net investment income	(if negative, enter -0-)		41,280.		
		Adjusted net income (if i				26,561.	
6235	01 11	1-23-16 LHA For Pape	rwork Reduction Act Notice	e, see instructions.			Form 990-PF (2016)

NORTH FAMILY TRUST

C/O M. HOGAN, L. MURPHY JR.

Form 990-PF (2016)

Fo	m 99	90-PF (2016) C/O M. HOGAN, L. MURPHY		05-	6091467 Page 2
Part II Balance Sheets Attached schedules and amounts in the description Beginning of year Column should be for end-of-year amounts only		End o			
_	1 1		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing			
	1	Savings and temporary cash investments	110,888.	91,719.	91,719.
	3	Accounts receivable -			'
	1	Less; allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable	<u> </u>		<u> </u>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	l _	Less: allowance for doubtful accounts			
ssets	8	Inventories for sale or use			<u> </u>
Ass	9				
•	i i	Investments - U.S. and state government obligations	060 250	040 500	4 004 500
	į.	Investments - corporate stock STMT 6	962,358.	942,709.	1,001,530.
		Investments - corporate bonds			
	11	_ \\			
	40	Less accumulated depreciation	·		
		Investments - mortgage loans			
	13	Investments - other			
	14	_			
	45	Less accumulated depreciation			
	1	Other assets (describe			
	וסו	Total assets (to be completed by all filers - see the	1 072 246	1,034,428.	1 002 240
_	17	Instructions. Also, see page 1, item I) Accounts payable and accrued expenses	1,073,240.	1,034,420.	1,093,249.
	18	Grants payable			!
6 0	19	Deferred revenue	*		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	"		j
Ē	21	Mortgages and other notes payable			
Ë	ı	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	l ·
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
Ba	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here	1		! !
Ē		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	1,982,752.	<u>1,982,752.</u>	1
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	\$
Ä	29	Retained earnings, accumulated income, endowment, or other funds	<909,506.		>
Š	30	Total net assets or fund balances	1,073,246.	1,034,428.	
	 		1 072 246	1 024 400	* · · · · · · · · · · · · · · · · · · ·
_	31	Total liabilities and net assets/fund balances	1,073,246.	1,034,428.	·
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30	<u> </u>	
		st agree with end-of-year figure reported on prior year's return)		11	1,073,246.
		r amount from Part I, line 27a		2	<38,818.>
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,034,428.
5	Decr	eases 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, co	lumn (b), line 30	6	1,034,428.
					Form QQ0-DE (2016)

05-6091467

C/O M. HOGAN, L. MURPHY JR.

Part IV Capital Gains	and Lo	sses for Tax on In	vestmen	t Income						
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					How acquired - Purchase - Donation		c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a					<u> </u>					
b SEE ATTACHED	STAT	TEMENT			 —		-			
<u>c</u>					├		+	 _	 	
<u>d</u>					├		+		 	
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo (e) plus (f) minu		
a										
b						 _ 				
С	ļ					<u> </u>				
<u>d</u>	 									
e 229,224.			t - f d - b	193,15	9.	<u> </u>			36,065	
Complete only for assets shown							(I) G	iains (Col. (h) ga c), but not less th	in minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)				(k), but not less than -0-) or Losses (from col. (h))		
<u>a</u>	 									
<u>b</u>	 									
<u>C</u>	}									
<u>d</u>	 								36,065	
<u>e</u>	l				\neg	T	<u>_</u>		30,003	
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7						36,065				
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).						10,544				
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estment l	nco	me	10,344	
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quation to the the appropriate amount in	tion 4942 t	tax on the distributable am section 4940(e). Do not co	mplete this pa	ert.					Yes X No	
(a)		(b)	34 2040113 20	lore making any c		<u>- </u>			(d)	
Base periód years Calendar year (or tax year beginni	ing in)	Adjusted qualifying dist		Net value of no				Distr (col. (b) c	ribùtión ratio divided by col. (c))	
2015			5,689. 7,838.	,		,061,68			.05245	
2014 2013			$\frac{7,838.}{2,711.}$, <u>252,12</u> , <u>296,5</u> (.05417	
2013			2,837.			$\frac{154}{154}$.04836 .04577	
2012			4,184.	r - 	- <u>+</u>	$\frac{134}{181}$.05431	
2011			<u> </u>		_=	, , , ,			.03431	
Total of line 1, column (d)Average distribution ratio for the	5-vear bas	e period - divide the total o	n line 2 by 5.	or by the number	of ve	 ars	i	2	.25508	
the foundation has been in existe	-	•		or by the number	0. ,0	uio		3	.05101	
4 Enter the net value of noncharitat	ole-use ass	ets for 2016 from Part X, I	ine 5				i	4	1,095,302	
5 Multiply line 4 by line 3								5	55,879	
6 Enter 1% of net investment incor	ne (1% of I	Part I, line 27b)						6	413	
7 Add lines 5 and 6								7	56,292	
8 Enter qualifying distributions fror	n Part XII,	line 4						8	66,098	
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, ch	eck the box in Part VI, line	1b, and comp	elete that part usin	g a 19	% tax rate.				
623521 11-23-16									Form 990-PF (20)	

NORTH FAMILY TRUST

	n 990-PF (2016) C/O M. HOGAN, L. MURPHY JR. art VI Excise Tax Based on Investment Income (Section 4940)	(a)	40	940(b) 494(Nel or 4	05-	6091	L467	ıctio	Page 4	<u>4</u>
	Exempt operating foundations described in section 4940(d)(2), check here and en)	1	300	111361	40 tio	113)	_
	Date of ruling or determination letter: (attach copy of letter if nece]					,
ŀ	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%								4	13.	-
-	of Part I, line 27b									<u> </u>	- ,
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pari	11.	. line 12. col. (b)							
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)								-	0.	ı
3	Add lines 1 and 2			,		3			4	13.	_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ners er	nte	er -0-)		4				0.	<u>'</u> -
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	1013 01		01 0)		5			Λ	13.	<u>'</u> -
6	Credits/Payments;					 -				<u> 10.</u>	7
Ů,	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1		644.	·					•
	Exempt foreign organizations - tax withheld at source	- 6b	╁╌		044.	{					1
			+								1
	Tax paid with application for extension of time to file (Form 8868)	6c	+			1					!
	Backup withholding erroneously withheld Tetal gradita and neumants. Add less So through Sd.	<u>6d</u>					-	-	٠ ,	A A .	-1
_	Total credits and payments. Add lines 6a through 6d					7			0	44.	-
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack	nea				8					-
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9	<u> </u>			21	-
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			221 -		10	<u> </u>			<u>31.</u>	<u>-</u>
	Enter the amount of line 10 to be: Credited to 2017 estimated tax Int VII-A Statements Regarding Activities			231. Ref	unded	<u>1</u> 1				0.	-
_									Voc	No	-
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legisla	เนอก อ	or c	aid it participate	or intervene	ın		1a	163		-
	any political campaign?									X	-
0	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?								<u> </u>	_X	-
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	а сор	эie	s of any mater	ials publist	ned or		1			1
	distributed by the foundation in connection with the activities.							1c			
	c Did the foundation file Form 1120-POL for this year?									X	ī
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y				^			1] _		
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers.		_		0.			}	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ire tax	(III	nposed on foun	dation						
_	managers. ▶ \$ 0.										1
Z	Has the foundation engaged in any activities that have not previously been reported to the IRS) (2_	<u></u>	<u>X</u>	7
_	If "Yes," attach a detailed description of the activities.	. 4									l
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in		en	t, articles of inco	rporation, o	r		-			-
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes							3		X	-
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	,				27	/ 3	48		X	-
	If "Yes," has it filed a tax return on Form 990-T for this year?					IA	/ A	4b		37	-
ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year?							5	<u> </u>	X	-
	If "Yes," attach the statement required by General Instruction T.										!
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	er:									
	By language in the governing instrument, or							ì			
	By state legislation that effectively amends the governing instrument so that no mandatory	directi	ЮГ	is that conflict w	ith the state	law]
_	remain in the governing instrument?		_					6		<u> </u>	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete I	Pa	art II, col. (c), a	nd Part XV			7	X		-
_								İ			
Вa	Enter the states to which the foundation reports or with which it is registered (see instructions	s) 🟲									
	RI		_								i
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte	orney	Ge	eneral (or design	ate)]	.	-	
_	of each state as required by General Instruction G? If "No," attach explanation			0/1/01 - 40/01	VE) (8b	X		Λ
9	Is the foundation claiming status as a private operating foundation within the meaning of sect			,)(5) for cale	ndar			77		1
10	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," co.	•						9	X	37	
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	listing	the	err names and addr	esses			10	<u></u>	<u>X</u> _	_

C/O M. HOGAN, L. MURPHY JR.

<u> 12</u>	art VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	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 ► N/A			
14	The books are in care of ► MARGARET L. HOGAN Telephone no. ► 401-7		<u>488</u>	
	Located at ► 344 MAIN STREET, WAKEFIELD, RI ZIP+4 ►0	<u> 2879</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			LX.
	and enter the amount of tax-exempt interest received or accrued during the year			0.
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
<u> </u>	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		5.	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	a During the year did the foundation (either directly or indirectly);			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 }		ı
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1 1		ı
	(5) Transfer any income or assets to a disqualified person (or make any of either available			i
	for the benefit or use of a disqualified person)?	}		i
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	_		
	if the foundation agreed to make a grant to or to employ the official for a period after	1 1		!
	termination of government service, if terminating within 90 days.)		. 1	1
O	o If 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)? Organizations solves on a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	1 1		i
Ü	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?			 '
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		<u>X</u>
_	defined in section 4942(j)(3) or 4942(j)(5)):			į
2	the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 1		i I
•	before 2016? Yes X No	1 1		
	If "Yes," list the years \(\bigcup_{ } \), \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 1	1	1
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 1		į
Ī	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1 1	İ	į
	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.			
		1 1	}	1
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?		i	
b	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after		}	1
	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.) N/A	3b		-
4a	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			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	ľ	X
			DE /	

, NORTH FAMILY TRUST				
Form 990-PF (2016) C/O M. HOGAN, L. MURPHY	JR.		<u>05-60914</u>	67 Page 6
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 indi		[]	}
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	'
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section	┌ ┐	[]	
4945(d)(4)(A)? (see instructions)			es X No	1 1 '
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or	_	[1 2]	
the prevention of cruelty to children or animals?	4. 11 . 1 . 1		es X No	1 1 '
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	in Regulations	37 / 3	
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5 b
Organizations relying on a current notice regarding disaster assistance check I				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?		1/A Y	es Ll 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	\Box	es X No	
a personal benefit contract?		Y6		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal penelit contract?		<u> - </u>	Sb X
If "Yes" to 6b, file Form 8870.	shaltar transaction?		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.		16		7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		<u> </u>
Paid Employees, and Contractors	ccs, i oundation wit	inagers, riigin	•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(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
MARGARET L. HOGAN	TRUSTEE			
344 MAIN STREET, SUITE 200		<u> </u>		
WAKEFIELD, RI 02879	2.00	14,000.	0.	0.
LOUIS G. MURPHY, JR.	TRUSTEE			
ONE TURKS HEAD PLACE, #800	1	l i		
PROVIDENCE, RI 02903	2.00	14,000.	0.	0.
		T		
			ľ	
		<u> </u>		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Cookshirkana ta	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(CI) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(5, 5	compensation	allowances
NONE				
		ļ		
]	
		1	,	
		 		
				
Tetal number of other amployage and over \$50,000	L	1		
Total number of other employees paid over \$50,000			Earre	990-PF (2016)
			ruim :	750-FT (2010)

NORTH FAMILY TRUST

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 services.		(c) Compensation
NONE		(c) compensation
	ļ	
		······································
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A		
1N/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		
	\neg	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
	Forn	n 990-PF (2016)

Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		l 1a	1,018,374.
b	Average of monthly cash balances	1b	93,608.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,111,982.
	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	
3	Subtract line 2 from line 1d	3	1,111,982.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,680.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,095,302.
6	Minimum investment return. Enter 5% of line 5	6	54,765.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	ınd certain	
	foreign organizations check here 🕨 🗶 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5	1	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
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	66,098. 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	66,098.
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	413.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	65,685.
	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

4940(e) reduction of tax in those years.

Part XIII Undistributed	Income (see instructions)	N/A		
,	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from	m Part XI,			
line 7				
2 Undistributed income, if any, as of the e	nd of 2016			
a Enter amount for 2015 only				
b Total for prior years:				
			ļ	
3 Excess distributions carryover, if a	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		-		
4 Qualifying distributions for 2016 fi	rom		 	
Part XII, line 4: >\$	10111			
a Applied to 2015, but not more tha	n line 2a			
b Applied to undistributed income of				<u></u>
years (Election required - see instr	·]	
c Treated as distributions out of cor	· · · · · · · · · · · · · · · · · · ·		 	
(Election required - see instruction				
d Applied to 2016 distributable amo	·		† — — — — — — — — — — — — — — — — — — —	
e Remaining amount distributed out		7.1		
5 Excess distributions carryover applied to	0 2016	·		
(If an amount appears in column (d), the must be shown in column (a))	same amount			
6 Enter the net total of each column indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtra	ct line 5	-		
b Prior years' undistributed income.			 	
line 4b from line 2b			į	
c Enter the amount of prior years'				
undistributed income for which a r deficiency has been issued, or on the section 4942(a) tax has been p assessed	which			
d Subtract line 6c from line 6b. Taxa	ble			
amount - see instructions]		
e Undistributed income for 2015. Su	ubtract line			1. <u>1.</u>
4a from line 2a. Taxable amount -	see instr.			
f Undistributed income for 2016. Su	ubtract			
lines 4d and 5 from line 1. This am	nount must			
be distributed in 2017				
7 Amounts treated as distributions of	out of			
corpus to satisfy requirements imp	posed by	į		
section 170(b)(1)(F) or 4942(g)(3) (Election			
may be required - see instructions)		-	
8 Excess distributions carryover from	m 2011			
not applied on line 5 or line 7				
9 Excess distributions carryover to	l l			
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				
e Excess from 2016				

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed;

SEE STATEMENT 7

- b The form in which applications should be submitted and information and materials they should include;
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Form 990-PF (2016) C/O M. HOGAN, L. MURPHY JR.

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year AN EVEN START IN NEWPORT NONE 501(C)(3) TO SUPPORT CHARITABLE ACTIVITIES 3,250. BIG SISTERS OF AMERICA NONE 504 (C) (3) FUND BIG SISTER 1,875. BOYS & GIRLS CLUB OF NEWPORT COUNTY NONE 501(C)(3) FUND A COLLABORATIVE ART PROGRAM 1,500. BOYS TOWN NEW ENGLAND NONE 501(C)-(-3)----TO-SUPPORT-CHARIATBLE ACTIVITIES FOR CHILDREN IN NEED 1,000. CHILD AND FAMILY SERVICES NONE 501(C)(3) FUND CHARITABLE ACTIVITIES 2 000. Total SEE CONTINUATION SHEET(S) **▶** 3a 66 098. **b** Approved for future payment NONE Total **▶** 3b

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Form 990-PF (2016)

Part XVI-A Analysis of Income-Producing Activities

<u>-</u>	•				
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(c) Exclu- sion	by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	
a	_				
b					
c					
d	1 1				
e	1 1				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	<u> </u>		14	30,017.	
5 Net rental income or (loss) from real estate:			 	30,0271	
a Debt-financed property					
					
Not debt-financed property Net rental income or (loss) from personal			+ +		
property			+ +		*****
7 Other investment income			+ +		
8 Gain or (loss) from sales of assets other			1.0	26 065	
than inventory			18	36,065.	
9 Net income or (loss) from special events			+ +		·
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a					
b					
c	_				
d	_				
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0	•	66,082.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	66,082.
(See worksheet in line 13 instructions to verify calculations.))				
Part XVI-B Relationship of Activities	to the Accom	polishment of F	xempt P	urnoses	
Totalonomp of Activities		.p	.xompt i		
Line No. Explain below how each activity for which in	•	, ,	A contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other than the foundation).	an by providing funds	for such purposes).			
			• • •		
					
					
					

3	0/	Μ.	HOGAN,	L.	MURPHY	JR.

Page 13

Form 990-F		1. HOGAN,					05-60			ige 13
Part X\	Information Re Exempt Organ		nsfers To	and Tr	ansactions	and Relation	ships With Nonch	aritabl	e	
1 Did th	e organization directly or indi		of the follows	ing with a	ny other organizat	ion described in se	ction 501(c) of		Yes	No
	ode (other than section 501(c				-		Clion 50 1(c) or	- 1	103	140
	fers from the reporting found				-			ĺ	[i	Į
(1) C	•			3				1a(1)	-	X
	Other assets							1a(2)		X
	transactions:							1.51.57		
	Sales of assets to a noncharita	ible exempt organiza	ation					1b(1)		Х
	urchases of assets from a no							1b(2)		Х
	Rental of facilities, equipment,		·					1b(3)		Х
(4) R	Reimbursement arrangements	;						1b(4)		X
(5) L	oans or loan guarantees							1b(5)		X
(6) P	erformance of services or me	embership or fundra	ısıng solicitati	ions				1b(6)		X
c Sharır	ng of facilities, equipment, ma	alling lists, other ass	ets, or paid en	mployees				1c		X
d If the	answer to any of the above is	"Yes," complete the	following sch	nedule. Co	lumn (b) should a	lways show the fair	market value of the goods	, other as	sets,	
or ser	vices given by the reporting f	oundation. If the fou	ındatıon recen	ved less ti	nan fair market val	ue in any transactio	on or sharing arrangement	, show in		
colum	nn (d) the value of the goods,			···						
(a) Line no	(b) Amount involved	(c) Name o	f noncharitabl	le exempt	organization	(d) Description	on of transfers, transactions, an	d sharing ar	rangeme	nts
		<u> </u>	<u> N/A</u>			<u></u>				
		 								
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20 lc the	foundation directly or indirec	the affiliated with or	related to one	o or more	tay ayampt argan	rations described				
	tion 501(c) of the Code (othe					izations described		Yes	v	No
	s," complete the following sch		7(3)) 01 111 360	50011 JZ1 ·			l	163	LA.	טאו ב
<u> </u>	(a) Name of org		·	(b) Typ	e of organization		(c) Description of relation	ship		
	N/A	,		1-7-71		 	(-)			—
				1		<u> </u>				
	 		·	 	······	†				
										
	nder penalties of perjury, I declare							lay the IRS of	tiscuss t	his
Sign	nd belief, at is true correct, and cor	nplete Declaration of pr	repare (other tha	an taxpayer	is based on all inforr	nation of which prepare	er nas any knowledge	turn with the	e prepare	¥
Here	Non 190	11/	1		12/27/17	TRUST		X Yes		Νο
	Signature of officer or trustee		<i>'</i>	D	ate	Title	L			
	Print/Type preparer's na	ame (Preparer's s	signature		Date	Check if PTIN			
	MATTHEW BR	ENNAN,			_	12/2/17	self- employed			
Paid	CPA MST		<u></u>			19/17		0437		
Prepare	11111101101110 - 2220	M, LTD.					Firm's EIN ► 05-0	5149	19	
Use On	·									
	Firm's address ► 27						1			
		OVIDENCE,	RI 02	<u> 2904</u>			Phone no. 401-2	<u>273-1</u>	800	

C/O M. HOGAN, L. MURPHY JR. Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a 1000 SHS DUNKIN BRANDS VARIOUS 10/14/16 166 SHS ALCOA 04/16/05|12/09/16 c 1000 SHS BANK OF AMERICA VARIOUS 01/05/17 d 1000 SHS BROOKS AUTOMATION VARIOUS 03/16/17 1500 SHS OLIN CORP 02/07/17 VARIOUS 2000 SHS TRONOX 06/19/17 VARIOUS h i m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 40,350. 50,894 10,544. а 5,067. 5,956. <889.> b 21,760 15,834. <u>5,926.</u> C 78,307 57,202. 21,105. 43,900. 35,172. 8,728. е 29,296 38,645. <9,349.> g h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any * * 10,544. <889.> b 5,926. C <u>21,105.</u> d 8,728. е <9,349.> f g h m n

If gain, also enter in Part I, line 7

If (loss), enter "-0-" in Part I, line 7

2 Capital gain net income or (net capital loss)

If (loss), enter "-0-" in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

36,065.

2

C/O M. HOGAN, L. MURPHY JR.

05-6091467

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of recipient Amount any foundation manager contribution Name and address (home or business) or substantial contributor COMMUNITY BAPTIST CHURCH NONE 501(C)(3) TO FUND CHARITABLE ACTIVITIES 1,500. DR. MARTIN LUTHER KING COMMUNITY NONE 501(C)(3) FUND COMPUTER PURCHASE CENTER 1,000. EAST BAY COMMUNITY ACTION NONE 501(C)(3) TO SUPPORT CHARITABLE ACTIVITIES <u>5,311.</u> FRIENDS OF BALLARD PARK NONE 501(C)(3) FOR THE ENJOYMENT OF ALL NEWPORT RESIDENTS 1,000. GIRL SCOUTS OF RI NONE. 501(C)(3)___ FUND_GIRL_SCOUTS_ 1,350. HOME & HOSPICE CARE OF RI NONE 501(C)(3) CARING FOR THE TERMINALLY ILL 2 625. ISLAND MOVING CO. NONE 501(C)(3) FUND DANCE EDUCATION IN NEWPORT SCHOOLS 1,500. JAMES M MAHER CENTER NONE 501(C)(3) TO SUPPORT CHARITABLE ACTIVITIES 3,162. LOOKING UPWARDS NONE 501(C)(3) TO SUPPORT CHARITABLE ACTIVITIES 2,500. LUCY'S HEARTH NONE 501(C)(3) FUND SERVICES FOR HOMELESS MOTHERS & CHILDREN 2,500. Total from continuation sheets 56 473.

Part XV Supplementary Information	on				
3 Grants and Contributions Paid During the	Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient	Contribution	Amount	
MEALS ON WHEELS OF RI	NONE	501(C)(3)	FUND PROGRAM TO FEED		
			HOME BOUND CITIZENS	3,000.	
NARR COUNCIL BOY SCOUTS	NONE	501(C)(3)	TO FUND BOY SCOUTS		
		ļ		1,500.	
		ļ			
NEWPORT PARTNERSHIP FOR FAMILIES	NONE	TAX EXEMPT	FUND AID FOR FAMILIES		
		ļ		1,500.	
NEWPORT SCHOOL DEPARTMENT	NONE	501(C)(3)	TO SUPPORT CHARITABLE		
			ACTIVITIES	2,000.	
NEWPORT SUBSTANCE ABUSE PREVENTION	NONE	501(C)(3)	FUND DRUG ABUSE		
TASKFORCE			PROGRAM-AT ROGERS-HIGH		
			SCHOOL	2,500.	
PORTSMOUTH FREE PUBLIC LIBRARY	NONE	TAX EXEMPT	FUNDING FOR ADULT		
			EDUCATION AND CULTURAL PROGRAM	1.875.	
			1.001221	2,0,3.	
DOMMED I BACHE BOD ANIMALC	NONE	501(C)(3)	FUNDING FOR PET		
POTTER LEAGUE FOR ANIMALS	NONE	501(0)(3)	RELATED PROGRAMS	1,875.	
REACH OUT AND READ	NONE	501(C)(3)	TO SUPPORT CHARITABLE		
			ACTIVITIES	1,875.	
		1			
RHODE ISLAND COMMUNITY FOOD BANK	NONE	501(C)(3)	TO SUPPORT CHARITABLE		
		ļ	ACTIVITIES	2,000.	
RHODY SQUASH	NONE	501(C)(3)	TO SUPPORT CHARITABLE		
		<u> </u>	ACTIVITIES	1,900.	
Total from continuation sheets					

NORTH FAMILY TRUST C/O M. HOGAN, L. MURPHY JR. 05-6091467 **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient SEAMEN'S CHURCH INSTITUTE NONE 501(C)(3) TO SUPPORT CHARITABLE 1,000. ACTIVITIES ST PAUL'S UNITED METHODIST CHURCH NONE TAX EXEMPT FUND CHURCH ENDEAVORS 1,000. ST VINCENT DEPAUL SOCIETY NONE 501(C)(3) TO SUPPORT CHARITABLE ACTIVITIES 1,000. TURNING AROUND MINISTIRES NONE 501(C)(3) TO SUPPORT CHARITABLE **ACTIVITIES** 1,000. UNIVERSITY OF RHODE ISLAND NONE TAX EXEMPT FUND UNDERGRADUATE AND GRADUATE EDUCATIONAL OPPORTUN 7,000. VISITING NURSE SERVICES NONE 501(C)(3) FUND HOSPICE SERVICES 3,000.

623631

Total from continuation sheets

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STATEMENT 4		
) FABLE OSES		
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FORM 990-PF	OTHER EXPENSES				STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTE NET INCO		(D) CHARITA PURPOS		
ANNUAL FILING FEE ACCOUNT FEES	50. 100.		50. 100.		0.		0.	
TO FORM 990-PF, PG 1, LN 23	150.		150.		0.		0.	
FORM 990-PF	CORPORAT	E STOCK			ST	'ATEMENT	6	
DESCRIPTION			вос	OK VALUE	FA	IR MARKE' VALUE	T	
2000 SHS BANK OF AMERICA 4000 SHS BROOKS AUTOMATION 2000 SHS CISCO SYS INC 1000 SHS EXXON MOBILE CORP 4000 SHS GENERAL ELECTRIC 1000 SHS JOHNSON & JOHNSON			•	28,669. 0. 49,311. 29,941. 128,729. 52,859.		48,5 62,6 80,7 108,0 132,2	0. 00. 30. 40. 90.	
2000 SHS TRONOX LTS 2000 SHS GOLDMAN SACHS 2000 SHS MORGAN STANLEY DEP 1000 SHS AT&T INC 5000 SHS MANNING & NAPIER 1000 SHS CHICAGO BRIDGE & IRC 1500 SHS ALCOA INC	ON			39,469. 38,314. 36,159. 63,300. 57,217.		47,20 47,3 37,7 21,79	20. 30. 50.	
1000 SHS KINDER MORGAN INC 500 SHS PILGRIMS PRIDE 2000 SHS CITIZENS FINL GROUP 1500 SHS OLIN CORP 1000 SHS TRIUMPH GROUP 1000 SHS DUNKIN BRANDS GROUP				39,199. 23,964. 51,942. 0. 46,439.		19,10 21,9: 71,30 31,60	20. 60. 0.	
500 SHS MACY'S INC 1000 SHS MONDELEZ INTL 1000 SHS POWERSHARES EXCH 1000 SHS PFIZER 1000 SHS BANK OF AMERICA CORP 1000 SHS ARCONIC 1000 SHS INVESTORS BANCORP 1000 SHS HANESBRANDS 500 SHS GLAXOSMITHKLINE	P DEP 3.00			20,342. 40,856. 24,442. 33,828. 20,412. 25,595. 14,249. 19,739. 21,145.		11,62 43,19 26,10 33,59 22,59 22,69 13,30 23,10	20. 90. 60. 90. 50. 60.	
1000 SHS INTEL CORP TOTAL TO FORM 990-PF, PART II	I, LINE 10B			36,589.		33,74	40.	

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

NORTH FAMILY TRUST 344 MAIN STREET WAKEFIELD, RI 02879

TELEPHONE NUMBER NAME OF GRANT PROGRAM

401-782-4488

ALL

FORM AND CONTENT OF APPLICATIONS

EVIDENCE MUST BE PROVIDED TO SHOW THE ORGANIZATION IS CHARITABLE; A DETAILED LISTING OF THE SPECIFIC USE OF THE FUNDS NEEDS TO BE PROVIDED.

ANY SUBMISSION DEADLINES

WITHIN 30 DAYS OF THE ADVERTISEMENT

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE GEOGRAPHIC LOCATION MUST BE NEWPORT COUNTY. NO CHARITY MORE THAN ONE-THIRD OF AVAILABLE FUNDS.