

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation BLISS FAMILY FOUNDATION TO AID ELDERLY WOMEN INC		A Employer identification number 23-7061210	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 721		Room/suite	B Telephone number (see instructions) (508) 965-4687
City or town, state or province, country, and ZIP or foreign postal code WAREHAM, MA 02571		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 4,020,613	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	350			
	2 Check <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	56,126	56,126		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	124,811	124,753		
	12 Total. Add lines 1 through 11	181,287	180,879		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,066	0		0
	c Other professional fees (attach schedule)	65,483	0		65,483
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	27,792	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	1,138	0		500
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	16,322	14,245		711
	24 Total operating and administrative expenses. Add lines 13 through 23	114,801	14,245		66,694
	25 Contributions, gifts, grants paid	142,857			142,857
	26 Total expenses and disbursements. Add lines 24 and 25	257,658	14,245		209,551
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-76,371			
	b Net investment income (if negative, enter -0-)		166,634		
c Adjusted net income (if negative, enter -0-)					

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	22,771	5,491	5,491	
	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 (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges	2,075	1,742	1,742	
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶ _____ 566,077 Less accumulated depreciation (attach schedule) ▶ _____	566,077	566,077	1,739,200	
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	2,240,528	2,274,180	2,274,180	
	Liabilities	14	Land, buildings, and equipment basis ▶ _____ 2,650 Less accumulated depreciation (attach schedule) ▶ _____ 2,650			
15		Other assets (describe ▶ _____)				
16		Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	2,831,451	2,847,490	4,020,613	
17		Accounts payable and accrued expenses				
18		Grants payable				
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 ▶ _____)	631,221	723,631		
23		Total liabilities (add lines 17 through 22)	631,221	723,631		
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
		24	Unrestricted			
		25	Temporarily restricted			
		26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
		27	Capital stock, trust principal, or current funds	2,200,230	2,123,859	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0		
	29	Retained earnings, accumulated income, endowment, or other funds	0	0		
	30	Total net assets or fund balances (see instructions)	2,200,230	2,123,859		
	31	Total liabilities and net assets/fund balances (see instructions) .	2,831,451	2,847,490		

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	2,200,230
2	Enter amount from Part I, line 27a	2	-76,371
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	2,123,859
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	2,123,859

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)
1a			

(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			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or 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 (i) over col (j), if any	
a			
b			
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	
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	

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			
2015			
2014			
2013			
2012			

2 Total of line 1, column (d)	2	
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	
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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 <input type="checkbox"/> 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 <input type="checkbox"/> and enter 1% of Part I, line 27b	1	3,333
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	3,333
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3,333
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	5,075
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	0
7	Total credits and payments. Add lines 6a through 6d.	7	5,075
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	1
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	1,741
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 1,741 Refunded ▶	11	0

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 ▶ \$ 0 (2) On foundation managers ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0		
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	No
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	No
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	No

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 ► N/A	13	Yes	
14	The books are in care of ► PETER LATHAM Telephone no ► (508) 965-4687			

Located at **►** 85 HATHAWAY STREET WAREHAM MA ZIP+4 **►** 02571

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>	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? <input type="checkbox"/>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/>	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	<p>During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/> </p>	5b		
c	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i></p>			
6a	<p>Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes" to 6b, file Form 8870</i></p>	6b		No
7a	<p>At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	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	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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
NONE		

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	
2	
3	
4	

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

0

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	2,249,502
b	Average of monthly cash balances.	1b	19,575
c	Fair market value of all other assets (see instructions).	1c	1,744,275
d	Total (add lines 1a, b, and c).	1d	4,013,352
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	4,013,352
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	215,000
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,798,352
6	Minimum investment return. Enter 5% of line 5.	6	189,918

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	189,918
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	3,333
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	3,333
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	186,585
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	186,585
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	186,585

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	209,551
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		
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	209,551
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	209,551

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				186,585
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				111,144
f Total of lines 3a through e.	111,144			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 209,551				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				186,585
e Remaining amount distributed out of corpus	22,966			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	134,110			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
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).	0			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	134,110			
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				111,144
e Excess from 2017.				22,966

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 <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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					

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

Part XV	
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))	
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	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input type="checkbox"/> 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 PETER LATHAM 85 HATHAWAY STREET WAREHAM, MA 02571 (508) 965-4687 PETELATHAM85@MSN.COM	
b The form in which applications should be submitted and information and materials they should include RECIPIENTS NAME, ADDRESS, AGE, MONTHLY INCOME AND SERVICE REQUESTED	
c Any submission deadlines THRE ARE NO SUBMISSION DEADLINES	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors RESTRICTIONS DO APPLY RECIPIENT NEEDS TO BE FROM A PARTICULAR GEOGRAPHIC AND MUST ME AN ELDERLY WOMEN IN FINANCIAL NEED FOR MEDICAL SERVICES, EQUIPMENT,PRESSCRIPTIONS OR HOUSING EXPENSES	

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

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	142,857
b <i>Approved for future payment</i>				
Total			3b	0

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						
4 Dividends and interest from securities. . . .						56,126
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.						124,753
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a CLASS ACTION SUIT	900099	58				
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). .		58		0		180,879
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13			180,937

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

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2018-11-13 *****	May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SCOTT FACCHETTI EA		2018-11-13		P00355658
	Firm's name ▶ FACCHETTI & FACCHETTI LTD				Firm's EIN ▶ 04-3294405
	Firm's address ▶ 16 KENDRICK RD - SUITE 7 WAREHAM, MA 02571				Phone no (508) 295-6633

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
NANCY MACNEIL	PRESIDENT 5 00 12 ISLAND BROOK ROAD WAREHAM, MA 02571	0	0	0
PETER LATHAM	TREASURER 10 00 85 HATHAWAY STREET WAREHAM, MA 02571	0	0	0
MARY BETH CORMIER	CLERK/SECRETARY 5 00 84 GIBBS AVE WAREHAM, MA 02571	0	0	0
MARY BESSEY	TRUSTEE 5 00 68 DEXTER LANE ROCHESTER, MA 02770	0	0	0
JUDITH GALAVOTTI	TRUSTEE 5 00 8 SEA MEADOW LANE WAREHAM, MA 02571	0	0	0
EUGINA BOLIVER	TRUSTEE 5 00 7 SALTMEADOW ROAD WAREHAM, MA 02571	0	0	0
FRANCES MURPHY	TRUSTEE 5 00 257 HIGH STREET WAREHAM, MA 02571	0	0	0
TOM GLEASON	TRUSTEE 5 00 15 MARITIME DRIVE WAREHAM, MA 02571	0	0	0
JEAN SMITH	TRUSTEE 5 00 179 PINEVIEW TERRACE WAREHAM, MA 02571	0	0	0
HAZEL TABOR	TRUSTEE 5 00 136 MARION ROAD WAREHAM, MA 02571	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
JEAN ALVES34 CHURCH AVE WAREHAM, MA 02571	NONE		VARIOUS AID	1,020
LORETTA ANDREWS364A ONSET AVE E WAREHAM, MA 02538	NONE		VARIOUS AID	3,050
ANNE BISHOPC/O BOX 721 WAREHAM, MA 02571	NONE		VARIOUS AID	1,469
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SUSAN BOARN53 BERTINO ST ONSET, MA 02558	NONE		VARIOUS AID	994
MARLENE BOOTH10 KING DRIVE W WAREHAM, MA 02576	NONE		VARIOUS AID	810
JOANN BRUNOC/O BOX 721 WAREHAM, MA 02571	NONE		VARIOUS AID	696
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LOUISE BUCHANAN52 HOLIDAY DR W WAREHAM, MA 02576	NONE		VARIOUS AID	206
SANDI BUTLER2 BURFIELD DR W WAREHAM, MA 02576	NONE		VARIOUS AID	6,042
SHIRLEY CALIRI 57 SANDWICH RD APT 57 WAREHAM, MA 02571	NONE		VARIOUS AID	795
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ROSE CAMACHO8 SWIFTS BEACH ROAD WAREHAM, MA 02571	NONE		ARIOUS AID	1,405
SUSAN CAPEHARTPO BOX 787 E WAREHAM, MA 02538	NONE		VARIOUS AID	6,500
LINDA CARLSON3132 CRANBERRY HWY WAREHAM, MA 02571	NONE		VARIOUS AID	918
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LINDA CARREIRO2 QUASET AVE WAREHAM, MA 02571	NONE		VARIOUS AID	203
CHARLOTTE CARVALHO 42 GREAT HILL DRIVE W WAREHAM, MA 02576	NONE		VARIOUS AID	2,690
CAROL CONNOR24 ALEXANDER ST W WAREHAM, MA 02576	NONE		VARIOUS AID	243
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JULIETTE COSTA4 CAMP ST WAREHAM, MA 02571	NONE		VARIOUS AID	4,859
MILDRED DECOSTA4 GLADYS DRIVE MIDDLEBORO, MA 02346	NONE		VARIOUS AID	6,160
LUCILLE DALBEC22 KINGS DRIVE WAREHAM, MA 02571	NONE		VARIOUS AID	3,825
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JOANNE DERN51 TREASURE BOAT W WAREHAM, MA 02576	NONE		VARIOUS AIDPLUMBING	6,575
CAROLINE DORNE 280 MAIN STREET APT 4 WAREHAM, MA 02571	NONE		VARIOUS AID	1,200
JEAN DREW102 KIMBERLY COURT WAREHAM, MA 02571	NONE		VARIOUS AID	577
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MARY ANN DUARTE 3040 CRANBERRY HIGHWAY E WAREHAM, MA 02538	NONE		VARIOUS AID	1,800
PAULINE FARIAC/O BOX 721 WAREHAM, MA 02571	NONE		VARIOUS AID	4,725
IRMA FERNANDES5 CAMARDO DRIVE WAREHAM, MA 02571	NONE		VARIOUS AID	1,056
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MARY ELLEN FIELDING 211 GATEHOUSE DRIVE E WAREHAM, MA 02538	NONE		VARIOUS AID	663
FRANCES FLORINDO9 WEAVER STREET W WAREHAM, MA 02576	NONE		VARIOUS AID	31
SANDRA FRASER50 ROSEPOINT AVE W WAREHAM, MA 02576	NONE		VARIOUS AID	129
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LYNN FRAZIERC/O BOX 721 WAREHAM, MA 02571	NONE		VARIOUS AID	237
IRENE FREITAS5 KEVIN DRIVE MIDDLEBORO, MA 02346	NONE		VARIOUS AID	1,058
SUSAN FTOREX3 KRISTEN LANE WAREHAM, MA 02571	NONE		VARIOUS AID	172
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MARGARET GALLAGHER 22 SIESTA DRIVE W WAREHAM, MA 02576	NONE		VARIOUS AID	2,950
KAREN GOYETTE17 RYDER ST BUZZARDS BAY, MA 02532	NONE		VARIOUS AID	175
LORRAINE GOYETTE11 CHARLIE AVE WAREHAM, MA 02576	NONE		VARIOUS AID	8,000
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JUDY GREENLAW7 SIESTA DRIVE W WAREHAM, MA 02736	NONE		VARIOUS AID	6,000
LILLIAN GUION815 MAIN STREET WAREHAM, MA 02571	NONE		VARIOUS AID	373
HELEN HAYWOOD34 CHURCH STREET WAREHAM, MA 02571	NONE		VARIOUS AID	539
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SANDRA HEMMING3 AZTEC DRIVE BUZZARDS BAY, MA 02532	NONE		VARIOUS AID	199
LUANN JESUSC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	1,360
LATTIE JOSEPH7A WEST CENTRAL AVE ONSET, MA 02558	NONE		VARIOUS AID	2,385
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CAROL KEMP11 SHAKER AVE WAREHAM, MA 02571	NONE		VARIOUS AID	431
HELEN LIMAP O BOX 795 ONSET, MA 02558	NONE		VARIOUS AID	608
LYNNE LOPESP O BOX 982 ONSET, MA 02558	NONE		VARIOUS AID	336
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALICE LOPEZ8 SWIFTS BEACH RD WAREHAM, MA 02571	NONE		VARIOUS AID	739
KATHLEEN MAGRASC/O BOX 721 WAREHAM, MA 02571	NONE		GIFT CARDS-STOP & SHOP	5,314
DOROTHY MALINOSKIC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	652
Total <div>▶</div> 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ELAINE MANNINGC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	5,644
LINDA MARSHALL16 GIBBS ROAD MIDDLEBORO, MA 02346	NONE		VARIOUS AID	2,695
PAULA MATTOSPO BOX 271 W WAREHAM, MA 02576	NONE		VARIOUS AID	1,350
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LIVIA MONROE24 WINDSWEPT DRIVE WAREHAM, MA 02571	NONE		VARIOUS AID	499
JEANNE NEALE35 CROMESETT RD WAREHAM, MA 02571	NONE		VARIOUS AID	506
KATHERINE NEELY903 MAIN STREET W WAREHAM, MA 02576	NONE		VARIOUS AID	647
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
PRISCILLSA NIGHTENGALE 3132 CRANBERRY HIGHWAY E WAREHAM, MA 02538	NONE		VARIOUS AID	1,300
NOREEN OBIMC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	2,294
JANET OLIVER145 WINDSWEPT RD W WAREHAM, MA 02576	NONE		VARIOUS AID	942
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
KIMBERLY PATON 2612 CRANBERRY HIGHWAY WAREHAM, MA 02571	NONE		VARIOUS AID	762
RENITA PINA27 ROY STREET E WAREHAM, MA 02538	NONE		VARIOUS AID	196
SONJA PINTOC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	7,520
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
KIMBERLY PORIERC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	803
PAULINE PORTERC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	929
ADELE ROBSON815 MAIN STREET WAREHAM, MA 02571	NONE		VARIOUS AID	1,418
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRISTINE RODERICK 6 JOHNSON STREET WAREHAM, MA 02571	NONE		VARIOUS AID	1,397
BARBARA RUSSELLC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	3,360
VELIA SANBORNC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	770
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LINDA SATTERFIELD 556 CENTER STREET MIDDLEBORO, MA 02346	NONE		VARIOUS AID	558
JENNIE SCHATZI404 ORCHARD CT MIDDLEBORO, MA 02346	NONE		VARIOUS AID	200
CLAIRE SEIFERT136 QUEEN DRIVE W WAREHAM, MA 02576	NONE		VARIOUS AID	442
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MURIEL SLANEY18 WABAN AVE ONSET, MA 02558	NONE		VARIOUS AID	958
BARBARA SMITH8 SWIFTS BEACH ROAD WAREHAM, MA 02571	NONE		VARIOUS AID	620
JUDITH A SOUZAP O BOX 594 WAREHAM, MA 02571	NONE		VARIOUS AID	3,351
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LORRAINE STAFFIERE1 NINTH STREET ONSET, MA 02558	NONE		VARIOUS AID	182
MARGARET THOMPSON 8 SWIFTS BEACH RD WAREHAM, MA 02571	NONE		VARIOUS AID	1,224
DOROTHY TRACEYC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	199
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BONNIE VAN ETTENC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	3,400
LYNNE VERONESI44 GREAT HILL DRIVE W WAREHAM, MA 02576	NONE		VARIOUS AID	3,135
DOROTHY VINCENTC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	416
Total ▶ 3a				142,857

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LINDA WADELLC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	941
VARIOUS RECEIPIENTSC/O BOX 271 WAREHAM, MA 02571	NONE		VARIOUS AID	4,030
Total <div> <div></div> <div>3a</div> </div>				142,857

TY 2017 Accounting Fees Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	2,875	0		0
BOOKKEEPING	1,191	0		0

TY 2017 Cash Deemed Charitable Explanation Statement

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Explanation: FORM 990-PF, PAGE 8, PART X CASH DEEMED HELD FOR
CHARITABLE PURPOSES.

TY 2017 Investments - Other Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CITIZENS UNION SAVINGS BANK	AT COST	2,274,180	2,274,180

TY 2017 Other Expenses Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC
EIN: 23-7061210

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LIABILITY INSURANCE	500	0		0
OFFICE EXPENSES	644	0		0
INVESTMENT EXPENSES	14,245	14,245		0
CELLPHONE-SOCIAL WORKER	711	0		711
MISC EXPENSE	12	0		0
POSTAGE & DELIVERY	210	0		0

TY 2017 Other Income Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
LONG TERM CAPITAL GAIN CITIZENS UNION SAVINGS	121,750	121,750	121,750
OTHER INVESTMENT INCOME	3,003	3,003	3,003
CLASS ACTION SUIT	58		58

TY 2017 Other Liabilities Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Description	Beginning of Year - Book Value	End of Year - Book Value
UNREALIZED GAINS AND LOSSES	631,221	723,631

TY 2017 Other Professional Fees Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SOCIAL WORKERS	65,483	0		65,483

TY 2017 Taxes Schedule

Name: BLISS FAMILY FOUNDATION TO AID ELDERLY
WOMEN INC

EIN: 23-7061210

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	85	0		0
REAL ESTATE TAXES	23,838	0		0
FORM 990-PF	3,333	0		0
TAXES-OTHER	536	0		0