

**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.

Dep: Inter	artmen nal Rev	venue Service		► Go to www.	irs.gov/Form990PF for inst	ructions and the latest inf	ormation.	Open to Public Inspection
For	calen	dar year 2017 oi	tax year beg	inning		, and ending		
		foun dation					A Employer identification	number
				LY FOUNDA		<del></del>	05-0509060	<u> </u>
		•		is not delivered to street	•	Room/suite	<b>B</b> Telephone number	
				, TECH II			(401) 841-	8880
		own, state or prov DLETOWN ,		, and ZIP or foreign p 2842–5201			C If exemption application is p	ending, check here
		all that apply:	Initi	al return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
				al return Iress change	Amended return Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, proputation
H	_	type of organiza ection 4947(a)(1)		· · · · · · · · · · · · · · · · · · ·	xempt private foundation Other taxable private found:	ation OA	E If private foundation sta under section 507(b)(1)	
 I E		arket value of all a				Accrual	F If the foundation is in a	
		Part II, col. (c), lin	e 16)		ther (specify)		under section 507(b)(1)	
	<b>►</b> \$	a	958.2	297 . (Part I, colur	nn (d) must be on cash basi	s.)		(D), OHOUR HOLD
, —	art I	Analysis of Re (The total of amounecessarily equal	venue and Ex	penses b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
<b> F</b>	1	Contributions, o			103,700.			(cash basis only)
	'2		, ,	t required to attach Sch. B	103,700.			
	3	Interest on savings				<u> </u>	<del> </del>	
	4	Dividends and II	nterest from s	ecurities	14,005.	14,005		STATEMENT 1
	1	Gross rents	1101001 110111 0	504111.05	==/000		1	
	1	Net rental income	or (loss)		·			T
	6a	Net gain or (loss) fr	· · · —	s not on line 10	55,621.			1
9	b	Gross sales price f		244,596.	7.27.2			
Revenue	7	Capit al gain net inc	ome (from Part J			55,621.	,	
ă	8	Net short-term	apital-gain F	IVFD				
	9	Income modific	ations	10				
	10a	Gross sales less re and a llowances	turns	2018				
	b	Less Cost of good	s sold	် များ				
	c			je				
(A)	11	Other income						
1 2 L	12	Total Add lines			173,326.	69,626.	0.	
SCA div	13	Compensation of c	fficers, directors	, trustees, etc	0.	0.	0.	0.
2	14	Other employee		-			L	
	15	Pension plans, e	employee bene					
	}   16a	Legal fees		STMT 2	1,170.	0.	0.	1,170.
JUL ©	₹ b	Accounting fees		STMT 3	3,000.	0.	0.	3,000.
		: Other professioi	nal fees	STMT 4	8,838.	8,838.	0.	0.
⊨ ite	17					<u></u>	<u> </u>	
	18	Taxes		STMT 5	21.	21.	0.	0.
20% 30%	19	Depreciation and	d depletion		ļ	 	<del> </del>	
©9 <u>2</u>	20	Occupancy			ļ		<u> </u>	
ď	21	Travel, conferen		ings				
Ž	22	Printing and put	olications	am) ( )	550	<u> </u>	ļ <u>-</u> -	
2	23	Other expenses		STMT 6	770.	0.	0.	770.
I I 20%	24	Total operating			12 500	0.050		4 040
Š	5	expenses. Add			13,799.	8,859.	0.	4,940.
	25	Contributions, g			108,500.		<del> </del>	108,500.
	26	Total expenses		ments.	122 200	0 050	0.	112 440
_	-	Add lines 24 and			122,299.	8,859.	<del> </del>	113,440.
	27	<del>-</del> -			51,027.		1	
		Net investment	•		51,04/.	60,767.	<del> </del>	<del> </del>
		Adjusted net inc				00,767	0.	
		, vanasien net int	THE (II HEYAUV	Of Circle O )	1		,	1

C Adjusted net income (if negative, enter -0-) 723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

For	Form 990-PF (2017) THE BANCROFT FAMILY FOUNDATION 05-0509060 Page 2						
		Balance Sheets Attached schedules and amounts in the description		Beginning of year	End of		
Р	art	column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing		281,286.	215,428.	215,428.	
	2	Savings and temporary cash investments					
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons			_		
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts ▶					
S	8	Inventories for sale or use					
ssets	9	Prepaid expenses and deferred charges	ſ				
Ä	10a	Investments - U.S. and state government obligations	- [				
	b	Investments - corporate stock STMT	7	396,096.	512,981.	742,869.	
	C	Investments - corporate bonds					
	11	Investments - land, buildings and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	investments - other	ſ				
	14	Land, buildings, and equipment; basis					
		Less accumulated depreciation					
	15	Other assets (describe	)				
	16	Total assets (to be completed by all filers - see the					
		instructions. Also, see page 1, item l)	į	677,382.	728,409.	958,297.	
	17	Accounts payable and accrued expenses					
	18	Grants payable					
G	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
apil	21	Mortgages and other notes payable					
Ξ	22	Other liabilities (describe	) [				
	23	Total liabilities (add lines 17 through 22)		0.	0.		
			X				
		and complete lines 24 through 26, and lines 30 and 31					
Ses	24	Unrestricted	l	677,382.	728,409.		
auc	25	Temporarily restricted					
Bal	26	Permanently restricted					
Net Assets or Fund Balances	1	Foundations that do not follow SFAS 117, check here	╗╘				
ī		and complete lines 27 through 31					
ō	27	Capital stock, trust principal, or current funds					
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
As	29	Retained earnings, accumulated income, endowment, or other fun	ds				
et	30	Total net assets or fund balances		677,382.	728,409.		
~							
	31	Total liabilities and net assets/fund balances		677,382.	728,409.		
			nd Ba				
<u> </u> P	art	III Analysis of Changes in Net Assets or Fu	iiu Da	alalices			
1	Tota	net assets or fund balances at beginning of year - Part II, column (	a), line 3	30			
		st agree with end-of-year figure reported on prior year's return)			1	677,382.	
2	•	r amount from Part I, line 27a			2	51,027.	
		r increases not included in line 2 (itemize)			3	0.	
		lines 1, 2, and 3			4	728,409.	
		eases not included in line 2 (itemize)			5	0.	
		I net assets or fund balances at end of year (line 4 minus line 5) - Pa	ırt II, col	lumn (b), line 30	6	728,409.	
	_			<del></del>		Form <b>990-PF</b> (2017)	

orm 990-PF (2017) THE BANCROFT FAMILY FOUNDATION  Part IV Capital Gains and Losses for Tax on Investment Income						05-0509060			Page 3		
(a) List and describe	the kind(s) of	property sold (for exam ommon stock, 200 shs.	ple, real esta		(b) How acquired P - Purchase D - Donation				acquired lay, yr.)	( <b>d)</b> Date (mo., da	sold y, yr.)
 1a											-
b SEE ATTACHED	STATE:	MENT									
<u>c</u>					-						
<u>d</u>					-						
е					<u></u>						
(e) Gross sales price		eciation allowed allowable)		st or other basis expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))						
<u>a</u>		-									
<u>b</u>								_			_
<u>C</u>	<del></del>										
e 244,596.		····-		100 07	, E						<u></u>
	ia asin'in coli	mn (h) and owned by th	e foundation	188,97	э.		(1)	C (6	)-I (h)		,621.
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.  (i) FMV as of 12/31/69  (j) Adjusted basis (k) Excess of col (i) over col. (j), if any				col.	(k), but :	Col. (h) gain not less than (from col. (l	-0-) <b>or</b>				
a _			•			-					
b	· · · · · · · · · · · · · · · · · · ·										
C											
d											
е										55,	621.
2 Capital gain net income or (net ca	pıtal loss)	If gain, also enter i			}	2					621.
Net short-term capital gain or (los	s) as defined										
If gain, also enter in Part I, line 8,	•		(0).		ĴΙ						
If (loss), en ter -0- in Part I, line 8						3			N/A		
<del></del>		tion 4940(e) for I					ent Inc	ome			
For optional use by domestic private	foundations :	subject to the section 49	140(a) tax on	net investment in	icome.	.)					
f section 4940(d)(2) applies, leave th	nis part blank.										
	•										
Was the foundation liable for the sect				•	lods					Yes [	X No
f "Yes," the foundation doesn't qualif											
1 Enter the appropriate amount in 6	each column i	<del></del>	tructions be	rore making any e						/4\	
(a) Base period years		<b>(b)</b> Adjusted qualifying distri	hutione	Not value of no	(c)	tabla	una nanata		Distribi	(d) ution ratio	
Calendar year (or tax year beginning	ng in) /			Net value of no					(col. (b) dıvı		
2016			,808.				7,888				8957
2015			,355.				4,925				30328
2014			,299.				3,179				8245
2013			,360.				2,935				8055
2012			,000.			56	9,741	•		• 10	<u> 1801</u>
D. Tatal of line 1 column (d)										~ ~	7700
2 Total of line 1, column (d)	Swar bass = -	rod dunda the tetel	lina O ber 5 1	ا معالم الم	1			2		. 6 2	7386
Average distribution ratio for the 5			line 2 by 5.0	, or by the number	er of y	ears				1.0	
the foundation has been in exister	ice ii iess mai	i 5 years						3		. 14	<u> </u>
4 Enter the net value of noncharitab	le-use assets	for 2017 from Part X, lin	ie 5					4_		850,	240.
5 Multiply line 4 by line 3								5	106,686.		
6 Enter 1% of net investment incom	e (1% of Part	l, line 27b)						6			608.
7 Add lines 5 and 6								7		107,	294.
8 Enter qualifying distributions from	•							8		113,	440.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check	the box in Part VI, line 1	b, and comp	lete that part using	g a 1%	tax ra	ate.				

723521 01-03-18

	990-PF (2017) THE BANCROFT FAMILY FOUNDATION 05-0 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	5090	60	ctio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	300 111	3111	Ctio	13)
ıa	i i i				
	Date of ruling of determination letter: (attach copy of letter if necessary-see instructions)			_	0.0
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			6	<u> 80</u>
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
3	Add lines 1 and 2			6	08.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			6	08.
6	Credits/Payments:				
	2017 estimated tax payments and 2016 overpayment credited to 2017  6a 196.				
	Exempt foreign organizations - tax withheld at source  6b  0.				
	Tax paid with application for extension of time to file (Form 8868)  6c  0.				
	Backup withholding erroneously withheld 6d 0.				
7	Total credits and payments. Add lines 6a through 6d			1	<u>96.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8				<u>2.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			4	<u>14.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11				
	rt 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 participate or intervene in	L		Yes	
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1b	i	X
	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.	j	İ		
C	Did the foundation file Form 1120-POL for this year?	L	1c		X
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. ► \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		İ		
	managers. ► \$ 0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.	T.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A $\lceil$	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or	- 1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		ĺ		
	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.				
	RI		-		
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		вь	х	_
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 tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	1	10		X
		Form	990	-PF	2017)

Pa	rt VII-A	Statements Regarding Activities (continued)				
				,	Yes	No
11	-	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
		2(b)(13)? If "Yes," attach schedule. See instructions	-	11		X
12		ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg	jes?			
		ach statement. See instructions	-	12		X
13		ndation comply with the public inspection requirements for its annual returns and exemption application?	L	13	X	Щ_
		dress ► <u>N/A</u> are in care of ► LAURIE MANDLY  Telephone no. ► 4	01 04	1 0	200	
14			01-841 +4 <b>►</b> 028		<u> </u>	
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here	-4 <u>020</u>	744		
15		the amount of tax-exempt interest received or accrued during the year	1	N	/A	
16		e during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
10		or other financial account in a foreign country?	Γ	16		X
		tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
	foreign col	untry >				L
Pa	art VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form	1 4720 if any item is checked in the "Yes" column, unless an exception applies.	L		Yes	No
1a	During the	year, did the foundation (either directly or indirectly):				1
		e in the sale or exchange, or leasing of property with a disqualified person?	X_ No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)	l	l		
		ualified person?		İ		
	` '	h goods, services, or facilities to (or accept them from) a disqualified person?  Yes  The property of the property of the expenses of, a disqualified person?  Yes				
		ompensation to, or pay or reimburse the expenses of, a disqualified person? Lagrany income or assets to a disqualified person (or make any of either available	סאו בב	ŀ		
		er any income or assers to a disqualified person (or make any or either available person)?	Y No			
		to pay money or property to a government official? (Exception. Check "No"	טאו בב	ŀ		
		oundation agreed to make a grant to or to employ the official for a period after				
		iation of government service, if terminating within 90 days.)	X No			
ŀ		ver is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations				
	-		N/A	1b		
	Organizatio	ons relying on a current notice regarding disaster assistance, check here	▶□			
C	Did the fou	indation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
		first day of the tax year beginning in 2017?	-	1c		X
2	Taxes on fa	allure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
		section 4942(j)(3) or 4942(j)(5)):				
ā		of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	l			
	before 201	and the second s	X_ No			
		t the years ►				
	_	iny years listed in 2a for which the fourhation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect if assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach				
			N/A	2b		
		isions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	.,,			
•	<b>▶</b>					
3	a Did the fou	indation hold more than a 2% direct or indirect interest in any business enterprise at any time				1
	during the	year? Yes [	X No			
1	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, 19	369; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispos	e			1
	-	s acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,				1
		·	N/A	3b		<u> </u>
		indation invest during the year any amount in a manner that would jeopardize its charitable purposes?	-	4a		X
١		indation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		_,		v
	nad not be	en removed from jeopardy before the first day of the tax year beginning in 2017?		_ <u>4b</u> ₀ QQ∩	-DF	(2017)
			rui i	II ツフU	- u- B	(201/)

orm 990-PF (2017) THE BANCROFT FAMILY FOUR		05-05090	60	Page 6	
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,			
any voter registration drive?	Ye	s X No			
(3) Provide a grant to an individual for travel, study, or other similar purpose	Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organizati					
4945(d)(4)(A)? See instructions		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or f	or			
the prevention of cruelty to children or animals?	,,		s X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify ui	nder the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance? See inst			ب	ы	х
Organizations relying on a current notice regarding disaster assistance, check				-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ined			
expenditure responsibility for the grant?		//A	s No		
•	1	1/A	.5 110		
If "Yes," a ttach the statement required by Regulations section 53.4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to	a nav promiume on				
	o pay premiums on		s X No	ŀ	
a personal benefit contract?		Y €	ŀ		·
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	Sb	X
If "Yes" to 6b, file Form 8870.			s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye			
b If "Yes," did the foundation receive any proceeds or have any net income attrit				'b	!
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	inagers, Higniy	<i>'</i>		
List all officers, directors, trustees, and foundation managers and	their companiestion				
1 List all officers, directors, trustees, and foundation managers and		(c) Compensation	(d) Contributions to	(a) Evr	NADCO
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	, other
	to position	enter -0-)	compensation	allowa	nces
DIANE M. ZUSPAN	_PRESIDENT				
55 HAMMARLUND WAY TECH II					•
MIDDLETOWN, RI 02842	0.00	0.	0.		0.
SCOTT BANCROFT	_VICE PRESIDEN	T			
55 HAMMARLUND WAY TECH II			_		_
MIDDLETOWN, RI 02842	0.00	0.	0. 0. 0		
LAURIE MANDLY	TREASURER				
55 HAMMARLUND WAY TECH II					
MIDDLETOWN, RI 02842	0.00	0.	0.		0.
CAROL A. VERROCHI	SECRETARY				
55 HAMMARLUND WAY TECH II					
MIDDLETOWN, RI 02842	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	. other
	devoted to position		compensation	allowa	nces
NONE	_				
	_				
	_				
Total number of other employees paid over \$50,000			<b>&gt;</b>		0
			Form	990-PF	(2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
·	Average monthly fair market value of securities	1a	728,346.
	Average of monthly cash balances	1b	134,842.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	863,188.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	ĺ	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	863,188.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,948.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	850,240.
6	Minimum investment return. Enter 5% of line 5	6	42,512.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here   and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	42,512.
	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	608.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	41,904.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	41,904.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	41,904.
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	113,440.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	113,440.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	608.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	112,832.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section
	4040/-) and other of the control		

# Part XIII Undistributed Income (see instructions)

•		(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d</b> ) 2017
1 Distributable amount for 2	2017 from Part XI,	· · · · · · · · · · · · · · · · · · ·			<del></del>
line 7	,				41,904.
2 Undistributed income, if any, a	as of the end of 2017				
a Enter amount for 2016 or	nly			0.	
<b>b</b> Total for prior years:					
,			0.		
3 Excess distributions carry					
<b>a</b> From 2012	30,517.				
<b>b</b> From 2013	43,951.				
c From 2014	58,664.				
d From 2015	52,859.				
e From 2016	59,988.	0.45 0.00			
f Total of lines 3a through		245,979.			
4 Qualifying distributions for					
Part XII, line 4: ► \$				0	
a Applied to 2016, but not i				0.	
<b>b</b> Applied to undistributed i			0		
years (Election required -			0.		
c Treated as distributions o	·	0.			
(Election required - see in	<i>'</i>	<u> </u>			41,904.
d Applied to 2017 distributa		71,536.		<del></del>	41,904.
e Remaining amount distrib		71,550.			0.
5 Excess distributions carryover (If an amount appears in columnust be shown in column (a))	nn (d), the same amount	- 0.			<u>0.</u>
6 Enter the net total of eac indicated below:	h column as				
a Corpus Add lines 3f, 4c, and	4e Subtract line 5	317,515.			
<b>b</b> Prior years' undistributed	I income. Subtract				
line 4b from line 2b			0.		
c Enter the amount of prior	years'				
undistributed income for deficiency has been issue					
the section 4942(a) tax h					
assessed			0.		
<b>d</b> Subtract line 6c from line	6b. Taxable				
amount - see instructions			0.		
e Undistributed income for				•	
4a from line 2a. Taxable a	<del></del>			0.	
f Undistributed income for					
lines 4d and 5 from line 1	I. This amount must				^
be distributed in 2018					0.
7 Amounts treated as distri					
corpus to satisfy requirer					
section 170(b)(1)(F) or 4		0.			
may be required - see ins	· -				
8 Excess distributions carry		30,517.			
not applied on line 5 or li		JU, JI / •			
9 Excess distributions care Subtract lines 7 and 8 fro	-	286,998.			
10 Analysis of line 9:	minimie oa	200,000			
a Excess from 2013	43,951.				
b Excess from 2014	58,664.				
c Excess from 2015	52,859.				
d Excess from 2016	59,988.				
e Excess from 2017	71,536.				
723581 01 02 18					Form <b>990-PF</b> (2017)

Form 990-PF (2017) THE BANG	CROFT FAMIL			05-050	09060 Page 10
Part XIV   Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		_	<b>▶</b>	14040(3)(0)	
b Check box to indicate whether the found		ig foundation described	Prior 3 years	4942(j)(3) or 494	12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(e) Total
Income from Part I or the minimum	(a) 2011	(0) 2010	(6) 2013	(0) 2014	(e) rotal
investment return from Part X for			{		
each year listed		<del> </del>	<del>                                     </del>		
<b>b</b> 85% of line 2a		<del> </del>	<del> </del> -		
c Qualifying distributions from Part XII,					
line 4 for each year listed			· /	<del></del>	
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			<del></del>	<del></del>	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:			1		
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter			1		
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,				1	
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			<del></del>		
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during the					
1 Information Regarding Foundation		·····	<del></del>		
a List any managers of the foundation who	_	than 2% of the total cor	itributions received by th	e foundation before the close	e of any tax
year (but only if they have contributed m			and anong received by an	o touridation botoro tile close	b or arry tax
NONE					
b List any managers of the foundation who	own 10% or more of th	e stock of a cornoration	(or an equally large port	ion of the ownership of a pai	rtnershin or
other entity) of which the foundation has			(or arroquany large port	ion of allo officionip of a par	Tanoromp of
NONE	•				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. P	rograme:		
Check here ► X if the foundation o		•	_	not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.,					1010 101 101103. 11
a The name, address, and telephone numb				<del></del>	
a The fights, address, and telephone fight	oci di emanaduless di d	to person to whom appr	icanons snould be address	330u.	
<b>b</b> The form in which applications should b	e submitted and informa	tion and materials they s	should include:		
c Any submission deadlines:		<del></del>			
d Any restrictions or limitations on awards	such as hy geographic	al areas, charitable fields	kinds of institutions or	other factors:	
a rany resultations of infinitations on awards	, saon as by geographic	ar ar oddy driar habid holdd	,ao or mantanona, or	idoto10.	
				_	
					F 000 DE (0047)

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
·	(a) Business	(b)	(C)	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
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					
4 Dividends and interest from securities	<b></b>		14	14,005.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property	<b></b>				
<b>b</b> Not debt-financed property	<u> </u>	<del></del>			
6 Net rental income or (loss) from personal				)	
property	ļ			<del></del>	
7 Other investment income	<del></del>				<del></del>
8 Gain or (loss) from sales of assets other	1		18	EE 621	
than inventory	<del></del>		10	55,621.	
9 Net income or (loss) from special events     Gross profit or (loss) from sales of inventory		<del></del>	+		
11 Other revenue:	\ <del>-</del>				<del></del>
	1				
b					
c		<del></del>	<del></del>		<del></del>
d			<del></del>		
e					
12 Subtotal. Add columns (b), (d), and (e)		(	).	69,626.	
13 Total. Add line 12, columns (b), (d), and (e)				13	69,62
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Accom	plishment of	Exempt Pu	ırposes	
		· 		·	Lichmont of
Explain below how each activity for which income the foundation's exempt purposes (other than to be a constant of the foundation).				importantly to the accomp	DIISTIMENT OF

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
723621 01-03	Form <b>990-PF</b> (2017)						

Part XVII	Information Re		nd Transactions an	d Relationships With Noncha	aritable	u	.gc_13
1 Did the of	Exempt Organ	rectly engage in any of the following	ng with any other organization	described in section 501(c)		Yes	No
		nizations) or in section 527, relating					_ <del></del>
a Transfers	from the reporting found:	ation to a noncharitable exempt or	ganization of:			İ	
(1) Cash					1a(1)		X
(2) Othe					1a(2)		<u>X</u>
<b>b</b> Other tran						[	
· ·	s of assets to a noncharita				1b(1)		X
	al of facilities, equipment,	oncharitable exempt organization			1b(2) 1b(3)		X
• •	nbursement arrangements				1b(4)		X
	is or loan guarantees				1b(5)		X
		embership or fundraising solicitatio	ons		1b(6)		X
c Sharing o	of facilities, equipment, ma	alling lists, other assets, or paid em	ployees		10		X
	=			ays show the fair market value of the goods in any transaction or sharing arrangement		ets,	
		other assets, or services received.					
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, an	nd sharing arra	ingemei	nts
		N/A					
	- · · · · · · · · · · · · · · · · · · ·						
		<del> </del>	<del></del>				
		<del></del>					
					·		
		<del></del>					
		<del></del>					
		<del> </del>					
					<del></del>		
	· · · · · · · · · · · · · · · · · · ·						
		on 501(c)(3)) or in section 527?	or more tax-exempt organiza	ations described	Yes	x	 ] No
	complete the following sch						
	(a) Name of org		(b) Type of organization	(c) Description of relation	nship		
	N/A						
Sign Here		implete Declaration of preparer (other tha		tion of which preparer has any knowledge	May the IRS dieturn with the hown below?	prepare	er
	Print/Type preparer's na	ame Preparer's s	ignature	Date Check If PTIN	1		
	EDMUND A.	RESTIVO /	// M/ Inam	rada self- employed			
Paid	JR. CPA/MS		1 / JULIONI.	7017) P	000962	293	
Preparer		TIVO MONACELLI	(LLP /	Firm's EIN ► 77-0	060143	37	
Use Only		- DVAILANGE SEE	<u></u>				
		EXCHANGE TERRA		Phone no. (401)	) 273-	76	00
	PR	ROVIDENCE, RI 02	303		7 <u>4 7 3 -</u> Form <b>990</b>		

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization

**Employer identification number** 

	TH	E BANCROFT FAMILY FOUNDATION	05-0509060
Organiza	tion type (check o	ne)	
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	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
-	ly a section 501(c)	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special F	Rules		
:	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, ir, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amou line 1. Complete Parts I and II	, or 16b, and that received from
,	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III.	-
:	year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious implete any of the parts unless the <b>General Rule</b> applies to this organization because it is, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it mu	st answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

(d)

## THE BANCROFT FAMILY FOUNDATION

05-0509060

Part I . Contributors (see instructions) Use duplicate copies of Part I if additional space is		
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contribution
	<del>-</del>	

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_1	CLAIRE BANCROFT  55 HAMARLUND WAY  MIDDLETOWN, RI 02842	\$\$	Person X Payroll
(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 Oncash Complete Part II for noncash contributions )

Employer identification number

### THE BANCROFT FAMILY FOUNDATION

05-0509060

ırt II	Noncash Property (see instructions) Use duplicate copies of Property	art II if additional space is needed.	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om ert l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. om art 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. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

	ses for Tax on Investment Income		(b) How acquired	<del></del>
• (a) List and 2-story bri	describe the kind(s) of property solo ck warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
	<del></del>	ELD AT BANK OF AME	D Donation	
b PUBLICLY TRADE				
c PUBLICLY TRADE				
d CAPITAL GAINS I				
е				
f		····		
g				
<u>h</u>				
_1			+	
<del></del>				
<u>k</u> 	<del></del>		++	
<u>'</u>		<del></del>		
n				
0				<del></del>
(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 80,678.		60,802.		19,876.
b 49,222.		48,313.		909.
c 114,341.		79,860.		34,481.
d 114,341.				355.
e f				
9				
<u>h</u>				
			<del></del>	
k				
m				
n				
0				
Complete only for assets showin	g gain in column (h) and owned by t		(I) Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ı), ıf any	Gains (excess of col. (h) gain over but not less than "-0-")	col. (k),
a				19,876.
p				909.
С				34,481.
d				<u>355.</u>
e f				
f				
g h				
1				
k				
m		<del>                                     </del>		
n				
0			<del></del>	
2 Capital gain net income or (net cap	pital loss) { If gain, also enter If (loss), enter "-0	ın Part I, line 7 -" ın Part I, line 7		55,621.
If gain, also enter in Part I, line 8, o		d (6):		
If (loss), enter "-0-" in Part I, line 8		<u></u>	N/A	

Part XV Supplementary Information	NCROFT FAMILY FO	JONDALI TON	05-05	23000
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual.	F 4-4	B /	<del></del>
N o and address (harmony harmony)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Commodition	
OMINICAN SISTERS OF PRESENTATION		NONE	CHARITABLE DONATION	
MARIE POUSSEPIN CENTER	l	İ		
012 ELM STREET	}	Ì	1	
DIGHTON MA 02715		<u> </u>		1,00
OOMINICAN SISTERS OF PRESENTATION		NONE	CHARITABLE DONATION	
MARIE POUSSEPIN CENTER	}			
3012 ELM STREET			}	
DIGHTON MA 02715				10,00
HALL NEIGHBORHOOD HOUSE 52 GEORGE E. PIPKIN'S WAY		NONE	CHARITABLE DONATION	
BRIDGEPORT, CT 06608				12,50
HALL NEIGHBORHOOD HOUSE		NONE	CHARITABLE DONATION	
52 GEORGE E. PIPKIN'S WAY			1	
BRIDGEPORT CT 06608	<del> </del>			5,00
LUCY'S HEARTH		NONE	CHARITABLE DONATION	
19 VALLEY ROAD				0.50
MIDDLETOWN, RI 02842				2,50
MARY'S SHELTER	}	NONE	CHARITABLE DONATION	
PO BOX 958		[		
STUART, FL 34995				2,50
NATIVITY PREPARATORY SCHOOL 66 SPRING STREET		NONE	CHARITABLE DONATION	
NEW BEDFORD, MA 02740			1	15,00
NEW BEDTOND, IM 02/40				15,000
OPERATION DELTA DOG	<u>,                                      </u>	NONE	CHARITABLE DONATION	
PO BOX 121				
CHELMSFORD, MA 01824				2,50
OUR DAILY BREAD		NONE	CHARITABLE DONATION	
111 HIGH STREET			1	
TAUNTON, MA 02780		<del> </del>	+	2,50
PROJECT GOAL 79 SAVOY STREET		NONE	CHARITABLE DONATION	
PROVIDENCE RI 02906	<u> </u>	<u> </u>		10,000
Total from continuation sheets				71.00

3 Grants and Contributions Paid During the		<del></del>		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
AINT ANNE'S FOOD PANTRY		NONE	CHARITABLE DONATION	
18 MIDDLE STREET			1	
ALL RIVER, MA 02721	<u> </u>	<del> </del>		2,50
OUTHCOAST MENTORING INITIATIVE FOR		NONE	CHARITABLE DONATION	
EARNING EDUCATION & SERVICE		NONE	CHARTIADDE DONATION	
SOUTH MAIN STREET		Ì		
ALL RIVER, MA 02721			}	5,00
ADD KIVEK, III. VA.ZI				3,00
		}		
		}		
	<del> </del>			
	<del> </del>	-		
	}	-		
	}			
		}		
	<del></del>	<del> </del>		
	}			
		1		
	<del></del>			
		1		
		1		
		]		
Total from continuation sheets		<del></del>		<del></del>

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
BANK OF AMERICA 9,822 FIDELITY 2,052 WASHINGTON TRUST 2,482	5. 10		1,950.	9,572. 1,950. 2,483.
TO PART I, LINE 4 14,36	35	5. 14,005.	14,005.	14,005.
FORM 990-PF	LEGAL	FEES	នា	PATEMENT 2
DESCRIPTI ON	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	1,170.	0.	0.	1,170.
TO FM 990-PF, PG 1, LN 16A	1,170.	0.	0.	1,170.
FORM 990-PF	ACCOUNTI	NG FEES	Sī	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	3,000.	0.	0.	3,000.
TO FORM 990-PF, PG 1, LN 16B	3,000.	0.	0.	3,000.
FORM 990-PF	OTHER PROFES	SIONAL FEES	SI	CATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	
INVESTMENT FEES	8,838.	8,838.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	8,838.	8,838.	0.	0.

FORM 990-PF	TAX	ES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FOREIGN TAXES	21.	21	•	0. 0	
TO FORM 990-PF, PG 1, LN 18	21.	21	•	0. 0	
FORM 990-PF	OTHER E	XPENSES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
BANK FEES PHILANTHROPY DUES	20. 750.	0		0. 20 0. 750	
TO FORM 990-PF, PG 1, LN 23	770.	0	•	0. 770	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	
DESCRIPTION			OOK VALUE	FAIR MARKET VALUE	
SEE ATTACHED FIDELITY INVESTMENTS STATEMENT SEE ATTACHED WASHINGTON TRUST STATEMENT			65,415. 447,566.	73,642 669,227	
TOTAL TO FORM 990-PF, PART II, LINE 10B			512,981.	742,869.	