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2018

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20)18 , ar	nd ending 12-31-	2018	
		indation & CLARA C HIGGINS FOUNDATION			entification numbe	r
				04-6026914		
		d street (or P O box number if mail is not delivered to street address) N STREET 12TH FLOOR	Room/suite	B Telephone nu	ımber (see ınstructıoı	ns)
				(508) 459-8000)	
		ı, state or province, country, and ZIP or foreign postal code R, MA 01608		C If exemption	application is pendin	g, check here
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	D 1. Foreign or	ganızatıons, check he	ere , \Box
		☐ Final return ☐ Amended return			ganizations meeting	
		Address change Name change		<u> </u>	k here and attach co	· -
H Ch	eck ty	tpe of organization $\mathbf{\nabla}$ Section 501(c)(3) exempt private	foundation		undation status was t n 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitable trust	e private foundation			
of '	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 1,836,431 J Accounting method □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		ation is in a 60-montl n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach				
		schedule)				
	2	Check ► ☑ If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	27,594	27,594		
	5a	Gross rents				
	b	Net rental income or (loss)				
KIE	6a	Net gain or (loss) from sale of assets not on line 10	120,726			
Revenue	b	Gross sales price for all assets on line 6a 230,254				
2	7	Capital gain net income (from Part IV, line 2)		120,726		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances	<u> </u>			
	b c	Less Cost of goods sold	<u> </u>			
	11	Other income (attach schedule)	9 9	99		
	12	Total. Add lines 1 through 11	148,419			
	13	Compensation of officers, directors, trustees, etc	140,417	140,415		
	14	Other employee salaries and wages				
s	15	Pension plans, employee benefits				
15e	16a	Legal fees (attach schedule)				
Expenses	ь	Accounting fees (attach schedule)	11,927	5,964		5,963
Ĕ	С	Other professional fees (attach schedule)	19,716	19,716		
Operating and Administrative	17	Interest				
stra	18	Taxes (attach schedule) (see instructions)	3,500			
Ē	19	Depreciation (attach schedule) and depletion				
≣	20	Occupancy				
Ρ	21	Travel, conferences, and meetings				
a	22	Printing and publications				
Eu	23	Other expenses (attach schedule)	376			78
rat	24	Total operating and administrative expenses.				
<u>5</u>		Add lines 13 through 23	35,519			6,041
_	25	Contributions, gifts, grants paid	94,000			94,000
	26	Total expenses and disbursements. Add lines 24 and 25	129,519	25,680		100,041
	27	Subtract line 26 from line 12				
	а	Excess of revenue over expenses and disbursements	18,900			
	ь	Net investment income (if negative, enter -0-)		122,739		
	С	Adjusted net income (if negative, enter -0-)				
_			•			•

4 Pledges receivable ► Less allowance for doubtful accounts ► 5 Grants receivable			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
			l
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)			
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)	1,000,125	1,106,265	

1,157,807

1,157,807

1,157,807

1,157,807

1,176,707

1,176,707

1,176,707

1,176,707

2

3

4 5

6

1,157,807

1,176,707

1,176,707 Form **990-PF** (2018)

18,900

1,765,989

1,836,431

14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe > _ Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 17 18 Grants payable 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Liabilities

Balances

Fund

5

Assets 27

Net 30

2

21

22

23

24

25

26

28

29

31 Part III

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶.

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

(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)

(c)

Date acquired

(b)

How acquired

P—Purchase

Page **3**

2-story brick ware	enouse, or common stock, 200 sns	MLC Co)	P—Purchase D—Donation	(mo , day, yr)	(mo , day, yr)
1 a SCHLUMBERGER NV		P			
b BARRETT ASSET MANAGEN	MENT		P		
С					
d					
e					
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed	Cost or	other basis	Gain d	r (loss)
•	(or allowable)	plus expe	ense of sale	(e) plus (f) minus (g)
	,195		7,064		-1,869
b 225,	,059		102,464		122,595
С					
d					
e					
Complete only for assets s	showing gain in column (h) and owr	ned by the foundation (on 12/31/69	(1)
(i)	(i)		(k)		h) gain minus
F M V as of 12/31/69	Adjusted basis as of 12/31/69	l l	of col (ı) (j), ıf any		less than -0-) or om col (h))
	as 0/ 12/31/09	Over cor	(j), ii aliy	203363 (11	-1,869
a b					122,595
					122,393
d					
e		If gain, also enter in P	art I line 7		
2 Capital gain net income o		If (loss), enter -0- in F			
capital gain fiet income o	(Het supritui 1855)	(1000), o.1101 o 1111		2	120,726
3 Net short-term capital ga	ın or (loss) as defined in sections 1	222(5) and (6)			
	I, line 8, column (c) (see instruction	ons) If (loss), enter -0	-	_	
ın Part I, lıne 8			}	3	
Part V Qualification Ur	adar Faction 4040(a) for Bo	duced Tay on Not	Investment In		
	nder Section 4940(e) for Re				
For optional use by domestic pri	vate foundations subject to the sec	tion 4940(a) tax on ne	t investment incom	e)	
f section 4940(d)(2) applies, lea	ve this part blank				
Nas the foundation liable for the	section 4942 tax on the distributab	ole amount of any year	in the base period?		es 🗹 No
	qualify under section 4940(e) Do i		in the base period		25 140
	ount in each column for each year,		making any entries	<u> </u>	
(a)	, <u>, , , , , , , , , , , , , , , , , , </u>			(d)	
Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	le-use assets	Distribution rat (col (b) divided by c	
year (or tax year beginning in) 2017	88,558		1,892,757	(cor (b) divided by c	0 046788
2016	87,996		1,731,300		0 050827
2015	96,664		1,859,120		0 051994
2014	94,266		1,867,012		0 050490
2013	93,207		1,682,198		0 055408
2 Total of line 1, column (d)	'		2		0 255507
, , ,	or the 5-year base period—divide t	he total on line 2 by 5			
	ation has been in existence if less t		3		0 051101
	charitable-use assets for 2018 from	Part X, line 5	4		2,040,111
			5		104,252
	t income (1% of Part I, line 27b)		6		1,227
			7		105,479
	ns from Part XII, line 4 ,				100,041
	ter than line 7, check the box in Pa	rt VI, line 1b, and com	plete that part usin	g a 1% tax rate Se	e the Part VI
instructions				F	orm 990-PF (2018
				FC	ハロロ ララひ‐PF(2018)

Page **6**

5a	During the year did the foundation	pay or	ncur any amount to						Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?		□ vos	✓ r	No.		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry							10		
	on, directly or indirectly, any voter registration drive?							No.		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc , organization described							10		
	ın section 4945(d)(4)(A)? See	ınstruc	tions			Yes	✓ r	No.		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or							•		
	educational purposes, or for th	e prev	ention of cruelty to childr	en or anımals?		Yes	✓ 1	No.		
b	If any answer is "Yes" to 5a(1)-(5)), did a	iny of the transactions fa	ıl to qualıfy under the ex	ceptions desci	ibed in	ا ت	•		
	Regulations section 53 4945 or in a	a curre	nt notice regarding disas	ter assistance? See instr	uctions			5b		
	Organizations relying on a current	notice	regarding disaster assist	ance check here		▶	П			
C	If the answer is "Yes" to question 5	5a(4),	does the foundation clain	n exemption from the						
	tax because it maintained expendit	ture re	sponsibility for the grant	·		Yes	\Box	No		
	If "Yes," attach the statement requ	ured by	Regulations section 53	4945-5(d)		res	ш.	10		
6a	Did the foundation, during the year	r, rece	ive any funds, directly or	indirectly, to pay premit	ıms on					
	a personal benefit contract?					П.,	✓ r	.		
b	Did the foundation, during the yea	r, pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?	∟ Yes		NO 6b		No
	If "Yes" to 6b, file Form 8870									
7a	At any time during the tax year, w	as the	foundation a party to a p	rohibited tax shelter trai	nsaction?	П.,	✓ r	.		
b	If yes, did the foundation receive a					⊔ Yes		NO 7b		
8	Is the foundation subject to the se-	ction 4	960 tax on payment(s) o	of more than \$1,000,000	ın remunerati	on or				
	excess parachute payment during	the yea	ar?			П.,		.		
			ers, Directors, Trust				r			
Pai	and Contractors	OIIIC.	cis, Directors, irust	ecs, roundation ric	magers, m	, iii y i ai	u L	pioyees	,	
1	List all officers, directors, truste	oc fo	undation managers ar	d their compensation	See instruct	ione				
	List all bilice s, ullectors, truste	ces, iu	unuation manayers ar	ia ilieli collipelisation	. 366 111311 UC	10115				
	•	1	b) Title, and average	(c) Compensation (If	(d) Contr	ibutions t	<u> </u>			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contr employee ber			(e) Expe		
						nefit plans	and		nse acc	
VERO		TRUS	hours per week devoted to position	not paid, enter	employee ber deferred co	nefit plans	and			
2210	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD		hours per week devoted to position	not paid, enter -0-)	employee ber deferred co	nefit plans	and on			
2210 SEDO	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336	TRUS	hours per week devoted to position TEE	not paid, enter -0-)	employee ber deferred co	nefit plans	and on 0			
2210 SEDO ELISA	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL	TRUS	hours per week devoted to position TEE	not paid, enter -0-)	employee ber deferred co	nefit plans	and on			
2210 SEDO ELISA 706 B	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336	TRUS	hours per week devoted to position TEE	not paid, enter -0-)	employee ber deferred co	nefit plans	and on 0			
2210 SEDO ELISA 706 B SILVE	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET	TRUS 1 00 TRUS 1 00 TRUS	hours per week devoted to position TEE	not paid, enter -0-)	employee ber deferred co	nefit plans	and on 0			
2210 SEDO ELISA 706 B SILVE HEAT	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD	TRUS	hours per week devoted to position TEE	not paid, enter -0-) 0	employee ber deferred co	nefit plans	s and on 0			
2210 SEDO ELISA 706 B SILVE HEAT	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE	not paid, enter -0-) 0	employee ber deferred co	nefit plans mpensati	s and on 0	other a	illowan	ces C
2210 SEDO ELISA 706 B SILVE HEAT	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TEE	not paid, enter -0-) 0	employee ber deferred co	nefit plans impensati	on 0 0	other a	illowan	ces C
2210 SEDO ELISA 706 B SILVE HEATI 135 N BEDFO	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TEE TOTAL TEE	not paid, enter -0-) 0 nose included on line	employee ber deferred co	nefit plans impensati	on 0 0 Cf none	other a	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEATI 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-page	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	other a	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TEE TOTAL TEE	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	etions). I	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEATI 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	Count,
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEAT 135 N BEDFO 2	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TPEE TPE TPE TPIONE T	not paid, enter -0-) 0 nose included on line	L—see instruction (d) Control employee plans and	ctions). In the benefit of the benefit of deferred	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEATI 135 N BEDF 2 (a)	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-pi Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TIEE TIE	not paid, enter -0-) 0 nose included on line : (c) Compensation	L—see instruction (d) Contraction (employee plans and competition (competition) (compe	ctions). In the benefit of deferred in sation	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2210 SEDO ELISA 706 B SILVE HEATI 135 N BEDF 2 (a)	(a) Name and address NICA WILDING-WHITE WINTERS E MULE DEER RD NA, AZ 86336 BETH H NULL ONIFONT STREET R SPRING, MD 20910 HER J WILDING ASHUA ROAD DRD, NH 03110 Compensation of five highest-p. Name and address of each employed more than \$50,000	TRUS 1 00 TRUS 1 00 TRUS 1 00 TRUS 1 00	hours per week devoted to position TEE TEE TIEE TIE	not paid, enter -0-) 0 nose included on line : (c) Compensation	L—see instruction (d) Contraction (employee plans and competition (competition) (compe	ctions). In the benefit of deferred in sation	on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e, enter \((e) Exper	'NONE	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	er "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	of
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation du 1 N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form 990-PF (2018)

3h

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

the section 4940(e) reduction of tax in those years

4

5

4

5

100.041

100,041

Form **990-PF** (2018)

e From 2017.

4 Qualifying distributions for 2018 from Part

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

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. . .

Subtract lines 7 and 8 from line 6a

indicated below:

same amount must be shown in column (a))

99.551

Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2017 2017 2018 Corpus Distributable amount for 2018 from Part XI, line 7 99,551 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. **b** Total for prior years

Excess distributions carryover, if any, to 2018 a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016.

3 404 3.080

f Total of lines 3a through e.

XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election **d** Applied to 2018 distributable amount. . . .

5 Excess distributions carryover applied to 2018

e Remaining amount distributed out of corpus

3,404 3.080

490

6,974

6,974

6.484

factors



Enter gros	s amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies					
	ership dues and assessments					
	st on savings and temporary cash ments					
	nds and interest from securities			14	27,594	
	ntal income or (loss) from real estate					
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.			14	99	
	r (loss) from sales of assets other than			14	99	
invent	, ,			18	120,726	
9 Net in	come or (loss) from special events				·	
	profit or (loss) from sales of inventory					
	revenue a					
d						
е	tal Add columns (b), (d), and (e).				148,419	
e L2 Subto L3 Total.	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	148,419	
e L2 Subto .3 Total. (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)			· · · · · · · · · · · · · · · · · · ·	
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e L2 Subto L3 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu T-B Relationship of Activities to the Explain below how each activity for which	lations) ne Accomplish income is reporto	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
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. (20	,10)		
	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

1. Due to organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 5011 (c)) (c) (c) (described in section 5011 (c)) (c) (c) (c) (c) (c) (c) (c) (c) (c	Par	t XVII	Exempt Organi		ansicis io e	and manisactio	iis aliu Kelatio	iisiiips With None	ilai itabie		
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash. (2) Dither assets. (3) Differ transactions (3) Service of seasets to a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan quarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Perception of transfers, transactions, and sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (6) Perception of reactionship. (6) Perception of transfers, transactions, and sharing arrangement and transfers, transactions, and transfers, transactions, and transfers, transactions, and tr			ganization directly or in	directly engag					501	Yes	No
(1) Seles of assets to a noncharitable exempt organization. (1) Seles of assets to a noncharitable exempt organization. (1) Seles of assets from a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (5) Loans or loan guarantees. (5) Performance of services or membership or fundrasing solicitations. (5) Seles of assets from a noncharitable exempt organization. (5) Seles of assets from a noncharitable exempt organization. (5) Performance of services or membership or fundrasing solicitations. (5) Performance of services or membership or fundrasing solicitations. (5) Seles of the assets, or services given by the reporting foundation if the foundation are surplement, show in column (d) the assets, or services given by the reporting foundation if the foundation reverse the following schedule of the goods, other assets, or services given by the reporting foundation if the foundation reverse the following schedule of the goods, other assets, or services received (a) Line No (b) Amours molved (c) Name of nonchantable everyt organization (d) Description of transfers, transactors, and shaming arrancement and secondary organizations (d) Description of transfers, transactors, and shaming arrancement of the fundation of transfers are services received. (a) Name of organization (c) Name of nonchantable everyt organization (d) Description of transfers, transactors, and shaming arrancement of the fundation of transfers are services received. (a) Name of organization (b) Type of organization (c) Description of relationship (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Name of organization (c) Description of relationship (e) Provided the fundation of the fundation of the f		•	, , , ,	_	•		-				
b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Sales of loans guarantees. (8) Performance of services given by the reporting foundation if the foundation received less than 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 (3) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing arrangement described in section 501(c) (other than section 501(c)(3)) or in section 527? 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? 2b 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? 2c Is a section 501(c) (other than section 501(c)(3)) or in section 527? (a) Name of organization (b) Type of organization (c) Description of relationship. (a) Name of organization (b) Type of organization (c) Description of relationship. (a) Name of organization (b) Type of organization (c) Description of relationship. (d) Transactions of perjury, I declare that I have examined this return, inclinding accompanying schedules and statements, and to the off my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which is the preparer in the second of the pr	(1) Cash								1a(1)		No
(2) Purchases of assets from a nonchartable exempt organization. 16(1) (2) Purchases of assets from a nonchartable exempt organization. 16(2) (3) Rental of facilities, equipment, or other assets. 16(3) (4) Reimbursament arrangements. 16(4) (5) Loans or loan guarantees. 16(3) (6) Performance of services or membership or fundrasing solidations. 16(6) (6) Performance of services or membership or fundrasing solidations. 16(6) (6) Performance of services or membership or fundrasing solidations. 16(6) (6) Performance of services or membership or fundrasing solidations. 16(6) (6) Performance of services or membership or fundrasing solidations. 16(6) (6) International content of the above is "Yes," complete the following schedule Column (b) should always both the fair market value of the goods, other assets, or services received una may transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement cescribed in section 501(c) (other than section 501(c)(3)) or in section 527? □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	(2) Othe	er assets						. 1a(2)		No
(2) Purchases of assets from a nonchantable exempt organization. (3) Reinbursement arrangements. (4) Reinbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundrasing solicitations. (6) Performance of services or membership or fundrasing solicitations. (7) Staring of facilities, equipment, mailing lists, other assets, or paid emologies. (8) Integrated to any of the aboves "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 records or inclination of the value of the goods, other assets, or services records or inclination in column (d) the value of the goods, other assets, or services records or sharing arrangement, show in column (d) the value of the goods, other assets, or services records or sharing arrangement, show in column (d) the value of the goods, other assets, or services records or sharing arrangement, show in column (d) the value of the goods, other assets, or services records or sharing arrangement or s	b Other transactions										
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(4) Rembursement arrangements. 116(4) (5) Loans or loan guarantees. 116(5) (6) Performance of services or membership or fundraising solicitations. 116(5) (10(5) (1	(2) Purch	hases of assets from a n	oncharitable (exempt organiz	zation			. 1b(2)		No
(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. 2 Ib(6) 1b(6) 1b(6) 1c 1b(6) 1b(6) 1c 1b(6) 1b(6) 1c 1b(6) 1c 1b(6)	(3) Rent	al of facilities, equipmer	nt, or other as	sets				. 1b(3)		No
(6) Performance of services or membership or fundrissing solicitations	(4) Reim	bursement arrangemen	ts							No
c Sharing of facilities, equipment, mailing lasts, other assets, or paid emilolyces. If it is answer to any of the above is "Ves", complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received in the fair market value of the goods, other assets, or services received in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement (e) Line No. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement organizations of the fair transaction of transfers, transactions, and sharing arrangement organizations of the fair transaction of transfers, transactions, and sharing arrangement organizations of the fair transaction of transfers, transactions, and sharing arrangement organization of transfers, transactions, and sharing arrangement organization of transfers, transactions, and sharing arrangement organization of transfers, transactions, and sharing arrangement organizations of transaction	•	-	-								No
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In any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement											
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?											
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?	(-)	- N- 1	(In) Assessment consistent	l (-) Nama -6		1	(4) D	h			
described in section 501(c) (other than section 501(c)(3)) or in section 527?	(a) Lin	ie ivo	(b) Amount involved	(c) Name of r	noncharitable exe	mpt organization	(a) Description or	transfers, transactions, a	nd snaring arra	ngemen	.ts
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											-
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
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described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
described in section 501(c) (other than section 501(c)(3)) or in section 527?											
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge Variable Var	2a Is	the fou	ndation directly or indire	ectly affiliated	with, or relate	d to, one or more	tax-exempt organ	zations			
(a) Name of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (h) Type of organization (h) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (h) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (h) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (d) Description of relationship (d) Description of relationship (e) Description of relationship (ii) Description of relationship (iii) Description	de	scribed	ın section 501(c) (other	r than section	501(c)(3)) or	ın section 527? .		∐Yes	✓ No		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ****** 2019-10-31	b If	"Yes," c	•								
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ******* 2019-10-31 ******* *************************			(a) Name of organization	on	(1	b) Type of organization	on	(c) Description of	f relationship		
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ******* 2019-10-31 ******* *************************											
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ******* 2019-10-31 ******* *************************											
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ******* 2019-10-31 ******* *************************											
of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge ******* 2019-10-31 ******* *************************											
Which preparer has any knowledge ****** Signature of officer or trustee Date Print/Type preparer's name BRIAN A SANTOS EA Firm's name ▶ FLETCHER TILTON PC Firm's address ▶ 370 MAIN ST 11TH FLOOR Phone no. (508) 459-86											
Here ******* 2019-10-31 *******					rrect, and com	plete Declaration	of preparer (other	than taxpayer) is base	ed on all info	rmatior	า of
Firm's name ► FLETCHER TILTON PC Signature of officer or trustee Date Title	Sian	.		wiedge					May the IRS d	ecuse th	216
Signature of officer or trustee Date Print/Type preparer's name Preparer's Signature Date Check if self- employed ▶ □ PTIN PO1270354 Preparer Use Only Firm's name ▶ FLETCHER TILTON PC Firm's address ▶ 370 MAIN ST 11TH FLOOR	_		*****			2019-10-31	*****		return		
Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶☐ Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶☐ Preparer Use Only Firm's name ▶ FLETCHER TILTON PC Firm's address ▶ 370 MAIN ST 11TH FLOOR		∣ ∤ '					—) ——			rer shov	vn
Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶☐ BRIAN A SANTOS EA Firm's name ▶ FLETCHER TILTON PC Firm's address ▶ 370 MAIN ST 11TH FLOOR Phone no. (508) 459-8		'	Signature of officer or to	rustee		Date	7 Title		(see instr)?	✓ Yes	□ No
Paid Preparer Use Only BRIAN A SANTOS EA PO1270354 Po1270354 Po1270354 Firm's name ▶ FLETCHER TILTON PC Firm's ein ▶ 04-26286 Phone no. (508) 459-8											
Paid Preparer Use Only BRIAN A SANTOS EA P01270354 P01270354 Firm's name ▶ FLETCHER TILTON PC Firm's address ▶ 370 MAIN ST 11TH FLOOR Phone no. (508) 459-8			Print/Type preparer's	name	Preparer's Sigi	nature	Date	Check if self-	IN		
Paid Preparer Use Only BRIAN A SANTOS EA 2019-10-31									P01270	0354	
Preparer Use Only Firm's name ► FLETCHER TILTON PC Firm's EIN ►04-26286 Firm's address ► 370 MAIN ST 11TH FLOOR	Daid	ı	BRIAN A SANTOS I	EA			2019-10-31				
Use Only Firm's address ▶ 370 MAIN ST 11TH FLOOR Phone no. (508) 459-3	_	_	- E	CUED TY TO:	l DC						
Firm's address ► 370 MAIN ST 11TH FLOOR Phone no. (508) 459-3			THIN 3 HAIRE F TEET	CHER TILTON	I PC			Fır	m's EIN ▶04	-26286	501
WORCESTER, MA 016081779 Phone no (508) 459-8		y		'0 MAIN ST 11	LTH FLOOR						
WORCESTER, MA UT0081//9				ODCECTED 14	A 016001770			 Ph	one no (508) 459-8	8000
			"	WORCESTER, MA 016081779					,	•	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DUDLE

3600 CLIPPER MILL ROAD SU BALTIMORE, MD 212111995	NONE	PORTIC	EHN 2018 GIFT	1,500
ALBERT SCHWEITZER FELLOWSHIP INC 330 BROOKLINE AVE BOSTON, MA 022155400	NONE	PUBLIC	EHN 2018 GIFT	500

ALBERT SCHWEITZER FELLOWSHIP INC 330 BROOKLINE AVE BOSTON, MA 022155400	NONE	PUBLIC	EHN 2018 GIFT	500
THE ALLIANCE FOR CLIMATE PROTECTION PO BOX 50803 WASHINGTON, DC 20091	NONE	PUBLIC	WW 2018 GIFT (CARTER)	500
Total			▶ 3a	94,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN FILM INSTITUTE NONE **PUBLIC** EHN 2018 GIFT 250 2021 N WESTERN AVE

LOS ANGELES, CA 900271625				
ANIMAL HUMANE ASSOCIATION OF NEW ME 615 VIRGINIA STREET SE ALBUQUERQUE, NM 871084228	NONE	PUBLIC	WW 2018 GIFT (FRED)	5,222
ANTHROPOCENE ALLIANCE	NONE	PUBLIC	HANNAH 2018 GIFT	1.000

NEW ME 615 VIRGINIA STREET SE ALBUQUERQUE, NM 871084228				
ANTHROPOCENE ALLIANCE	NONE	PUBLIC	HANNAH 2018 GIFT	1,0

Total .

ALBUQUERQUE, NM 871084228				
ANTHROPOCENE ALLIANCE 5000 N MARINE DR STE 12 CHICAGO, IL 60640	NONE	PUBLIC	HANNAH 2018 GIFT	1,00

ANTHROPOCENE ALLIANCE 5000 N MARINE DR STE 12 CHICAGO, IL 60640	NONE	PUBLIC	HANNAH 2018 GIFT	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ARTIST ORGANIZED ART INC NONE **PUBLIC** HANNAH 2018 GIFT 5,100 90 LINSEED RD

WEST HATFIELD, MA 010889505				
BEDFORD COMMUNITY FOOD PANTRY FA B PO BOX 10083 BEDFORD, NH 03110	NONE	PUBLIC	WW 2018 GFIT (HINDI)	722
BEDFORD HISTORICAL SOCIETY	NONE	PUBLIC	WW 2018 GFIT (HINDI)	700

FA B PO BOX 10083 BEDFORD, NH 03110				
BEDFORD HISTORICAL SOCIETY	NONE	PUBLIC	WW 2018 GFIT (HINDI)	7

PO BOX 10083 BEDFORD, NH 03110				
BEDFORD HISTORICAL SOCIETY 24 N AMHERST RD	NONE	PUBLIC	WW 2018 GFIT (HINDI)	

BEDFORD, NH 03110				
BEDFORD HISTORICAL SOCIETY 24 N AMHERST RD BEDFORD, NH 03111	NONE	PUBLIC	WW 2018 GFIT (HINDI)	700

BEDFORD HISTORICAL SOCIETY NONE PUBLIC WW 2018 GFIT (HINDI) 70					
BEDFORD, NH 03111	24 N AMHERST RD	NONE	PUBLIC	WW 2018 GFIT (HINDI)	700

94,000

BEDFORD HISTORICAL SOCIETY	NONE	PUBLIC	WWW ZOIO GEIT (HINDI)	i
24 N AMHERST RD				
BEDFORD, NH 03111				

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BEDFORD LAND TRUSTPO BOX 10315 NONE PUBLIC WW 2018 GFIT (HINDI) 700 BEDFORD. NH 031100315

BERKSHIRE HUMANE SOCIETY 214 BARKER ROAD PITTSFIELD, MA 01201	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,000
BERKSHIRE MONTESSORI SCHOOL INC PO BOX 422 LENOX DALE MA 012400000	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,000

Total				94 000
BERKSHIRE MONTESSORI SCHOOL INC PO BOX 422 LENOX DALE, MA 012400000	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,000
PITTSFIELD, MA U1201				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
BREARLEY SCHOOL	NONE	PUBLIC	EHN 2018 GIFT	500

610 EAST 83RD STREET NEW YORK, NY 10028				
CAPITAL AREA FOOD BANK 645 TAYLOR STREET NE	NONE	PUBLIC	EHN 2018 GIFT	1,000

· '				
CAPITAL AREA FOOD BANK 645 TAYLOR STREET NE WASHINGTON, DC 200172063	NONE	PUBLIC	EHN 2018 GIFT	1,000
CHEWONKI FOUNDATION INC 485 CHEWONKI NECK ROAD	NONE	PUBLIC	EHN 2018 GIFT	250

	645 TAYLOR STREET NE WASHINGTON, DC 200172063	NONE	FOBLIC	ENN 2016 GIFT	1,000
	CHEWONKI FOUNDATION INC 485 CHEWONKI NECK ROAD WISCASSET, ME 045784822	NONE	PUBLIC	EHN 2018 GIFT	250
1					

Total			▶ 3a	94 000
CHEWONKI FOUNDATION INC 485 CHEWONKI NECK ROAD WISCASSET, ME 045784822	NONE	PUBLIC	EHN 2018 GIFT	250
WASHINGTON, DC 200172063				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHURCH OF SAINT JOHN THE NONE PUBLIC HANNAH 2018 GIFT 950 **EVANGELIST** PO BOX 537

RED HOOK, NY 125710537				
CHURCH OF THE HOLY APOSTLES 296 9TH AVENUE NEW YORK, NY 100015703	NONE	PUBLIC	HANNAH 2018 GIFT - SOUP KITCHEN	1,000
COLLEGE OF THE ATLANTIC	NONE	PUBLIC	EHN 2018 GIFT	500

94,000

296 9TH AVENUE NEW YORK, NY 100015703	NONE	TOBLIC	KITCHEN	1,0
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR MF 046091105	NONE	PUBLIC	EHN 2018 GIFT	50

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 046091105	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT (JACOB)THORND	1,400

DAK HARBOK, ME 040001100				<u>I</u>
COLLEGE OF THE ATLANTIC 105 EDEN STREET	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT (JACOB)ANNUAL	1
BAR HARBOR, ME 046091105				I

Total .

	COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 046091105	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT (JACOB)ANNUAL	1,600
- 1	CORNUCOPIA COMMUNITY ADVOCATES 95 SPOTTED FAWN CT	NONE	PUBLIC	WW 2018 GIFT (VERONICA)	3,668

BAR HARBOR, ME 046091105			(JACOB)ANNUAL	
CORNUCOPIA COMMUNITY ADVOCATES 95 SPOTTED FAWN CT SEDONA, AZ 863517288	NONE	PUBLIC	WW 2018 GIFT (VERONICA)	3,668

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **CULTURAL SURVIVAL** NONE PUBLIC EHN 2018 GIFT 250 11 DIVINITY AVENUE CAMBRIDGE MA 02138

G/ (1 15) (15 GE/ 11) (GE 13 G				
CURRIER MUSEUM OF ART150 ASH ST MANCHESTER, NH 03104	NONE	PUBLIC	WW 2018 GFIT (HINDI)	700
DEMOCRACY NOW PRODUCTIONS INC 207 W25TH ST 11TH FLOOR	NONE	PUBLIC	EHN 2018 GIFT	250

DEMOCRACY NOW PRODUCTIONS INC 207 W25TH ST 11TH FLOOR NEW YORK, NY 10001	NONE	PUBLIC	EHN 2018 GIFT	250
Total			▶ 3a	94,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

DERRYFIELD SCHOOL THE 2108 RIVER ROAD MANCHESTER, NH 031041396	NONE	PUBLIC	WW 2018 GIFT (HEATHER)	3,000
EARTHJUSTICE 50 CALIFORNIA STREET SUI SAN FRANCISCO, CA 941114608	NONE	PUBLIC	EHN 2018 GIFT	500

'				
EARTHJUSTICE 50 CALIFORNIA STREET SUI SAN FRANCISCO, CA 941114608	NONE	PUBLIC	EHN 2018 GIFT	500
ELECTRONIC FRONTIER FOUNDATION INC 815 EDDY ST SAN FRANCISCO, CA 941097701	NONE	PUBLIC	EHN 2018 GIFT	500

815 EDDY ST SAN FRANCISCO, CA 941097701				
ELECTRONIC FRONTIER FOUNDATION INC 815 FDDY ST	NONE	PUBLIC	EHN 2018 GIFT	500
SAN FRANCISCO, CA 941114608				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **EMILY HARVEY FOUNDATION** NONE PUBLIC HANNAH 2018 GIFT 2.100 36 ELM STREET OLD SAYBROOKO, CT 06475

EPISCOPAL CHURCH OF THE ASCENSION 633 SLIGO AVENUE SILVER SPRING, MD 20910	NONE	PUBLIC	EHN 2018 GIFT	1,000
EPISCOPAL CHURCH OF THE ASCENSION 634 SLIGO AVENUE SILVER SPRING, MD 20910	NONE	PUBLIC	EHN 2018 GIFT - ANNUAL FUND	2,000

Total .

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year EPISCOPAL CHURCH OF THE NONE PUBLIC EHN 2018 GIFT -MEMORIAL 500 ASCENSION FUND FOR ROB 635 SLIGO AVENUE

SILVER SPRING, MD 20910				
FLAGSTAFF INTERNATIONAL RELIEF EFFO 107 N SAN FRANCISCO STREE FLAGSTAFF, AZ 860015243	NONE	PUBLIC	WW 2018 GIFT (VERONICA)	5,000
FOLKLORE SOCIETY OF GREATER WASHING 3612 GREENWAY PLACE	NONE	PUBLIC	EHN 2018 GIFT - GETAWAY	500

▶ 3a

94,000

EFFO 107 N SAN FRANCISCO STREE FLAGSTAFF, AZ 860015243				
FOLKLORE SOCIETY OF GREATER WASHING 3612 GREENWAY PLACE ALEXANDRIA, VA 22302	NONE	PUBLIC	EHN 2018 GIFT - GETAWAY	

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
FOLKLORE SOCIETY OF GREATER WASHING 3612 GREENWAY PLACE ALEXANDRIA, VA 22302	NONE	PUBLIC	EHN 2018 GIFT - ROBERT CLAYTON MEMOR	500

ALEXANDRIA, VA 22302				
FOLKLORE SOCIETY OF GREATER WASHING 3612 GREENWAY PLACE ALEXANDRIA, VA 22302	NONE	PUBLIC	EHN 2018 GIFT - FOLK FESTIVAL DEFICI	1,000

FOLKLORE SOCIETY OF GREATER WASHING 3612 GREENWAY PLACE ALEXANDRIA, VA 22302	NONE	PUBLIC	EHN 2018 GIFT - FOLK FESTIVAL DEFICI	1,000
FRIENDS OF ERIC SLOANEPO BOX 871	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,222

WASHING 3612 GREENWAY PLACE ALEXANDRIA, VA 22302			DEFICI	
FRIENDS OF ERIC SLOANEPO BOX 871 KENT, CT 06757	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,222

ALEXANDRIA, VA 22302				
FRIENDS OF ERIC SLOANEPO BOX 871 KENT, CT 06757	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1,222
Total			▶ 3a	94,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ELLI CRI IM DOINT NEW MUSIC PROJECT	NONE	DUBLIC	HANNAH 2019 CIET	EOO

FULCRUM POINT NEW MUSIC PROJECT 359 W BELDEN CHICAGO, IL 606143817	NONE	PUBLIC	HANNAH 2018 GIFT	500
GREATER ALBUQUERQUE HABITAT FOR HUM	NONE	PUBLIC	WW 2018 GIFT (FRED)	5,222

CHICAGO, IL 606143817				
GREATER ALBUQUERQUE HABITAT FOR HUM PO BOX 8353 ALBUQUERQUE, NM 87198	NONE	PUBLIC	WW 2018 GIFT (FRED)	5,222

HUM PO BOX 8353 ALBUQUERQUE, NM 87198			, ,	,
HIAS1300 SPRING STREET SUITE	NONE	PUBLIC	EHN 2018 GIFT	250

PO BOX 8353 ALBUQUERQUE, NM 87198				
HIAS1300 SPRING STREET SUITE	NONE	PUBLIC	EHN 2018 GIFT	250

,				
HIAS1300 SPRING STREET SUITE SILVER SPRING, MD 20910	NONE	PUBLIC	EHN 2018 GIFT	250
SILVER SPRING, MD 20910				1

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

Name and address (home or business)

Total .

Hame and dadress (nome of business)	or substantial contributor			
a Paid during the year				
HIGHLAND PARK COMMUNITY FOUNDATION PO BOX 398	NONE	PUBLIC	HANNAH 2018 GIFT	1,200

recipient

PO BOX 398 HIGHLAND PARK, IL 600350398				
HISTORIC TAKOMA INCPO BOX 5781 TAKOMA PARK, MD 209135781	NONE	PUBLIC	EHN 2018 GIFT	500
JACOBS PILLOW DANCE FESTIVAL INC	NONE	PUBLIC	WW 2018 GFIT (CARTER)	500

HISTORIC TAKOMA INCPO BOX 5781 TAKOMA PARK, MD 209135781	NONE	PUBLIC	EHN 2018 GIFT	500
JACOBS PILLOW DANCE FESTIVAL INC 358 GEORGE CARTER RD BECKET, MA 012234001	NONE	PUBLIC	WW 2018 GFIT (CARTER)	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, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
JEWISH COUNCIL ON URBAN AFFAIRS	NONE	PUBLIC	HANNAH 2018 GIFT	250

CHICAGO, IL 606051901				
JOPPA HILL EDUCATIONAL FARM 174 JOPPA HILL ROAD BEDFORD, NH 03110	NONE	PUBLIC	WW 2018 GIFT (HINDI)	700

JOPPA HILL EDUCATIONAL FARM 174 JOPPA HILL ROAD BEDFORD, NH 03110	NONE	PUBLIC	WW 2018 GIFT (HINDI)	700
KIMBALL UNION ACADEMY PO BOX 188 57 MAIN STREET MERIDEN NH 03770	NONE	PUBLIC	WW 2018 GIFT (HINDI)	1,000

	174 JOPPA HILL ROAD BEDFORD, NH 03110				
	KIMBALL UNION ACADEMY PO BOX 188 57 MAIN STREET MERIDEN, NH 03770	NONE	PUBLIC	WW 2018 GIFT (HINDI)	1,000
1					i

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LAMPO INCPO BOX 4615 NONE **PUBLIC** HANNAH 2018 GIFT 500 CHICAGO, IL 606804615

LEAGUE OF WOMEN VOTERS OF MARYLAND 111 CATHEDRAL STREET SUIT ANNAPOLIS, MD 214012739	NONE	PUBLIC	EHN 2018 GIFT	250
LUTHERAN CHURCH OF THE LIVING WORD 1925 SOUTH MAIN STREET LAURINBURG, NC 28352	NONE	PUBLIC	EHN 2018 GIFT	500

94,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL PUBLIC HOUSING MUSEUM NONE PUBLIC HANNAH 2018 GIFT 500 625 N KINSBURY STREET CHICAGO, IL 60654

NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET NEW YORK, NY 10011	NONE	PUBLIC	EHN 2018 GIFT	250
NEW ENGLAND CENTER FOR CHILDREN INC 33 TURNPIKE RD	NONE	PUBLIC	EHN 2018 GIFT	250

▶ 3a

94,000

SOUTHBOROUGH, MA 017722108

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NEW HAMPSHIRE CATHOLIC CHARITIES IN 215 MYRTLE ST MANCHESTER, NH 031044354	NONE	PUBLIC	WW 2018 GFIT (HINDI)	700

MANCHESTER, NH 031044354				
NEW OBSERVATIONS LTD 225 W 34TH ST STE 1513 NEW YORK, NY 101221511	NONE	PUBLIC	HANNAH 2018 GIFT	1,000
OBERLIN COLLEGE	NONE	PUBLIC	HANNAH 2018 GIFT	2,000

П	225 W 34TH ST STE 1513 NEW YORK, NY 101221511				
	OBERLIN COLLEGE COX ADMINISTRATION BLDG OBERLIN, OH 440741090	NONE	PUBLIC	HANNAH 2018 GIFT	2,000
1					

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **ONAWAY TRUST** NONE **PUBLIC** EHN 2018 GIFT 250 27 CAMP ONAWAY ROAD

HEBRON, NH 032417434				
OPPORTUNITY VILLAGE FOUNDATION 6050 S BUFFALO DR LAS VEGAS, NV 89113	NONE	PUBLIC	WW 2018GIFT (GENEVA WINTERS)FINE & P	1,500
PAW PLACEMENT OF NORTHERN ARIZONA ATTN LIZ BOHLKE PO BOX FLAGSTAFF, AZ 860020942	NONE	PUBLIC	WW 2018 GIFT (VERONICA)	1,000

94,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

PAW PRINTS HUMANE SOCIETY OF SEDONA 2115 SHELBY DRIVE SEDONA, AZ 86336	NONE	PUBLIC	WW 2018 GIFT (VERONICA)	3,000
PLANNED PARENTHOOD FEDERATION OF AM	NONE	PUBLIC	HANNAH 2018 GIFT	2,100

SEDONA, AZ 66336				
PLANNED PARENTHOOD FEDERATION OF AM 123 WILLIAM STREET 10TH NEW YORK, NY 10038	NONE	PUBLIC	HANNAH 2018 GIFT	2,100
PRIMARY INFORMATION INC	NONE	PUBLIC	HANNAH 2018 GIFT	500

123 WILLIAM STREET 10TH NEW YORK, NY 10038				
PRIMARY INFORMATION INC 41 GRAND ST NEW YORK, NY 100131619	NONE	PUBLIC	HANNAH 2018 GIFT	500

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
PRINTED MATTER INC 195 TENTH AVENUE NEW YORK, NY 100114739	NONE	PUBLIC	HANNAH 2018 GIFT	500

195 TENTH AVENUE NEW YORK, NY 100114739				
PROJECT &C/O JENNER BLOCK LLP35 CHICAGO, IL 60654	NONE	PUBLIC	HANNAH 2018 GIFT	1,000

PROJECT &C/O JENNER BLOCK LLP35 CHICAGO, IL 60654	NONE	PUBLIC	HANNAH 2018 GIFT	1,00
ROCKEND INCPO BOX 296	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT	1 50

PROJECT &C/O JENNER BLOCK LLP35 CHICAGO, IL 60654	NONE	PUBLIC	HANNAH 2018 GIFT	1,
ROCKEND INCPO BOX 296	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT	1,.

CHICAGO, IL 60654				
ROCKEND INCPO BOX 296	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT	1,500

	1			
ROCKEND INCPO BOX 296 NE HARBOR, ME 046620296	NONE	PUBLIC	HIGGINS/NULL 2018 GIFT (JACOB)	1,500
	NONE	TOBLIC	,	_

NE HARBOR, ME 046620296	NONE	POBLIC	(JACOB)	1,500
Total			▶ 3a	94,000

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
SARAH LAWRENCE COLLEGE ONE MEADWAY	NONE	PUBLIC	EHN 2018 GIFT	500

E MEADWAY DNXVILLE, NY 107085931	NONE	FOBLIC	LINV 2010 GII I	
VER SPRING VILLAGEPO BOX 8217	NONE	PUBLIC	EHN 2018 GIFT	

CIVIARE NERODALE E OLCE CE	NONE	DUDLIC		2 200
SILVER SPRING VILLAGEPO BOX 8217 SILVER SPRING, MD 20907	NONE	PUBLIC	EHN 2018 GIFT	250
BRONXVILLE, NY 107085931				

SILVER SPRING, MD 20907	NONE	PUBLIC	ENN 2016 GIFT	230
SKYART NFP3217 E 91ST ST	NONE	PUBLIC	HANNAH 2018 GIFT	2,200

SILVER SPRING, MD 20907				
SKYART NFP3217 E 91ST ST CHICAGO, IL 606174409	NONE	PUBLIC	HANNAH 2018 GIFT	2,200

SKYART NFP3217 E 91ST ST CHICAGO, IL 606174409	NONE	PUBLIC	HANNAH 2018 GIFT	2,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOCIETY FOR THE PREVENTION OF NONE PUBLIC HIGGINS/NULL 2018 GIFT 1,500 CRUEL (JACOB) 141 BAR HARBOR ROAD

TENTON, ME 04605				
ST ANDREWS UNIVERSITY 1700 DOGWOOD MILE STREET LAURINBURG, NC 283525521	NONE	PUBLIC	EHN 2018 GIFT	250
TETON VALLEY RANCH CAMP EDUCATION F PO BOX 4915290 EAST BRO JACKSON, WY 83001	NONE	PUBLIC	WW 2018 GIFT (HEATHER)	2,222

Total .

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
THE SHEPHERDS TABLE INC 8210-A COLONIAL LANE	NONE	PUBLIC	EHN 2018 GIFT	1,000

8210-A COLONIAL LANE SILVER SPRING, MD 209105722				
TIFERETH ISRAEL CONGREGATION 7701 16TH ST NW WASHINGTON, DC 20012	NONE	PUBLIC	EHN 2018 GIFT	500
	l			

TIFERETH ISRAEL CONGREGATION 7701 16TH ST NW WASHINGTON, DC 20012	NONE	PUBLIC	EHN 2018 GIFT	500
UNIVERSITY OF ILLINOIS FOUNDATION 303A JEFFERSON HALL M/C CHICAGO, IL 60607	NONE	PUBLIC	HANNAH 2018 GIFT	1,000

Total			▶ 3a	94,000
UNIVERSITY OF ILLINOIS FOUNDATION 303A JEFFERSON HALL M/C CHICAGO, IL 60607	NONE	PUBLIC	HANNAH 2018 GIFT	1,000
7701 16TH ST NW WASHINGTON, DC 20012				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

UNIVERSITY OF MAINE FOUNDATION TWO ALUMNI PLACE ORONO, ME 044690001 NONE PUBLIC EHN 2018 GIFT - MAINE FOLKLIFE CENTE	a Paid during the year			
	TWO ALUMNI PLACE	NONE	PUBLIC	 750

KONO, IIL 044030001				
ERDE VALLEY SANCTUARYPO BOX 595 EDONA, AZ 863390595	NONE		WW 2018 GFIT (SIERRA WINTERS)	
AMC DUBLIC DADIO210 CENTRAL AVE	NONE	DUDLIC	WWW 2010 CIET (CARTER)	

VERDE VALLEY SANCTUARYPO BOX 595 SEDONA, AZ 863390595	NONE	PUBLIC	WW 2018 GFIT (SIERRA WINTERS)	1,500
WAMC PUBLIC RADIO318 CENTRAL AVE	NONE	PUBLIC	WW 2018 GIFT (CARTER)	500

SEDONA, AZ 863390595			WINTERS)	
WAMC PUBLIC RADIO318 CENTRAL AVE ALBANY, NY 12206	NONE	PUBLIC	WW 2018 GIFT (CARTER)	500

WAME PUBLIC RADIO318 CENTRAL AVE	NONE	PUBLIC	WW 2018 GIFT (CARTER)	1
ALBANY, NY 12206			· · ·	<u> </u>

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WASHINGTON MUSICA VIVA INC NONE **PUBLIC** EHN 2018 GIFT 500 7502 FLOWER AVE

TAKOMA PARK, MD 20912				
WBEZ ALLIANCE INC (THE) 1819 W PERSHING ROAD 6E CHICAGO, IL 606092300	NONE	PUBLIC	HANNAH 2018 GIFT	100
WILD SPIRIT WOLF SANCTUARY PKACAN 378 CANDY KITCHEN ROAD HC RAMAH, NM 87321	NONE	PUBLIC	WW 2018 GIFT (FRED)	5,222

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution

Recipient If recipient is an individual, show any relationship to any foundation manager recipient

,	or substantial contributor			
a Paid during the year				
WORLD WILDLIFE FUND & CONSERVATION	NONE	PUBLIC	WW 2018 GFIT (CARTER)	500

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491304015069						
TY 2018 Accounting Fees Schedule						
		JOHN W 04-60269		INS FOUNDATION		
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TRUST & ACCOUNTING FEES		11,927	5,96	i4	5,963	

effie GRAPHIC Print - DO NOT PROCESS	AS Filed Data -	DLN: 93491304015069
TV 2010 Torrestore Otherwise	Calcadada	
TY 2018 Investments - Other	Schedule	
Name:	JOHN W & CLARA C HIGGINS F	OUNDATION
ETN:	04-6026014	

DI N. 0240120401E060

1,665,889

1,006,040

ofile CDADUIC maint DO NOT DDOCECE As Filed Date

BARRETT ASSET - EQUITIES

EIN: 04-0	020914		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BARRETT ASSET - FIXED INCOME	AT COST	100,225	100,100

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491304015069
TY 2018 Other Expenses Sche	dule			
Name		RA C HIGGINS FC	NINDATION	
Haine.	JOHN W & CLA	KA C HIGGINS I C	ONDATION	
EIN:	04-6026914			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				

MA PC FILING FEE

MICROEDGE FEE

BANK FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491304015069
TY 2018 Other Income Schedul	e	
Name: J	OHN W & CLARA	C HIGGINS FOUNDATION

99

EIN: 04-6026914 Other Income Schedule Description Revenue And Net Investment Adjusted Net Income Expenses Per Books Income

99

OTHER INCOME

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data		DL	N: 93491304015069
TY 2018 Other Professional Fees Schedule				
				1
Nar	me: JOHN W & C	CLARA C HIGGINS F	FOUNDATION	
F	IN: 04-6026914	+		
		T		1
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

17,618

2,098

17,618

2,098

INVESTMENT FEES

CUSTODIAL FEES

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491304015069
TY 2018 Taxes Schedule				
Nan	ne: 10HN W & C	LARA C HIGGINS F	FOUNDATION	
			OUNDATION	
. E)	IN: 04-6026914			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
		Net Investment	_	for Charitable