

For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2019)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value	
Assets	1 Cash—non-interest-bearing	6,549	6,991	6,991
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	6,549	6,991	6,991	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	6,549	6,991	
	29 Total net assets or fund balances (see instructions)	6,549	6,991	
30 Total liabilities and net assets/fund balances (see instructions) .	6,549	6,991		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	6,549
2 Enter amount from Part I, line 27a	2	442
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	6,991
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	6,991

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) <div style="float: right; font-size: small;"> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } </div>	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	193,838	15,098	12 838654
2017	192,631	21,361	9 017883
2016	165,525	18,624	8 887726
2015	17,666	30,670	0 576003
2014	155,857	33,324	4 677020

2 Total of line 1, column (d)	2	35 997286
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	7 199457
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	16,687
5 Multiply line 4 by line 3	5	120,137
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	120,137
8 Enter qualifying distributions from Part XII, line 4	8	200,121

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	0
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MA _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.WEB5.COM/FOUNDATION	13	Yes	
14	The books are in care of ► MONICA M THOMMAS BONNICK Telephone no ► (508) 438-3555			

Located at ► 10 A STREET AUBURN MA ZIP+4 ► 01501

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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

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

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	16,941
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	16,941
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	16,941
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	254
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,687
6	Minimum investment return. Enter 5% of line 5.	6	834

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

1	Minimum investment return from Part X, line 6.	1	834
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	834
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	834
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	834

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	200,121
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	200,121
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	200,121

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				834
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014.	154,191			
b From 2015.	17,410			
c From 2016.	164,594			
d From 2017.	191,563			
e From 2018.	193,087			
f Total of lines 3a through e.	720,845			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 200,121				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				834
e Remaining amount distributed out of corpus	199,287			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	920,132			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	154,191			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	765,941			
10 Analysis of line 9				
a Excess from 2015.	17,410			
b Excess from 2016.	164,594			
c Excess from 2017.	191,563			
d Excess from 2018.	193,087			
e Excess from 2019.	199,287			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

Part XV

1 Information Regarding Foundation Managers:

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

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

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

MONICA M THOMAS-BONNICK EXECUTIVE D
10 A STREET
AUBURN, MA 015012102
(508) 438-3555

b The form in which applications should be submitted and information and materials they should include

APPLICATIONS AVAILABLE AT ABOVE ADDRESS

c Any submission deadlines

SEE APPLICATIONS FOR VARIOUS DEADLINES

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

THE WEBSTER FIVE FOUNDATION RESTRICTS ITS AWARDS TO ORGANIZATIONS THAT MEET ELIGIBILITY GUIDELINES AS SET FORTH IN THE APPLICATION PACKAGE. A SUMMARY OF THOSE GUIDELINES IS ATTACHED.

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	200,051
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	140,249

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions)
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	15	
4 Dividends and interest from securities. . . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a TAX REFUND _____					498
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). .		0		15	498
13 Total. Add line 12, columns (b), (d), and (e).			13		513

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

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

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

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	*****	2020-05-14	*****	May the IRS discuss this return with the preparer shown below? (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	HARRY A KALAJIAN JR CPA		2020-05-15		P00464296
	Firm's name WOLF & COMPANY PC				Firm's EIN 04-2689883
Firm's address 99 HIGH STREET 21ST FLOOR BOSTON, MA 02110					Phone no (617) 439-9700

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MAURA E ANIELLO 10 A STREET AUBURN, MA 015012102	DIRECTOR 1 00	0	0	0
BENJAMIN A CRAVER 10 A STREET AUBURN, MA 015012102				
SAM BITAR 10 A STREET AUBURN, MA 015012102	DIRECTOR 1 00	0	0	0
DON DOYLE 10 A STREET AUBURN, MA 015012102				
DAVID S BAYER II 10 A STREET AUBURN, MA 015012102	DIRECTOR 1 00	0	0	0
MONICA M THOMAS-BONNICK 10 A STREET AUBURN, MA 015012102		0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
15-40 CONNECTION55 OTIS STREET WESTBOROUGH, MA 01581	NOT RELATED	PC	EXEMPT PURPOSE	3,500
ADVOCATES1881 WORCESTER ROAD FRAMINGHAM, MA 01701	NOT RELATED	PC	EXEMPT PURPOSE	2,500
ANGELS-NET FOUNDATION 360 WEST BOYLSTON STREET 213 WEST BOYLSTON, MA 01583	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
APPLE TREE ARTS ONE GRAFTON COMMON GRAFTON, MA 01519	NOT RELATED	PC	EXEMPT PURPOSE	1,200
ART IN THE PARK WORCESTER 11 WHEELER AVENUE WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	500
ASSABET VALLEY MASTERSINGERS PO BOX 911 NORTHBOROUGH, MA 01532	NOT RELATED	PC	EXEMPT PURPOSE	500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AUBURN YOUTH AND FAMILY SERVICES INC 21 PHEASANT COURT AUBURN, MA 01501	NOT RELATED	PC	EXEMPT PURPOSE	5,000
AUDIO JOURNAL INC 799 WEST BOYLSTON STREET WORCESTER, MA 01606	NOT RELATED	PC	EXEMPT PURPOSE	2,000
BOYS & GIRLS CLUB OF WORCESTER 65 BOYS GIRLS CLUB WAY WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	1,250
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAPEN HILL NATURE ASSOCIATION INC PO BOX 218 CHARLTON CITY, MA 01508	NOT RELATED	PC	EXEMPT PURPOSE	1,500
CASA PROJECT INC100 GROVE STREET WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	6,000
CENTER FOR WOMEN AND ENTERPRISE 69 MILK STREET SUITE 217 WESTBOROUGH, MA 01581	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTRAL MASSACHUSETTS HOUSING ALLIANCE 6 INSTITUTE ROAD PO BOX 3 WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	5,000
CHILDREN'S FRIEND INC 81 HOPE AVENUE WORCESTER, MA 01603	NOT RELATED	PC	EXEMPT PURPOSE	2,500
COMMUNITY HARVEST PROJECT 37 WHEELER ROAD NORTH GRAFTON, MA 01536	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY LEGAL AID INC 405 MAIN STREET WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	5,000
CREATIVE HUB WORCESTER 2 IONIC AVENUE WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	6,667
DISMAS HOUSE OF MASSACHUSETTS INC PO BOX 30125 WORCESTER, MA 01603	NOT RELATED	PC	EXEMPT PURPOSE	4,500
Total ► 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DUDLEY SOCCER CLUBPO BOX 74 DUDLEY, MA 01571	NOT RELATED	PC	EXEMPT PURPOSE	2,000
EASTER SEALS MASSACHUSETTS 484 MAIN STREET WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	1,500
FAMILY HEALTH CENTER OF MASSACHUSETTS 26 QUEEN STREET WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	2,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF ST LUKE INC 141 MAIN STREET SOUTHBRIDGE, MA 01550	NOT RELATED	PC	EXEMPT PURPOSE	2,000
FRIENDS OF THE CHESTER C CORBIN LIBRARY 350 MAIN STREET WEBSTER, MA 01570	NOT RELATED	PC	EXEMPT PURPOSE	15,000
GENESIS CLUB HOUSE INC 274 LINOLN STREET WORCESTER, MA 01605	NOT RELATED	PC	EXEMPT PURPOSE	2,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRL SCOUTS OF CENTRAL AND WESTERN MASSACHUSETTS INC 115 CENTURY DRIVE WORCESTER, MA 01606	NOT RELATED	PC	EXEMPT PURPOSE	2,000
GIRLS INCORPORATED OF WORCESTER 125 PROVIDENCE STREET WORCESTER, MA 01604	NOT RELATED	PC	EXEMPT PURPOSE	1,000
HARRINGTON HEALTHCARE SYSTEM 100 SOUTH STREET SOUTHBRIDGE, MA 01550	NOT RELATED	PC	EXEMPT PURPOSE	2,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HORACE MANN EDUCATIONAL ASSOCIATES INC 8 FORGE PARK EAST FRANKLIN, MA 02038	NOT RELATED	PC	EXEMPT PURPOSE	1,000
JEREMIAH'S INNPO BOX 30035 WORCESTER, MA 01603	NOT RELATED	PC	EXEMPT PURPOSE	4,000
JOY OF MUSIC PROGRAM INC 1 GORHAM STREET WORCESTER, MA 01605	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ► 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KENNEDY-DONOVAN CENTER 1 COMMERCIAL STREET FOXBORO, MA 02035	NOT RELATED	PC	EXEMPT PURPOSE	1,500
LITERACY VOLUNTEERS OF TRI-COMMUNITY 236 MAIN STREET SOUTHBRIDGE, MA 01550	NOT RELATED	PC	EXEMPT PURPOSE	2,000
LIVING IN FREEDOM TOGETHER INC 108 BEACON STREET WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	4,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOVE YOUR LABELS INC 271 SHREWSBURY STREET WORCESTER, MA 01604	NOT RELATED	PC	EXEMPT PURPOSE	2,000
MAIN SOUTH COMMUNITY DEVELOPMENT CORPORATION 875 MAIN STREET WORCESTER, MA 01605	NOT RELATED	PC	EXEMPT PURPOSE	2,000
MASSACHUSETTS AUDUBON SOCIETY INC 414 MASSASOIT ROAD WORCESTER, MA 01604	NOT RELATED	PC	EXEMPT PURPOSE	4,300
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MASSACHUSETTS EDUCATION AND CAREER OPPORTUNITIES INC 484 MAIN STREET SUITE 500 WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	5,000
NET OF COMPASSION674 MAIN STREET WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	2,000
NICHOLS COLLEGEPO BOX 5000 DUDLEY, MA 01571	NOT RELATED	PC	EXEMPT PURPOSE	7,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OAK HILL COMMUNITY CORPORATION 74 PROVIDENCE STREET WORCESTER, MA 01604	NOT RELATED	PC	EXEMPT PURPOSE	2,000
OLD STURBRIDGE VILLAGE 1 OLD STURBRIDGE VILLAGE ROAD STURBRIDGE, MA 01566	NOT RELATED	PC	EXEMPT PURPOSE	2,500
ORGANIZATION FOR NONPROFIT EXCELLENCE 484 MAIN STREET SUITE 300 WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PAKACHOAG MUSIC SCHOOL OF GREATER WORCESTER 10 IRVING STREET WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	2,000
PERNET FAMILY HEALTH SERVICES 237 MILLBURY STREET WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	1,000
PROJECT BREAD - THE WALK FOR HUNGER INC 145 BORDER STREET BOSTON, MA 02128	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PROJECT NEW HOPE INC 70 JAMES STREET SUITE 157 WORCESTER, MA 01603	NOT RELATED	PC	EXEMPT PURPOSE	750
PROVISION MINISTRY INC 7 THOMAS NEWTON DRIVE WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	1,750
RACHEL'S TABLE 623 SALISBURY STREET WORCESTER, MA 01505	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RAINBOW CHILD DEVELOPMENT CENTER 10 EDWARD STREET WORCESTER, MA 01581	NOT RELATED	PC	EXEMPT PURPOSE	5,000
REGIONAL ENVIRONMENTAL COUNCIL INC PO BOX 255 WORCESTER, MA 01613	NOT RELATED	PC	EXEMPT PURPOSE	1,000
RENDER CREATIVE INC 9 IRVING STREET WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHREWSBURY YOUTH AND FAMILY SERVICES INC THE HIGGINS BUILDING 222 MAPLE AVENUE SHREWSBURY, MA 01545	NOT RELATED	PC	EXEMPT PURPOSE	5,000
SIMON SAYS GIVE 867 GRAFTON STREET 10 PMB 25 WORCESTER, MA 01604	NOT RELATED	PC	EXEMPT PURPOSE	1,500
SPECTRUM HEALTH SYSTEMS INC 10 MECHANIC STREET 302 WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STRAIGHT AHEAD MINISTRIES 791 MAIN STREET WORCESTER, MA 01610	NOT RELATED	PC	EXEMPT PURPOSE	1,000
TASKS FOR TRANSIT 379 GREENWOOD STREET SUITE 4 MILLBURY, MA 01527	NOT RELATED	PC	EXEMPT PURPOSE	600
TENACITY INC38 EVERETT STREET ALLSTON, MA 02134	NOT RELATED	PC	EXEMPT PURPOSE	2,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THOMPSON ECUMENICAL EMPOWERMENT GROUP PO BOX 664 NORTH GROSVENORDALE, CT 06255	NOT RELATED	PC	EXEMPT PURPOSE	2,200
TRI-VALLEY INC10 MILL STREET DUDLEY, MA 01571	NOT RELATED	PC	EXEMPT PURPOSE	7,000
VNA CARE NETWORK AND HOSPICE 120 THOMAS STREET WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	1,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
VSA MASSACHUSETTS AN AFFILIATE OF SEVEN HILLS FOUNDATION 81 HOPE AVENUE WORCESTER, MA 01603	NOT RELATED	PC	EXEMPT PURPOSE	1,500
WEBSTER EMS67 THOMPSON ROAD WEBSTER, MA 01570	NOT RELATED	PC	EXEMPT PURPOSE	4,000
WORCESTER CHAMBER MUSIC SOCIETY 323 MAIN STREET WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WORCESTER CHILDREN'S CHORUS 500 SALISBURY STREET WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	500
WORCESTER COMMUNITY HOUSING RESOURCES INC 11 PLEASANT STREET SUITE 300 WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	7,500
WORCESTER COUNTY HORTICULTURAL SOCIETY 11 FRENCH DRIVE PO BOX 598 WORCESTER, MA 01505	NOT RELATED	PC	EXEMPT PURPOSE	5,000
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WORCESTER EDUCATIONAL COLLABORATIVE 484 MAIN STREET SUITE 300 BOYLSTON, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	1,000
WORCESTER INTERFAITH 111 PARK AVENUE WORCESTER, MA 01609	NOT RELATED	PC	EXEMPT PURPOSE	2,000
WORCESTER PUBLIC LIBRARY FOUNDATION 3 SALEM SQUARE WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	1,500
Total ▶ 3a				200,051

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WORCESTER YOUTH CENTER 326 CHANDLER STREET WORCESTER, MA 01602	NOT RELATED	PC	EXEMPT PURPOSE	3,500
YWCA CENTRAL MASSACHUSETTS 1 SALEM SQUARE WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	8,334
YOUTHCONNECT SUMMER C/O UNITED WAY 484 MAIN STREET SUITE 300 WORCESTER, MA 01608	NOT RELATED	PC	EXEMPT PURPOSE	2,000
Total ▶ 3a				200,051

TY 2019 General Explanation Attachment**Name:** WEBSTER FIVE FOUNDATION INC**EIN:** 04-3303760**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	RESTRICTIONS OR LIMITATIONS ON AWARDS	990-PF PART XV	<p>THE FOUNDATION RESTRICTS ITS AWARDS TO ORGANIZATIONS THAT MEET ELIGIBILITY GUIDELINES AS SET FORTH IN THE APPLICATION PACKAGE. A SUMMARY OF THOSE GUIDELINES ARE AS FOLLOWS: ELIGIBILITY: THE WEBSTER FIVE FOUNDATION, INC. PROVIDES CHARITABLE CONTRIBUTIONS ONLY TO NOT-FOR-PROFIT, TAX-EXEMPT IRC SECTION 501(C)(3) ORGANIZATIONS. RESTRICTIONS - THE FOUNDATION WILL CONSIDER A REQUEST FROM ORGANIZATIONS THAT ARE BASED IN OR WILL DIRECTLY BENEFIT THE WEBSTER FIVE'S DELINEATED COMMUNITY, IN AMOUNTS RANGING FROM \$1,000 TO \$15,000 - THE FOUNDATION WILL SUPPORT ORGANIZATIONS INVOLVED IN YOUTH SERVICES, SENIOR SERVICES, HEALTH AND SOCIAL SERVICES - THE FOUNDATION WILL CONSIDER THE FOLLOWING TYPES OF SUPPORT: ANNUAL CAMPAIGNS, PROGRAM DEVELOPMENT, AND EMERGENCY FUNDS. THE FOUNDATION WILL NOT SUPPORT INDIVIDUALS, POLITICAL ORGANIZATIONS/CANDIDATES, CHURCHES, SYNAGOGUES OR MOSQUES, FRATERNAL ORGANIZATIONS, EMPLOYMENT UNIONS OR TAX-SUPPORTED ENTITIES. EXCEPTIONS TO THE TAX-SUPPORTED ENTITY EXCLUSION WILL BE CONSIDERED FOR LIBRARY CAPITAL CAMPAIGNS THAT ARE SUPPORTED BY A PRIVATE FUNDING PROGRAM. THE FOUNDATION DISCOURAGES REPEAT REQUESTS FOR FUNDING FOR THE SAME PROGRAM/PROJECT. A REPEAT REQUEST FOR FUNDING SHOULD BE WELL DOCUMENTED. UNUSUAL OR EMERGENCY CIRCUMSTANCES WILL BE CONSIDERED ON A CASE-BY-CASE BASIS.</p>

TY 2019 Other Expenses Schedule**Name:** WEBSTER FIVE FOUNDATION INC**EIN:** 04-3303760**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MA STATE FILING FEES	70	0		70

TY 2019 Other Income Schedule**Name:** WEBSTER FIVE FOUNDATION INC**EIN:** 04-3303760**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
TAX REFUND	498		498

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047 2019
Name of the organization WEBSTER FIVE FOUNDATION INC		Employer identification number 04-3303760

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization
WEBSTER FIVE FOUNDATION INC

Employer identification number
04-3303760

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WEBSTER FIVE CENTS SAVINGS BANK 136 THOMPSON RD WEBSTER, MA 01570	\$ 200,050	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)

Name of organization WEBSTER FIVE FOUNDATION INC	Employer identification number 04-3303760
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Part II			
Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

04-3303760

Use duplicate copies of Part III if additional space is needed.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)