EXTENDED TO NOVEMBER 15, 2018
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.

Dep	artme	nto time i reasury	social security numbers on		•	2017			
For calendar year 2017 or tax year beginning , and ending									
		f foundation			A Employer identification	n number			
F	<u>IER</u>	MANN FOUNDATION, INC.							
C/O HENRY LUSARDI Number and street (or PO box number if mail is not delivered to street address) Floom/suite B Telephone number									
_3	370	MAIN STREET		925	(508) 756-	-4657			
		own, state or province, country, and ZIP or foreign p. .CESTER, MA 01608	oostal code		C If exemption application is	pending, check here .			
G	Chec	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	is, check here			
		Final return	Amended return						
		Address change	Name change		Foreign organizations m check here and attach or	peeting the 85% test, omputation			
H_	_	type of organization X Section 501(c)(3) ex			E If private foundation st	atus was terminated			
느			Other taxable private founda	ation	under section 507(b)(1)(A), check here			
		arket value of all assets at end of year J Account	· •	Accrual	F If the foundation is in a				
			ther (specify)		under section 507(b)(1)(B), check here .			
	ert l	72, 152, 906. (Part I, colur Analysis of Revenue and Expenses			43.44	(d) Danier			
	#FT 1	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for chantable purposes			
	1	Contributions, grifts, grants, etc , received			N/A	(cash basis only)			
	2	Check X if the foundation is not required to attach Sch B			477.5%				
	3	Interest on savings and temporary cash investments	38.	38.		STATEMENT 1			
	4	Dividends and interest from securities	1,535,324.	1,535,324.		STATEMENT 2			
	5a	Gross rents				# 774 # 7 4 7 H 7 1 H 7			
	}	Net rental income or (loss)			***************************************				
_	Fa Fa	Net gain or (loss) from sale of assets not on line 10	1,842,217.	**************************************	· · · · · · · · · · · · · · · · · · ·	CEIVED			
nge	b	Gross sales price for all 20,712,911.			8	X			
Revenue	7	Capital gain net income (from Part IV, line 2)	 	1,842,217.		L 3 1 2018 121			
ď	8	Net short-term capital gain		,					
	9	Income modifications				BUEN, UT			
	10a	Gross sales less returns and allowances		, , , , , , , , , , , , , , , , , , , ,					
	b	Less Cost of goods sold							
	5	Gross profit or (loss)				<u> </u>			
	11	Other income .	548.	548.	 	STATEMENT 3			
	12	Total. Add lines 1 through 11	3,378,127.	3,378,127.	· · · · · · · · · · · · · · · · · · ·				
	13	Compensation of officers, directors, trustees, etc	312,500.	156,250.		0.			
	14	Other employee salanes and wages							
õ	15	Pension plans, employee benefits	ļ						
Administrative Expenses	16a	Legal fees	24 764	12 202		 			
ٷٛؠ	þ	Accounting fees STMT 4	24,764.	12,382.	 	0.			
رُبُ	C C	Other professional fees				 			
溢	10	Interest Taxes STMT 5	19,880.	0.		0.			
str	10	Taxes STMT 5 Depreciation and depletion	17,000.			1			
Ē.	20	Occupancy	+						
PQ PQ	21	Travel, conferences, and meetings				 			
Đị C		Printing and publications	 -						
9 8	23	Other expenses STMT 6	139,392.	131,147.		0.			
atin	24	Total operating and administrative							
je.	i	expenses. Add lines 13 through 23	496,536.	299,779.		0.			
Ō,	⊃ 25	Contributions, gifts, grants paid	3,084,960.			3,084,960.			
		Total expenses and disbursements.		1	·····				
		Add lines 24 and 25	3,581,496.	299,779.		3,084,960			
\neg		Subtract line 26 from line 12.			, , , , , , , , , , , , , , , , , , , 	1			
	1	Excess of revenue over expenses and disbursements	-203,369.	1					
- 1		Net investment income (if negative, enter -0-)		3,078,348.	···· • • • • • • • • • • • • • • • • •	X			
- 1		Adjusted net income (f negative, enter -0-)			N/A				

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

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
	ari	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	6,299,531.	5,494,546.	5,494,546
	3	Accounts receivable			
	1	Less allowance for doubtful accounts			
	4	Pledges receivable			
	{	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less. allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	108	Investments - U.S. and state government obligations STMT 8	2,400,376.	1,426,768.	1,406,658
	t	Investments - corporate stock STMT 9	40,431,024.	42,260,928.	64,084,476
	[0	Investments - corporate bonds STMT 10	870,752.	870,752.	858,101.
	11	Investments - land, buildings, and equipment: basis			,
	1	Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 11	277,539.	276,880.	309,125.
	14	Land, buildings, and equipment basis ▶			
	Ì	Less: accumulated depreciation		· 	····
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	_	instructions. Also, see page 1, item I)	50,279,222.	50,329,874.	72,152,906.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ŝ	19	Deferred revenue			
Ě	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
		,	,		
	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.			
ê	24	Unrestricted			
Ē	25	Temporarily restricted			
Ď	26	Permanently restricted			
בַּ		Foundations that do not follow SFAS 117, check here			
ヹ		and complete lines 27 through 31.			
<u>0</u>	27	Capital stock, trust principal, or current funds	50,129,704.	49,926,335.	
Se :	28	Paid-in or capital surplus, or land, bldg, and equipment fund	149,518.	403,539.	•
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
	30	Total net assets or fund balances	50,279,222.	50,329,874.	,
-			'		,
	31	Total liabilities and net assets/fund balances	50,279,222.	50,329,874.	•
×.					
<u> </u>	art	HI Analysis of Changes III Net Assets of Fulld Di	aidi 1069		
	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(mus	t agree with end-of-year figure reported on prior year's return)			50,279,222.
?	Enter	amount from Part I, line 27a	• • • • • • • • • • • • • • • • • • • •		-203,369.
)	Othe	rincreases not included in line 2 (itemize)	SEE STA	TEMENT 7 3	254,021.
	Add I	ines 1, 2, and 3		4	50,329,874.
i	Decre	eases not included in line 2 (itemize)		5	0.
.	Fotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		50,329,874.

	HENRY LUSARDI				56-2	2385301	Page
Part IV Capital Gains	and Losses for Tax on	Investmen	t Income	4.1	-·· · · · · · · · · · · · · · · · · ·		
	e the kind(s) of property sold (for ex rarehouse; or common stock, 200 s		ate,	(b) How acquired P - Purchase D - Donation	(c) Date acquii (mo , day, yr		
1a							
b SEE ATTACHEL	STATEMENT						
<u> </u>							
1							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, ,,,,	st or other basis		(h) Gain or ((e) plus (f) m		
a	(- 	((0) p.do (-)		
b .	 	 		- 			
C							
<u>d</u>							
g 20,712,911.			8,616,67			1,842	<u>,217</u>
Complete only for assets showi	ng gain in column (h) and owned by			(1)	Gains (Col (h) (k), but not les	gain minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	cess of col (i) col (j), if any	Col	Losses (from		
<u>a</u>		 					
<u>b</u>		 					
ď		 					
<u> </u>		 				1,842	,217
	∫ If gain, also ente)		1,842	
2 Capital gain net income or (net ca	((((((((((((((((((((1	J 2		1,042	1211
3 Net short-term capital gain or (lo	column (c).	nd (6).			N	I/A	
If (loss), enter -0- in Part 1, line 8 Part V Qualification U		r Reduced	Tax on Net I	nvestment inc		<u>/ A</u>	
(For optional use by domestic private							
	- -			····· ,			
If section 4940(d)(2) applies, leave t	his part blank						
Was the foundation liable for the sec if "Yes," the foundation doesn't quain			•	d ⁹		Yes	X No
1 Enter the appropriate amount in				nes			
(a) Base period years	(b)			(c)	, n	(d) estribution ratio	
Calendar year (or tax year beginni	ng in) Adjusted qualifying dis			charitable-use assets	(col. (b) divided by col (
2016		4,537.		2,119,825			55128
2015	3,31	5,060. 1,197.		4,990,277			1009
2014 2013		1,333.		1,547,961			15947 18764
2012		7,719.		8,226,467			0282
5012							, , , ,
? Total of line 1, column (d)					2	.25	51130
	5-year base period - divide the total			of years			
the foundation has been in exister	nce if less than 5 years				3	.05	0226
Figure 1 Enter the net value of noncharitate	le-use assets for 2017 from Part X,	line 5			4	67,082,	087
i Multiply line 4 by line 3					5	3,369,	
6 Enter 1% of net investment incom	ie (1% ot Part I, linė 27b)		• •		6		783.
7 Add lines 5 and 6		- •			7	3,400,	048.
Enter qualifying distributions from					8	3,084,	960.
If line 8 is equal to or greater man See the Part VI instructions	line 7, check the box in Part VI, line	io, and compl	ete that part using :	a 1% tax rate			
maco4 04 02 18						Form QQ 0_ D	E /2017

X

MA

8a Enter the states to which the foundation reports or with which it is registered. See instructions

of each state as required by General Instruction G? If "No," attach explanation

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)

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address

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

	art vir-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	1		
40	section 512(b)(13)? If "Yes," attach schedule See instructions	11	 	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		v
19	If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	X	X
13	Website address ► N/A	13		<u></u>
14	- CAAN	756-	465	7
	Located at ▶ 370 MAIN STREET, SUITE 925, WORCESTER, MA ZIP+4 ▶0			<u> </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	. []
	and enter the amount of tax-exempt interest received or accrued during the year	· 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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		*******	
	foreign country			
P	art 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.		Yes	No
18	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? [X] Yes No.			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	-		
b	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	16	1	X
	Organizations relying on a current notice regarding disaster assistance, check here			*********
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?	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			
	before 2017?			
	If "Yes," list the years			
þ	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		1	
	statement - see instructions)	2b	 -	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		- 1	
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year?			
h	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after		1	
J	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		ļ	
	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	Ť	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	$\neg +$	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	_	X _
	Fo	m 990	-PF (2017)

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contil	nued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No		1
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indi				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	\$?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizati	on described in section				
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance? See inst			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?		1/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d)			ļ		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		. [] Yı	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		- -	6b	<u>X</u>
If "Yes" to 6b, file Form 8870				1	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Yı	s X No		<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	enagers, Highly	<i>(</i>		
List all officers, directors, trustees, and foundation managers and to	their companyation				
Table on officers, and total state of the formation managers and	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Fy	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	, other
	to position	enter -0-)	compensation	allowa	inces
	+				
SEE STATEMENT 12	+	312,500.	0.		0.
DEC DIMIBILIA 12	 	312,300.	<u> </u>	·	
	-				
	-				
	-				
		 			
	•	ĺ			
	-]			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account allowa	, other
NONE			our paragon		
			ļ		
			[
			į		
		 			
Total number of other employees paid over \$50,000		<u> </u>			0
					U

Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, el	nter "NONE."	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GRIMES & COMPANY, INC.		
	INVESTMENT ADVIS	OR 108,888.
		Ţ
Total number of others receiving over \$50,000 for professional services	·	▶ 0
Part X-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant standard of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the produced, etc	Expenses
1 N/A		
		1
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 <u>N/A</u>		
2		
All other program-related investments. Con instructions		
All other program-related investments. See instructions 3		
J		
Total. Add lines 1 through 3		0.
TAXABLE PARTIES AND		Form QQ0_DE (2017)

Form 990-PF (2017)

C/O HENRY LUSARDI

F	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	62,206,603.
b	Average of monthly cash balances	1b	5,897,039.
C	Fair market value of all other assets	10	
đ	Total (add lines 1a, b, and c)	1d	68,103,642.
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	68,103,642.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,021,555.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	67,082,087.
6	Minimum investment return. Enter 5% of line 5	6	3,354,104.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	3,354,104.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	income tax for 2017 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	26	61,567.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,292,537.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,292,537.
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	3,292,537.
P	art XII Qualifying Distributions (see instructions)	·····	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
2	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,084,960.
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	
þ	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	3,084,960.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	t	
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,084,960.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	r the section

	USARDI			200001 rages
Part XIII Undistributed Income (se	e instructions)			
	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				3,292,537.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			2,263,020.	``
b Total for prior years				
	· · · · · · · · · · · · · · · · · · ·	0.		*******************************
3 Excess distributions carryover, if any, to 2017		1	1	
a From 2012	1			
b From 2013				
c From 2014	1			
d From 2015			İ	
e From 2016			1	
f Total of lines 3a through e	0.			······································
4 Qualifying distributions for 2017 from		1		
Part XII, line 4 > \$ 3,084,960.			2,263,020.	
a Applied to 2016, but not more than line 2a			2,203,020.	· · · · · · · · · · · · · · · · · · ·
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	·····			-12, 140 -14 -1 1-2 -11(1-16, -16 -14
c Treated as distributions out of corpus	0.			
(Election required - see instructions)		· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , 	821,940.
d Applied to 2017 distributable amount	0.			······································
e Remaining amount distributed out of corpus	0.		**	0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 instr.			0.	
f Undistributed income for 2017. Subtract			1	
lines 4d and 5 from line 1. This amount must				2 470 507
be distributed in 2018	 		· ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,470,597.
7 Amounts treated as distributions out of		,		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		1	` .	
may be required - see instructions)	0.	, - , ,,, ,, ,,, ,,,, ,,, ,,, ,,, ,,, ,	· · · · · · · · · · · · · · · · · · ·	', 44 + 1811 - 241 ' - `44 + 181
8 Excess distributions carryover from 2012	0		1	
not applied on line 5 or line 7	0.	* * * * * * * * *	!	** , ** ** ** ** ** *** ***
9 Excess distributions carryover to 2018.	0.		į	
Subtract lines 7 and 8 from line 6a				· · · · · · · · · · · · · · · · · · ·
10 Analysis of line 9.	1		‡	
a Excess from 2013	`	1	Ī	
b Excess from 2014	#	1	‡	
E CALGOO HUIH EU IJ I	4	4	1	

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d Excess from 2016 e Excess from 2017

b The form in which applications should be submitted and information and materials they should include. BY LETTER c Any submission deadlines NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors MUST BE A SECTION 501(C)(3) PUBLIC CHARITY

Form **990-PF** (2017)

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C/O HENRY LUSARDI

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ABBY KELLY FOSTER HOUSE, INC. NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION 25,000. AMERICAN ANTEQUARIAN SOCIETY NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION 25,000. ASSOCIATION TO PRESERVE CAPE COD NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT 35,000. FUNCTION BARNSTABLE LAND TRUST NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION 25,000. BOYS & GIRLS CLUB OF CAPE COD NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION 35,000. SEE CONTINUATION SHEET(S) ➤ 3a 3,084,960. Total b Approved for future payment NONE Total 0.

Part XVI-A	Analysis	of Income-	Producing	Activities
4 200 4 444 4 7 7 7		000		

Enter gross amounts unless otherwise indicated	Unrelated business income			ded by section 512, 513, or 514	(e)	
-	(a) (b) Business Amount		Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue	code		- Lode			
a	 					
	 	· · · · · · · · · · · · · · · · · · ·				
6	1	-	_			
đ	 	· · · · · · · · · · · · · · · · · · ·				
e			+			
g Fees and contracts from government agencies		, , , , , , , , , , , , , , , , , , , 				
2 Membership dues and assessments	<u> </u>		1			
3 Interest on savings and temporary cash			1			
investments	} }		14	38.		
4 Dividends and interest from securities		 	14	1,535,324.		
5 Net rental income or (loss) from real estate:		7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	~ 1 1		-1,, 	
a Debt-financed property			1			
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property			1 1			
7 Other investment income			14	548.		
8 Gain or (loss) from sales of assets other						
than inventory			18	1,842,217.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b						
C						
d						
e						
2 Subtotal Add columns (b), (d), and (e)		0		3,378,127.	0.	
3 Total. Add line 12, columns (b), (d), and (e)	•			. 13	3,378,127.	
(See worksheet in line 13 instructions to verify calculations.)						

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

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).

Part A	Exempt Organ		lisiers to	and Iransactions	and nelation	Ships With Nonci	iaritable	,	
1 Did th	e organization directly or ind	irectly engage in an	y of the follow	ing with any other organiz	ation described in se	ection 501(c)		Yes	No
(other	r than section 501(c)(3) orga	inizations) or in sect	tion 527, relati	ng to political organization	ıs?				
a Trans	fers from the reporting found	jation to a nonchari	table exempt o	rganization of					
(1) C	ash						1a(1)		X
(2) 0	Other assets						1a(2)		X
b Other	transactions								
(1) S	ales of assets to a noncharita	able exempt organız	ation		•		. 1b(1)	<u> </u>	X
(2) P	urchases of assets from a no	oncharitable exempt	torganization				1b(2)		X
(3) R	ental of facilities, equipment,	, or other assets					1b(3)		X
(4) R	eimbursement arrangements	.	•				1b(4)		X
(5) L	oans or loan guarantees			•	•		1b(5)		X
(6) P	erformance of services or me	embership or fundra	aısıng solıcıtati	ons .			1b(6)		X
c Sharin	ng of facilities, equipment, ma	ailing lists, other ass	sets, or paid er	nployees			1c		X
d If the a	answer to any of the above is	"Yes," complete the	e following sch	edule. Column (b) should	always show the fai	r market value of the good	s, other ass	ets,	
or sen	vices given by the reporting f	foundation If the for	undation receiv	ved less than fair market v	alue in any transacti	on or sharing arrangemen	t, show in		
	n (d) the value of the goods,	other assets, or ser	vices received		· · · · · · · · · · · · · · · · · · ·				
(a) Line no	(b) Amount involved	(c) Name (e exempt organization	(d) Descript	on of transfers, transactions, a	nd sharing an	rangeme	ents
			N/A						
							-		
									_
				· · · · · · · · · · · · · · · · · · ·					
	-								
			•						
2a Is the f	foundation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt orga	nizations described				
	ion 501(c) (other than sectio						Yes	X	No
	" complete the following sch			• •	• •	•			
	(a) Name of org			(b) Type of organization	1	(c) Description of relation	nship		
	N/A						,		
					<u> </u>				
			· - ·						
									
			· · ·						
Un	der penalties of perjury, I declare	that I have examined th	ıs return, İncludin	g accompanying schedules an	d statements, and to the	e best of my knowledge			
Sign and	d belief, it is true, correct, and con	nplete Declaration of pr	reparer (other that	n taxpayer) is based on all info	rmation of which prepar	er has any knowledge	flay the IRS di eturn with the hown below?	scuss the prepare	hie ar
Here	Senny	Lusar	di	1/ 7/26/18	TREAS	IIRER	X Yes	See ins] No
F	ignature of officer or trustee	0 10-02 -0 .	<u>~ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `</u>	Date	Title	<u> </u>	LAL TES	<u> </u>) NO
	Print/Type preparer's na	me	Preparer's si		Date	Check if PTIN	<u> </u>		
	7,50	-		0 , 4.		self- employed	-		
Paid	GARY SKAGE	RT.TND	Lan	Negroslind	7/26/2018		009596	501	
Prepare			SARDT	, , , , , , , , , , , , , , , , ,	1 1.0100	Firm's EIN ► 04-2			
Use Onl			THILD I O	V		FITTI S EIN P 04-2	.13043	, ,	
	Firm's address ► 37	O MATN CT	CIIT	TE 925					
	•		•	08-1772		Dhoma no /5001	756-4	165	7
	, NO.	KOHOT HK/	TITY OIG	<u> </u>	<u> </u>				
							Form 990 -	-rr (†	ZU1/)

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co. (mo, day, yr) (mo., day, yr) D - Donation 1a UBS FINANCIAL SERVICES 281 DETAILS ON FILE VARIOUS 12/31/17P b GRIMES INVESTMENTS - DETAILS ON FILE \overline{P} VARIOUS 12/31/17 c UBS FINANCIAL SERVICES- 129 DETAILS ON FILE P VARIOUS 12/31/17 d FROM K-1 FRANCOISE HERMANN TRUST F/B/O MONICA HER VARIOUS P 12/31/17 e FROM K-1 FRANCOISE HERMANN TRUST F/B/O MONICA HER P VARIOUS 12/31/17 f GRIMES INVESTMENTS - DETAILS ON FILE P VARIOUS 12/31/17 Q UBS FINANCIAL SERVICES 281 DETAILS ON FILE P VARIOUS 12/31/17 h UBS FINANCIAL SERVICES 129 12/31/17 DETAILS ON FILE P VARIOUS CAPITAL GAINS DIVIDENDS k ١ m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -93. 3,198 3,29110,544,325 10,021,838. 522,487. þ 816,051. 829,518. -13,467.-79,747.d -174,274.6,192,971. 4,736,998 1,455,973. 1,282,503. 1,369,284 -86,781. g 1,823,249. 1,655,744 167,505. h 50,614 50,614. m П 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) F.M V as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any -93. a 522,487. Þ -13,467.-79,747. -174,274.1,455,973. -86,781. 167,505. ħ 50,614. m { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 1,842,217. 2 Capital gain net income or (net capital loss) 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) If (loss), enter "-0-" in Part I, line 8 N/A

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,			
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		
BOYS & GIRLS CLUB OF SOUTH COAST	HONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		 	FUNCTION	35,000
BRAILLE INSTITUTE	NONE	DIEDLIC CUADITY	ENABLE DONEE TO	
BRAINDE INSTITUTE	NONE	FOBLIC CHARITI	CONTINUE EXEMPT	
		<u> </u>	FUNCTION	35,000
CALIFORNIA BALLET COMPANY	NONE	PUBLIC CHARITY	enable donee to	
			CONTINUE EXEMPT	
		 	FUNCTION	50,000
CAMP GOOD NEWS	NONE	DIIRLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<u> </u>	FUNCTION	25,000
CAPE COD COMMUNITY COLLEGE EDUCATION	NONE	PUBLIC CHARITY	ENABLE DONER TO	
FOUNDATION			CONTINUE EXEMPT	
		 	FUNCTION	25,000
CAPE COD CONSERVATION	NONE	PUBLIC CHARITY	enable donee to	
			CONTINUE EXEMPT	100 000
			FUNCTION	100,000
CENTER FOR COASTAL STUDIES	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
	<u> </u>		FUNCTION	60,000
HURCH OF THE MESSIAH	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	50,000.
ITY OF HOPE	NONE	DUBLIC CHYSIAA	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	40,000.
ITY SPROUTS INC	NONE		ENABLE DONEE TO	
		Į.	CONTINUE EXEMPT	2E 000
Total from continuation sheets	.1	I	FUNCTION	25,000. 2,939,960.

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
any foundation manager or substantial contributor	status of recipient	CONTRIBUTION ENABLE DONEE TO	Amount
NONE	PUBLIC CHARITY		
		CONTINUE EXEMPT FUNCTION	1,000
NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	100,000
NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	50,000
NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
NONE -	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	100,000
NONE	PUBLIC CHARITY	CONTINUE EXEMPT	116,000
NONE		CONTINUE EXEMPT	20,000
NONE		CONTINUE EXEMPT	100,000
NONE		CONTINUE EXEMPT	50,000
NONE		CONTINUE EXEMPT	50,000
	NONE NONE NONE NONE	NONE PUBLIC CHARITY NONE PUBLIC CHARITY NONE PUBLIC CHARITY NONE PUBLIC CHARITY NONE PUBLIC CHARITY NONE PUBLIC CHARITY NONE PUBLIC CHARITY	NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION NONE PUBLIC CHARITY ENABLE DONEE TO CONTINUE EXEMPT FUNCTION

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the			·	
Recipient Name and address (home as humana)	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)	any foundation manager or substantial contributor	recipient		
JML CARE CENTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT FUNCTION	125 000
		 	FUNCTION	125,000
LAURA'S HOUSE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<u> </u>	FUNCTION	50,000.
LOS ANGELES YOUTH NETWORK	NONE	PUBLIC CHARITY	enable donke to	
		į.	CONTINUE EXEMPT	
			FUNCTION	20,000.
MANOMET CENTER FOR CONSERVATION	NONE	DIDITO CUADITY	ENABLE DONEE TO	
SCIENCES	,		CONTINUE EXEMPT	
			FUNCTION	50,000.
MARK FIDRYCH FOUNDATION INC	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		 	FUNCTION	25,000.
Wangin In Livering Market Landson				
MARTHA'S VINEYARD YOUTH LEADERSHIP INITIATIVE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			FUNCTION	83,960.
MASSACHUSETTS GENERAL HOSPITAL	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	25,000.
MATTHEW 25	NOVE			
MATTHEW 25	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
		<u> </u>	FUNCTION	25,000.
MERCY CENTER OF WORCESTER	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
		į.	CONTINUE EXEMPT	
			FUNCTION	25,000.
MONTY TECH HIGH SCHOOL	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	25,000.
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the \(\)				Γ
Recipient	If recipient is an individual,	T		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		,
MUSEUM OF SCIENCE	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
	 		FUNCTION	50,000
NEW ENGLAND CARPENTER'S TRAINING FUND	NONE		DUDE DOVIE TO	
NEW ENGLAND CARPENTER S TRAINING FUND	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	25,000
				-
NEW ENGLAND CENTER AND HOME FOR	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
VETERANS			CONTINUE EXEMPT	
			FUNCTION	45,000
NORTH END ATHLETIC ASSN INC	NONE	PITRI.TC CHARTTY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
		<u> </u>	FUNCTION	25,000
NORTHEASTERN UNIVERSITY	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
	, ,		CONTINUE EXEMPT	
		ļ	FUNCTION	100,000
	2			
ORANGE COUNTY RESCUE MISSION	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT FUNCTION	40,000.
PET PLACE INTERNATIONAL INC	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	92,000.
PROJECT ANGEL FOOD	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
		1	FUNCTION	60,000.
PULLMAN BROTHERS CHARITABLE	NONE	PUBLIC CHARITY	enable donee to	
FOUNDATION		{	CONTINUE EXEMPT	
			FUNCTION	25,000.
REACH BEYOND DOMESTIC VIOLENCE	NONE		ENABLE DONEE TO	
		1	CONTINUE EXEMPT FUNCTION	100,000.
Total from continuation sheets	L	L	- OHOLLOIS	100,000.

Part XV Supplementary Informatio 3 .Grants and Contributions Paid During the				
Recipient	If recipient is an individual.	Faundation	Dumana of a part or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
RECOVERY WITHOUT WALLS	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
		1	CONTINUE EXEMPT	
			PUNCTION	25,000
SKYLINE TECHNICAL, INC.	NONE	PUBLIC CHARITY	ENABLE DONER TO	Ti di
			CONTINUE EXEMPT FUNCTION	25,000
SPAM BENEVOLENT FUND	NONE	PIRLIC CHARTTY	ENABLE DONEE TO	
517E. 5MI210-1MI2 1035			CONTINUE EXEMPT	
			FUNCTION	25,000
STARLIGHT CHILDRENS FOUNDATION	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
			FUNCTION	75,000
,				
STONE SOUP LEADERSHIP INSTITUTE	NONE	PUBLIC CHARITY	enable donee to	
			CONTINUE EXEMPT	
			FUNCTION	187,000
SUSTAINABLE HOLYOKE YOUTH LEADERSHIP	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT	
			FUNCTION	45,000.
THE 300 COMMITTEE LAND TRUST	NONE	PUBLIC CHARITY	ENABLE DONEE TO	
			CONTINUE EXEMPT	
	<u> </u>		FUNCTION	75,000.
THE FAMILY INC	NONE	PUBLIC CHARITY	enable donee to	
			CONTINUE EXEMPT	
· · ·			FUNCTION	60,000.
THE HOLE IN THE WALL GANG CAMP	NONE	l	ENABLE DONEE TO	
		}	CONTINUE EXEMPT	
	 		FUNCTION	50,000.
THE HOLY UNION SISTERS	NONE	PUBLIC CHARITY	1	
			CONTINUE EXEMPT FUNCTION	25,000.
Total from continuation sheets	-4 			

3 .Grants and Contributions Paid During the 1				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of areat or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
TREEHOUSE FOR KIDS	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
WOODS HOLE OCEANOGRAPHIC INSTITUTE	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	100,000
WORCESTER CENTER FOR PERFORMING ARTS,	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
WORCESTER COWBOYS FOOTBALL INC.	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
WORCESTER EDUCATIONAL DEVELOPMENT FOUNDATION INC	NONE	PUBLIC CHARITY	ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	75,000
WORCESTER JEWISH COMMUNITY CENTER	NONE		ENABLE DONEE TO CONTINUE EXEMPT FUNCTION	25,000
Total from continuation sheets	·			

FORM 990-PF INTER	EST ON SAVING	GS AND TEMPOR	RARY CASH	TNVESTMENTS	STATEMENT
		(A)		(B)	(C)
SOURCE		REVENUE PER BOOK		INVESTMENT INCOME	ADJUSTED NET INCOME
TD BANK			38.	38.	
TOTAL TO PART I, L	INE 3	=======================================	38.	38.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SEC	URITIES	STATEMENT 2
		CAPITAL	(A)	(B)	(C)
SOURCE	GROSS AMOUNT	GAINS DIVIDENDS	REVENUE PER BOOK		
GRIMES & COMPANY, INC. U.B.S. FINANCIAL	631,314.	0.	631,31	4. 631,31	4.
SERVICES, INC. U.B.S. FINANCIAL	782,825.	50,614.	732,21	1. 732,21	1.
SERVICES, INC.	171,799.	0.	171,79	9. 171,79	9.
TO PART I, LINE 4	1,585,938.	50,614.	1,535,32	1,535,32	4.
FORM 990-PF		OTHER INCO	ME		STATEMENT 3
			(A) VENUE	(B) NET INVEST-	(C) ADJUSTED
DESCRIPTION			BOOKS	MENT INCOME	NET INCOME
CLASS ACTION PROCEE	EDS		548.	548.	•

548.

548.

TOTAL TO FORM 990-PF, PART I, LINE 11

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	24,764.	12,382.		0.
TO FORM 990-PF, PG 1, LN 16B	24,764.	12,382.		0.
FORM 990-PF	TAX	ES	S	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX EXPENSE	19,880.	0.		0.
TO FORM 990-PF, PG 1, LN 18	19,880.	0.	***************************************	0.
FORM 990-PF	OTHER E	XPENSES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES MASSACHUSETTS FORM PC INSURANCE BANK FEES FILING FEES-ANNUAL REPORT INVESTMENT PUBLICATIONS MISCELLANEOUS INVESTMENT	127,422. 500. 7,711. 621. 34. 185.	127,422. 0. 0. 621. 0. 185.		0. 0. 0. 0.
EXPENSES	2,919.	2,919.		0.
TO FORM 990-PF, PG 1, LN 23	139,392.	131,147.		0.

FORM 990-PF OTHER INCREASES	S IN NET ASSE	rs or fu	ND BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
PASS THRU FINAL DEDUCTIONS FI	ROM FINAL K-1	FRANCOI	SE HERMANN	254,0	21.
TOTAL TO FORM 990-PF, PART I	II, LINE 3			254,0	21.
FORM 990-PF U.S. AND S	STATE/CITY GOV	/ERNMENT	OBLIGATIONS	STATEMENT	8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE	r
UBS - GOV. OBLIGATIONS	×		1,426,768.	1,406,6	58.
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS	•	1,426,768.	1,406,6	58.
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBLIG	SATIONS			
TOTAL TO FORM 990-PF, PART II	, LINE 10A	=	1,426,768.	1,406,6	58.
FORM 990-PF	CORPORATE	STOCK		STATEMENT	 9
DESCRIPTION			BOOK VALUE	FAIR MARKET	ľ
UBS - COMMON STOCK GRIMES - COMMON STOCK UBS - PREFERRED SECURITIES UBS - MUTUAL FUNDS UBS - FIXED BOND EQUITIES		-	13,372,860. 21,787,118. 257,292. 6,007,818. 835,840.	22,597,93 30,120,45 307,32 10,220,55 838,15	54. 27. 58.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		42,260,928.	64,084,47	76.

FORM 990-PF	CORPORATE BONDS		STAT	EMENT 1
DESCRIPTION		BOOK VALU		MARKET ALUE
UBS - CORPORATE BONDS		870,7	52.	858,101
TOTAL TO FORM 990-PF, PART II, I	LINE 10C	870,7	52.	858,101
FORM 990-PF C	OTHER INVESTMENTS		STAT	EMENT 1
DESCRIPTION	VALUATION METHOD	BOOK VALU		MARKET ALUE
UBS - COMMODITIES	COST	276,8	80.	309,125
TOTAL TO FORM 990-PF, PART II, I	LINE 13	276,8	80.	309,125
	IST OF OFFICERS, D ND FOUNDATION MANA			EMENT 12
· · · · · · · · · · · · · · · · · · ·	•		STAT	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	GERS COMPEN- SATION	EMPLOYEE BEN PLAN	
TRUSTEES AN	TITLE AND	GERS COMPEN- SATION	EMPLOYEE BEN PLAN	EXPENSE
NAME AND ADDRESS HENRY LUSARDI 370 MAIN STREET SUITE 925	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECT	COMPEN-SATION CTOR 100,000.	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NAME AND ADDRESS HENRY LUSARDI 370 MAIN STREET SUITE 925 WORCESTER, MA 01608 MARIA STARZYK 25642 EL OESTE	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECTORS 20.00 PRESIDENT/DIRECTORS	COMPEN-SATION CTOR 100,000.	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT 0.
NAME AND ADDRESS HENRY LUSARDI 370 MAIN STREET SUITE 925 WORCESTER, MA 01608 MARIA STARZYK 25642 EL OESTE LAGUNA NIGUEL, CA 92677 KERRY QUINNIN 25941 PASOFINO LAGUNA NIGUEL, CA 92677 EDWARD STARZYK 25642 EL OESTE	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECTOR	COMPEN-SATION CTOR 100,000. CTOR 200,000.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0.
NAME AND ADDRESS HENRY LUSARDI 370 MAIN STREET SUITE 925 WORCESTER, MA 01608 MARIA STARZYK 25642 EL OESTE LAGUNA NIGUEL, CA 92677 KERRY QUINNIN 25941 PASOFINO	TITLE AND AVRG HRS/WK TREAS/SEC/DIRECTOR 12.00 DIRECTOR 12.00	COMPEN-SATION CTOR 100,000. CTOR 200,000.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0.