Form **990-PF**

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.

		nue Service	Information a	bout Form 990-PF and its se	parate instructions	is at www	.irs.gov/forn	1990 <i>pf.</i> Op	en to Public Inspection
Fo	r cale	ndar year 20	16 or tax year be		/1/2016		ending	9/30/20	17
		undation		<u> </u>			A Employer	identification numb	
F.A	Y FUG	SENE F TR L	JAA/II I						
				ot delivered to street address)	Roo	m/suite		04-609142	6
		lon, NA - P			}		B Telephon	number (see instruc	
			ce, country, and ZIP or	foreign postal code				(
_		_	so, country, and En or	- ·	45000.0	40E		(647) 700 70	ene
_	ttsburg			PA	15230-0			(617) 722-76	
FC	ireign cou	untry name	Foreig	gn province/state/county	Foreign pos	stal code	C If exempt	ion application is pen	ding, check here ▶
_	- CI								
G	Check	k all that appl	_	=	of a former public	charity	D 1. Foreig	n organizations, chec	k here ►
			Final retur	n 🔲 Amended re	turn		2. Foreig	n organizations meeti	ng the 85% test,
			Address c	hange 🔲 Name chang	е	_	check	here and attach comp	outation ▶ 🔲
Н	Check	k type of orga	inization Se	ction 501(c)(3) exempt pr	ivate foundation	191)	E If private	foundation status was	
X				able trust 🔲 Other tax			section 50	07(b)(1)(A), check her	e ▶ 🛄
ī			of all assets at	J Accounting method		Accrual			
•				l 	Δj Casn ∟	Accruai		ndation is in a 60-mon	. 🗖
			Part II, col (c),	Other (specify)	;		under sec	tion 507(b)(1)(B), che	ck here
		6) ▶ \$		(Part I, column (d) must be	on casn basis)		L	,	
نظ	art	-		cpenses (The total of	(a) Revenue and	/65 51-	t inventor t	(a) Adurated and	(d) Disbursements
				(d) may not necessanly	expenses per	1 ' '	t investment icome	(c) Adjusted net income	for charitable purposes
		equal the am	ounts in column (a)	(see instructions))	books] "		income	(cash basis only)
	1	Contributions.	gifts, grants, etc. reco	eived (attach schedule)		44.	A. A.		
"}	2			ot required to attach Sch B	10 W7-1181	71.	10 11:		
ナ	3			orary cash investments	***************************************	- [* *	***		
	4		and interest from se		25,35	1	24,781		
Λ	5a	Gross rents		ecunies	23,33	' 	24,701		
	b					<u> </u>			
V			ncome or (loss)						
Revenue	6a	-		assets not on line 10	19,16	1		<u> </u>	
ē	_ b	-	rice for all assets on hi						
ě	7		net income (from	Part IV, line 2)			19,161	1 . A	
œ	8		rm capital gain		M. P. M. C.		1)1 . \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	9	Income mod	difications	1	1811, 181		**\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		3387 A 337
	10a		ss returns and allowa	nces	131 M - 131 - 1	ì · 31.			. <u>10 1 15 </u>
	b	Less Cost	of goods sold		St. St. Mi	~ ii : 'U	}}{}		
	c	Gross profit	or (loss) (attach s	chedule)		14. 1	. N. 73		
	11	Other incom	ne (attach schedul	e)					2000
	12	Total. Add	lines 1 through 11	1	44,51	2	43,942		0
ும்	13			ectors, trustees, etc	14,79		8,727		5,918
755 nses	14		oyee salaries and		1112	`			
	15	•	ns, employee ben	—		+			
			attach schedule)	Citto		+			
<u> </u>	16a		•	dula)		 			
ج. ف	b		fees (attach sched					 	
泛单	, C		ssional fees (attac	n schedule)	<u>, 40</u>	<u> </u>			400
ij	17	Interest	POSTA	AARK . PEC	EIVED 53			 	
. ·≅	18		ch schedule (See		53 EIVED	4	534		
Ē	19		n (attach schedule	e) and depletion					1.500 % 300
듄	20	Occupancy	13 0212	2010 0 44				L	
⋖	21	Travel, conf	erences, and mee	etings 021	6 2313				
2	22	Printing and	l publications						
- 6	23		nses (attach sched	tule) OCDEN	3	5			35
n D	24			trative/expenses.		\top			1
ati	{		3 through 23	Carts remandated la	15,76	3	9,261		06,353
وَ	25		ns, gifts, grants pa	ıd	71,00				
$A_{l}^{2}\{\zeta\}$ Operating and Administrative Ex	26			ts. Add lines 24 and 25.					
<u> </u>				io. Add illico 24 aliu 20 .	86,76		9, <u>261</u>	N	0 77,353
	27		e 26 from line 12			- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	We No		[1] 化自己
	a			and disbursements .	-42,25	1	1111: X . X	18,7% 1 1	
	b			egative, enter -0-) .	11.15 1. 15 1333		34,681	2.25 . 2.42	
	_ с	Adjusted n	et income (if nega	ative, enter -0-)			Ball His		0
Fo	Paper	work Reducti	on Act Notice, see	instructions.				F	orm 990-PF (2016)

For Paperwork Reduction Act Notice, see Instructions.



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age 2

Part II		Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	of year	
=		Datafice Offeets	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest	•				
	2		rary cash investments	6,962	5,280		
	3	Accounts receivable					
	}		doubtful accounts				
	4	Pledges receivable		The dis. M	Maria de Alba	Calibration of the second	
	1	Less allowance for	doubtful accounts				
	5	Grants receivable					
	6		om officers, directors, trustees, and other				
	1		s (attach schedule) (see instructions)				
	7		eceivable (attach schedule)				
	Ì	Less allowance for dou					
Assets	8	Inventories for sale					
SS	9		and deferred charges				
4	10a		state government obligations (attach schedule)				
	b	•	orate stock (attach schedule)				
	C		orate bonds (attach schedule)			x	
	11		dings, and equipment basis ►				
]	·	reciation (attach schedule)				
	12	Investmentsmorto	- -		l 		
	13	Investments—other		1,341,585		1,496,135	
	14	Land, buildings, and equ					
	l	•	reciation (attach schedule)				
	15	Other assets (descr					
	16		completed by all filers—see the				
		instructions Also, s		1,348,547	1,306,879	1,501,415	
	17		and accrued expenses		ļ <u> </u>		
S	18	Grants payable	•				
Liabilities	19	Deferred revenue			ļ		
Ξ	20		irectors, trustees, and other disqualified persons				
Lia	21		er notes payable (attach schedule)				
	22	Other liabilities (des					
	23_		d lines 17 through 22)	0	0		
Š]		follow SFAS 117, check here				
2			s 24 through 26 and lines 30 and 31.	}			
Balances	24	Unrestricted			ļ 		
	25	Temporarily restrict					
밀	26	Permanently restric					
Net Assets or Fun	ſ	and complete lines	do not follow SFAS 117, check here ► 🗓		1		
2	27	-	principal, or current funds	1 240 547	1 206 970		
S	27			1,348,547	1,306,879		
Sel	28 29		irplus, or land, bldg , and equipment fund				
AS	1	-	cumulated income, endowment, or other funds	1 240 547	4 200 070		
et/	30		r fund balances (see instructions)	1,348,547	1,306,879		
ž	31	instructions)	d net assets/fund balances (see	4 0 4 0 5 4 7	4 000 070		
D۵	rt III		anges in Not Assets or Fund Relances	1,348,547	1,306,879		
			anges in Net Assets or Fund Balances alances at beginning of year—Part II, column (a) line 30 /must cor	ee with		
•			d on prior year's return)	a), inte 30 (must agr	ee with	1,348,547	
2		amount from Part I,		•		-42,251	
				IND	2	583	
		increases not including ines 1, 2, and 3	ded in line 2 (itemize) PY FED TAX REFU	אוויר	3	1,306,879	
5		mes 1, 2, and 3 eases not included in	line 2 (itemize)		5	1,300,679	
			alances at end of year (line 4 minus line 5)—P	art II. column (h). lin		1,306,879	
Ť	Total	not assorts of fund bi	dianoss at end of year time 4 minus line 3)—F	are ii, columni (b), iiii	1 8	Form 990-PF (2016)	

Add lines 5 and 6

Part VI instructions

Enter qualifying distributions from Part XII, line 4

Form 990-PF (2016) FAY EUGENE F TR U/WILL 04-6091426 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, P-Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo, day, yr) (mo, day, yr) D-Donation See Attached Statement h d A (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale а b C đ Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any h d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 19.161 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) (see instructions). If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank X Yes No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries (d) (a) (b) (c) Base period years Distribution ratio Adjusted qualifying distributions Net value of nonchantable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 2015 1,455,068 0 067169 0 000000 2014 2013 0 000000 2012 0 000000 2011 0 000000 Total of line 1, column (d) 2 0 067169 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 0 067169 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 4 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6

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

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instru	ctions)	
1a b	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) Domestic foundations that meet the section 4940(e) requirements in Part V, check		694
_	here ▶ ☐ and enter 1% of Part I, line 27b	. 11 S. 11 L. 12 L. 14	
С	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-)		0
3	Add lines 1 and 2		694
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		694
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 562		
b	Exempt foreign organizations—tax withheld at source Tax paid with application for outgraph of two to file (Form 8868)		
c d	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6c 6d		
7	Total credits and payments Add lines 6a through 6d		562
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		002
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		132
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0
11	Enter the amount of line 10 to be. Credited to 2017 estimated tax ► Refunded ► 11		O
Part	VII-A Statements Regarding Activities		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes No
	participate or intervene in any political campaign?	1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		
	Instructions for the definition)? If the answer is "Yes" to the set of the activities and access of any material.	/a 1b	 - - - - - - - - -
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material published or distributed by the foundation in connection with the activities	` {	
С	Did the foundation file Form 1120-POL for this year?	10	X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		3 2 3
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers >\$	d	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	X
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? <i>If</i> "Yes," <i>attach a conformed copy of the changes</i>	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5	N/A
,	If "Yes," attach the statement required by General Instruction T	3	<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		-, ,]]
	By language in the governing instrument, or		2.3
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		
	conflict with the state law 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
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		Yi sa
_	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(i)(5) for calendar year 2016 or the tayable year hoginaling in 2016 (see instructions for Bott XIV)2.		
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? / "Yes," complete Part XIV	″ 9	x 4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	<u> </u>	- ^ "
••	names and addresses	10	x
			-PF (2016)

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Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Yes	No 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	Х	
	Website address ► N/A			
14	The books are in care of ► BNY MELLON, N.A. Telephone no ► (Use the books are in care of ► BNY MELLON, N.A. Located at ► P.O. BOX 185, PITTSBURGH, PA. ZIP+4 ► 1	617) 722-762 5230-0185	6	- <i>-</i>
15	Located at ► PO BOX 185 PITTSBURGH, PA ZIP+4 ► 1 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here.	5230-0105	 1	▶ 🗓
10		5		754
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other author		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u>y_</u>	<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	; <u>*</u> *	Yes	No
1a	During the year did the foundation (either directly or indirectly)	_ #15	- * *	M
		X No │		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	X No	î.	
		⊠ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	□ No .		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	X No €		
	(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 termination of government service, if terminating within 90 days)	X No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	i i i i	1.4	<u> </u>
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	▶ □ 1b		X
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	— I ;		-, 28%
·	were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	e 👬		3. 3.
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	3"		- 1
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	X No		1, 4,
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	Z		
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(ű.	.13
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	3.8.8
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	e		
3a	▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			37 187
•	at any time during the year?	X No ↓		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation of	ır İ		
	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 lap	se		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	137	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		, , , , , , , , , , , , , , , , , , ,	18
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	1	X

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Раг	VII-B Statements Regarding Activities for	or Whi	ch Form 47	'20 Ma	y Be Req	uired (continue	d)		
5a	During the year did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to			(sectio	on 4945(e))	7	☐ Yes	X No		
	(2) Influence the outcome of any specific public el directly or indirectly, any voter registration drive		(see section	4955), (or to carry o	on, 	☐ Yes	X No		
	(3) Provide a grant to an individual for travel, stud		her sımılar pı	ırposes	2		Yes	X No		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions).	charita	able, etc , orç	ganızatı	on describe	ed in	☐ Yes	⊠ No		
	(5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelty to ch			literary	, or educati	onal	☐ Yes	⊠ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53 4945 or in a current notice							bed in	5b	N/A
	Organizations relying on a current notice regardin	_	-		-		·	▶ 🛚	3	
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility for	or the c	rant?	-	n from the t N/A	ax	☐ Yes	☐ No		
6-	If "Yes," attach the statement required by Regulat								- 1	
6a	Did the foundation, during the year, receive any fu on a personal benefit contract?	ınas, ai	rectly or inali	еспу, п	o pay prem	iums	Yes	⊠ No		
b	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870	s, direct	tly or indirect	ly, on a	personal b	enefit c	ontract?		6b	X
	At any time during the tax year, was the foundation a pa						Yes	X No		
	If "Yes," did the foundation receive any proceeds VIII Information About Officers, Director								7b	N/A
ιαι	and Contractors	, ii	usices, ro	unuau	OII Walla	jeis, n	iigiiiy F	alu Liii	pioye	co,
1	List all officers, directors, trustees, foundation	mana	gers and the	eir com	pensation	(see in	struction	ns).		
	(a) Name and address	(b) Title hou	e, and average rs per week ed to position	(c) Co (If s	mpensation not paid, nter -0-)	(d) emplo	Contribution yee benefit erred compe	s to plans		ense account, allowances
	Mellon, N A BOX 185 Pittsburgh, PA 15230-0185	TRUS SEE A	TEE TTACHED		14,794	NONE			NONE	
2	Compensation of five highest-paid employees "NONE."	(other	than those	include	ed on line	1—see	instructi	ons). If	none,	enter
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred		ense account, allowances
NONE										
			ļ		 		<u> </u>			
·							!			
·										
Total	number of other employees paid over \$50,000								NONE	
								F	orm 99	0-PF (2016)

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	nation About Officers, Directors, Trustees, Foun	dation Managers, Highly Paid E	mployees,
	ontractors (continued) aid independent contractors for professional service	e (see instructions) If none enter	'NONE "
	ne and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	to and address of each person paid more than 400,000	(B) Type of certific	(c) companion
			<u> </u>
		-	
		-	
		-	
		-	
Fotal number of others	s receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A Sum	mary of Direct Charitable Activities		
	argest direct chantable activities during the tax year include relevant sta eneficiaries served, conferences convened, research papers produced, e		Expenses
1 NONE			
			.
<u> </u>			
2			·
			·
3			. [
			.
4			
4	•••••••••••••••••••••••••••••••••••••••		·
			•
Part IX-B Sum	mary of Program-Related Investments (see inst	ructions)	
	rogram-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 NONE			.
2			+
	•		· }
	nvestments See instructions		
3 NONE			. [
			- [
Total. Add lines 1 throi	uah 3		NONE
			Form 990-PF (2016

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundations,	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities		1,460,597
b	Average of monthly cash balances	1b	25,950
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,486,547
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,486,547
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see	}	
	instructions)	4	22,298
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,464,249
6	Minimum investment return. Enter 5% of line 5		73,212
Part			
	foundations and certain foreign organizations check here and do not complete this part		
1	Minimum investment return from Part X, line 6	1	73,212
2a	Tax on investment income for 2016 from Part VI, line 5	4	
b	Income tax for 2016 (This does not include the tax from Part VI)	المنطقة الم	
С	Add lines 2a and 2b	2c	694
3	Distributable amount before adjustments Subtract line 2c from line 1	3	72,518
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	72,518
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	72,518
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	- 4	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	77,353
b	Program-related investments—total from Part IX-B	1b NONE	
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	25 12	
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	77,353
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	77,353
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the found	
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2016)

FAY EUGENE F TR U/WILL

Form 990-PF (2016)

Undistributed Income (see instructions) Part XIII (a) (b) (c) Corpus Years prior to 2015 2015 Distributable amount for 2016 from Part XI. line 7 72.518 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only . _, 20___ , 20 **b** Total for prior years 20 Excess distributions carryover, if any, to 2016 a From 2011 **b** From 2012 c From 2013 d From 2014 e From 2015 22.184 Total of lines 3a through e Qualifying distributions for 2016 from Part XII. line 4 ▶ 77.353 a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2016 distributable amount 72.518 e Remaining amount distributed out of corpus 4.835 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 27.019 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount-see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount-see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a 27,019 10 Analysis of line 9 a Excess from 2012 b Excess from 2013 Excess from 2014 d Excess from 2015 22,184 e Excess from 2016

4.835

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Form **990-PF** (2016)

Form 9	90-PF (2016) FAY EUGENE F TR U	/WILL			04-60	91426 Page 10
Part	XIV Private Operating Foundation	ons (see instruct	ions and Part VI	I-A, question 9)		N/A
1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective for			•		
	Check box to indicate whether the foundation	on is a private opera	ing foundation desc	ribed in section	4942()	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	each year listed					0
b	85% of line 2a					0
C	Qualifying distributions from Part XII,					
	line 4 for each year listed			<u> </u>		0
d	Amounts included in line 2c not used directly]				
	for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities				,	
	Subtract line 2d from line 2c			<u> </u>	·	0
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					i
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			/		0
b	"Endowment" alternative test—enter 2/3			 	······································	
	of minimum investment return shown in Part X, line 6 for each year listed			<u> </u>		0
С	"Support" alternative test—enter		.*			
	(1) Total support other than gross investment income (interest,		,	1		1
	dividends, rents, payments on					}
	securities loans (section		,	ļ		
	512(a)(5)), or royalties) (2) Support from general public		 	 		0
	and 5 or more exempt		<u>,</u> /	}		
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization		<u> </u>	<u> </u>		0
	(4) Gross investment income)				0
Part	XV Supplementary Information	(Complete this	s part only if the	e foundation ha	d \$5,000 or mo	re in assets at
	any time during the year—	see instructions	s.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation when					the foundation
	before the close of any tax year (but or	ily if they have cor	ntributed more tha	in \$5,000) (See se	ction 507(d)(2))	
NONE						
b	List any managers of the foundation wi	no own 10% or mo	ore of the stock of	a corporation (or a	n equally large po	ortion of the
	ownership of a partnership or other ent	ity) of which the fo	oundation has a 10	0% or greater inter	est	
NONE						
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation or	nly makes contribu	tions to preselecte	ed charitable orgar	izations and does	s not accept
	unsolicited requests for funds. If the for		fts, grants, etc (se	ee instructions) to i	ndividuals or orga	anizations
	under other conditions, complete items	2a, b, c, and d				
а	The name, address, and telephone nur	mber or e-mail add	ress of the person	n to whom applicat	ions should be ac	idressed
MARY	ZAREMBA ONE BOSTON PLACE BC	STON, MA 02108	(617)722-7626			
b	The form in which applications should I	e submitted and	nformation and m	aterials they shoul	d include	
CALL	MARY ZAREMBA (617) 722-7626					
	Any submission deadlines					
CALL	MARY ZAREMBA (617) 722-7626					
d	Any restrictions or limitations on award	s, such as by geo	graphical areas, c	haritable fields, kin	ds of institutions,	or other
	factors					
110	MADV 7ADEMBA (647) 700 7606					

Total

nuod)		04-60914	26 Page 11
he Year or Approve	d for Future	Payment	
If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
any foundation manager or substantial contributor	recipient	contribution	, and and
İ			
	<u> </u>	N 0-1	74.000
		₽ 3a	71,000
	If recipient is an individual,	If recipient is an individual, show any relationship to any foundation manager	If recipient is an individual, show any relationship to any foundation manager any foundation manager

3b NONE Form 990-PF (2016) Form 990-PF (2016)

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Pa	ırt XV	I-A Analysis of Income-Producing Ac	tivities				
		ss amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Prog	gram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	a _		ļ				·
			ļ		 	ļ	
			\		 	<u> </u>	<u> </u>
							
	e _						
	g F	ees and contracts from government agencies			 		
2	_	bership dues and assessments			-		
3		est on savings and temporary cash investments					
4		dends and interest from securities			14	25,351	
5	Net i	rental income or (loss) from real estate	115 115			14: A4: W	
	a [Debt-financed property					
	b N	Not debt-financed property					
6	Net	rental income or (loss) from personal property			<u> </u>		
7		er investment income					
8		or (loss) from sales of assets other than inventory			18	19,161	
9		ncome or (loss) from special events	ļ		ļ	}	
10		ss profit or (loss) from sales of inventory					
11		er revenue a			 	 	
					<u> </u>		
			 -		 		
	e –						
12	_	otal Add columns (b), (d), and (e)	**************************************	0	740 - 111	44,512	0
		II. Add line 12, columns (b), (d), and (e)	L	<u> </u>		13	44,512
		sheet in line 13 instructions to verify calculation	ns)				
Pa	rt XV	-B Relationship of Activities to the A	ccomplishm	ent of Exempt	Purposes		
Lir	ne No.	Explain below how each activity for which incom	ne is reported in o	column (e) of Part	XVI-A contribute	d importantly to the	;
	▼	accomplishment of the foundation's exempt pur	poses (other than	by providing fund	ls for such purpo	ses) (See instructi	ons)
		NOT APPLICABLE	 				
							
							
							
							
							
							
						,	
							
							
					· · · · · · · · · · · · · · · · · · ·		
							

Form 990-PF (2016) FAY EUGENE F TR U/WILL Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements NOT APPLICABLE Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes ☒ No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below 11/29/2017

Paid	Pnnt/Type preparer's name	Preparer's signature	Date	Check X if PTIN
	Shawn P Hanlon	20210 on	11/29/2017	self-employed P00965923
Preparer	Firm's name ▶ PRICEWATERHOUS	ECOOPERS LLP	Firm's	EIN ► 13-4008324
Use Only	Firm's address ▶ 600 GRANT STREET	PITTSBURGH, PA 15219	Phone	no (412) 355-6000

Here

Signature of officer or trustee

VICE PRESIDENT

Form 990-PF (2016)

XYes [

(see instructions)?

FAY EUGENE F TR U/WILL				04-609	1426 Page	1 of 4
Continuation of Part XV, Li	ne 3a (990-PF) -	Gran	ts and Contr	ibutions Paid	During the	e Year
Recipient(s) paid during the year						
Name						
BROOKLINE POLICE MUTUAL AID A	CCOCIATION					
Street	SSOCIATION			_		
350 WASHINGTON STREET						
City		State	Zip Code	Foreign Cour	itn	
BROOKLINE		MA	02146-6851	i oreign cour	iti y	
Relationship	Foundation Status		102140-0031			
NONE	PC					
Purpose of grant/contribution	<u> </u>				Amount	
GENERAL OPERATING PURPOSES						1,000
					<u> </u>	
Name	2001471011					
BROOKLINE FIREMAN'S RELIEF AS: Street	SOCIATION					
49 BABCOCK STREET City	 	Ctoto	Zip Code	Foreign Cour	<u></u>	
BROOKLINE		MA	02146-6851	Foreign Cour	itry	
Relationship	Foundation Status		<u> UZ 140-005 </u>		 	
NONE	PC	'				
Purpose of grant/contribution	<u> FO</u>			 	Amount	
GENERAL OPERATING PURPOSES					Amount	1,000
					 	1,000
Name						
PERKINS SCHOOL FOR THE BLIND				·		
Street						
175 N BEACON STREET		1044	T=-		4	
City		State	1 .	Foreign Cour	itry	
WATERTOWN	F1-41	MA	02472			
Relationship	Foundation Status	,				
NONE Purpose of grant/contribution	PC				Amaunt	
GENERAL OPERATING PURPOSES					Amount	1 000
GENERAL OPERATING PORPOSES						1,000
Name						
UNITARIAN UNIVERSALIST ASSOCI	ATION					
Street						
PO BOX 843152						
City			Zip Code	Foreign Cour	ntry	
BOSTON		MA	02284-3152			
Relationship	Foundation Status	;				
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES			· · · · · · · · · · · · · · · · · · ·			1,000
Name						
UNITED CHURCH IN WALPOLE						
Street						
30 COMMON STREET, P O BOX 287	•					
City		State	Zip Code	Foreign Cour	ntry	
WALPOLE		MA	02081-0287		•	
Relationship						
	Foundation Status	;				
NONE	Foundation Status	•				
		•			Amount	
Purpose of grant/contribution					Amount	1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name					Amount	1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE					Amount	1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street					Amount	1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street 382 WALNUT ST			Zin Code	Foreign Com		1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street 382 WALNUT ST City		State	•	Foreign Cou		1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street 382 WALNUT ST City BROOKLINE	PC	State MA	Zip Code 02146-7563	Foreign Cou		1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street 382 WALNUT ST City BROOKLINE Relationship	PC Foundation Status	State MA	•	Foreign Cou		1,000
Purpose of grant/contribution GENERAL OPERATING PURPOSES Name FIRST PARISH IN BROOKLINE Street 382 WALNUT ST City BROOKLINE	PC	State MA	•	Foreign Cou		1,000

FAY EUGENE FIR U/WILL				04-609	1426 Page 2	2 of 4
Continuation of Part XV, Lin	ne 3a (990-PF) -	Gran	ts and Cont	ributions Paid	During the	e Year
Recipient(s) paid during the year						
Name BRIGHAM AND WOMEN'S HOSPITAL	INC					
Street 116 HUNTINGTON AVE - 5TH FLOOR						
City		State	Zip Code	Foreign Coun	try	
BOSTON		MA	02116	orengin douin	,	
Relationship	Foundation Status		1			
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					<u> </u>	1,000
Name C L CHANDLER CORPS 109 W R C						
Street						
P O BOX 165		,	<u></u>	·		
City		State	Zip Code	Foreign Coun	try	
NEW DURHAM	JE	NH	03855-0165			
Relationship NONE	Foundation Status					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					Amount	1,000
						1,000
Name						
NEWTON WELLESLEY HOSPITAL Street						
2000 WASHINGTON ST						
City		State	Zip Code	Foreign Coun	try	
NEWTON		MA	02158	i oreign coun	y	
Relationship	Foundation Status		102.00		···	
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	1,000
Name						
THE STONE INSTITUTE AND NEWTO	N HOME FOR AGED	PEOP	l F			
Street						
227 ELLIOT ST						
City		State	Zip Code	Foreign Coun	try	
NEWTON		MA	02164-1231			
Relationship	Foundation Status					
NONE	PC				14	
Purpose of grant/contribution					Amount	1 000
GENERAL OPERATING PURPOSES						1,000
Name						
COMMUNITY RESOURCES FOR JUS	TICE			·		
Street						
355 BOYLSTON ST City		State	Zip Code	Foreign Coun	·tm/	
BOSTON		State MA	02116-3133	Foreign Coun	itry	
Relationship	Foundation Status		102110-3133			
NONE	PC					
Purpose of grant/contribution	<u></u>				Amount	
GENERAL OPERATING PURPOSES						1,000
Name						
NORTH BENNET STREET SCHOOL						
Street						
150 North St						
City		State	Zip Code	Foreign Coun	itry	
BOSTON		MA	02109		- •	
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES					J	5 000

FAY EUGENE F TR U/WILL				04-609		
Continuation of Part XV, Li	<u>ne 3a (990-PF) -</u>	<u>Gran</u>	ts and Con	<u>tributions Paic</u>	During the	<u>e Year</u>
Recipient(s) paid during the year						
Name						
BROOKLINE COMMUNITY FOUNDA	TION					
Street						
40 Webster Pl						
City		State	Zip Code	Foreign Cour	itry	
Brookline		MA	02445	0,0,g,, 00m	,	
Relationship	Foundation Status		102-1-10			
NONE	PC	•				
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						1,000
						1,000
Name						
ACTION FOR BOSTON COMMUNITY	<u>, </u>					
Street						
178 Tremont St						
City		State	Zip Code	Foreign Cour	ntry	
BOSTON		MA	02111			
Relationship	Foundation Status					
NONE	PC					
Purpose of grant/contribution		· · · · · ·			Amount	
GENERAL OPERATING PURPOSES					1	5,000
Name						
DRESS FOR SUCCESS BOSTON						
Street						
989 Commonwealth Avenue		·				
City		State	1 •	Foreign Cour	ntry	
BOSTON		MA	02215			
Relationship	Foundation Status	;				
NONE	PC				. <u></u>	
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						5,000
Name						
	OFNITED					
IRISH INTERNATIONAL IMMIGRANT Street	CENTER					
1 State St		T 04 .	T=:			
City		State	Zip Code	Foreign Cour	itry	
BOSTON		<u>MA</u>	02109			
Relationship	Foundation Status	3				
NONE	[PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES						5,000
Name						
READ TO A CHILD						
Street						
20 William Street #G25						
City		Canan	7: Code	Foreign Cour		
			Zip Code	Foreign Cour	itry	
Wellesley	In the second	MA	02481			
Relationship	Foundation Status	•				
NONE	_PC					
Purpose of grant/contribution					Amount	
GENERAL OPERATING PURPOSES	- 					5,000
Name						
JUST-A-START						
Street						
1035 Cambridge Street		1 64	7:	F		
City			Zip Code	Foreign Cour	itry	
Cambridge		MA	02141			
Relationship	Foundation Status	3				
NONE	IPC					
Purpose of grant/contribution					Amount	5,000
CENEDAL ODEDATING DUDDOCES						5 በበበ

FAY EUGENE F TR U/WILL Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Cont	04-609 ributions Paic		4 of 4 e Year
Recipient(s) paid during the year						
Name SCIENCE CLUB FOR GIRLS						
Street	·		·			
136 Magazine St			<u> </u>			
City Cambrige		State MA	Zip Code 02139	Foreign Coun	itry	
Relationship	Foundation Status	IVIA	102139			
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
Name ST_STEPHEN'S YOUTH PROGRAMS						
Street					· · · · ·	
419 Shawmut Ave			T=. 2 .		· · · · · · · · · · · · · · · · · · ·	
City Boston			Zip Code	Foreign Coun	itry	
Relationship	Foundation Status	MA	02118			
NONE	PC					
Purpose of grant/contribution	.r ·				Amount	
GENERAL OPERATING PURPOSES					<u> </u>	5,000
Name TAILORED FOR SUCCESS, INC						.
Street Ct						
587 Pleasant St City		State	Zip Code	Foreign Coun		
Maiden		MA	02148	Foreign Coun	itry	
Relationship	Foundation Status	IVIA	102 140	<u>.</u>	 	
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
Name KIPP ACADEMY LYNN CHARTER SCH	HOOL					
Street				•		•
90 High Rock St		·	T 0 1			
City Lynn		MA	Zip Code 01902	Foreign Cour	itry	
Relationship	Foundation Status	I IVIA	101902			
NONE	PC					
Purpose of grant/contribution			· ·		Amount	
GENERAL OPERATING PURPOSES						5,000
Name SCIENCE FROM SCIENTISTS						
Street						-
1 Deangelo Dr Suite C City		04-4-	Tin Ondo	Familian Carre	A	
Bedford		State MA	Zip Code 01730	Foreign Cour	itry	
Relationship	Foundation Status		101730			
NONE	PC					
Purpose of grant/contribution GENERAL OPERATING PURPOSES					Amount	5,000
Name ASIAN AMERICAN CIVIC ASSOCIATION	ON INC					
Street 87 Tyler St						
87 Tyler St		State	Zip Code	Foreign Cour	ntrv	···
87 Tyler St City Boston		State MA	Zip Code 02111	Foreign Cour	ntry	
87 Tyler St City Boston Relationship	Foundation Status	MA		Foreign Cour	ntry	
87 Tyler St City Boston		MA		Foreign Cour	Amount	

Attachment to Form 990PF Part VIII, Column (b) Title and Average Hours Per Week Devoted To Position

The compensation reported in column (b) paid to BNY Mellon, N.A. as Corporate Trustee is calculated based on market value and current fee schedule. It is not determined on an hourly basis. Corporate Trustee services include administrative responsibilities, grant requirements, recordkeeping, investment management, income collection, statement and accounting services, and regulatory reporting.

11/29/2017 2 57 41 PM - XXXXXXXX3009 - 468 - BOS - FAY EUGENE F TR U-WILL

Part 1 line 6 (990 DE). Gain/lines from Sala of Assets Other Than Inventory
Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than inventory

								Totals	Gre	0\$5	Cost or Other B	asis Expenses		Gain
	Amount								Sa		Depreciation as			220_
Long Term CG Distributions	11,464	ก					(Capital Gains/Losses		182,368		163,205		19,161
Short Term CG Distributions		5						Other sales				0		0
				Check X if										
		Check X"	1	Purchaser				ļ .			Expense of Sale		ļ	l
1		to include	,	15.8	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of		l .	Net Gain
Description	CUSIP #	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Degreciation	Adjustments	or Loss
1 BNY MELLON SM/MID CAP-M	05569M442	X				3/22/2012	2/24/2017	7,487	7,330				0	157
2 BNY MELLON INCOME STOC	05589M301	x .	1	1	1	2/24/2017	7/25/2017	1,035	1,027			1) 0	8
3 BNY MELLON TAX SEN L/C M	05569M434	1 x	Ī	I		12/20/2016	2/24/2017	9,950			l .	Į.		459
BNY MELLON TAX-SEN LIC M	05569M434	[x	i	1	Ī	12/20/2016	7/25/2017	734	661	1	1	1	\ 0	[73
8 BNY MELLON TAX-SEN L/C M	05569M434	x	1	ľ		1/24/2013	7/25/2017	1,486	1,186		·	<u>[</u>		300
6 BNY MELLON SM/MID CAP-M	05569M442	[x		ĺ	Ī	3/22/2012	7/25/2017	1,695	1,574			L		121
7 BNY MELLON SM/MID CAP-M	05569M442	T X	1			3/22/2012	9/15/2017	565	533]0	32
8 BNY MELLON M/C MULTI STR	05569M509	X	, mas - 2			12/20/2016	2/24/2017	1,042	997					45
9 BNY MELLON MIC MULTI-STR	05589M509	x				3/5/2015	2/24/2017	3,196	3,058				\ <u></u> 0	140
10 BNY MELLON M/C MULTI-STR	05569M509	I x] = ===================================		Ι	3/5/2015	7/25/2017	1,005	918			l	! 0	87
11 BNY MELLON S/T US GOV SE	05569M780	I x		ľ	1	2/11/2010	2/24/2017	5,642	5,954	I	i .	ļ		-312
12 BNY MELLON S/T US GOV SE	05569M780] x	I "		1	2/3/2011	2/24/2017	9,324	9,761		l		l	-437
13 BNY MELLON ST US GOV SE	05569M780	, ×		1		1/24/2013	2/24/2017	5,539	5,742	7				-203
14 BNY MELLON INTERMEDIATE	05569M814] " x" '	I	T		1/24/2013	2/24/2017	1,275	1,340					-65
15 BNY MELLON INTERMEDIATE	05569M814	X				1/24/2013	7/25/2017	1,080	1,134				0	54
16 BNY MELLON BOND FUND-M	05569M830	x	I	1		2/24/2017	7/25/2017	1,575	1,570	i		Ì	į o	5
17 DREYFUS YIELD ENH STRA	26188X817	x	I	Ī	1 -	4/1/2014	2/24/2017	1,720	1,759	Ī	I	1) o	-39
18 DREYFUS YIELD ENH STRA	26188X817	[x	1	I	Ī	4/1/2014	7/25/2017	1,710	1,731		l	ĺ	0	-21
19 DREYFUS YIELD ENH STRA 1	26188X817	X	[1	1	4/1/2014	9/8/2017	855	B66	{	}	l l] 0	-11
20 DREYFUS YIELD ENH STRA	26188X817]_ x	·	l	I	4/1/2014	9/15/2017	570	577				L	
21 DREYFUS ALTERN DIVERS S	26188X858	, x	1	1		4/1/2014	2/24/2017	4,798	4,833		l			-35
22 DREYFUS ALTERN DIVERS S	26188X858			r		4/1/2014	7/25/2017	2,580	2,584]0	-4
23 DREYFUS ALTERN DIVERS S	26188X858	IX		L		4/1/2014	9/8/2017	1,290	1,285				l	5
24 DREYFUS ALTERN DIVERS S	26188X858	X			1	4/1/2014	9/15/2017	860	857	1	1	1	<u> </u>	3
26 DREYFUS DIVERSIFIED INTL	261986228	x	1	1	I	2/3/2011	2/24/2017	1,991	1,905		1 .	1] 0	86
26 DREYFUS DIVERSIFIED INTL	261986228	l x	I	Ī	1	4/1/2014	2/24/2017	24,663			į	Į.	1 0	-1,121
27 DREYFUS DIVERSIFIED INTL	261986228	[_ ×	L	I	J	2/17/2018	2/24/2017	73,185			L		<u></u>	7,659
28 BNY MELLON TAX SEN L/C M	05569M434	````x				1/24/2013	9/8/2017	1,110	895			L		215 153 333 125
29 BNY MELLON TAX-SEN LIC M	D5569M434	×	1			1/24/2013	9/15/2017	740					· · · · · · · · · · · · · · · · · · ·	153
30 DREYFUS DIVERSIFIED INTL	261986228	x	1	1	1	2/17/2018	7/25/2017	1,650	1,317	1	1	1	0	333
31 DREYFUS DIVERSIFIED INTL	261986228	I ×	Ī	[1	2/17/2016	9/15/2017	550	425	I .	1	1] 0	125
		•	•	•	-	•	-	-	-					

Part I, Line 16c (990-PF) - Other Professional Fees

<u> </u>	1141 1 000			
	400	0	C	400
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	400			400

Part I, Line 18 (990-PF) - Taxes

	534	534	0	0
	Revenue			Disbursements
	and Expenses	Net Investment	Adjusted	for Charitable
Description	per Books	Income	Net Income	Purposes
1 FOREIGN TAX WITHHELD	534	534		

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

	35	0	0	35
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 STATE AG FEES	35	0		35

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Part II, Line 13 (990-PF) - Investments - Other

			1,341,585	1,301,599	1,496,135
		Basis of	Book Value	Book Value	FMV
L	Asset Description	Valuation	Beg of Year	End of Year	End of Year
<u>1</u>				0	
2	BNY MELLON INCOME STK FD CL M		0	102,113	103,313
_ 3	BNY MELLON TAX-SENSITIVE LARGE CAR		0	183,984	233,810
4	BNY MELLON SMALL/MID CAP FUND-M		0	140,907	177,588
5	BNY MELLON MID CAP STK FD CL M		0	66,775	105,110
6	BNY MELLON INTERMEDIATE BOND FD C		0	104,891	106,723
7	BNY MELLON BOND FD CL M		0	135,281	156,706
8	DREYFUS YIELD ENH STRAT-Y		0	171,419	169,503
9	DREYFUS ALTERN DIVERS STR-Y		0	253,904	255,672
10	DREYFUS DIVERSIFIED INTL-Y		O	142,325	187,710

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Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

	_	Amount										_		
	Long Term CG Distributions	11,464											_	
	Short Term CG Distributions	0				170,902		0	163,205	7,697	0	Q		7,697
i			i			1			Cost or Other		FMV	Adjusted Basis	Excess of FMV	Gains Minus
- 1			Acquisition	Date	Date	Gross	Depreciation		Bases Plus	ľ	as of	as of	Over	Excess FMV Over
1	Description of Property Sold	CUSIP #	Method	Acquired	Sold	Sales Price	Allowed	Adjustments	Expense of Sale	Gain or Loss	12/31/69	12/31/69	Adjusted Basis	Adj Basis or Losses
- 1	1 BNY MELLON SWMID CAP-M	05589M442	l	3/22/2012	2/24/2017	7 487		0	7 330	157	0	0		15/
- 1	2 BNY MELLON INCOME STOC	05569M301	,	2/24/2017	7/25/2017	1 035		. 0	1 027	8	o	o o	, ,	8
- 1	3 BNY MELLON TAX-SEN LIC M	05569M434		12/20/2016	2/24/2017	9 950		0	9 491	459	0	0		459
- 1	4 BNY MELLON TAX-SEN L/C M	05569M434	! .	12/20/2016	7/25/2017	734		0	661	73	0	0		73
	5 BNY MELLON TAX-SEN LIC M	05569M434		1/24/2013	7/25/2017	1 486		0	1 186	300	0		!	300
- 1	6 BNY MELLON SM/MID CAP-M	05569M442	ļ	3/22/2012	7/25/2017	1 695		. 0	1,574	121	0	0] 9	121
- 1	7 BNY MELLON SM/MID CAP-M	05569M442_		3/22/2012	9/15/2017	565		0	533	32	0	0	\ <u>_</u>	32
	B BNY MELLON M/C MULTI-STR	05569M509	l ".	12/20/2016	2/24/2017	1 042		0	997	45	0	[0	į	45
ı	9 BNY MELLON M/C MULTI-STR	05569M509		3/5/2015	2/24/2017	3,196		0	3 056	140	0	. 0	Į a	140
L	10 BNY MELLON M/C MULTI-STR	05569M509	I	3/5/2015	7/25/2017	1 005		0	918	87		0	C	87
L	11 BNY MELLON S/T US GOV SE	05569M780		2/11/2010	2/24/2017	5 642		0	5 954	-312	0	0	į c	-312
1	_12_BNY MELLON S/T US GOV SE	05569M780	l	2/3/2011	2/24/2017	9 324		0	9,761	437	0]0	<u>] </u>	437
1	13 BNY MELLON S/T US GOV SE	05569M780	I	1/24/2013	2/24/2017	5 539	:	0	5 742	-203	0	. 0	į c	-203
- 1	14 BNY MELLON INTERMEDIATE	05569M814	·	1/24/2013	2/24/2017	1,275		0	1,340	-65	0	0		65
- [15 BNY MELLON INTERMEDIATE	05569M814		1/24/2013	7/25/2017	1 080		0	1 134	-54	0	0]	-54
- L	16 BNY MELLON BOND FUND M	05569M830	l	2/24/2017	7/25/2017	1,575		0	1 570	5	0	0	l	5
L	17 DREYFUS YIELD ENH STRAT	26188X817		4/1/2014	2/24/2017	1,720	3 10110 35 10100- 111100	0	1,759	-39	0	0		-39
L	18 DREYFUS YIELD ENH STRAT	26188X817	Ī.	4/1/2014	7/25/2017	1 710		0	1 731	-21	0		<u>_</u>	-21
1	19 DREYFUS YIELD ENH STRAT	26188X817		4/1/2014	9/8/2017	855		0	866	-11	0	0	1	-11
	20 DREYFUS YIELD ENH STRAT	26188X817		4/1/2014	9/15/2017	570		0	577	-7	0			-7
- [21 DREYFÜS ALTERN DIVERS S	26188X858		4/1/2014	2/24/2017	4 798		0	4,833	-35	0	0	[-35
	22 DREYFUS ALTERN DIVERS S	26188X858	Ι	4/1/2014	7/25/2017	2 580		0	2,584	-4	0		[4
	23 DREYFUS ALTERN DIVERS S	26188X858		4/1/2014	9/8/2017	1 290		0	1 285	5[0	0		5
	24 DREYFUS ALTERN DIVERS S	26188X858		4/1/2014	9/15/2017	860		0	857	3	0	. 0]3
- [25 DREYFUS DIVERSIFIED INTL	261986228		2/3/2011	2/24/2017	1,991		0	857 1,905	86	0	0		86
	26 DREYFUS DIVERSIFIED INTL	261986228	1	4/1/2014	2/24/2017	24 663		0	25 784	-1 121	0] 0	Į (-1 121
. [27 DREYFUS DIVERSIFIED INTL	261986228		2/17/2016	2/24/2017	73 185		ō	65 526	7 659	0	0	(7 659
	28 BNY MELLON TAX-SEN LIC M	05569M434	}	1/24/2013	9/8/2017	1 110	!	0	895	215	0	0	T (215
- 1	29 BNY MELLON TAX SEN LIC M	05569M434		1/24/2013	9/15/2017	740		0	587	153	0		(153 333
t	30 DREYFUS DIVERSIFIED INTL	261985228	1	2/17/2016	7/25/2017	1 650			1 317	333	0	0	(333
1	31 DREYFUS DIVERSIFIED INTL	261986228	Ī	2/17/2016	9/15/2017	550	Ī	Ö	425	125	0	0	[(125

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

14,794 0)
Г		Check X	I		Г				Avg Hrs			Expense
L	Name_	if Business	Street	l Crty	State	Zip Code	Foreign Country	Trtie	Per Week	Compensation	Benefits	Account
	BNY Mellon N A	×	P O BOX 185	Pittsburgh	PA	15230-0185			SEE ATTAC	14 794	NONE	NONE
- 1			j .	1		ļ l			l .			
- 1	1 1	Į.	\	1	!	ļ	l :			l .	!	1

Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date		Amount
1	Credit from prior year return		1	562
2	First quarter estimated tax payment		2	
3	Second quarter estimated tax payment		3 -	
4	Third quarter estimated tax payment		4	
	Fourth quarter estimated tax payment		5	
6	Other payments		6	
_7	Total		7	562