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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

**Return of Private Foundation** 

2018

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , ar	nd ending 12-31-	2018		
		indation IF GRASS FUND	A Employer id	A Employer identification number			
LL	AVES O	IF GRASS FUND	22-2824793	22-2824793			
	ber and D BOX 2	d street (or P O box number if mail is not delivered to street address) 233	Room/suite	<b>B</b> Telephone nu	mber (see instruction	ns)	
				(508) 358-2566	<b>;</b>		
		n, state or province, country, and ZIP or foreign postal code IA 017730233		<b>C</b> If exemption	application is pendin	g, check here	
<b>G</b> Cl	neck al	Il that apply $igsqcup$ Initial return $igsqcup$ Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganızatıons, check he	ere 🕨 🔲	
		Final return Amended return			ganizations meeting k here and attach co		
		Address change Name change		·	ındatıon status was t	· -	
_	,	/pe of organization   ✓ Section 501(c)(3) exempt private			n 507(b)(1)(A), chec		
			e private foundation  Cash	- L F 15 th - 6 d			
of	year (f	xet value of all assets at end from Part II, col (c),  ▶\$ 33,144,165   J Accounting method  □ Other (specify) (Part I, column (d) must			ation is in a 60-montl n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Bayanya 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 <b>not</b> required to attach					
	_	Sch B	392	392			
	3 4	Dividends and interest from securities	664,136				
	5a	Gross rents	,	,			
	ь	Net rental income or (loss)					
Пе	6a	Net gain or (loss) from sale of assets not on line 10	1,159,242				
Revenue	b	Gross sales price for all assets on line 6a 3,781,453					
Re	7	Capital gain net income (from Part IV, line 2)		1,215,145			
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances Less Cost of goods sold					
	Ь	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	265,792	265,792			
	12	Total. Add lines 1 through 11	2,089,562	2,145,465			
	13	Compensation of officers, directors, trustees, etc	0	0		0	
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)	500			500	
Expenses	b	Accounting fees (attach schedule)	26,099			26,099	
Ve	17	Other professional fees (attach schedule)	98,859 38,872	98,859 38,872		0	
rati	18	Taxes (attach schedule) (see instructions)	101,000	· ·		2,000	
and Administrative	19	Depreciation (attach schedule) and depletion		,,,,,		,	
<del>d</del>	20	Occupancy					
d A	21	Travel, conferences, and meetings					
ä	22	Printing and publications	_				
ju.	23	Other expenses (attach schedule)	354,245	0		960	
erat	24	Total operating and administrative expenses.	610 575	146 261		20 550	
Operating	25	Add lines 13 through 23	619,575 1,700,533			29,559 1,700,533	
	26	Total expenses and disbursements. Add lines 24 and	2,700,000				
	27	Subtract line 26 from line 12	2,320,108	146,261		1,730,092	
	2/ a	Excess of revenue over expenses and					
	_	disbursements	-230,546				
	b c	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)		1,999,204			
For		work Reduction Act Notice, see instructions.		Cat No 11289>	[ C	m <b>990-PF</b> (2018)	

	_				
		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 ▶			
<u>ر</u>	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Ass	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	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)	32,503,554	33,328,258	32,857,540
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			

33,845,429

33,845,429

33,845,429

33,845,429

33,614,883

33,614,883

33,614,883

33,614,883

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33,845,429

33,614,883

33.614.883 Form **990-PF** (2018)

0

-230,546

33,144,165

16

17

18

19

20

21

22

23

24

25

26

28

29

31 Part III

Liabilities

**Fund Balances** 

ŏ

Assets 27

Net 30

2

Total assets (to be completed by all filers—see the

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 ▶

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

Capital stock, trust principal, or current funds . . . . Paid-in or capital surplus, or land, bldg, and equipment fund

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

instructions Also, see page 1, item I)

Grants payable

Unrestricted

Temporarily restricted Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Deferred revenue .

Other liabilities (describe >\_

Accounts payable and accrued expenses .

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Tabl	e				
b					
С					
d					
<u>e</u>					
	(f)		(g)	(	h)
(e) Gross sales price	Depreciation allowed (or allowable)		other basis ense of sale	Gain o	r (loss) ) minus (g)
a See Addıtıonal Data Tabl	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		<b>(k)</b> s of col (ı) l (յ), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a See Additional Data Tabl			3,7		
b					
С					
d					
e					
•	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- }	3	1,215,145
Part V Qualification (	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	rivate foundations subject to the sec				
If section 4940(d)(2) applies, le	•	ction 4940(a) tax on in	et investment incor	ne )	
	e section 4942 tax on the distributant qualify under section 4940(e) Do	• •	· ·	7 Y	es 🗹 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	e making any entrie	es	
<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharital	ole-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
2017	1,623,465		35,670,871	, -/-	0 045512
2016	1,402,363		33,177,984		0 042268
2015	970,054		28,039,224		0 034596
2014	871,219		19,834,023		0 043925
2013	768,208		18,966,845		0 040503
2 Total of line 1, column (	d)		2		0 206804
number of years the four	o for the 5-year base period—divide indation has been in existence if less	than 5 years	3		0 041361
	ncharitable-use assets for 2018 fron	•	4		35,873,285
			5		1,483,755
	ent income (1% of Part I, line 27b)				19,992
			7		1,503,747
If line 8 is equal to or gre	ons from Part XII, line 4    ,     . Pater than line 7, check the box in Pa			 ng a 1% tax rate Se	1,730,092 e the Part VI
Instructions					

Page **6** 

Pa	Statements Regard	ling Activities for Which	n Form 4720 May Be	Required (continued)			
Ба	During the year did the foundation p	pay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	rise attempt to influence legis	lation (section 4945(e))?	☐ Yes ✓	No		
	(2) Influence the outcome of any sp	pecific public election (see sec	tion 4955), or to carry	□ fes ⊡	NO		
	on, directly or indirectly, any vo	ter registration drive?		· · · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual	for travel, study, or other sim	nılar purposes?	Yes V	No		
	(4) Provide a grant to an organizati		· -	d			
	in section 4945(d)(4)(A)? See in			· · · · Yes 🗹	No		
	(5) Provide for any purpose other th	- ·	• • • • • • • • • • • • • • • • • • • •				
<b>L</b>	educational purposes, or for the			∟ Yes 🖭	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a	=			5b		
	Organizations relying on a current n				30		
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu		•				
	If "Yes," attach the statement require			· · □ Yes □	No		
= -		· -		ume an			
5a	Did the foundation, during the year,			uilis oii			
h	a personal benefit contract? Did the foundation, during the year,			Yes V	No 6b		No
ь	If "Yes" to 6b, file Form 8870	pay premiums, directly or mo	uirectly, on a personal be	enent contract?	80		NO
7a	At any time during the tax year, was	the foundation a party to a	prohibited tay chalter tra	neaction? $\square$			
	If yes, did the foundation receive an			∟ tes 🖭	No 7b		
	Is the foundation subject to the sect				/6		
,	excess parachute payment during th						
	<u> </u>			Yes 🔽	No L		<u> </u>
Pa	and Contractors	Officers, Directors, Trus	tees, Foundation Ma	anagers, Hignly Paid En	npioyees	,	
1	List all officers, directors, trustee				1		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and	(e) Expe		
	. ,	devoted to position	-0-)	deferred compensation	other a	llowand	ces
ee .	Additional Data Table						
2	Compensation of five highest-pa	id employees (other than t	hose included on line	1—see instructions). If nor	ne, enter "	NONE	."
_ \	Name - and address of angle amounts.	(b) Title, and average		(d) Contributions to	(a) Funan		
a)	Name and address of each employee more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expen other al		
		devoted to position		compensation			
ON	E						
ota	I number of other employees paid over	er \$50,000					(
				L	Form 00	O-DE	(2019

Form 990-PF (2018)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued)	oundation Managers, Highly Pai	d Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "	NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include releva organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
11		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>P</b> 0
		Form <b>990-PF</b> (2018)

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

1a

1b

2

3a 3h

4

5

1,730,092

1.730.092

1.710.100

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19.992

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

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

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

Page 9

30,194

1,737,378

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t	XIII	Ī
		_

orm 990-PF (20	018)	
Part XIII	Undistributed Income	(see instructions)

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018
- a Enter amount for 2017 only. . . . . .

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

1.699.898

1,699,898

- **b** Total for prior years
- 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. . . . . . . .

  - XII, line 4 > \$ 1,730,092
- 4 Qualifying distributions for 2018 from Part a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years

required—see instructions). . . . . . . . . .

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018

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

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

6 Enter the net total of each column as

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

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. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

same amount must be shown in column (a) )



Enter gross amounts unless otherwise indicated		Unrelated bu	ısıness ıncome	Excluded by section	(e) Related or exempt	
-	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
g Fees	and contracts from government agencies					
	rship dues and assessments					
3 Interes investn	t on savings and temporary cash nents			14	392	
	nds and interest from securities			14	664,136	
	ital income or (loss) from real estate					
	financed property					
	ebt-financed property					
	ntal income or (loss) from personal property			14	265,792	
	nvestment income			14	200,792	
invento	• •			14	1,159,242	
9 Net inc	ome or (loss) from special events				1,133,212	
	profit or (loss) from sales of inventory					
	revenue a					
Ь						
	al Add columns (b), (d), and (e).		0		2,089,562	
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu			1	3	2,089,562
Part XV	-B Relationship of Activities to th	ne Accomplish	ment of Exemi	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exposure instructions (					
		-				

. ,	,
П	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
	Exempt Organizations

Part	YATI	Exempt Organi	zations									
1 Did (c)	the org (other t	anization directly or in the character i	dırectly enga organızatıon	age in any of the s) or in section	e following with 527, relating to	any polit	other organizatio tical organization	n described in sections?	on 501		Yes	No
a Trai	nsfers f	rom the reporting foun	dation to a n	oncharitable ex	empt organizati	ion o	f					
(1) Cash									.	1a(1)		No
٠,		assets				•			.	1a(2)		No
		sactions										
		of assets to a nonchar	•	-						1b(1)		No
		ases of assets from a r l of facilities, equipmer								1b(2) 1b(3)		No No
		oursement arrangemen	•							1b(4)		No
		or loan guarantees.								1b(5)		No
		mance of services or m							F	1b(6)		No
٠,		facilities, equipment, n	•	_						1c		No
of t	he good	er to any of the above ls, other assets, or ser saction or sharing arra	vices given b	y the reporting	foundation If t	he fo	oundation receive	d less than fair mar	ket value			
			ا د د د				(1) 5		1 1			
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization		(a) Description or	transfers, transactions,	, and snari	ng arra	ngemen	ts
		dation directly or indire	•	•	•			_		No		
		mplete the following s		1 301(0)(3)) 01	in section 3277	٠.		шт	es <u>t</u>	NO		
ווע	165, CO	(a) Name of organization		1 0	<b>b)</b> Type of organiz	ation	. I	(c) Description	of relation	ship		
		(-,						(-,				
	of my	r penalties of perjury, y knowledge and belief	, it is true, c									
Sign	*	n preparer has any kno *****	wledge		2019-11-13					ıRS dı	scuss th	nis
Here	<b>  ▶</b> −	ignature of officer or t	rustee		Date		Tıtle		below		rer show <b>Z</b> Yes I	
		Print/Type preparer's	name	Preparer's Sign	nature		Date		PTIN	, j. <b>L</b>	res	- 140
		, . , pe preparer s					Date	Check if self-		00190	1623	
Paid		EMILY M PAUL						employed ▶ ☐	·	00190	7025	
Prep Use (		Firm's name ▶ PAUI	_ MCCOY FAN	I MILY OFFICE SE	RVICES LLP				Fırm's EI	N <b>▶</b> 04	-35401	.29
	-	Firm's address ► 31	ST JAMES A	VENUE SUITE 7	40							
	BOSTON, MA 02116						Phone no	(617	) 933-3	3600		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation MELLON 3004 2014-01-01 2018-12-31 1 MELLON HS MGMT 2014-01-01 2018-12-31 MELLON HS MGMT 2001-01-01 2018-12-31 VANGUARD LT TREAS FD 2017-01-31 2018-04-11 ATALAYA ASSET FUND III K-1 Ρ 2018-01-01 2018-12-31 Р HARVEST MLP FUND III K-1 2018-01-01 2018-12-31 Р HARVEST MLP FUND III K-1 2018-01-01 2018-12-31 Р SOMERSET GLOBAL EMERGING MARKETS 2018-01-01 2018-12-31 SOMERSET GLOBAL EMERGING MARKETS Ρ 2018-12-31 2018-01-01 GQG PTRS INTL EQ FUND K-1 Р 2018-01-01 2018-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 755,000 775,034 -20,034 499,805 2,429,177 1,929,372 14,259 4,259 10,000 400,010 405,638 -5,628 -10,4324,220 -7,907 -12,682 6,289 -34,571 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -20,034 499,805 10,000 -5,628 -10,4324,220 -7,907 -12,682 6,289 -34,571

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold (mo, day, yr) P-Purchase (mo, day, yr) D-Donation GQG PTRS INTL EQ FUND K-1 Р 2018-01-01 2018-12-31 NYES LEDGE CAP PTRS K-1 2018-01-01 2018-12-31 NYES LEDGE CAP PTRS K-1 Р 2018-01-01 2018-12-31 Capital Gains Dividends Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Cost or other basis Depreciation allowed Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 87,711 -59,455 574.822 183,007 183,007 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any 87,711 -59,455 574,822

183,007

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation HENRY S WHITE TRUSTEE 0 0 00 P O Box 233 LINCOLN, MA 01773 BARBARA WHITE TRUSTEE 0.00 P O Box 233 LINCOLN, MA 01773 ELEANOR HERZOG TRUSTEE 0 00 P O Box 233 LINCOLN, MA 01773 JAMES HERZOG TRUSTEE 0 0 0 00 P O Box 233 LINCOLN, MA 01773 NOAH HERZOG TRUSTEE 0.00 P O Box 233 LINCOLN, MA 01773 EVE ROBBINS TRUSTEE 0 0.00 P O Box 233 LINCOLN, MA 01773 JARED WHITE TRUSTEE 0 0 00 P O Box 233 LINCOLN, MA 01773 MIRANDA WHITE TRUSTEE 0 00

P O Box 233 LINCOLN, MA 01773

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

ACADIA CENTER31 MILK STREET BOSTON, MA 02109	NONE	EXEMPT	CHARITABLE	10,000
ACLU NATIONAL PRISON PROJECT 125 BROAD STREET 18TH FLOOR	NONE	EXEMPT	CHARITABLE	15,000

125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	15,000
ACLU OF MASSACHUSETTS 211 CONGRESS ST BOSTON, MA 02110	NONE	EXEMPT	CHARITABLE	30,000

NEW YORK, NY 10004				
ACLU OF MASSACHUSETTS 211 CONGRESS ST BOSTON, MA 02110	NONE	EXEMPT	CHARITABLE	30,000
Total			▶ 3a	1,700,533

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 contribution show any relationship to status of

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
ADOPT A FAMILY MARIN 35 MITCHELL BLVD 16 SAN RAFAEL, CA 94903	NONE	EXEMPT	CHARITABLE	2,500
AMERICAN BIRD CONSERVATION	NONE	EXEMPT	CHARITABLE	14,000

recipient

SAN RAFAEL, CA 94903				
AMERICAN BIRD CONSERVATION PO BOX 249 4249 LOUDOUN AVE THE PLAINS, VA 20198	NONE	EXEMPT	CHARITABLE	14,000
ANIMAL MEDICAL CENTER	NONE	EXEMPT	CHARITABLE	5,000

PO BOX 249 4249 LOUDOUN AVE THE PLAINS, VA 20198				
ANIMAL MEDICAL CENTER 350 S HUNTINGTON AVE JAMAICA PLAIN, MA 02130	NONE	EXEMPT	CHARITABLE	5,000

THE PLAINS, VA 20198				
ANIMAL MEDICAL CENTER 350 S HUNTINGTON AVE JAMAICA PLAIN, MA 02130	NONE	EXEMPT	CHARITABLE	5,000

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				
ASYLUM ACCESSPO BOX 14205 SAN FRANCISCO, CA. 94114	NONE	EXEMPT	CHARITABLE	10,000

AN FRANCISCO, CA 94114	NONE	LALMFI	CHARTABLE	
ETH ISRAELDEACONESS HOSPITAL	NONE	EXEMPT	CHARITABLE	

5				
BETH ISRAELDEACONESS HOSPITAL 330 BROOKLINE AVENUE	NONE	EXEMPT	CHARITABLE	
POSTON MA 02215		1		

BETH ISRAELDEACONESS HOSPITAL	NONE	EXEMPT	CHARITABLE	15,000
330 BROOKLINE AVENUE				
BOSTON, MA 02215				

BOSTON, MA 02215				
BK ROT1278 MYRTLE AVE	NONE	EXEMPT	CHARITABLE	500

BK ROT1278 MYRTLE AVE BROOKLYN, NY 11221	NONE	EXEMPT	CHARITABLE	500

BK ROT1278 MYRTLE AVE	NONE	EXEMPT	CHARITABLE	
BROOKLYN, NY 11221				

BROOKLYN, NY 11221		
Total	 ▶ 3a	1,700,533

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

	or substantial contributor			
a Paid during the year				
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVE BOSTON, MA 02115	NONE	EXEMPT	CHARITABLE	25,000

recipient

36,000

1,700,533

B051011/1111 02115				
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVE BOSTON, MA 02115	NONE	EXEMPT	CHARITABLE	
DRANDEIG UNIVERGITY	NONE	EVEMBE	CHARTTARIE	

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

301 MASSACHUSETTS AVE BOSTON, MA 02115				,
BRANDEIS UNIVERSITY 415 SOUTH STREET	NONE	EXEMPT	CHARITABLE	50,00

BOSTON, MA 02115				
BRANDEIS UNIVERSITY 415 SOUTH STREET WALTHAM, MA 02453	NONE	EXEMPT	CHARITABLE	50,000

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				
BRENNAN CENTER120 BROADWAY 1750 NEW YORK, NY 10271	NONE	EXEMPT	CHARITABLE	15,000

NEW YORK, NY 10271				
BRIGHAM AND WOMEN'S HOSPITAL 116 HUNTINGTON AVENUE 5TH FLOOR	NONE	EXEMPT	CHARITABLE	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

BRIGHAM AND WOMEN'S HOSPITAL 116 HUNTINGTON AVENUE 5TH FLOOR BOSTON, MA 02116	NONE	EXEMPT	CHARITABLE	100,000

116 HUNTINGTON AVENUE 5TH FLOOR BOSTON, MA 02116				,
BRONX FREEDOM FUND360 F 161ST ST	NONE	EXEMPT	CHARITABI F	15 000

BOSTON, MA 02116				
BRONX FREEDOM FUND360 E 161ST ST	NONE	EXEMPT	CHARITABLE	15,000

BRONX FREEDOM FUND360 E 161ST ST BRONX, NY 10451	NONE	EXEMPT	CHARITABLE	15,000

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
BULLETIN OF ATOMIC SCIENTISTS 1155 EAST 60TH STREET CHICAGO, IL 60637	NONE	EXEMPT	CHARITABLE	2,500

recipient

1	1		I	
CAMPAIGN LEGAL CENTER 1101 14TH ST NW SUITE 400 WASHINGTON, DC 20005	NONE	EXEMPT	CHARITABLE	5,000
CARBON CYCLE INSTITUTE	NONE	EXEMPT	CHARITABLE	10,000

WASHINGTON, DC 20005				
CARBON CYCLE INSTITUTE 245 KENTUCKY ST SUITE A PETALUMA CA 94952	NONE	EXEMPT	CHARITABLE	10,000

WASHINGTON, DC 20005				
CARBON CYCLE INSTITUTE	NONE	EXEMPT	CHARITABLE	10,
245 KENTUCKY ST SUITE A				1

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				
CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW 1350 CONNECTICUT AVE NW WASHINGTON, DC 20036	NONE	EXEMPT	CHARITABLE	15,000

WASHINGTON, DC 20036				
CENTER FOR REPRODUCTIVE RIGHTS 199 WATER STREET 22ND FLOOR NEW YORK, NY 10038	NONE	EXEMPT	CHARITABLE	;
CENTER ON BUDGET AND POLICY	NONE	EXEMPT	CHARITABLE	

199 WATER STREET 22ND FLOOR NEW YORK, NY 10038				
CENTER ON BUDGET AND POLICY PRIORITIES 820 FIRST ST NE SUITE 510	NONE	EXEMPT	CHARITABLE	15,000

21,000

199 WATER STREET 22ND FLOOR NEW YORK, NY 10038				
CENTER ON BUDGET AND POLICY PRIORITIES 820 FIRST ST NE SUITE 510 WASHINGTON, DC 20002	NONE	EXEMPT	CHARITABLE	15,000
Total			▶ 3a	1,700,533

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

a raid during the year				
CHILDRENS HEALTH WATCH 88 E NEWTON STREET VOSE HALL 4TH FLOOR BOSTON, MA 02118	NONE	EXEMPT	CHARITABLE	1,000

COMMUNITY SERVINGS	NONE	EVEMBE	CHADITABLE	15 000
CODMAN COMMUNITY FARM 58 CODMAN RD LINCOLN, MA 01773	NONE	EXEMPT	CHARITABLE	3,000
BOSTON, MA 02118				

58 CODMAN RD LINCOLN, MA 01773				
COMMUNITY SERVINGS 18 MARBURY TERRACE JAMAICA PLAIN, MA 02130	NONE	EXEMPT	CHARITABLE	15,000

1,700,533

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				
CONSERVATION LAW FOUNDATION 62 SUMMER STREET	NONE	EXEMPT	CHARITABLE	15,000
BOSTON, MA 02110				

ı				
	CORRECTIONAL ASSOCIATION OF NY 2090 ADAM CLAYTON POWELL BLVD	NONE	EXEMPT	CHARITABLE
ı				
	SUITE			
	200			
П		I	I	1

Total .

CORRECTIONAL ASSOCIATION OF NY 2090 ADAM CLAYTON POWELL BLVD SUITE 200 NEW YORK, NY 10027	NONE	EXEMPT	CHARITABLE	10,000
CRADLES TO CRAYONS	NONE	EXEMPT	CHARITABLE	15,000

SUITE 200 NEW YORK, NY 10027				
CRADLES TO CRAYONS	NONE	EXEMPT	CHARITABLE	15,0

NEW YORK, NY 10027				
CRADLES TO CRAYONS 32 MYRTLE STREET DUINCY, MA 02171	NONE	EXEMPT	CHARITABLE	15,000

EW YORK, NY 10027				
RADLES TO CRAYONS 2 MYRTLE STREET	NONE	EXEMPT	CHARITABLE	15,00

82 MYRTLE STREET QUINCY, MA 02171	CRADLES TO CRAYONS	NONE	EXEMPT	CHARITABLE	15,000
QUINCY, MA 02171					
	QUINCY, MA 02171				

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

DEMOCRACY INITIATIVE EDUCATION FUND 805 15TH STREET NW SUITE 800 WASHINGTON, DC 20005	NONE	EXEMPT	CHARITABLE	5,000
DOCTORS WITHOUT DORDERS	NONE	EVENDE	CUADITABLE	45 000

DOCTORS WITHOUT BORDERS 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	15,000
EARTH JUSTICE	NONE	EXEMPT	CHARITABLE	15,000

333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	13,000
EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111	NONE	EXEMPT	CHARITABLE	15,000

NEW YORK, NY 10001				
EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111	NONE	EXEMPT	CHARITABLE	15,000
				1

Total .

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

Name and address (home or business)	or substantial contributor			
a Paid during the year				
EARTHWORKS1612 K ST NW SUITE 904 WASHINGTON, DC 20006	NONE	EXEMPT	CHARITABLE	3,750

WHO I LITER ON IN DE LEGGE				
ENDOMETRIOSIS FOUNDATION OF AMERICA 205 EAST 42ND STREET 20TH FLOOR NEW YORK, NY 10017	NONE	EXEMPT	CHARITABLE	5,000

AMERICA 205 EAST 42ND STREET 20TH FLOOR NEW YORK, NY 10017				
ENTERPRISE COMMUNITY PARTNERS 1 WHITEHALL STREET 11TH FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	35,000

1,700,533

205 EAST 42ND STREET 20TH FLOOR NEW YORK, NY 10017				
ENTERPRISE COMMUNITY PARTNERS 1 WHITEHALL STREET 11TH FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	35,

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				
ENTERPRISE COMMUNITY PARTNERS 1 WHITEHALL STREET 11TH FLOOR NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	10,000

NEW YORK, NY 10001				
EVERY MOTHER COUNTS 180 VARICK ST RM 1116 NEW YORK, NY 10014	NONE	EXEMPT	CHARITABLE	5,000
FAIR ELECTION CENTER	NONE	EXEMPT	CHARITABI F	40 000

180 VARICK ST RM 1116 NEW YORK, NY 10014				3,000
FAIR ELECTION CENTER 1825 K ST NW SUITE 450 WASHINGTON, DC 20006	NONE	EXEMPT	CHARITABLE	40,000

NEW YORK, NY 10014				
FAIR ELECTION CENTER 1825 K ST NW SUITE 450 WASHINGTON, DC 20006	NONE	EXEMPT	CHARITABLE	40,000
Total			▶ 3a	1,700,533

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				
FIBERSHEDPO BOX 221	NONE	EXEMPT	CHARITABLE	2,500

AN GERONIMO, CA 94963				
OOD BANK FOR NEW YORK CITY	NONE	EXEMPT	CHARITABLE	

Total .

39 BROADWAY 10TH FLOOR NEW YORK, NY 10006				
FORTUNE SOCIETY29 NORTHERN BLVD	NONE	EXEMPT	CHARITABLE	5.000

NEW YORK, NY 10006				
FORTUNE SOCIETY29 NORTHERN BLVD	NONE	EXEMPT	CHARITABLE	5,000

FORTUNE SOCIETY29 NORTHERN BLVD	NONE	EXEMPT	CHARITABLE	5,000
LONG ISLAND, NY 11101				

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				
FRACTURED ATLAS 248 WEST 35TH STREET 10TH FLOOR	NONE	EXEMPT	CHARITABLE	500

NEW YORK, NY 10001				
FRENCH CULTURAL CENTER ALLIANCE 53 MARLBOROUGH ST BOSTON, MA 02116	NONE	EXEMPT	CHARITABLE	1,000

53 MARLBOROUGH ST BOSTON, MA 02116				
FRUIT TREE PLANTING FOUNDATION 1925 FRANCISCO BLVD E 5 SAN RAFAEL, CA 94901	NONE	EXEMPT	CHARITABLE	2,000

Total			▶ 3a	1,700,533
FRUIT TREE PLANTING FOUNDATION 1925 FRANCISCO BLVD E 5 SAN RAFAEL, CA 94901	NONE	EXEMPT	CHARITABLE	2,000
BOSTON, MA 02116				

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				
GIRLS WRITE NOW 247 W 37TH ST STE 1000 NEW YORK, DC 10018	NONE	EXEMPT	CHARITABLE	5,000

NEW YORK, DC 10018				
GIVE DIRECTLY CHURCH STREET STATION PO BOX 3221 NEW YORK, NY 10008	NONE	EXEMPT	CHARITABLE	25,000

CHURCH STREET STATION PO BOX 3221 NEW YORK, NY 10008				,
GOOD SHEPHERD COMMUNITY CARE 90 WELLS AVENUE NEWTON MA 02459	NONE	EXEMPT	CHARITABLE	6,000

NEW YORK, NY 10008				
GOOD SHEPHERD COMMUNITY CARE 90 WELLS AVENUE NEWTON, MA 02459	NONE	EXEMPT	CHARITABLE	6,000
Total			<b>&gt;</b> 3a	1,700,533

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

a Paid during the year				
GRAMEEN AMERICA 7216 ROOSEVELT AVE JACKSON HEIGHTS, NY 11372	NONE	EXEMPT	CHARITABLE	13,750

JACKSON HEIGHTS, NT 11372				
GREATER BOSTON FOOD BANK 70 SOUTH BAY AVENUE BOSTON, MA 02118	NONE	EXEMPT	CHARITABLE	50,000

70 SOUTH BAY AVENUE BOSTON, MA 02118	NONE	EXEMIT	CHANTABLE	30,000
HEAD COUNT104 WEST 29TH ST	NONE	EXEMPT	CHARITABLE	15,000

BOSTON, MA 02118				
HEAD COUNT104 WEST 29TH ST NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	15,000

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 contribution status of

any foundation manager

Total .

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
HOUSING AND SERVICES INCORPORATED 243 WEST 30TH STREET 2ND FLOO	NONE	EXEMPT	CHARITABLE	8,000

recipient

NEW YORK, NY 10001				
HOUSING WORKS54 WESTLAND AVE BOSTON, MA 02115	NONE	EXEMPT	CHARITABLE	3

HOUSING WORKS54 WESTLAND AVE BOSTON, MA 02115	NONE	EXEMPT	CHARITABLE	3,000
HUMAN RIGHTS FIRST 75 BROAD ST 31ST FLOOR	NONE	EXEMPT	CHARITABLE	10,000

BOSTON, MA 02115	NONE	LALINI	CHARTABLE	3,000
HUMAN RIGHTS FIRST 75 BROAD ST 31ST FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	10,000

BUSTON, MA 02115				
HUMAN RIGHTS FIRST 75 BROAD ST 31ST FLOOR NEW YORK, NY 10004	NONE	EXEMPT	CHARITABLE	10,0

Recipient If recipient is an individual, show any relationship to status of status of

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INDIAN LAW RESOURCE CENTER 602 NORTH EWING STREET HELENA, MT 59601	NONE	EXEMPT	CHARITABLE	5,000
INNOCENCE PROJECT 40 WORTH STREET SUITE 701 NEW YORK, NY 10013	NONE	EXEMPT	CHARITABLE	3,000
INTERNATIONAL MEDICAL CORPS 12400 WILSHIRE BLVD SUITE 1500 LOS ANGELES, CA 90025	NONE	EXEMPT	CHARITABLE	15,000

1,700,533

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 .

	or substantial contributor			
a Paid during the year				
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168	NONE	EXEMPT	CHARITABLE	200,000

recipient

NEW TORK, NT 10100				
KIDS CLOTHES CLUB 120 CYRESS STREET BROOKLINE, MA 02445	NONE	EXEMPT	CHARITABLE	25,000
LOC ANGELES FOOD DANK	NONE	EVENDE	CHARTTARIE	F0 000

120 CYRESS STREET BROOKLINE, MA 02445				
LOS ANGELES FOOD BANK 1734 EAST 41ST STREET LOS ANGELES, CA 90058	NONE	EXEMPT	CHARITABLE	50,000

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 husiness)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
MAKE THE ROAD NEW YORK 301 GROVE STREET	NONE	EXEMPT	CHARITABLE	10,000

BROOKLYN, NY 11237				
MALDEF1016 16TH ST NW 100 WASHINGTON, DC 20036	NONE	EXEMPT	CHARITABLE	15,000
MARGARITA MUNIZ ACADEMY	NONE	EXEMPT	CHARITABLE	2,000

WASHINGTON, DC 20036	NONE	EXEMPI	CHARITABLE	15,000
MARGARITA MUNIZ ACADEMY FOUNDATION 20 CHILD ST JAMAICA PLAIN, MA 02130	NONE	EXEMPT	CHARITABLE	2,000
·			·	

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				
MARIN AGRICULTURAL LAND TRUST PO BOX 809 POINT REYES STATION, CA 94956	NONE	EXEMPT	CHARITABLE	47,000

POINT REYES STATION, CA 94956				
MINNESOTA INDEPENDENCE COLLEGE AND COMM 7501 LOGAN AVE S 2A RICHFIELD, MN 55423	NONE	EXEMPT	CHARITABLE	15,000

AND COMM 7501 LOGAN AVE S 2A RICHFIELD, MN 55423				,
MUSICIANS ON CALL 110 WEST 40TH STREET SUITE 702	NONE	EXEMPT	CHARITABLE	5,000

RICHFIELD, MN 55423				
MUSICIANS ON CALL 110 WEST 40TH STREET SUITE 702 NEW YORK, NY 10018	NONE	EXEMPT	CHARITABLE	5,000

1,700,533

1				
MUSICIANS ON CALL 110 WEST 40TH STREET SUITE 702 NEW YORK, NY 10018	NONE	EXEMPT	CHARITABLE	5,000

MUSICIANS ON CALL	NONE	EXEMPI	CHARITABLE	5,00
110 WEST 40TH STREET SUITE 702				1
NEW YORK, NY 10018				I

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 NARAL PROCHOICE AMERICA NONE EXEMPT CHARITABLE 20,000

FOUNDATIONS 1156 15TH STREET NW SUITE 700 WASHINGTON, DC 20005				
NATIONAL DIAPER BANK NETWORK 129 CHURCH STREET	NONE	EXEMPT	CHARITABLE	

			1	
NATIONAL DIAPER BANK NETWORK 129 CHURCH STREET NEW HAVEN, CT 06510	NONE	EXEMPT	CHARITABLE	1
NATIVE SONGBIRD CARE AND CONSERVATION	NONE	EXEMPT	CHARITABLE	

NATIONAL DIAPER BANK NETWORK 129 CHURCH STREET NEW HAVEN, CT 06510	NONE	EXEMPT	CHARITABLE	10,000
NATIVE SONGBIRD CARE AND CONSERVATION 8050 ELPHICK RD	NONE	EXEMPT	CHARITABLE	2,000

NEW HAVEN, CT 06510				
NATIVE SONGBIRD CARE AND CONSERVATION 8050 ELPHICK RD	NONE	EXEMPT	CHARITABLE	2,000
CERACTOROL CA 05472	1	I		

Total	 	▶ 3a	1,700,533
CONSERVATION 8050 ELPHICK RD SEBASTOPOL, CA 95472			

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

<b>a</b> Paid during the year				
NEW DIRECTIONS FOR VETERANS 11303 WILSHIRE BLVD VA BLDG 116 LOS ANGELES, CA 90073	NONE	EXEMPT	CHARITABLE	10,000

LOS ANGELES, CA 90073				
NEW ENGLAND CENTER FOR HOMELESS VETERANS 7 COURT STREET BOSTON, MA 02108	NONE	EXEMPT	CHARITABLE	20,000

VETERANS 7 COURT STREET BOSTON, MA 02108				
NEW YORK CITY AUBUDON 71 W 23RD ST STE 1523	NONE	EXEMPT	CHARITABLE	6,000

BOSTON, MA 02108				
NEW YORK CITY AUBUDON 71 W 23RD ST STE 1523 NEW YORK, NY 10010	NONE	EXEMPT	CHARITABLE	6,000

1,700,533

	·				
NEW YORK CITY AUBUDON NONE EXEMPT CHARITABLE 71 W 23RD ST STE 1523 NEW YORK, NY 10010		NONE	EXEMPT	CHARITABLE	6,000

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

or substantial contributor.

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
NEW YORK FESTIVAL OF SONG 307 SEVENTH AVENUE SUITE 1601 NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	10,000

NEW TORK, NT 10001				
NEW YORK IMMIGRATION COALITION 131 WEST 33RD STREET NEW YORK, NY 10003	NONE	EXEMPT	CHARITABLE	12,500

131 WEST 33RD STREET NEW YORK, NY 10003				,
NURSE- FAMILY PARTNERSHIP 1900 GRANT STREET SUITE 400 DENVER, CO 80203	NONE	EXEMPT	CHARITABLE	10,000

NEW YORK, NY 10003				
NURSE- FAMILY PARTNERSHIP 1900 GRANT STREET SUITE 400 DENVER, CO 80203	NONE	EXEMPT	CHARITABLE	10,000
Total			<b>&gt;</b> 3a	1,700,533

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
OCEAN CONSERVACY	NONE	EXEMPT	CHARITABLE	15,000

OCEAN CONSERVACY 1300 19TH ST NW STE 800 WASHINGTON, DC 20036	NONE	EXEMPT	CHARITABLE	15,000
OCEANA296 STATE STREET	NONE	EXEMPT	CHARITABLE	9 000

WASHINGTON, DC 20036				
OCEANA296 STATE STREET BOSTON, MA 02109	NONE	EXEMPT	CHARITABLE	9,000
PHYSICIANS FOR HUMAN RIGHTS 434 MASSACHUSETTS AVENUE SUITE 503	NONE	EXEMPT	CHARITABLE	10,000

BOSTON, MA 02109				,
PHYSICIANS FOR HUMAN RIGHTS 434 MASSACHUSETTS AVENUE SUITE 503 BOSTON, MA 02118	NONE	EXEMPT	CHARITABLE	10,000
Total			<b>&gt;</b> 3a	1,700,533

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

recipient

1,700,533

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
PLANNED PARENTHOOD	NONE	EXEMPT	CHARITABLE	55,000

any foundation manager

NEW YORK, NY 10001				
PLASTIC OCEANS FOUNDATION 23823 MALIBU RD STE 50-205	NONE	EXEMPT	CHARITABLE	15,000
MALTBULCA 90265				

PLASTIC OCEANS FOUNDATION 23823 MALIBU RD STE 50-205 MALIBU, CA 90265	NONE	EXEMPT	CHARITABLE	15,000
POETRY PROJECT ST MARK'S 131 E 10TH STREET	NONE	EXEMPT	CHARITABLE	500

MALIBU, CA 90265				
POETRY PROJECT ST MARK'S 131 E 10TH STREET NEW YORK, NY 10003	NONE	EXEMPT	CHARITABLE	500

MALIBU, CA 90265				
POETRY PROJECT ST MARK'S 131 E 10TH STREET NEW YORK, NY 10003	NONE	EXEMPT	CHARITABLE	50

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				
POETS IN NEEDPO BOX 5411 BERKELY, CA 94705	NONE	EXEMPT	CHARITABLE	10,000

PRISON POLICY INITIATIVEPO BOX 127 NORTHAMPTON, MA 01061	NONE	EXEMPT	CHARITABLE	5,000
BERKELY, CA 94705				

NORTHAMPTON, MA 01061	NONE	EXEM 1	CHARTABLE	3,000
PUPPIES BEHIND BARS263 W 38TH ST	NONE	EXEMPT	CHARITABLE	7,500

1,700,533

-				
PUPPIES BEHIND BARS263 W 38TH ST NEW YORK, NY 10018	NONE	EXEMPT	CHARITABLE	7,500

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				
RAILS TO TRAILS 2121 WARD COURT NW 5TH FLOOR WASHINGTON, DC 20037	NONE	EXEMPT	CHARITABLE	7,500

WASHINGTON, DC 20037				
RIVERKEEPER220 SECOR RD OSSINING, NY 10562	NONE	EXEMPT	CHARITABLE	20,000
ROCK THE VOTE 1875 CONNECTICUT AVE NW 10TH	NONE	EXEMPT	CHARITABLE	11,500

ROCK THE VOTE NONE EXEMPT CHARITABLE 1:	OSSINING, NY 10562	NOINE	EXEMPT	CHARITABLE	20,000
1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON, DC 20009	1875 CONNECTICUT AVE NW 10TH FLOOR	NONE	EXEMPT	CHARITABLE	11,500

OSSINING, NY 10562				•
ROCK THE VOTE 1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON, DC 20009	NONE	EXEMPT	CHARITABLE	11,5

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

SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104	a Paid during the year				
	400 WASHINGTON AVE	NONE	EXEMPT	CHARITABLE	10,000

MONTGOMERY, AL 36104				
SPRINGWELL307 WAVERLY OAKS RD WALTHAM, MA 02452	NONE	EXEMPT	CHARITABLE	75,533
SUDBURY VALLEY TRUSTEES	NONE	EXEMPT	CHARILABLE	2,500

WALTHAM, MA 02452				
SUDBURY VALLEY TRUSTEES 18 WOLBACH RD SUDBURY, MA 01776	NONE	EXEMPT	CHARILABLE	2,500

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				
THE BAIL PROJECTPO BOX 750	NONE	EXEMPT	CHARITABLE	15,000

VENICE, CA 90294				
THE FOOD PROJECT555 DUDLEY ST DORCHESTER, MA 02125	NONE	EXEMPT	CHARITABLE	

THE FOOD PROJECT555 DUDLEY ST DORCHESTER, MA 02125	NONE	EXEMPT	CHARITABLE	4,000
THE OSBORNE ASSOCIATION	NONE	EXEMPT	CHARITABLE	5,000

DORCHESTER, MA 02125				
THE OSBORNE ASSOCIATION 175 REMSEN STREET SUITE 800 BROOKLYN, NY 11201	NONE	EXEMPT	CHARITABLE	5,000

THE OSBORNE ASSOCIATION 175 REMSEN STREET SUITE 800 BROOKLYN, NY 11201	NONE	EXEMPT	CHARITABLE	5,000
Total			<b>&gt;</b> 3a	1,700,533

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 Daid during the year

a Paid during the year				
TURN 2 US PROGRAM 215 PARK AVENUE SOUTH SUITE 1905 NEW YORK, NY 10003	NONE	EXEMPT	CHARITABLE	25,000
UNION OF CONCERNED SCIENTISTS	NONE	EXEMPT	CHARITABLE	10.000

NEW YORK, NY 10003				
UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE CAMBRIDGE, MA 02138	NONE	EXEMPT	CHARITABLE	1
/IOLENCE POLICY CENTER L025 CONNECTICUT AVE NW SUITE	NONE	EXEMPT	CHARITABLE	1

Total .

CAMBRIDGE, MA 02138				
VIOLENCE POLICY CENTER 1025 CONNECTICUT AVE NW SUITE 1210 WASHINGTON DC 20036	NONE	EXEMPT	CHARITABLE	15,000

CAMBRIDGE, MA UZ138				1
VIOLENCE POLICY CENTER 1025 CONNECTICUT AVE NW SUITE 1210 WASHINGTON, DC 20036	NONE	EXEMPT	CHARITABLE	15,00

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

	NONE	EVENARE	CILABITA DI E	44.000
VOTO LATINOPO BOX 35608 WASHINGTON, DC 20033	NONE	EXEMPT	CHARITABLE	5,000
a Paid during the year				

WASHINGTON, DC 20033				
WATER AID AMERICA 315 MADISON AVENUE SUITE 2301 NEW YORK, NY 10017	NONE	EXEMPT	CHARITABLE	14,000
WATERVEERERS ALLIANCE	NONE	EVEMBT	CHARITARIE	20,000

315 MADISON AVENUE SUITE 2301 NEW YORK, NY 10017				·
WATERKEEPERS ALLIANCE 180 MAIDEN LN STE 603 NEW YORK NY 10038	NONE	EXEMPT	CHARITABLE	20,000

14E44 TORR, 141 10017				
WATERKEEPERS ALLIANCE 180 MAIDEN LN STE 603 NEW YORK, NY 10038	NONE	EXEMPT	CHARITABLE	20,000

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 contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
WEILL CORNELL MEDICINE 1300 YORK AVENUE BOX 314	NONE	EXEMPT	CHARITABLE	15,000

NEW YORK, NY 10065				
WESTSIDE FOOD BANK 1710 22ND STREET	NONE	EXEMPT	CHARITABLE	25,000

WESTSIDE FOOD BANK	NONE	EXEMPT	CHARITABLE	25,000
1710 22ND STREET SANTA MONICA, CA 90404				,
			l .	

efile GRAPHIC print - DO NOT P	print - DO NOT PROCESS As Filed Data - DLN: 93491317022029					
TY 2018 Accounting Fe	es Schedule			_		
Name: LEAVES OF GRASS FUND EIN: 22-2824793						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES	26,099	0		26,099		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491317022029

## **TY 2018 Investments - Other Schedule**

Name: LEAVES OF GRASS FUND

<b>EIN:</b> 22-2824793						
nvestments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
BUENA VISTA ASIAN OPPORTUNTIES FUND	AT COST	1,300,000	1,282,368			
FIRST EAGLE FUNDS	AT COST	2,428,004	2,205,246			
HARVEST	AT COST	1,009,060	1,081,249			
HILDENE OPP	AT COST	153,674	654,536			
HS MANAGEMENT	AT COST	2,522,308	2,448,421			
LEGG MASON BRANDYWINE	AT COST	2,949,948	2,768,823			
LONGLEAF FUNDS	AT COST	1,656,648	1,289,378			
MELLON CUST EQUITIES	AT COST	1,239,278	1,235,769			
MELLON CUST FIXED INCOME	AT COST	1,252,278	1,214,431			
NYES LEDGE CAPITAL PARTNERS	AT COST	5,302,903	5,289,327			
PIMCO BOND FUND	AT COST	3,098,040	3,015,458			
RS GLOBAL	AT COST	1,473,793	645,357			
SOLA I	AT COST	1,000,000	1,002,418			
SOMERSET GLOBAL EMERGING MARKETS FUND LLC	AT COST	1,821,855	1,875,352			
VANGUARD LONG TERM TREASURY	AT COST	808,937	796,355			
ATALAYA III	AT COST	485,905	481,756			
ABDIEL	AT COST	1,000,000	1,709,112			
PRINCE STREET	AT COST	800,000	820,241			
GQG PARTNERS	AT COST	2,748,325	2,765,579			
ATALAYA IV	AT COST	277,302	276,364			

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TY 2018 Legal Fees Schedu	ıle		_		
Nan	ne: LEAVES OF	GRASS FUND			
<b>EIN:</b> 22-2824793					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	500	0		500	

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TY 2018 Other Expenses Schedule					
<u>-</u> I				•	
Name: LEAVES OF GRASS FUND					
<b>EIN:</b> 22-2824793				1	
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FROM K-1'S	353,285	0	1	0	
USPS	210	0	[	210	
DUES	750	0	1	750	

TY	2018	Other	<b>Income</b>	Schedule

Name: LEAVES OF GRASS FUND

**EIN:** 22-2824793

## \_\_\_\_\_

Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
FROM K-1'S	258,895	258,895	258,895	
MISC	6,897	6,897	6,897	

DLN: 93491317022029

efile GRAPHIC print - DO NOT PROCESS	SS As Filed Data -	<u></u>	DLI	N: 93491317022029	
TY 2018 Other Professional Fees Schedule					
Name: LEAVES OF GRASS FUND					
<b>EIN:</b> 22-2824793					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

98,859

98,859

OTHER PROFESSIONAL FEES &

SUBSCRIPTIONS

efile GRAPHIC print - DO NOT PROCESS	PROCESS As Filed Data - DLN: 93491317022029			
TY 2018 Taxes Schedule				
Name:	LEAVES OF (	GRASS FUND		
EIN:	22-2824793			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MA ANNUAL FILE FEE	2,000	0		2,000
FOREIGN TAX WITHHELD	8,530	8,530		0
FEDERAL AND STATE TAXES PAID	90,470	0		0