

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing		25,106	25,106
	2	Savings and temporary cash investments	348,545	77,901	77,901
	3	Accounts receivable ▶ <u>8,200</u>			
		Less allowance for doubtful accounts ▶ _____	6,137	8,200	8,200
	4	Pledges receivable ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ <u>50,000</u>			
		Less allowance for doubtful accounts ▶ _____	50,000	50,000	50,000
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	12,108	6,276	6,276
	10a	Investments—U S and state government obligations (attach schedule)	918,364	1,909,454	1,872,763
	b	Investments—corporate stock (attach schedule)	5,304,875	4,651,618	6,084,558
	c	Investments—corporate bonds (attach schedule)	405,488	152,106	145,179
	11	Investments—land, buildings, and equipment basis ▶ _____			
	Less accumulated depreciation (attach schedule) ▶ _____				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)	60,317	384,828	349,796	
14	Land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____)	937,987	1,354,290	0	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	8,043,821	8,619,779	8,619,779	
Liabilities	17	Accounts payable and accrued expenses	12,408	14,327	
	18	Grants payable	217,518	338,240	
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	229,926	352,567	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	7,813,895	8,267,212	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	7,813,895	8,267,212	
31	Total liabilities and net assets/fund balances (see instructions) .	8,043,821	8,619,779		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	7,813,895
2	Enter amount from Part I, line 27a	2	8,305
3	Other increases not included in line 2 (itemize) ▶ _____	3	445,012
4	Add lines 1, 2, and 3	4	8,267,212
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	8,267,212

Part IV Capital Gains and Losses for Tax on Investment 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)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a SHORT-TERM COVERED SECURITIES (SEE ATTACHED)	P	2017-01-01	2017-12-31
b LONG-TERM COVERED SECURITIES (SEE ATTACHED)	P	2016-12-31	2017-12-31
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,510,759	0	1,514,203	-3,444
b 2,697,304	0	2,132,676	564,628
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a 0	0	0	-3,444
b 0	0	0	564,628
c			
d			
e			

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	2	561,184
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) (see instructions) If (loss), enter -0- in Part I, line 8		3	-3,444

Part V 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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	848,538	7,757,232	0 109387
2015	799,677	8,730,060	0 091600
2014	709,836	8,575,114	0 082779
2013	659,449	7,974,708	0 082693
2012	574,744	6,943,277	0 082777

2 Total of line 1, column (d)	2	0 449236
3 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 089847
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	8,063,594
5 Multiply line 4 by line 3	5	724,490
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	6,517
7 Add lines 5 and 6	7	731,007
8 Enter qualifying distributions from Part XII, line 4	8	880,462

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 Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	6,517
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	6,517
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	6,517
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	765
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	6,765
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	132
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	116
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ☐ 0 Refunded ☐	11	116

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ _____ (2) On foundation managers ☐ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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 "Yes," attach a conformed copy of the changes</i>	3	Yes
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ 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? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address www.nebf.org	13	Yes	
14	The books are in care of JESSICA L BROWN Telephone no (978) 998-7990			

Located at [240 COUNTY ROAD IPSWICH MA](#) ZIP+4 [019382723](#)

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ☐ and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ 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). ☐ Yes ☒ No			
b	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 relying on a current notice regarding disaster assistance check here. ☐	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? ☐	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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)(2) to all years listed, answer "No" and attach statement—see instructions). ☐	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 ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). ☐	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐	Yes	☒	No
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐	Yes	☒	No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☒	Yes	☐	No
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☒	Yes	☐	No
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐	Yes	☒	No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		No	
	Organizations relying on a current notice regarding disaster assistance check here.				
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?				
	If "Yes," attach the statement required by Regulations section 53.4945–5(d) 				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				
		☐	Yes	☒	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No	
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?				
		☐	Yes	☒	No
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
DEBORAH J FRAIZE 114 FAYERWEATHER STREET 2 CAMBRIDGE, MA 02138	ASSOC DIR 35 00	73,924	18,709	0

Total number of other employees paid over \$50,000. **0****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MORGAN STANLEY SMITH BARNEY 1 PENN PLAZA NEW YORK, NY 10001	INVESTMENT MANAGEMENT PENSION PLAN MANAGEMENT	89,368

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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NEBF SUPPORTS PRIMARILY GRASSROOTS ORGANIZATIONS WITH AN EMPHASIS ON CONSERVATION, BIOCULTURAL DIVERSITY, ECOSYSTEMS, FOOD SECURITY AND THE MARINE ENVIRONMENT	880,462
2	0
3	0
4	0

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	8,024,481
b	Average of monthly cash balances.	1b	161,909
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	8,186,390
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	8,186,390
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	122,796
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	8,063,594
6	Minimum investment return. Enter 5% of line 5.	6	403,180

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	403,180
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	6,517
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	6,517
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	396,663
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	396,663
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	396,663

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	880,462
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	880,462
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	6,517
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	873,945

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)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				396,663
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012. 236,360				
b From 2013. 276,416				
c From 2014. 293,382				
d From 2015. 379,566				
e From 2016. 470,006				
f Total of lines 3a through e.	1,655,730			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 880,462				
a Applied to 2016, 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 2017 distributable amount.				396,663
e Remaining amount distributed out of corpus	483,799			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,139,529			
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 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	236,360			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,903,169			
10 Analysis of line 9				
a Excess from 2013. 276,416				
b Excess from 2014. 293,382				
c Excess from 2015. 379,566				
d Excess from 2016. 470,006				
e Excess from 2017. 483,799				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
NA

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If 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
JESSICA L BROWN
240 COUNTY ROAD
IPSWICH, MA 019382723
(978) 998-7990

b The form in which applications should be submitted and information and materials they should include
REFER TO THE FOUNDATION'S WEBSITE, WWW NEBF ORG, FOR COMPLETE INSTRUCTIONS

c Any submission deadlines
APPLICATIONS ARE REVIEWED TWICE A YEAR

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
REFER TO THE FOUNDATION'S WEBSITE, WWW NEBF ORG, FOR COMPLETE INSTRUCTIONS

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> SEE ATTACHED GRANT SCHEDULES IN ATTACHED PDFS IPSWICH, MA 01938		NC/PC	SEE ATTACHED SCHEDULES	576,928
LEAH HARMON 39 BROADWAY AVENUE EXT IPSWICH, MA 01938	NONE	N/A	POST-SECONDARY EDUCATION	10,000
Total			▶ 3a	586,928
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments			14	64		
4 Dividends and interest from securities.			14	180,487		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory			18			561,184
9 Net income or (loss) from special events						39,585
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .				180,551		600,769
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13			781,320

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII

		Yes	No
--	--	------------	-----------

--	--	--

1a(1)	No
--------------	-----------

1a(2)	No
-------	----

--	--	--

1b(1)	No
--------------	-----------

1b(2)		No
--------------	--	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)	No
-------	----

1b(6)		No
--------------	--	-----------

1c		No
----	--	----

value
ue[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

***** 2019-05-07 ***** May the IRS discuss this return with the preparer shown

May the IRS discuss this return with the preparer shown below

(see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name TIMOTHY F HAGAN CPA	Preparer's Signature	Date 2019-06-06	Check if self-employed ☐	PTIN P00365920
	Firm's name ▶ BERNARD JOHNSON & COMPANY PC				Firm's EIN ▶
	Firm's address ▶ 15 MAIN STREET TOPSFIELD, MA 01983				Phone no (978) 887-2220

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JESSICA L BROWN 275 HIGH ROAD NEWBURY, MA 01951	EXECUTIVE DIRECTOR 27 00	90,256	29,878	0
HENRY P PAULUS 85 EAST INDIA ROW 35A BOSTON, MA 02110				
DAVID C COMB 1 NORTONS POINT MANCHESTER, MA 01944	TRUSTEE 5 00	0	0	0
HEIDI ELLARD 8 GREAT POND DRIVE BOXFORD, MA 01921				
DYLAN COMB 242 MAIN STREET APT 3R GLOUCESTER, MA 01930	TRUSTEE 5 00	0	0	0
JOVIAL KING 85 LAKEVIEW TERRACE BURLINGTON, VT 05401				

TY 2017 Accounting Fees Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BJHC, PC REVIEW & TAX	9,384			9,384

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
SARTENEJA ALLIANCE FOR CONSERVATION AND DEVELOPMENT	NORTH FRONT STREET SARTENEJA VILLAGE COROZAL DISTRICT BH	2017-08-03	17,200	THE COMMUNITY RESEARCHER PROGRAMME EMPOWERING YOUTH THROUGH LEADERSHIP OPPORTUNITIES FOR THE BETTER STEWARDSHIP OF THE NATURAL RESOURCES AND ECOSYSTEM SERVICES OF COROZAL BAY WILDLIFE SANCTUARY	17,200	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
INSTITUTO POLITECNICO TOMAS KATARI	CALLE NATANIEL AGUIRRE 560 SUCRE OROPEZA BL	2017-08-03	7,500	REDUCTION OF THE RISKS OF CLIMATE CHANGE AND PRESERVATION OF THE ENVIRONMENT IN 12 COMMUNITIES IN POCOATA	7,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
NATURE-CARE-CAMEROON	PO BOX 121 KUMBO CM	2017-08-03	7,000	AGROFORESTRY PROMOTION FOR LIVELIHOOD ENHANCEMENT AND BIODIVERSITY SUSTAINABILITY OF THE MBIAME COMMUNITY FOREST, NORTHWEST CAMEROON	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
CAMEROON GENDER AND ENVIROMENT WATCH	MANCHOOK OKU OKU BUI NORTHWEST REGION CM	2017-12-01	6,000	FOREST EDUCATION THROUGH NATIVE TREE NURSERY DEVELOPMENT AND FOREST REGENERATION BY CHILDREN AND BEE FARMERS IN IJIM FOREST	6,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FOREST AND AGROFORESTRY PROMOTERS	LONG STREET NDOP BAMENDA NDOP CM	2017-12-01	6,500	TREE PLANTING AND BEE KEEPING FOR WATER CATCHMENT PROTECTION AND CONSERVATION IN THE MOUNT CAMEROON REGION	6,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
GEO-ENVIRONMENTAL RESOURCE ASSOCIATION CAMEROON	ADMINISTRATIVE QUARTER UP STATION KUMBA SOUTHWEST REGION CM	2017-12-01	4,700	CLIMATE CHANGE WORKSHOP FOR YOUNG PEOPLE A PROJECT ENGAGING YOUTH BETWEEN THE AGES OF 8 AND 16 IN TREE PLANTING ACTIVITIES IN KUMBA, SOUTHWEST REGION	4,700	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
THE GREENS	TEKEN QUARTER MILE 4 NKWEN BAMENDA NORTHWEST REGION CM	2017-12-01	6,500	FORESTS-PEOPLE LEASING PARTNERSHIP FOR THE CONSERVATION OF THE BAMENDA HIGHLANDS FORESTS SUPPORTING A PARTNERSHIP IN WHICH LOCAL FARMERS LEASE THEIR LAND FOR CONSERVATION AND TO CARRY OUT ALTERNATIVE INCOME- GENERATING, FOREST-FRIENDLY ACTIVITIES	6,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
MEG WAH (MY EARTH)	KAWAH STREET BOMAKA BUEA SOUTHWEST REGION CM	2017-12-01	4,500	HARNESSING AND SCALING UP A PROVEN LOCAL PANACEA TO DEFORESTATION AND PRESSURE ON WILDLIFE HABITAT PROMOTING SUSTAINABLE COCOA FARMING PRACTICES IN THE COMMUNITIES AROUND TOFALA HILL WILDLIFE SANCTUARY	4,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION
EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
TERRALINGUA	217 BAKER ROAD SALT SPRING ISLAND BC CA	2017-10-03	1,000	GENERAL SUPPORT, INCLUDING ITS FLAGSHIP PUBLICATION LANGSCAPE, AND ITS PARTICIPATION IN THE GLOBAL BIOCULTURAL DIVERSITY DIALOGUE	1,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ACCELERATED RURAL DEVELOPMENT ORGANISATION	PO BOX 359 HOHOE VOLTA GH	2017-08-03	7,400	CONSERVATION, PROTECTION, AND PROMOTION OF THE WETO SACRED SITE AT GOVIEFE TODZI FOR THE ENHANCEMENT OF THE LIVES OF PEOPLE A PROJECT INCORPORATING PARTICIPATORY MAPPING, TREE PLANTING, AND TRAINING IN BUSH-FIRE MANAGEMENT	7,400	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
AGRO-INTRODUCTIONS GHANA	PO BOX CT 1095 CANTONMENTS ACCRA GH	2017-08-03	8,000	ENHANCING COMMUNITY RESOURCE MANAGEMENT IN THE WECHIAU HIPPOPOTAMUS SANCTUARY	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
GHANA WILDLIFE SOCIETY	ACCRA CONSERVATION CENTER ACCRA GREATER ACCRA GH	2017-12-01	7,000	PROMOTING COMMUNITY PARTICIPATION IN NATURAL RESOURCE MANAGEMENT A PUBLIC EDUCATION PROGRAM INVOLVING THE COMMUNITIES AROUND MOUNTAIN AFADJATO	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
CENTRE FOR INDIGENOUS KNOWLEDGE AND ORGANIZATIONAL DEVELOPMENT	PO BOX CT 4131 ACCRA GH	2017-12-01	8,000	FORIKROM BIOCULTURAL HERITAGE AND SOCIAL EXPRESSIONS IMPLEMENTATION OF A TWO-YEAR ACTION PLAN DESIGNED TO REVITALIZE AND SAFEGUARD FORIKROM CULTURE AND COMMUNITY	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		DUE NO LATER THAN ONE YEAR FROM DECISION DATE

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FUNDACION MUNDO AZUL	BULEVAR LANDIVAR 10-05 PASEO CAYALA GUATEMALA GT	2017-12-01	8,800	PARTICIPATORY SOLID WASTE MANAGEMENT AT A SHARK FISHING COMMUNITY ON GUATEMALA'S CARIBBEAN COAST	8,800	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		DUE NO LATER THAN ONE YEAR FROM DECISION DATE

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION DE PRODUCTORES ORGANICOS PARA EL DESARROLLO INTEGRAL DEL POLOCHI	ALDEA CAMPUR LA TINTA ALTA VERAPAZ COBAN COBAN ALTA VERAPAZ GT	2017-12-01	7,000	STRENGTHENING THE CAPACITIES OF APODIP PRODUCERS IN AGROFORESTRY A PROJECT TO STRENGTHEN AGRO-ECOLOGICAL APPROACHES TO FARMING, INCLUDING ENVIRONMENTALLY-FRIENDLY PRODUCTION OF COFFEE, CACAO, AND HONEY	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		DUE NO LATER THAN ONE YEAR FROM DECISION DATE

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FUNDACION PROPETEN	CALLE CENTRAL FLORES PETEN GT	2017-12-01	8,000	STRENGTHENING COMMUNITY GOVERNANCE FOR THE MANAGEMENT OF NATURAL AND CULTURAL RESOURCES AROUND NAJ TUNICH ARCHAEOLOGICAL PARK	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION MAYA PROBIENSTAR RURAL DEL AREA SARSTUN	ALDEA BARRA LAMPARA LIVINGSTON IZAB IZABAL GT	2017-12-01	7,000	SUPPORTING SUSTAINABLE LIVELIHOODS INVESTMENTS FOR FISHING COMMUNITIES IN THE RIO SARSTUN PROTECTED AREA	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
CANTERA CENTER FOR COMMUNICATION AND POPULAR EDUCATION	DE PLAZA EL SOL DOS CUADRAS AL SUR MANAGUA NU	2017-12-01	8,000	STRENGTHENING AGROECOLOGICAL PRACTICES AND SEED BANKS ON THE PACIFIC COAST OF NICARAGUA AN INITIATIVE IN EIGHT (8) COMMUNITIES IN RIVAS TO WORK TOWARD SUSTAINABLE FOOD PRODUCTION FOR LOCAL CONSUMPTION	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION MOVIMIENTO DE JOVENES DE OMETEPE	DEL PUERTO DE MOYOGALPA 400 METROS RIVAS NU	2017-12-01	7,000	BY CARING FOR THE OMETEPE ISLAND BIOSPHERE RESERVE, I CARE FOR MY LIFE, MY SAFETY, AND THAT OF OTHERS A PROJECT TO BUILD THE CAPACITY OF YOUTH TO CARE FOR LOCAL RESOURCES	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
PLANETO OCEANO	MALECON ARMENDARIZ 199 DPTO 201 LIMA PE	2017-08-03	7,000	CONNECTING SCHOOLS AND PROMOTING YOUNG LEADERS IN MARINE CONSERVATION FACILITATING ONLINE CONVERSATIONS WITH PEERS FROM DISTINCT GEOGRAPHIES THAT WILL CATALYZE KNOWLEDGE EXCHANGE AND MOBILIZE COMMUNITY ACTION	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION MINGA PERU	CALLE SARGENTO LORES 469 IQUITOS-LO LIMA PE	2017-08-03	2,000	IN HONOR OF MINGA'S 20TH ANNIVERSARY WORKING IN THE PERUVIAN AMAZON	2,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ALIANZA ARKANA	JR AQUAYTIA 560 PUCALLPA UCAYALI PE	2017-12-01	8,000	SUSTAINABLE LIVELIHOODS, FOOD SOVERIGNTY, AND REFORESTATION IN THE SHIIBO COMMUNITY OF SANTA CLARA	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
SAPHICHAY	PSJE RAYMOND 189 HUANCAYO JUNIN PE	2017-12-01	7,500	A PROJECT THAT WORKS WITH SCHOOLCHILDREN AND THEIR PARENTS IN HUANCAYO, LOCATED IN THE CENTRAL ANDES, TO REVITALIZE THEIR CONNECTION TO SEEDS, SOIL, NATIVE DIET, LANGUAGE, AND IDENTITY THROUGH BIOCULTURAL CONSERVATION	7,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FAUNA AND FLORA INTERNATIONAL	PEMBROKE STREET CAMBRIDGE UK	2017-12-01	7,000	INTEGRATED ECOSYSTEM-BASED LANDSCAPE MANAGEMENT IN THE OMETEPE ISLAND BIOSPHERE RESERVE A PROJECT ENGAGING LOCAL FARMERS IN AN AGROECOLOGICAL APPROACH TO IMPROVE PRODUCTION AND SUSTAINABILITY AND TO REDUCE VULNERABILITY TO LOCAL IMPACTS OF CLIMATE CHANGE	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
SARSTOON TEMASH INSTITUTE FOR INDIGENOUS MANAGEMENT (SATIIM)	PO BOX 127 PUNTA GORDA TOWN BH	2017-08-03	17,000	MAYAN COMMUNITIES CARING FOR "MOTHER TREES" IN SOUTHERN BELIZE TRAINING INDIGENOUS COMMUNITIES TO MAP FOREST INVENTORIES, STANDARDIZE FORESTRY PRACTICES, AND BUILD A NETWORK OF COMMUNITY FORESTERS	17,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
CENTRE FOR NURSERY DEVELOPMENT AND ERU PROPOGATION (CENDEP)	SAMCO JUNCTION LIMBE CM	2017-08-03	7,500	STRENGTHENING COMMUNITY-LED FAMILY FARMS AND FOOD SECURITY IN MBVEN SUBDIVISION, NORTHWEST REGION, CAMEROON	7,500	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ENVIRONMENTAL GOVERNANCE INSTITUTE (EGI)	PARAMOUNT STREET MOLYKO BUEA SW REGION CM	2017-08-03	7,000	ADDRESSING THE HUMAN DIMENSIONS OF WILDLIFE CONSERVATION IN COMMUNITIES AROUND THE TAKAMANDA NATIONAL PARK IN CAMEROON AN INITIATIVE TO SUPPORT THE PARTICIPATION OF KALUMO, AKWA, OKPAMBE, ATINTA, AND ATOLO VILLAGES IN PARK MANAGEMENT DECISIONS	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
RESOURCE CENTRE FOR ENVIRONMENT AND SUSTAINABLE DEVELOPMENT (RCESD)	PO BOX 30 BUREA SW REGION CM	2017-08-03	8,000	AN INTEGRATED COMMUNITY-LED MODEL FOR SUSTAINABLE LIVELIHOOD DEVELOPING A RESILIENT, MARKET-DRIVEN AGRICULTURE SYSTEM IN THE BONAKADA COMMUNITY ADJACENT TO MOUNT CAMEROON NATIONAL PARK	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
A RHOCA GHANA	PO BOX KN 3480 KENESHIE ACCRA GH	2017-08-03	8,000	BIOCULTURE EDUCATORS AS THE BEST BET FOR OUR PRESENT AND FUTURE CULTURE AND NATURAL RESOURCES THE CASE OF BOBIRI FOREST RESERVE AND BUTTERFLY SANCTUARY	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
CENTRE FOR SUSTAINABLE RURAL AGRICULTURE AND DEVELOPMENT (CSRAD)	PO BOX 67 ESIAMA WESTERN REGION GH	2017-08-03	6,600	GREENING AND INTEGRATING YOUTH THROUGH CREATIVE APPROACHES TO STRENGTHEN CONSERVATION OF AMANZULE WETLAND FOR GENERATIONAL BENEFITS	6,600	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION
EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
HERP CONSERVATION GHANA (HERP-GHANA)	PLOT 58 BLOCK H KRAPHA KUMASI ASHANTI GH	2017-08-03	8,000	TOWARDS THE ESTABLISHMENT OF A COMMUNITY-BASED AMPHIBIAN SANCTUARY IN THE TOGO-VOLTA HILLS	8,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
GREENGLOBE GHANA	PO BOX HP 1343 HO VOLTA REGION GH	2017-08-03	7,000	COMMUNITY INSTITUTIONAL CAPACITY BUILDING FOR NATURAL RESOURCE MANAGEMENT IN SAVIEFE AGORKPO	7,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
RED DE CONSERVACION VOLUNTARIA DE AMAZONAS	JR ASUNCION 1340 JR LA MERCED 802 BARRIO LA LAGUNA CHACHAPOYAS PE	2017-08-03	6,000	CREATING PROMOTERS OF CONSERVATION AND SUSTAINABLE TOURISM FOR THE FINANCIAL SUSTAINABILITY OF THE AMAZON VOLUNTARY CONSERVATION NETWORK	6,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Expenditure Responsibility Statement

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ASOCIACION MINGA PERU	CALLE SARGENTO LORES 469 IQUITOS-LO LIMA PE	2017-08-03	19,000	WOMEN LEADERSHIP AND BIO-CULTURAL PRESERVATION PROJECT	19,000	TO THE KNOWLEDGE OF THE GRANTOR, NO FUNDS HAVE BEEN DIVERTED TO ANY ACTIVITY OTHER THAN THE ACTIVITY	DUE NO LATER THAN ONE YEAR FROM DECISION DATE		GRANTOR STAFF PERFORM PERIODIC SITE VISITS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Gain/Loss from Sale of Other Assets Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
INVESTMENT SECURITIES		Purchased			4,208,064	3,646,880	Cost		561,184	

TY 2017 Investments Corporate Bonds Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS #398-023140-322	152,106	145,179

TY 2017 Investments Corporate Stock Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCK #398-027154-322	378,186	505,869
COMMON STOCK #398-023157-322	1,751,367	2,306,367
COMMON STOCK #398-023156-322	2,522,065	3,272,322

TY 2017 Investments Government Obligations Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213**US Government Securities - End
of Year Book Value:**

1,909,454

**US Government Securities - End
of Year Fair Market Value:**

1,872,763

**State & Local Government
Securities - End of Year Book
Value:****State & Local Government
Securities - End of Year Fair
Market Value:**

TY 2017 Investments - Other Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
EXCHANGE-TRADED FUNDS #398-027154-322		6,432	5,943
MUTUAL FUNDS #398-023140-322		378,396	343,853

TY 2017 Other Assets Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	937,987	1,354,290	

TY 2017 Other Assets Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	937,987	1,354,290	

TY 2017 Other Assets Schedule

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UNREALIZED GAIN ON INVESTMENTS	937,987	1,354,290	

TY 2017 Other Expenses Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	606			606
OFFICE SUPPLIES	2,044			2,044
MEMBER DUES	8,518			8,518
BOARD EXPENSES	1,553			1,553
COMPUTER EXPENSE	349			349
FILING FEES	125			125
TELEPHONE	91			91
INSURANCE	1,586			1,586
SPECIAL EVENT EXPENSES	20,468			20,468
OTHER EXPENSE	2,717			2,717

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FUNDRAISING/SPONSORSHIPS	2,902			2,902

TY 2017 Other Increases Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213

Description	Amount
NET UNREALIZED GAIN ON INVESTMENTS	416,304
PRIOR PERIOD ADJUSTMENT	28,708

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2017 Other
Notes/Loans Receivable
Long Schedule**

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
ROOT CAPITAL INC	NONE	50,000	50,000	2017-12	2018-12	DUE ON DEMAND	1 750000 %	UNSECURED, FULL RECOURSE	INVESTMENT	NOTE	50,000

TY 2017 Other Professional Fees Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MORGAN STANLEY INVESTMENT MANAGEMENT FEES	89,368	89,368		
GAIL McELHINNEY BOOKKEEPING	1,901			1,901
PAYCHEX PAYROLL SERVICE FEES	2,299			2,299

TY 2017 Reasonable Cause Explanation

Name: NEW ENGLAND BIOLABS FOUNDATION

EIN: 04-2776213

Explanation: AN OUTSIDE GROUP OF FOUNDATION SUPPORTERS HELD AN ANNUAL GOLF TOURNAMENT THE PROCEEDS OF WHICH WERE USED TO PROVIDE POST-SECONDARY EDUCATION SCHOLARSHIPS FOR AREA YOUTH. THE ACCOUNTING FOR THESE FUNDS WAS MAINTAINED UNDER THE TAXPAYER IDENTIFICATION OF THE FOUNDATION. UPON LEARNING OF THIS ACTIVITY, THE FOUNDATION MANAGERS REQUESTED A FORMAL ACCOUNTING OF THE GOLF EVENT ACTIVITIES AND SCHOLARSHIP PAYMENTS SO THAT THIS ACTIVITY COULD BE INCLUDED IN THE FOUNDATION'S FORM 990-PF TAX RETURN FOR THE

TY 2017 Taxes Schedule**Name:** NEW ENGLAND BIOLABS FOUNDATION**EIN:** 04-2776213

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	11,609			11,609
FEDERAL EXCISE	6,565			
FOREIGN TAX	620	620		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization NEW ENGLAND BIOLABS FOUNDATION	Employer identification number 04-2776213

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization NEW ENGLAND BIOLABS FOUNDATION	Employer identification number 04-2776213
---	---

Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW ENGLAND BIOLABS INC 240 COUNTY ROAD IPSWICH, MA 01938	 \$ 203,000 	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization NEW ENGLAND BIOLABS FOUNDATION	Employer identification number 04-2776213
---	---

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organization NEW ENGLAND BIOLABS FOUNDATION	Employer identification number 04-2776213
---	---

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	