Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ➤ Do not enter social security numbers on this form as it may be made public

➤ Go to www.irs.gov/Form990PF for instructions and the latest information. Department of the Treasury
Internal Revenue Service

For calendar year 2017 or tax year beginn

01110 10 10 10 0002
2017
Open to Public Inspection

101	Calei	idar year 2017 of tax year beginning		, and ending			
		foundation				A Employer identific	ation number
		thern Bank & Trust Char	itable				
F	'ou	ndation, Inc.				46-16061	
Nur	nber a	and street (or P O box number if mail is not delivered to street	address)	Room	/suite	B Telephone number	937-5400
2	75	Mishawum Road				781-5	5.10 0
City	or t	own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application	on is pending, check here
W	ob	urn, MA 01801		_			
G (Check	all that apply Initial return	Initial return of a fo	rmer public charity		D 1 Foreign organiza	ations, check here
		Final return	Amended return			9	
		Address change	Name change			check here and atta	ns meeting the 85% test, ach computation
H (Check	type of organization X Section 501(c)(3) ex	kempt private foundation	9 Y	/	E If private foundatio	n status was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition		under section 507(b)(1)(A), check here
I Fa	air ma	arket value of all assets at end of year J Account	ng method ⁻ X Cash	Accrual		F If the foundation is	ın a 60-month termination
(fı	om F	Part II, col. (c), line 16)	ther (specify)				b)(1)(B), check here
	\$	419,655. (Part I, colur	nn (d) must be on cash bası	s.)			
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b) (c), and (d) may not	(a) Revenue and	(b) Net investme	ent	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarify equal the amounts in column (a))	expenses per books	income		income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	605,550.			N/A	
	2	Check if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	100.	1	.00.		
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					,
•	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a				-	
ķ	7	Capital gain net income (from Part IV, line 2)			0.		1 12 /
č	8	Net short-term capital gain				1	
	9	Income modifications				17	55000
	10a	Gross sales less returns and allowances				200	FED WILLIJ [-
	Ι.	Less Cost of goods sold				1	' .'
	C	Gross profit or (loss)				1	75 72 1 157
	11	Other income				L	
	12	Total. Add lines 1 through 11	605,650.	1	00.	-	
	13	Compensation of officers, directors trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
es		Legal fees					
xpenses	Ь	Accounting fees Stmt 1	1,550.	2	38.		1,312.
Š		Other professional fees	·				
ě		Interest					
ati		Taxes	<u> </u>				
istr	19	Depreciation and depletion					
Operating and Administrative	20	Occupancy					
Adi		Travel, conferences, and meetings					
P	1	Printing and publications					
g		Other expenses Stmt 2	89.		0.		89.
atin		Total operating and administrative					
)er		expenses Add lines 13 through 23	1,639.	2	38.		1,401.
ŏ	25	Contributions, gifts, grants paid	1,639. 263,998.				1,401. 263,998.
		Total expenses and disbursements.		 			
		Add lines 24 and 25	265,637.	2	38.		265,399.
_	27	Subtract line 26 from line 12,	, , , , , , , , , , , , , , , , , , , ,				
	ŀ	Excess of revenue over expenses and disbursements	340,013.				
		Net investment income (if negative, enter -0-)			0.		
	l	Adjusted net income (if negative, enter -0-)				N/A	
						_	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see Instructions

Form **990-PF** (2017)

Form 990-PF (2017)

46-1606139

Page 2

Γ <u>ο</u> ,	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
F	11 L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	79,642.		
ŀ	2	Savings and temporary cash investments		419,655.	419,655.
-	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
ı		Less: allowance for doubtful accounts			
- 1	5	Grants receivable			
- 1		Receivables due from officers, directors, trustees, and other			
l	•	disqualified persons			
ı	7	Other notes and loans receivable			
	•	Less; allowance for doubtful accounts			
		Inventories for sale or use			
Assets			 		
Ass		Prepaid expenses and deferred charges			
`		Investments - U.S. and state government obligations			
- 1		Investments - corporate stock			
i		Investments - corporate bonds	ļ <u> </u>		
	11	Investments - land, buildings, and equipment basis			
- (Less accumulated depreciation			
	12	Investments - mortgage loans			
H	13	Investments - other			
Ì	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
- 1	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	79,642.	41 <u>9</u> ,65 <u>5</u> .	<u>4</u> 19,655.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
20	19	Deferred revenue			
≝∣	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
<u>ا</u> ت	22	Other liabilities (describe)			
		·			
ì	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
- }		and complete lines 24 through 26, and lines 30 and 31.			
Se	24	Unrestricted		i	
×Ι		Temporarily restricted			
ä		Permanently restricted			
ᅙ		Foundations that do not follow SFAS 117, check here			
ᆵᅵ		and complete lines 27 through 31.	}	١	
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
ا ئ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.1	0.	
SS			79,642.	419,655.	
t l	29	Retained earnings, accumulated income, endowment, or other funds	79,642.	419,655.	
ž	30	Total net assets or fund balances	19,044.	415,000.	
		Total Pakings and a decrease the decrease	70 642	410 655	
	31	Total liabilities and net assets/fund balances	79,642.	419,655.	
Pá	art	Analysis of Changes in Net Assets or Fund B	Balances		
					
		net assets or fund balances at beginning of year - Part II, column (a), line	30] ,]	70 (40
		at agree with end-of-year figure reported on prior year's return)		1	79,642.
		amount from Part I, line 27a		2	340,013.
		r increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	419,655.
		eases not included in line 2 (itemize)		5	0.
6	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	419,655.
			_		Form 990-PF (2017)

46-1606139

Page 3

(a) List and describe	the kind(s)	of property sold (for exar or common stock, 200 shs	nple, real esta		(6) I	low ac - Purc - Dona	nase i '	c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a										
b NC	NE									
C										
<u>d</u>										
<u> </u>					Щ,					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)	1-1	st or other basis expense of sale					ain or (loss s (f) minus	
<u>a</u>	<u> </u>									
<u>b</u>	 			·	\dashv					
<u>c</u>										
<u>d</u>	}		 -							
Complete only for assets show	no dain in c	olumn (h) and owned by t	he foundation	on 12/31/60			(1) (Counc (C	ol (b) gain	minus
Outspice only for assets shown	T	i) Adjusted basis		cess of col. (i)	-		cal. (k), but r	iol. (h) gain not less tha	n -0-) o r
(i) FMV as of 12/31/69		as of 12/31/69		col. (j), if any			·	Losses	(from col. (h))
a	 				\dashv					
b			_						-	
C										
d										
e	<u> </u>									
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo	ss) as defin	•								
If gain, also enter in Part I, line 8			u (0).		ال					
If (loss), enter -0- in Part I, line 8						3				
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation doesn't qual 1 Enter the appropriate amount in	ction 4942 t ify under se	ax on the distributable am ction 4940(e). Do not com	plete this par	<u>.</u>						Yes X No
(a)	each coluit	-	Structions be	iore making any e				т-	·	(d) .
Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchai		use assets		Distrit	(d) oution ratio vided by col. (c))
2016	<u>g</u> ,		2,547.				2,658.		(cor. (b) an	12.841444
2015			4,735.		_		$\frac{2,033}{7,173}$			7.845746
2014			2,136.				8,593 .			2.084481
2013			5,947.				4,137.			1.638896
2012			0.			_1	9,700.			.000000
O Tabel of track and an invention										24.410567
2 Total of line 1, column (d) 3 Average distribution sets for the	E voor hoo	a pariod divida the total s	n line O by E	0				2		24.41030
3 Average distribution ratio for the the foundation has been in existe	-	•	ni ilile z by 5.	o, or by the numb	eror	years		3		4.882113
the lonnoation has been in existe	:IICE II IESS I	illali 5 years						- 3		4.00ZII.
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5				4		47,175				
5 Multiply line 4 by line 3				5		230,314				
6 Enter 1% of net investment inco	me (1% of F	Part I, line 27b)						6		0
7 Add lines 5 and 6								7		230,314
8 Enter qualifying distributions fro	m Part XII, I	ine 4						8		265,399
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, che	eck the box in Part VI, line	1b, and comp	olete that part usin	ıg a 1'	% tax ı	rate.			

Northern Bank & Trust Charitable

Form 990-PF (2017) Foundation, Inc.		46-160		Pag	
Part VI Excise Tax Based on Investment Income (Section 494	0(a), 4940(b), 4940(e), or	4948 - see	instruc	tions)	<u> </u>
1a Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A" on line 1.				- !
Date of ruling or determination letter: (attach copy of letter if ne					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1			<u>) .</u>
of Part I, line 27b		1 1			į
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49	% of Part I, line 12, col. (b). 丿				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or	thers, enter -0-)	2			<u>0 .</u>
3 Add lines 1 and 2		3			<u> </u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	others, enter -0-)	4			<u>0</u> .
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		(<u>0 .</u>
6 Credits/Payments:]]			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0.				1
b Exempt foreign organizations - tax withheld at source	6b 0.				!
c Tax paid with application for extension of time to file (Form 8868)	6c <u>0</u> .				1
d Backup withholding erroneously withheld	6d 0.	┥			
7 Total credits and payments. Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	iched	8			<u>0</u> .
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9		(<u>.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	>	10			
11 Enter the amount of line 10 to be; Credited to 2018 estimated tax	Refunded ►	11			
Part VII-A Statements Regarding Activities				/ NI	
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	station or did it participate or interveni	e in	-	res N	
any political campaign?			1a		<u>X</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo		nition	1b	_ 2	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materials published or		1 1	1	} !
distributed by the foundation in connection with the activities.					 _
c Did the foundation file Form 1120-POL for this year?			10		<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	· ·				
(1) On the foundation. > \$ 0. (2) On foundation managers		<u>.</u>	1 1	Į	1
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax imposed on foundation			ŀ	1
managers. ▶ \$ 0.	D02		-		X
2 Has the foundation engaged in any activities that have not previously been reported to the I	NO!		2	- 1	<u></u>
If "Yes," attach a detailed description of the activities.	metrument estades of measurestan	0.5		1	!
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation,	OI .	3	—- - ,	X
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	~		4a		<u>x</u> -
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year b If "Yes," has it filed a tax return on Form 990-T for this year?	11 *	N/A	4b	-+-	<u></u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	2	M/ A	5	- ,	<u>x</u> -
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 e	uther.			1	
By language in the governing instrument, or	Titlor:			Ī	1
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the state	te law		1	
remain in the governing instrument?	y an obtain that commet man the such		6	$\overline{\mathbf{x}}$	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	olete Part II, col. (c), and Part XV		7	X	
2.5 and 100 maximum at 1000 \$4,000 in accord at any time as mig the year. If 100, 00 mig	510to 1 art 11, 0011 (0), arta 1 art 110		+++		
8a Enter the states to which the foundation reports or with which it is registered. See instruction	ons >				
MA			'	- !	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	, <u>\</u> g ,		8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(i)(3) or 4942(i)(5) for cal	lendar	 		
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," con			9		$\overline{\mathbf{x}}^{-} \mathbf{\nu}$
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sched			10		X
		F	orm 990 -	-PF (20)17)

723531 01-03-18

Pa	irt VII-A Statements Regarding Activities (continued)			
_			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			L
14	The books are in care of ▶ Francis Kenney Telephone no. ▶ 781-56	9-5	400	
• •	Located at ▶ 275 Mishawum Road, Woburn, MA ZIP+4 ▶01			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		_	\Box
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	_
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	<u> </u>		
	foreign country	ł	i	
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Γ	Yes	No
19	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	ŀ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			İ
	If the foundation agreed to make a grant to or to employ the official for a period after	i '		1
	termination of government service, if terminating within 90 days.)			ŀ
h	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 N/A	1b		\
	Organizations relying on a current notice regarding disaster assistance, check here	<u> </u>		
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	l		
·	before the first day of the tax year beginning in 2017?	10		X
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)):			
а	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	1		\
	before 2017?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
-	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.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	▶,,,,	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
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.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		ļ	
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		rm 00	T DE	

Page 6

Part VII-B Stat	ements Regarding Activities for Which F	form 4720 May Be F	Required (contin	ued)			
5a During the year, die	d the foundation pay or incur any amount to:					Yes	No
(1) Carry on propa	aganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es 🗓 No 🛭		_	1
(2) Influence the o	outcome of any specific public election (see section 4955); o	r to carry on, directly or indire					İ
any voter regis	stration drive?		Ye	s X No	ļ	ļ	i
(3) Provide a gran	nt to an individual for travel, study, or other similar purposes'	>	X Ye	s No		- 1	
(4) Provide a gran	nt to an organization other than a charitable, etc., organization	i described in section					ĺ
4945(d)(4)(A)	? See instructions		Y6	es 🗓 No	1	İ	
(5) Provide for an	y purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		1			
the prevention	of cruelty to children or animals?		Y6	s X No		}	ı i
b If any answer is "Ye	es" to 5a(1)-(5), did any of the transactions fail to qualify unc	er the exceptions described i	n Regulations				ا الـــــا
section 53.4945 or	r in a current notice regarding disaster assistance? See instru	ictions			5b		<u>X</u> _
Organizations relyi	ng on a current notice regarding disaster assistance, check h	ere			- 1	Ì	
c If the answer is "Ye	es" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined		İ		. !
expenditure respor	nsibility for the grant?	N	[/A Ye	s No	1	- 1	i
If "Yes," attach the	statement required by Regulations section 53.4945-5(d).				1		
6a Did the foundation,	, during the year, receive any funds, directly or indirectly, to p	pay premiums on				Į	. [
a personal benefit (contract?		Ye	es 🗶 No			نــــا
b Did the foundation,	, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		_X_
If "Yes" to 6b, file F	orm 8870.				- 1	1	
7a At any time during	the tax year, was the foundation a party to a prohibited tax \boldsymbol{s}	helter transaction?	Ye	es 🗓 No			
	ndation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII Info	rmation About Officers, Directors, Trust	ees, Foundation Ma	inagers, Highly	/			
	Employees, and Contractors						
1 List all officers, d	irectors, trustees, and foundation managers and t		(c) Compensation	(4)	T .) Fun	
	(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	aci	e) Expo	
		to position	`enter`-0-)	compensation	a	llowar	ices
					-		
 _							_
See Stateme	ent 3		0.	0	-		<u>0.</u>
					+		
					1		
					-		
					1		
2 Composation of	five highest paid ampleyees (ather than these inc	luded on line 4) If name	onton IINONE II		ــــــــــــــــــــــــــــــــــــــ		
2 Compensation of	five highest-paid employees (other than those inc		T T TONE.	(d) Contributions to	1 1	a) Exp	ense
(a) Name and a	address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plan: and deterred	⁵ aċ	count,	ense , other
NONE		devoted to position		compensation		illowai	1062
NONE							
							
	- 		}		İ		
		_ 	 	 _	+-		
		. <u> </u>	 		+-		
			 		+		
							
				L			0
i otal number of other e	employees paid over \$50,000				- 000	DE	
				For	n 990	-25	(2017)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u>▶</u>] 0
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	
See Statement 4	5,000.
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0 • Form 990-PF (2017)

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	47,893.
	Fair market value of all other assets	1c	
d		1d	47,893.
е	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	47,893.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	718.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	47,175.
6	Minimum investment return. Enter 5% of line 5	6	2,359.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	2,359.
, 2a		- 	4,555.
2 a			
C		2c	0.
3	Distributable amount before adjustments, Subtract line 2c from line 1	3	2,359.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,359.
6	Deduction from distributable amount (see instructions)	6	0.
	·	7	2,359.
<u></u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	_ / _	
	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	265,399.
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	265,399.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	265,399.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI,				<u></u>
line 7				2,359.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0		I
5		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
bFrom 2013 54,208.				
c From 2014 119, 206.				
dFrom 2015 133,876. eFrom 2016 161,914.				
	469,204.			1
f Total of lines 3a through e	409,204.			
4 Qualifying distributions for 2017 from				,
Part XII, line 4: ►\$ 265,399.			₀ -	1
a Applied to 2016, but not more than line 2a			<u> </u>	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		<u></u>
c Treated as distributions out of corpus	0.			ĺ
(Election required - see instructions)	<u>U.</u>			2,359.
d Applied to 2017 distributable amount	262 040			4,333.
e Remaining amount distributed out of corpus	263,040.			0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.1			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	732,244.			
b Prior years' undistributed income. Subtract				1
line 4b from line 2b		0.		1
c Enter the amount of prior years'				
undistributed income for which a notice of	, i	'	,	i I
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				1
amount - see instructions		0.		į
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			<u> </u>	
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				ļ
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	732,244.			
10 Analysis of line 9:				
a Excess from 2013 54, 208.				
b Excess from 2014 119, 206.				
c Excess from 2015 133,876.				
d Excess from 2016 161,914.	Ì			
e Excess from 2017 263,040.			<u> </u>	5 000 DE (0017)

723581 01-03-18

Northern Bank & Trust Charitable Form 990-PF (2017) Foundation, Inc. 46-1606139 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (e) Total (a) 2017 (b) 2016 (c) 2015 (d) 2014 income from Part I or the minimum investment return from Part X for each year listed **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 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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest. dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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. None Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔲 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed; See Statement 5 b The form in which applications should be submitted and information and materials they should include: See Statement 5 c Any submission deadlines: See Statement 5

Form **990-PF** (2017)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

See Statement 5

Foundation, Inc.

46-1606139 Page 11

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution	Amount
Show any relationship to any foundation manager or substantial contributor a Paid during the year Actor Community Supper and Food Pantry 235 Summer Road, Suite 205 Show any relationship to any foundation manager or substantial contributor Foundation status of recipient ** Replenish non-perishable food items for low and	Amount
Acton Community Supper and Food N/A PC Replenish Pantry 235 Summer Road, Suite 205 items for low and	
Acton Community Supper and Food N/A PC Replenish Pantry 235 Summer Road, Suite 205 items for low and	
Pantry non-perishable food 235 Summer Road, Suite 205 items for low and	
235 Summer Road, Suite 205	
·	
Boxborough, MA 01719 moderate income	
families in need	2,000
Boys & Girls Club of Greater N/A PC General Operating	
Billerica Support	
19 Campbell Road	
Billerica, MA 01821	5,000
Boys & Girls Club Woburn N/A PC Support low to 1 Charles Gardner Lane moderate income	
1 Charles Gardner Lane moderate income Woburn, MA 01801 children	E0 000
wobdin, MA 01001	50,000
Bread of Life N/A PC Providing low and 54 Eastern Avenue moderate income	
54 Eastern Avenue moderate income families with food	
supplies	2,000
Supplies	2,000
Budget Buddies N/A PC Financial Literacy	
14 High Street	
Chelmsford, MA 01824	2,500
Total See continuation sheet(s) ▶ 3a b Approved for future payment	263,998
None	
Total ► 3b	0 rm 990-PF (2017

Part XVI-A	Analysis of Income-Producing	Activities
	, , , , , , , , , , , , , , , , , , ,	

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a			+		
h			+		
С	- - 		+		
d	-	· · · · · · · · · · · · · · · · · · ·	+		
e					
1	- 		\dashv		
g Fees and contracts from government agencies	_		$\dashv \neg$		
2 Membership dues and assessments	-	·	+ +		
3 Interest on savings and temporary cash					
investments			14	100.	
4 Dividends and interest from securities			\dashv		
5 Net rental income or (loss) from real estate:					
a Debt-financed property			\dashv		
b Not debt-financed property			\vdash		
6 Net rental income or (loss) from personal			\dashv		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other		· · · · · ·	\dashv		
than inventory	1		1 1		
9 Net income or (loss) from special events					
0 Gross profit or (loss) from sales of inventory				-	
1 Other revenue:					
a					
b					-
c	_				
d					
e					
2 Subtotal. Add columns (b), (d), and (e)) 	100.	
13 Total, Add line 12, columns (b), (d), and (e)				13	10
See worksheet in line 13 instructions to verify calculations)				

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

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).					
'						
-+						
+						
 -						
i i						
						
-+						

Form **990-PF** (2017)

723621 01-03-18

Form 990	0-PF (2017) Foun C	iation, I	nc.		4 (6-1606139	Page 13
Part 2	XVII Information R Exempt Organ		nsfers to a	and Transactions a	nd Relationships With	loncharitable	
1 Did	the organization directly or ind	rectly engage in any	y of the following	ng with any other organization	on described in section 501(c)	Y	es No
	her than section 501(c)(3) orga				· ·		
a Tra	nsfers from the reporting found	lation to a noncharit	able exempt or	ganization of:			ļ
	Cash		•	•		1a(1)	X
	Other assets					1a(2)	X
	er transactions:					1.5(-)	
	Sales of assets to a noncharita	able exempt organiz	ation			1b(1)	X
	Purchases of assets from a no					16(2)	- X
	Rental of facilities, equipment,	•	Organization			1b(3)	X
٠,	Reimbursement arrangements					1b(4)	$\frac{1}{X}$
		,					$\frac{x}{x}$
	Loans or loan guarantees					1b(5)	$\frac{x}{x}$
	Performance of services or mi	•	•			1b(6)	$-\frac{x}{x}$
	aring of facilities, equipment, ma	•		• •		1 <u>1c</u>	
		•	-	, , ,	ways show the fair market value of t	- ·	ıs,
					ue in any transaction or sharing arra	ingement, snow in	
	umn (d) the value of the goods,				1 (2)		
(a)Line n	o (b) Amount involved	(c) Name o		e exempt organization	(0) Description of transfers, trans	actions, and sharing arrai	ngements
	_	Ļ <u> </u>	N/A				
		 					
	<u> </u>	<u> </u>					
					_		
	<u> </u>	<u> </u>					
		†					
	 	 					
	he foundation directly or indirected the foundation directly or indirection 501(c) (other than section	-		or more tax-exempt organi	zations described	Yes	 X No
	es," complete the following sch	. , . , ,	Section 327			163	١١٥ ليقف
	(a) Name of or			(b) Type of organization	(c) Description	of relationship	
	N/A	<u></u>		(#) Type of organization	(6) 2 6 6 7 7 8 6 7 1	or rolationomp	
				 			
				 			
	Under penalties of periury. I declare	that I have examined the	his return, includir	ng accompanying schedules and	I statements, and to the best of my knowle	edge	
Sign					nation of which preparer has any knowled	ge return with the	preparer
Here		lu		12-20-18	President	shown below?	See instr
	Signature of officer of trustee				Title	LXJ Yes	└── No
	Prip/Type preparer's n		Preparer's s	Date		ıf [PTIN	
	r inverse preparers in	ailic	L Lohdhar 2/2		self- employed	1	
Paid	Mighalas =	Dombo	1 //	1 U \			000
Prepa	Nicholas E		n (17a-	100	02/12/18	P013102	
Use (.er newmai	n & Noy	res	Firm's EIN	01-049452	0

Form **990-PF** (2017)

Phone no. (207)879-2100

Firm's address ▶ P.O. Box 507

Portland, ME 04112

3 Grants and Contributions Paid During the	fear (Continuation)			
Recipient	If recipient is an individual,		D	
None and address (bases as business)	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		
		Į.		
Catholic Charitable Bureau of the	N/A	₽C	Providing low and	
Archdiocese of Boston Inc.	1		moderate income	
275 West Broadway			families with food	
South Boston, MA 02127	 	 	supplies	5,000
			<u> </u>	
Cor Unum Meal Center	N/A	PC	General Operating	
118 South Broadway			Support	
Lawrence, MA 01843-1427				1,500
				· · · · · · · · · · · · · · · · · · ·
and with a managed	l.,,			
Goodnow Library Foundation	N/A	PC	Library technology	
21 Concord Road		ļ	upgrades	
Sudbury, MA 01776	 			1,000
Habitat for Humanity of Greater	N/A	PC	Low Income Housing in	
Lowell			Westford, MA	
At Hicks Farm, 124 Main Street	į	Ţ		
Westford MA 01886				10,000
medelola, Ma oloco				
Heading Home	N/A	PC	General Operating	
The Schrafft Center, 529 Main Street,			Support	
Suite 100 Charlestown, MA 02129		 		10,000
HopeSudbury	N/A	PC	Assist community	
P.O. Box 802	İ		members with emergency	
Sudbury, MA 01776			financial needs	2,500
Junior Achievement of Northern New	7/2		6	
	N/A	PC PC	Sponsor financial	
England	İ		literacy	
400 Fifth Avenue, Suite 300 Waltham, MA 02451)		10,000
Loaves and Fishes	N/A	PC	Replenish	
234 Barnum Road		1	non-perishable food	
Devens, MA 01434			items for low and	
bovons, in orror		1	moderate income	
			families in need	1,500
	 	 	Lamilles in need	
Melrose Friends of the Aging	N/A	€C	General Operating	
201 West Foster Street			Support	
Melrose, MA 02176		 	 	51,378
Minuteman Senior Services	N/A	₽C	Money Management	
26 Crosby Drive			Program	
Bedford, MA 01730		<u> </u>		2,500
Total from continuation sheets				202,498

3 Grants and Contributions Paid During	If recipient is an individual,	T		
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
Mission of Deeds	N/A	PC	Housing	
6 Chapin Avenue	1	1	1	
Reading, MA 01867				2,500
Mystic Valley Elder Services	N/A	PC	Monoy Managament	
300 Commercial Street, #19	N/A	FC .	Money Management Program for Low and	
Malden, MA 02148			Moderate Income	
Maiden, MA 02146			Seniors	10,000
Nashoba Learning Group	N/A	PC	Expansion of the Adult	
10 Oak Park Drive	N/A		_	
	<u> </u>	f	Program (\$16,120); Support individuals	
Bedford, MA 01730				
		ł	with autism and their	21 120
		<u> </u>	families (\$5,000)	21,120
National Brain Tumor Society	N/A	₽C	General Operating	
55 Chapel Street, Suite 200	1	}	Support	
Newton, MA 02458				25,000
		1		
NuPath	N/A	PC	General Operating	
147 New Boston Street			Support	
Woburn, MA 01801				2,500
			 	
Oak Meadow Montessori School	N/A	PC	Providing scholarships	
2 Old Pickard Lane			to children from low	
Littleton, MA 01460		1	to moderate income	
•	}	}	families	5,000
People Helping People	N/A	PC	General operational	
P.O. Box 343	1		assistance (\$2,500).	
Burlington, MA 01803			Assist with the food	
	\		pantry providing low	
		<u></u>	and moderate income	7,500
	1		}	
Reading Clergy Association	N/A	PC	Reading Food Pantry	
6 Salem Street		Ì		
Reading, MA 01867				2,000
Smile Mass Inc.	N/A	₽C	Assist familites with	
66 Dudley Road	F/ A	1	diasabled children	
Sudbury, MA 01776			diasabled children	3,000
www.st.j, ses villo		 	+	
Sudbury Community Food Pantry	N/A	PC	Assist low income	
P.O. Box 751	\		families with basic	
Sudbury, MA 01776		<u> </u>	food	1,000
Total from continuation sheets				

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	~ ` 			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Sunshine Gals of Billerica	N/A	PC	Replenish	
6 Windsor Road			non-perishable food	
Billerica, MA 01821		1	items for low and	
			moderate income	
			families in need	2,000.
The Elizabeth Peabody House Emergency	N/A	PC	Replenish	
Food Pantry			non-perishable food	
277 Broadway			items for low and	
Somerville, MA 02139		i	moderate income	
,			families in need	1,000.
Westford Food Pantry	N/A	PC	Replenish	
20 Pleasant Street	, · · ·		non-perishable food	
Westford, MA 01886			items for low and	
Webelola, Mr 01000			moderate income	
			I	2 000
			families in need	2,000.
Whitney Nash and Colby College	None	F F	2017 James McGarry	
c/o Colby College, 4000 Mayflower		ſ	Scholarship	
Hill Drive Waterville, ME 04901		1		5,000.
		·		
Woburn Council of Social Concern	N/A	₽C	General Operating	
2 Merrimac Street			Support	
Woburn, MA 01801				10,000.
YMCA of Metro North-Melrose	N/A	PC	Providing access for	
497 Main Street		Ì	ten children from the	
Melrose, MA 02176			Department of Children	
·			and Families with	
			Access to the YMCA	2,500.
YMCA of Waltham	N/A	PC	Providing access for	
725 Lexington Street			ten children from the	
Waltham, MA 02452			Department of Children	
		1	and Families with	
			Access to the YMCA	5,000.
		 	Access to the IMCA	3,000.
		_	<u> </u>	
		}		
Total from continuation sheets	<u> </u>	<u> </u>		

Northern Bank & Trust Charitable Foundation. Inc.

			Founda	tión,	In	c.				4	5-1606139	
Part XV	Suppleme	entary Ir	nformation									
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution												
Name of	Recipi	ent -	People	Help	ing	Peopl	.e					
General	operat	ional	assist	ance	(\$2	,500).	As	sist	with	the food	pantry	
providi	ng low	and m	oderate	inco	me_	famili	.es	with	food	supplies	(\$5,000)	
												
									<u>_</u>			
							_					
								-				
	<u> </u>			_								
												_
						-		_	-			
		<u> </u>										
		-										
						-		_				
		· ·										
					_							
												
												
								<u> </u>		·		
				-	_							

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

2017

Name of the organization

Northern Bank & Trust Charitable Foundation, Inc.

Employer identification number

46-1606139

Organization type (check one)							
Filers of:	Section:						
Form 990 or 990	D-EZ 501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note: Only a se	ganization is covered by the General Rule or a Special Rule . Stion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions						
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or y) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions						
Special Rules							
section any on	organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from e contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, orm 990-EZ, line 1 Complete Parts I and II.						
year, to	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ital contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for vention of cruelty to children or animals. Complete Parts I, II, and III.						
year, c is chec purpos	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the particular organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the particular organization stated more than \$1,000. If this box ked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., e. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively s, charitable, etc., contributions totaling \$5,000 or more during the year.						
but it must ansv	anization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), ver "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to esn't meet 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

Northern Bank & Trust Charitable

Employer identification number

Found	ation, Inc.	46	5-1606139
Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Northern Bank & Trust 275 Mishawum Road Woburn, MA 01801	\$\$.	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 Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0	1-17	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017

Name of organization Northern Bank & Trust Charitable Foundation, Inc.

Employer identification number

46-1606139

Part (I)	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u></u>	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
from Part I	Description of noncash property given		Date received
3453 11-01-		\$	990, 990-EZ, or 990-PF)

Name of org	anization		Employer identification number						
North	ern Bank & Trust Charit	able							
	ation, Inc		46-1606139						
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete	tributions to organizations described in s columns (a) through (e) and the following	ection 501(c)(7), (8), or (10) that total more than \$1,000 for						
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or less	for the year (Enterthis info once) > \$						
(a) No.	Use duplicate copies of Part III if addition	al space is needed.							
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
			_						
			_						
		(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
1									
ľ									
(a) No. from	(1.) (2	(-)11- (-)6							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
- 1									
			_						
ľ									
<u> </u>		(e) Transfer of gift							
	(o) manager or gire								
1	Transferee's name, address, a	Relationship of transferor to transferee							
ŀ									
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
1									
}		<u> </u>							
l		(e) Transfer of gift							
ľ	Transferee's name address a	Transferee's name, address, and ZIP + 4 Relati							
			Relationship of transferor to transferee						
}									
(a) No.									
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
L									
		(e) Transfer of gift							
		.=							
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
l									
}									

Form 990-PF	Accounti	ng Fees	Statement :	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income		(d) Charitable Purposes
Accounting Fees	1,550.	238.		1,312.
To Form 990-PF, Pg 1, ln 16b	1,550.	238.		1,312.
Form 990-PF	Other E	xpenses	s	tatement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	_	(d) Charitable Purposes
Filing Fees	89.	0.		89.
To Form 990-PF, Pg 1, ln 23	89.	0.		89.

	VIII - List of Officers, Directors Trustees and Foundation Managers		Statement 3	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
James J. Mawn 275 Mishawum Road Woburn, MA 01801	President/Direc	ctor 0.	0.	0.
Francis Kenney 275 Mishawum Road Woburn, MA 01801	Treasurer/Direc	ctor 0.	0.	0.
Donald Queenin 275 Mishawum Road Woburn, MA 01801	Clerk/Director 0.50	0.	0.	0.
Katie Gatcomb 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Mary Elizabeth Mawn-Ferullo 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Alicia J. Mawn-Mahlau 275 Mishawum Road Woburn, MA 01801	Director 0.50	0.	0.	0.
Totals included on 990-PF, Page	6, Part VIII	0.	0.	0.
Form 990-PF Summary of Direct Charitable Activities			State	ement 4

Activity One

Northern Bank & Trust Charitable Foundation awards up to 10 scholarships of \$5,000 or less to candidates who are accepted as full-time students in a bachelor's degree program and who have a parent or legal guardian employed as an active firefighter or police officer in the geographic area served by the Foundation.

To Form 990-PF, Part IX-A, line 1

Expenses 5,000.