

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	781,571	504,858	504,858
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	7,545,031	6,465,815	6,465,815
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	15,573,179	16,342,685	16,342,685	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	23,899,781	23,313,358	23,313,358	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	23,899,781	23,313,358	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	23,899,781	23,313,358	
31 Total liabilities and net assets/fund balances (see instructions) .	23,899,781	23,313,358		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	23,899,781
2 Enter amount from Part I, line 27a	2	-60,538
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	23,839,243
5 Decreases not included in line 2 (itemize) ▶ _____	5	525,885
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	23,313,358

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a BNY MELLON #5005	P	2018-01-01	2018-12-31
b BNY MELLON #5005	P	2017-01-01	2018-12-31
c PARTNERSHIP LONG TERM CAP GAINS	P	2017-01-01	2018-12-31
d PARTNERSHIP SHORT TERM LOSSES	P	2018-01-01	2018-12-31
e PARTNERSHIP SECTION 1250	P	2018-01-01	2018-12-31

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 445,448		445,448	0
b 257,103		283,916	-26,813
c 915,438			915,438
d		338,970	-338,970
e 1			1

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

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			0
b			-26,813
c			915,438
d			-338,970
e			1

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	549,656
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

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

☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,065,234	23,383,051	0 045556
2016	959,015	21,520,761	0 044562
2015	998,047	19,280,970	0 051763
2014	898,919	20,336,741	0 044202
2013	736,472	18,878,994	0 039010

2 Total of line 1, column (d)	2	0 225093
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 045019
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	24,134,245
5 Multiply line 4 by line 3	5	1,086,500
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	7,818
7 Add lines 5 and 6	7	1,094,318
8 Enter qualifying distributions from Part XII, line 4	8	1,128,071

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	7,818
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	7,818
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	7,818
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	27,362
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	27,362
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	19,544
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ☐ 19,544 Refunded ☐	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ MA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► THE BOSTON FAMILY OFFICE Telephone no ► (617) 624-0800			

Located at **►** C/O GEORGE P BEAL 88 BROAD ST 2ND FL BOSTON MA ZIP+4 **►** 02110

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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

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

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. ☐	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? ☐	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☒ No			
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☒ Yes ☐ No			
b	If "Yes," did it have excess business holdings in 2018 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 2018).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	No
	Organizations relying on a current notice regarding disaster assistance check here.	☒		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GEORGE PUTNAM C/O THE BOSTON FAMILY OFFICE 88 BROAD STREET 2ND FLOOR BOSTON, MA 02110	TRUSTEE (DECEASED) 1 00	0	0	0
NANCY PUTNAM C/O THE BOSTON FAMILY OFFICE 88 BROAD STREET 2ND FLOOR BOSTON, MA 02110	TRUSTEE 1 00	0	0	0
GEORGE PUTNAM III C/O THE BOSTON FAMILY OFFICE 88 BROAD STREET 2ND FLOOR BOSTON, MA 02110	TRUSTEE 1 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
BOSTON FAMILY OFFICE 88 BROAD STREET BOSTON, MA 02110	INVESTMENT MANAGEMENT FEES	73,011
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	0
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NOT APPLICABLE	0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	23,557,918
b	Average of monthly cash balances.	1b	943,854
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	24,501,772
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	24,501,772
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	367,527
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	24,134,245
6	Minimum investment return. Enter 5% of line 5.	6	1,206,712

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

1	Minimum investment return from Part X, line 6.	1	1,206,712
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	7,818
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	7,818
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,198,894
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,198,894
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	1,198,894

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	1,128,071
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	1,128,071
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	7,818
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,120,253

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,198,894
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			1,108,721	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,128,071</u>				
a Applied to 2017, but not more than line 2a			1,108,721	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				19,350
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	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 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				1,179,544
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 2013 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
See Additional Data Table

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

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

Check here ☐ 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. See instructions.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
THE AUSOLUS TRUST
C/O BFO 88 BROAD STREET 2ND FLOOR
BOSTON, MA 02110
(617) 624-0800

b The form in which applications should be submitted and information and materials they should include
NO PARTICULAR FORMAT

c Any submission deadlines
DECEMBER 1ST

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
NONE

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2018)

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.		1a(1)	No
(2) Other assets.		1a(2)	No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.		1b(1)	No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)	No
(3) Rental of facilities, equipment, or other assets.		1b(3)	No
(4) Reimbursement arrangements.		1b(4)	No
(5) Loans or loan guarantees.		1b(5)	No
(6) Performance of services or membership or fundraising solicitations.		1b(6)	No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c	No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2019-10-09	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below
 (see instr.)? ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00464296
	HARRY A KALAJIAN JR CPA				
	Firm's name ► WOLF & COMPANY PC				Firm's EIN ► 04-2689883
	Firm's address ► 99 HIGH STREET 21ST FLOOR BOSTON, MA 02110				Phone no (617) 439-9700

Form 990PF Part XV Line 1a - 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).

GEORGE PUTNAM
NANCY PUTNAM

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMERICAN ACADEMY OF ARTS AND SCIENCES 136 IRVING STREET CAMBRIDGE, MA 02138	NOT RELATED	PC	EXEMPT PURPOSE	5,000
BEATRIX FARRAND SOCIETY PO BOX 111 MT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	5,000
BEVERLY HOSPITAL85 HERRICK STREET BEVERLY, MA 01915	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOSTON SYMPHONY POPS FUND 301 MASSACHUSETTS AVENUE BOSTON, MA 02115	NOT RELATED	PC	EXEMPT PURPOSE	5,000
CAPE ANN ANIMAL AID SOCIETY 4 PAWS LANE GLOUCESTER, MA 01930	NOT RELATED	PC	EXEMPT PURPOSE	10,000
CAPE ANN HISTORICAL MUSEUM 27 PLEASANT STREET GLOUCESTER, MA 01930	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ► 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAPE ANN HISTORICAL MUSEUM 27 PLEASANT STREET GLOUCESTER, MA 01930	NOT RELATED	PC	EXEMPT PURPOSE	5,000
CAPE ANN SYMPHONYPO BOX 1343 GLOUCESTER, MA 01931	NOT RELATED	PC	EXEMPT PURPOSE	5,000
COASTAL MAINE BOTANICAL GARDEN PO BOX 234 BOOTHBAY, ME 04537	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 04609	NOT RELATED	PC	EXEMPT PURPOSE	10,000
COLONIAL WILLIAMSBURG FOUNDATION 301 1ST STREET WILLIAMSBURG, VA 23185	NOT RELATED	PC	EXEMPT PURPOSE	5,000
EMMANUEL CHURCH - MANCHESTER 24 MASCONOMO STREET MANCHESTERBYTHESEA, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EMMANUEL CHURCH - MANCHESTER 24 MASCONOMO STREET MANCHESTERBYTHESEA, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	2,500
EPIPHANY SCHOOL154 CENTRE STREET DORCHESTER, MA 02124	NOT RELATED	PC	EXEMPT PURPOSE	5,000
ESSEX COUNTY GREENBELT 82 EASTERN AVENUE ESSEX, MA 01929	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF ACADIAPO BOX 45 BAR HARBOR, ME 04609	NOT RELATED	PC	EXEMPT PURPOSE	5,000
FRIENDS OF THE PUBLIC GARDEN 69 BEACON STREET BOSTON, MA 02108	NOT RELATED	PC	EXEMPT PURPOSE	10,000
HARBOR HOUSE329 MAIN STREET SOUTHWEST HARBOR, ME 04679	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HARVARD UNIVERSITY ALUMNI AND DEVELOPMENT SERVICES 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	NOT RELATED	PC	EXEMPT PURPOSE	50,000
HISTORIC NEW ENGLAND 141 CAMBRIDGE STREET BOSTON, MA 02114	NOT RELATED	PC	EXEMPT PURPOSE	2,500
HISTORIC NEW ENGLAND 141 CAMBRIDGE STREET BOSTON, MA 02114	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ► 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOOPER FUNDPO BOX 544 MANCHESTER, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	2,500
ISABELLA GARDNER MUSEUM 280 THE FENWAY BOSTON, MA 02115	NOT RELATED	PC	EXEMPT PURPOSE	5,000
ISLAND INSTITUTE 386 MAIN STREET PO BOX 648 ROCKLAND, ME 04841	NOT RELATED	PC	EXEMPT PURPOSE	10,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ISLAND INSTITUTE 386 MAIN STREET PO BOX 648 ROCKLAND, ME 04841	NOT RELATED	PC	EXEMPT PURPOSE	10,000
ISLAND READERS & WRITERS PO BOX 227 MOUNT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	110,000
ISLAND READERS & WRITERS PO BOX 227 MOUNT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	60,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KISMA PRESERVEPO BOX 84 MT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	5,000
LASELL COLLEGE 1844 COMMONWEALTH AVENUE NEWTON, MA 02466	NOT RELATED	PC	EXEMPT PURPOSE	10,000
LASELL COLLEGE 1844 COMMONWEALTH AVENUE NEWTON, MA 02466	NOT RELATED	PC	EXEMPT PURPOSE	10,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAINE COAST HERITAGE TRUST 1 BOWDOIN MILL ISLAND TOPSHAM, ME 04086	NOT RELATED	PC	EXEMPT PURPOSE	10,000
MAINE COAST MEMORIAL HOSPITAL 50 UNION STREET ELLSWORTH, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	2,500
MAINE COMMUNITY FOUNDATION 245 E MAIN STREET ELLSWORTH, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ► 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MANCHESTER ESSEX CONSERVATION TRUST PO BOX 1486 MANCHESTER, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	2,500
MANCHESTER ESSEX CONSERVATION TRUST PO BOX 1486 MANCHESTER, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	20,000
MANCHESTER HISTORICAL MUSEUM 10 UNION STREET MANCHESTER, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MDI BIOLOGICAL LABSPO BOX 35 SALISBURY COVE, ME 04672	NOT RELATED	PC	EXEMPT PURPOSE	5,000
MDI BIOLOGICAL LABSPO BOX 35 SALISBURY COVE, ME 04672	NOT RELATED	PC	EXEMPT PURPOSE	5,000
MGH FUND-MASS GENERAL DEVELOPMENT OFFICE 125 NASHUA STREET SUITE 540 BOSTON, MA 02114	NOT RELATED	PC	EXEMPT PURPOSE	10,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOUNT DESERT HISTORICAL SOCIETY PO BOX 653 MOUNT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	5,000
MOUNT DESERT HISTORICAL SOCIETY PO BOX 653 MOUNT DESERT, ME 04660	NOT RELATED	PC	EXEMPT PURPOSE	10,000
MOUNT DESERT ISLAND HOSPITAL 10 WAYMAN LANE BAR HARBOR, ME 04609	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ► 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOUNT DESERT LAND AND GARDEN PRESERVE PO BOX 208 SEAL HARBOR, ME 04675	NOT RELATED	PC	EXEMPT PURPOSE	25,000
MOUNT DESERT LAND AND GARDEN PRESERVE PO BOX 208 SEAL HARBOR, ME 04675	NOT RELATED	PC	EXEMPT PURPOSE	25,000
MSPCA - ANGELL MEMORIAL HOSPITAL 350 SOUTH HUNTINGTON AVENUE BOSTON, MA 02130	NOT RELATED	PC	EXEMPT PURPOSE	15,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MSPCA - ANGELL MEMORIAL HOSPITAL 350 SOUTH HUNTINGTON AVENUE BOSTON, MA 02130	NOT RELATED	PC	EXEMPT PURPOSE	15,000
MUSEUM OF FINE ARTS BOSTON 465 HUNTINGTON AVENUE BOSTON, MA 02115	NOT RELATED	PC	EXEMPT PURPOSE	10,000
MUSEUM OF FINE ARTS BOSTON 465 HUNTINGTON AVENUE BOSTON, MA 02115	NOT RELATED	PC	EXEMPT PURPOSE	15,000
Total ► 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PEABODY ESSEX MUSEUM 161 ESSEX STREET SALEM, MA 01970	NOT RELATED	PC	EXEMPT PURPOSE	15,000
PEABODY ESSEX MUSEUM 161 ESSEX STREET SALEM, MA 01970	NOT RELATED	PC	EXEMPT PURPOSE	15,000
SECOND STAGE THEATER 1501 BROADWAY SUITE 518 NY, NY 10109	NOT RELATED	PC	EXEMPT PURPOSE	25,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SOUTHWEST HARBOR PUBLIC LIBRARY 338 MAIN STREET SOUTHWEST HARBOR, ME 04679	NOT RELATED	PC	EXEMPT PURPOSE	5,000
SPCA OF HANCOCK COUNTY 141 BAR HARBOR ROAD TRENTON, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	10,000
ST MARK'S SCHOOL 25 MARLBORO ROAD SOUTHBOROUGH, MA 01772	NOT RELATED	PC	EXEMPT PURPOSE	15,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST MARK'S SCHOOL 25 MARLBORO ROAD SOUTHBOROUGH, MA 01772	NOT RELATED	PC	EXEMPT PURPOSE	15,000
THORNTON BURGESS SOCIETY 6 DISCOVERY HILL ROAD EAST SANDWICH, MA 02537	NOT RELATED	PC	EXEMPT PURPOSE	5,000
THORNTON BURGESS SOCIETY 6 DISCOVERY HILL ROAD EAST SANDWICH, MA 02537	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRUSTEES OF RESERVATIONS 527 ESSEX STREET BEVERLY, MA 01915	NOT RELATED	PC	EXEMPT PURPOSE	15,000
TRUSTEES OF RESERVATIONS 527 ESSEX STREET BEVERLY, MA 01915	NOT RELATED	PC	EXEMPT PURPOSE	10,000
WGBH EDUCATIONAL FOUNDATION ONE GUEST STREET BOSTON, MA 02135	NOT RELATED	PC	EXEMPT PURPOSE	15,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WGBH EDUCATIONAL FOUNDATION ONE GUEST STREET BOSTON, MA 02135	NOT RELATED	PC	EXEMPT PURPOSE	25,000
WOODLAWN MUSEUMPO BOX 1478 ELLSWORTH, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	30,000
WOODLAWN MUSEUMPO BOX 1478 ELLSWORTH, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	100,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MORRIS ARBORETUM 100 E NORTHWESTERN AVENUE PHILADELPHIA, PA 19118	NOT RELATED	PC	EXEMPT PURPOSE	25,000
MCLEAN HOSPITAL115 MILL STREET BELMONT, MA 02478	NOT RELATED	PC	EXEMPT PURPOSE	100,000
ESSEX COUNTY GREENBELT 82 EASTERN AVENUE ESSEX, MA 01929	NOT RELATED	PC	EXEMPT PURPOSE	10,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAINE COAST MEMORIAL HOSPITAL 50 UNION STREET ELLSWORTH, ME 04605	NOT RELATED	PC	EXEMPT PURPOSE	2,500
BEVERLY HOSPITAL85 HERRICK STREET BEVERLY, MA 01915	NOT RELATED	PC	EXEMPT PURPOSE	5,000
FRIENDS OF ACADIAPPO BOX 45 BAR HARBOR, ME 04609	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				1,117,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOOPER FUNDPO BOX 544 MANCHESTER, MA 01944	NOT RELATED	PC	EXEMPT PURPOSE	5,000
WGBH MASTERPIECE TRUST ONE GUEST STREET BOSTON, MA 02135	NOT RELATED	PC	EXEMPT PURPOSE	100,000
Total ▶ 3a				1,117,500

TY 2018 Accounting Fees Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WOLF & COMPANY, P C	5,070	0		5,070

TY 2018 Investments Corporate Stock Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PUBLICLY TRADED EQUITIES	6,465,815	6,465,815

TY 2018 Other Assets Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
NEW GENERATION LP	13,136,514	13,417,259	13,417,259
NEW PROVIDENCE BALANCED PORTFOLIO	2,436,665	2,463,978	2,463,978
LONG PATH PARTNERS FUND LP	0	461,448	461,448

TY 2018 Other Decreases Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079

Description	Amount
CHANGE IN UNREALIZED GAIN (LOSS)	525,885

TY 2018 Other Expenses Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	500	0		500
PASSTHROUGH PORTFOLIO EXP	0	332,855		0
PASSTHROUGH CHARITABLE CONTRIBUTIONS	0	0		1

TY 2018 Other Income Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
SECTION 988 INCOME (LOSS)	0	21,788	0
PARTNERSHIP OTHER INCOME	1,456	10,080	1,456

TY 2018 Other Professional Fees Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MGT	73,011	73,011		0
ADMIN FEES	5,000	0		5,000

TY 2018 Taxes Schedule**Name:** THE AUSOLUS TRUST

C/O BOSTON FAMILY OFFICE GEORGE P BEAL

EIN: 04-3368079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES WITHHELD	0	2,014		0
PASSTHROUGH FOREIGN TAXES PAID	0	1,418		0
FEDERAL TAXES	20,000	0		0
MASS UBI TAXES	0	1		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2018
Name of the organization THE AUSOLUS TRUST C/O BOSTON FAMILY OFFICE GEORGE P BEAL		Employer identification number 04-3368079

Organization type (check one)

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organizationTHE AUSOLUS TRUST
C/O BOSTON FAMILY OFFICE GEORGE P BEAL**Employer identification number**

04-3368079

Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE & NANCY PUTNAM C/O BFO 88 BROAD STREET 2ND FLOOR BOSTON, MA 02110	\$ 1,000,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

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Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization THE AUSOLUS TRUST C/O BOSTON FAMILY OFFICE GEORGE P BEAL	Employer identification number 04-3368079
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	