Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public

▶ Go to www irs.gov/Form990PF for instructions and the latest information.

2019
Open to Public Inspection

For	calendar year 2019 or tax year beginning		, and ending		
Nai	me of foundation			A Employer identification	number
	SALEM FIVE CHARITABLE FOUND			04-3342405	
	mber and street (or P O box number if mail is not delivered to street as	idress)	Room/suite	B Telephone number	
	210 ESSEX STREET			978-745-55	55
-	ty or town, state or province, country, and ZIP or foreign po SALEM,MA 01970	ostal code		C If exemption application is p	ending, check here
GC	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
	Final return	Amended return		9 -	
	Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	Check type of organization: X Section 501(c)(3) ex	empt private foundation	ОЦ	E If private foundation sta	tus was terminated
		Other taxable private founda	ition 04	under section 507(b)(1)	(A), check here
	air market value of all assets at end of year J Accountir		Accrual	F If the foundation is in a	
		her (specify)		under section 507(b)(1)	(B), check here
_	\$ 11,274,746. (Part I, column	in (a), must be on cash bas		 -	1 (4)
	Art I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	1,558,377.		N/A ·	
	2 Check I if the foundation is not required to attach Sch. B			<u> </u>	
	3 Interest on savings and temporary cash investments	8,811.	8,811.		STATEMENT 1
	4 Dividends and interest from securities	143,890.	143,890.		STATEMENT 2
	5a Gross rents				1 4
	Net rental income or (loss)	465 000		,	
<u>ه</u>	62 Net gain or (loss) from sale of assets not on line 10 . Gross sales price for all 2071 962	465,803.		<u> </u>	<u> </u>
evenue	b Gross sales price for all 2,074,862.	- -	1 014 151	·	
Rev	-1 /1 /1	7 - "	1,014,151.	F RECE!	ED
_	o Net Short-term capital gain	7 . L	<u>1</u> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 m
	9 Income modifications Gross sales less returns			MAY 11	2020 (3)
	10a and allowances			181 MAI	12
	b Less Cost of goods sold c Gross profit or (loss)		7		LIT
	11 Other income			OG555	 , ∪
	12 Total Add lines 1 through 11	2,176,881.	1,166,852.		ů
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
es	16a Legal fees				
pense	b Accounting fees				
ĒX	AL C LITHER DIVIECCIONAL ISSES 50 LINE 1 1 3 1	36,909.	36,909.		0.
.U ministrative	18 Taxes			· · · · · · · · · · · · · · · · · · ·	
nst	19 Depreciation and depletion		·		
					
/UZU AAdm	21 Travel, conferences, and meetings		<u> </u>		ļ
d and	22 Printing and publications	570	0.		570.
F	<u>-1</u>	570.	0.		570.
11.11 eratir	24 Total operating and administrative	37,479.	36,909.		570.
ő	expenses Add lines 13 through 23 25 Contributions, gifts, grants paid	465,030.		and the Comment De Andrea	465,030.
		403,030	THE PROPERTY NAME OF \$150-15	The part of the part of the State of the Sta	100,000.
(No-1-4)	26 Total expenses and disbursements. Add lines 24 and 25	502,509.	36,909.		465,600.
· -	27 Subtract line 26 from line 12;	202,303.	20,3030	7	
ب	a Excess of revenue over expenses and disbursements	1,674,372.	a		
ċ	b Net investment income (if negative, enter -0-)		1,129,943.		
_				N/A	

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2019.03040 SALEM FIVE CHARITABLE FOU 13525_J1

For	m 99	00-PF (2019) SALEM FIVE CHARITABLE FO			3342405 Page 2
Þ	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
<u>'</u> -	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	50,913.	75,330.	75,330.
	l 2	Savings and temporary cash investments	706,054.	405,792.	405,792.
	1	Accounts receivable			
	ľ	Less, allowance for doubtful accounts			
	۱,	Pledges receivable	,	79. p el	en en gran an agent a
	"	Less: allowance for doubtful accounts			
	_ ا				
	5	Grants receivable			
	8	Receivables due from officers, directors, trustees, and other			
		disqualified persons .			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
E	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Å	10a	Investments - U.S and state government obligations			
	Ь	Investments - corporate stock STMT 6	4,916,420.	8,850,062.	10,780,191.
	_	Investments - corporate bonds			
	l	Investments - land, buildings, and equipment basis			
	' '		··· — — — —	···	
	۱.,	Less accumulated depreciation			
	12	investments - mortgage loans			
	13	Investments - other			 -
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ► OTHER ASSETS)	9,019.	13,433.	13,433.
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	5,682,406.	9,344,617.	11,274,746.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue	.,		
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Š	21	Mortgages and other notes payable			
Ĺã	ı				
	22	Other liabilities (describe	······		
		7	0.	0.	
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30			
ě	24	Net assets without donor restrictions			
Net Assets or Fund Balance:	25	Net assets with donor restrictions			
9	Ì	Foundations that do not follow FASB ASC 958, check here 🕨 🗶	Ì		}
Š		and complete lines 26 through 30			
ř	28	Capital stock, trust principal, or current funds	0.	0.	i .
ls c	27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	a l
se	28	Retained earnings, accumulated income, endowment, or other funds	5,682,406.	9,344,617.	j
As	29	Total net assets or fund balances	5,682,406.	9,344,617.	
ě	20	Total liet assets of fully balances	3,002,2001	3/022/0	
_	١,,	Total liabilities and not asset that he lands	5,682,406.	9,344,617.	
=		Total liabilities and net assets/fund balances		<u> </u>	<u></u>
P	art	Analysis of Changes in Net Assets or Fund Bal	ances		
_					
		net assets or fund balances at beginning of year - Part II, column (a), line 2	9		F 600 406
	•	st agree with end-of-year figure reported on prior year's return)		1	5,682,406.
2	Ente	r amount from Part I, line 27a		2	1,674,372.
3	Othe	r increases not included in line 2 (itemize)	SEE STA	ATEMENT 5 3	1,987,839.
4	Add	lines 1, 2, and 3		4	9,344,617.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	umn (b), line 29	6	9,344,617.
					Form 990-PF (2019)

923511 12-17-19

	nd Losses for Tax or					TTACHE		PATEMI	
	e kınd(s) of property sold (fo house; or common stock, 20:		ate,) P	- Purc - Dona	hase	(mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
a	···			1					
b									
<u>c</u>				ļ					
<u>d</u>		_		├					
<u>e_</u>	(f) Degree etten allaured	- (2) (2)	et er ether beer	┸			(h) C	our or (loss	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(ain or (loss (f) minus (
a_	<u> </u>	_							
<u> </u>		_							
<u>c</u>									
2 074 060			1 060 71						1 014 151
2,074,862.	gain in column (h) and owner		1,060,71	++		<i>(1)</i> 0	(O		1,014,151
Complete only for assets showing	(j) Adjusted basis		xcess of col. (I)	\dashv		còl. (k	c), but n	ol. (h) gain iot less thai	n -0-) or
(i) FMV as of 12/31/69	as of 12/31/69		r col. (j), if any	Í		Ĩ	osses	(from col. (h))
a									
b									
c_									
<u>d</u>									1 014 151
<u> </u>				. 					1,014,151
Capital gain net income or (net capi	If gain, also	enter in Part I, line ter -0- in Part I, line	: 7 - 7	}	2				1,014,151
	•		e <i>1</i>	7					
Net short-term capital gain or (loss) if gain, also enter in Part I, line 8, co	•	(5) and (6):		λl					
If (loss), enter -0- in Part I, line 8	. ,				3			N/A	··
Part V Qualification Un	der Section 4940(e)	for Reduced	Tax on Net	Inve	stm	ent Incom	10		
or optional use by domestic private for	oundations subject to the sec	tion 4940(a) tax on	i net investment in	come.)				
section 4940(d)(2) applies, leave this	part blank.								
		lo amount of any va	oor in the bace nor	1043					Yes X
/as the foundation liable for the sectio "Yes," the foundation doesn't qualify i			-	iou					Ten
Enter the appropriate amount in ea				ntries.					
(a) Base period years	(b)			(c)				Distrib	(d) oution ratio
Calendar year (or tax year beginning	in) Adjusted qualifyin		Net value of no					(col. (b) div	rided by col. (c))
2018		588,477.	ļ			2,726.			.07191
2017		591,436.				6,420.	<u> </u>		.10364
2016		541,401. 536,216.	ļ	3	, <u>∠ 3</u>	1,927. 4,305.			.12793
2015 2014		458,194.				3,656.			.12046
		200,202.			, , ,	-,			
Total of line 1, column (d)							2		.57784
Average distribution ratio for the 5	year base period divide the t	total on line 2 by 5.	.0, or by the numbe	er of y	ears				
the foundation has been in existence	e if less than 5 years						3_		.1155
Enter the net value of noncharitable	-use assets for 2019 from Pa	rt X, line 5					4		8,098,462
M. H. J. L							ا ۔ ا		035 036
Multiply line 4 by line 3							5		935,939
Enter 1% of net investment income	/1% of Part I line 97h)						6		11,299
Cittor 170 of not investment income	(170 OFF art 1, MIG 270)						┌┷┥		
Add lines 5 and 6							7		947,238
Enter qualifying distributions from F	Part XII, line 4						8		465,600
Enter qualifying distributions from F If line 8 is equal to or greater than li See the Part VI instructions.		l, line 1b, and comp	plete that part usin	ıg a 1%	% tax r	ate	8		465,600

rm 990-PF (2019) SALEM FIVE CHARITABLE FOUNDA Part VI Excise Tax Based on Investment Income (Section 4	940(a), 4940(b), 49			42405 instruc		Page 4
)	10 000	-		,
la Exempt operating foundations described in section 1040(d)(2), check here		,		•		
Date of ruling or determination letter: (attach copy of letter i	<u> </u>	118)	_		2,5	a a
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	ſ	1		4,5 .	,,,
of Part I, line 27b	or 49/ of Dort I line 19 col	/b)	بيب. اه اه د	the way was	المنتاب	er.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only		(0)	2			0.
	ly, others, enter -0-)		3	2	2,5	
Add lines 1 and 2	hu others anter ()		4		<u> </u>	0.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on			5	2	2,5	
Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	•				<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>
Credits/Payments,	ا مما	28,605.				
a 2019 estimated tax payments and 2018 overpayment credited to 2019		0.				
Exempt foreign organizations - tax withheld at source	8b	0.				
Tax paid with application for extension of time to file (Form 8868)	BC	0.				
Backup withholding erroneously withheld	6d	0.	_		0 6	Λ.E.
Total credits and payments. Add lines 6a through 6d			7		8,6	
Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is	s attached	_ ا	8			0.
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	A		<u> </u>	0.0
Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpa	iid .	, > [10		6,0	
Enter the amount of line 10 to be Credited to 2020 estimated tax	6,006.	Refunded 🟲	11			0.
art VII-A Statements Regarding Activities						
a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it particip	ate or intervene	ın		Yes	_
any political campaign?				1a		X_
Did it spend more than \$100 during the year (either directly or indirectly) for political p	ourposes? See the instruction	ons for the defini	ition	<u>_1h</u>		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	pies of any materials publis	hed or				
distributed by the foundation in connection with the activities.				<u> </u>		
c Did the foundation file Form 1120-POL for this year?				1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durin	ig the year					
(1) On the foundation > \$ (2) On foundation mana	agers. ► \$	0.		7 55	+77	, ,,,,
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	penditure tax imposed on f		-	ĺ		İ
managers. ► \$ 0.	•			1	l	l
llas the foundation engaged in any activities that have not previously been reported to	the IRS?			2		X
If "Yes," attach a detailed description of the activities.						
Has the foundation made any changes, not proviously reported to the IRS, in its govern	ning instrument, articles of	incorporation of	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	X	
Did the foundation have unrelated business gross income of \$1,000 or more during the				4a		х
	o yearr		N/A			
o If "Yes," has it filed a tax return on Form 990-T for this year?	ugar?		,	5		X
Was there a liquidation, termination, dissolution, or substantial contraction during the	year r			"		
If "Yes," attach the statement required by General Instruction T	ind oither!				1	
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfi	ieu enner.			ľ		٠.
By language in the governing instrument, or	4-4		lave			
By state legislation that effectively amends the governing instrument so that no mani-	datory directions that conti	ict with the state	iaw		$\overline{\mathbf{x}}$	
remain in the governing instrument?				6	X	-
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II, col. (c), a	nd Part XV		7	 ^	
a Enter the states to which the foundation reports or with which it is registered. See instr	ructions			1		
MA	- MARION			_		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General (or de	esignate)	 '	-		
DILLING GROWER IS TES TO THE L'HIGS THE TOURINGHISH HITHISHED & COPY OF TOTH 350°FF TO	the atterney denotal (of the	o.g.iato/		8b	x	
				"	-	
of each state as required by General Instruction G? If "No," attach explanation	of section 4942(1)(3) or 40	42(1)(5) for cale	ndar			
of each state as required by <i>General Instruction G?</i> If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning		14?(j)(5) for cale	ndar			X
of each state as required by General Instruction G? If "No," attach explanation	* complete Part XIV		ndar	9		X

Part IV Capital Gains and Los	sses for Tax on Investment Income			
(a) List and	describe the kind(s) of property solo ick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(1110.; day; ji) (1110.; day; ji.)
1a PFIZER INC			P	03/04/1604/18/19
b PFIZER INC			P	10/26/1604/18/19
c PFIZER INC			P	12/28/1604/18/19
d PFIZER INC			P	07/31/1704/18/19
e PFIZER INC		-	P	12/26/17/04/18/19
f MONDELEZ INTL			P	01/24/1308/05/19
q MONDELEZ INTL			P	03/30/1608/05/19
h MONDELEZ INTL			P	10/26/1608/05/19
MONDELEZ INTL			P	09/01/1308/05/19
MONDELEZ INTL			P	12/30/1308/05/19
k MONDELEZ INTL			P	12/17/1508/05/19
MONDELEZ INTL			P	01/29/1608/05/19
m MONDELEZ INTL			P	01/24/1308/05/19
n MONDELEZ INTL			P	07/31/1708/05/19
0 MONDELEZ INTL			P	12/26/17/08/05/19
	(f) Depreciation allowed	(g) Cost or other basis		n) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale		plus (1) minus (g)
a 34,686.		24,761.		9,925.
b 21,022.		16,190.		4,832.
c 19,971.		15,396.		4,575.
d 15,766.		12,410.		3,356.
e 46,240.		39,995.		6,245.
1 21,645.		11,168.		10,477.
g 8,117.		4,189.		3,928.
h 18,940.		14,671.		4,269.
8,117.		4,176.		3,941.
10,823.		5,656.		5,167.
k 20,563.		16,267.		4,296.
5,411.		4,156.		1,255.
m 9,362.	-	4,831.		4,531.
n 2,706.		2,218.		488.
o 28,410.		22,583.		5, <u>827.</u>
Complete only for assets showin	g gain in column (h) and owned by t		(I) Lo	sses (from col. (h))
(ı) 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		of col. (h) gain over col. (k), not less than "-0-")
a				9,925.
b				4,832.
c				4,575.
d				3,356.
e				6,245.
f				10,477.
a				3,928.
h				4,269.
1				3,941.
<u>'</u>				5,167.
<u>, </u>				4,296.
1				1,255.
m				4,531.
m n				488.
<u>n</u>				5,827.
0	. If your also area	r in Part I line 7		5,02,7
2 Capital gain net income or (net ca	pital loss) { if gain, also enter "-(r in Part I, line 7 0-" in Part I, line 7	2	
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		nd (6):		
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		<u> </u>	3	
				•

The All IV	sses for Tax on Investment Income	11101 01 05		
	describe the kind(s) of property solo	t. e.g., real estate.	(b) How acquired	(c) Date acquired (d) Date sold
	ick warehouse; or common stock, 20		P - Purchase D - Donation	(mo, day, yr) (mo., day, yr.)
1a ORACLE			P	10/26/1608/23/19
b ORACLE			P	06/19/0608/23/1
c ORACLE			P	09/09/1308/23/1
d ORACLE			P	09/01/1308/23/1
e ORACLE				12/17/1508/23/1
† ORACLE				09/01/1308/23/1
g ORACLE	·····			09/01/1308/23/1
h ORACLE			P	01/29/1608/23/1
ORACLE			P	09/01/1308/23/1
ORACLE			P	09/30/1308/23/1
k ORACLE		· · · · · · · · · · · · · · · · · · ·	P	03/28/1408/23/1
ORACLE			P	07/31/1708/23/1
			P	$\frac{07/31/1700/23/1}{12/26/1708/23/1}$
m ORACLE				09/28/18/08/23/19
n SCHWAB CHARLES			P	09/28/1808/23/1
O SCHWAB CHARLES				
(e) Gross sales price	(1) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) ilus (f) minus (g)
a 26,846.		18,920.		7,926
b 26,846.		7,256.		19,590
c 1,342.		811.		531
d 16,108.		10,597.		5,511
e 32,216.		22,374.		9,842
1 2,685.		1,748.		937
g 8,054.		5,142.		2,912
h 4,027.		2,620.		1.,407
5,369.		3,337.		2,032
5,369.		3,210.		2,159
k 5,370.		3,892.		1,478
10,739.		10,233.		506
m 34,095.		30,417.		3,678
n 14,629.		20,080.		<5,451.
0 10,878.		14,933.		<4,055.
	ig gain in column (h) and owned by t		(I) Los	sses (from col. (h))
(ı) 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	Gains (excess of	of col. (h) gain over col. (k), lot less than "-0-")
2				7,926
a h				19,590
<u> </u>				531
C d				5,511
<u>d</u>				9,842
<u>e</u>				937
				2,912
g				1,407
<u>h</u>	-			2,032
<u> </u>				2,032
<u> </u>				1,478
<u>K</u>				506
<u> </u>				3,678
m			 	<5,451.
n			-	
0				<4,055.
2 Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-0	r in Part I, line 7)-" in Part I, line 7	2	
If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c).	`		
If (loss), enter "-0-" in Part I, line	<u> </u>		3	

B N/	ses for Tax on Investment Income	1110. 01 00		
- Capital California	describe the kind(s) of property solo	i. e.g . real estate.	(b) How acquired	(c) Date acquired (d) Date sold
	ick warehouse; or common stock, 20		P - Purchase D - Donation	(mo., day, yr.) (mo., day, yr.)
1a SCHWAB CHARLES				09/28/1808/23/19
b APPLE			P	02/28/1110/31/19
c APPLE			P	02/04/1310/31/19
d APPLE				08/29/1510/31/19
e APPLE			P	05/30/1510/31/19
f APPLE			P	03/28/1410/31/19
q APPLE			D	07/24/1710/31/19
h APPLE			P	12/20/1810/31/19
AVERY DENNISON	CORP		D	10/28/1910/31/19
BANK MARIN BCP			D	10/28/1910/31/19
k CONSTRUCTION PA	ARTNERS INC	···	D	10/28/1910/31/19
DOLLAR GEN CORI			D	10/28/1910/31/19
m DOLLAR GEN CORI				10/28/1910/31/19
n LIBERTY BROADBA			D	10/28/1910/31/19
O LIBERTY BROADBA				10/28/1910/31/19
··· =	(f) Depreciation allowed	(g) Cost or other basis) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale		plus (f) minus (g)
a 50,639.		69,496.		<18,857.>
ы 31,691.		6,346.		25,345.
c 34,128.		9,180.		24,948.
d 42,661.		11,301.		31,360.
e 8,532.		2,665.		5,867.
48,755.		12,981.		35,774.
g 213,791.		57,457.		156,334.
h 34,846.		23,545.		11,301.
88,375.		39,915.		48,460.
65,190.		30,258.		34,932.
k 98,525.		48,203.		50,322.
80,767.		34,554.		46,213.
m 66,221.		29,714.		36,507.
n 38,282.		14,966.		23,316.
0 7,727.		2,664.		5,063.
	g gain in column (h) and owned by t		(I) Los	sses (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	Gains (excess	of col. (h) gain over col. (k), iot less than "-0-")
a				<18,857.>
b	·			25,345.
C				24,948.
d				31,360.
e				5,867.
1				35,774.
·				156,334.
h B				11,301.
1				48,460.
				34,932.
k				50,322.
1				46,213.
<u>'</u> m				36,507.
				23,316.
0				5,063.
		. D. 41 loss 7		
2 Capital gain net income or (net ca		r in Part I, line 7)-" in Part I, line 7	2	
3 Net short-term capital gain or (lo: If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		od (6).	2	
11 (1055), citter -0- 111 Fatt 1, 1111e	<u> </u>		3	

OF

SALEM FIVE CHARITABLE FOUNDATION, Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e g, real estate, (d) Date sold (mo., day, yr.) (ino., day, yr.) 2-story brick warehouse; or common stock, 200 shs MLC Co. D - Donation D 10/28/19|10/31/19 1a LIBERTY BROADBAND D 10/28/19|10/31/19 b LIBERTY BROADBAND D 10/28/19|10/31/19 c LIBERTY BROADBAND d PERFICIENT INC 10/28/1910/31/19 D 10/28/1910/31/19 D e PERFICIENT INC P 03/25/1110/31/19 f THERMO FISHER 11/17/0810/31/19 q THERMO FISHER P P 09/01/13|10/31/19 h THERMO FISHER P 12/17/1510/31/19 THERMO FISHER P 12/11/12/10/31/19 THERMO FISHER 10/26/1610/31/19 THERMO FISHER ₽ 12/26/1710/31/19 P THERMO FISHER 10/28/1910/31/19 m THERMO FISHER D 10/28/1910/31/19 n UBIQUITI INC D 10/28/19/10/31/19 D O UBIQUITI INC (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 65,793. 29,965. 35,828. a 25,755.12,855. 12,900. b 8,060. 15,346. 23,406. C 15,293. 23,417. 8,124. d 43,266. 62,205. 105,471. 18,300. 22,351 4,051 338. 2,642. 2,980. g 12,957. 52,152. 39,195. 21,579. 26,103. 47,682. 4,896. 22,351. 17,455. 14,753. 15,048. 29,801. 20,933. 59,603. 38,670. 72,792. 120,683. 47,891. m 4,212. 5,425. 9,637. n 48,837. 11,548. <u>60,385.</u> 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (I) but not less than "-0-") (i) F M V. as of 12/31/69 as of 12/31/69 over col (j), if any 35,828. a 12,900. b 8,060. C 15,293. d 62,205. 18,300. 2,642. g 39,195. h 26,103. 17,455. 14,753. 20,933. 72,792. m 5,425. n 11,548. 0 If gain, also enter in Part I, line 7 (If (loss), enter "-0-" in Part I, line 7 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

INC.

Part I	V Capital Gains and Los	ses for Tax on Investment Income				
	(a) List and	describe the kind(s) of property so ick warehouse; or common stock, 2	old, e.g., real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
1a OR	ACLE			D	08/23/19	12/26/17
b						
С						
d						
е					ļ	
ţ						
g						
h					ļ. .	
1						
k						
m						<u> </u>
n					 	ļ
0			T		150	1
(0	e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e)) Gain or (loss) plus (f) minus (g)	
a	16,913.		5,194.			11,719.
b						
С						
d						
е						.
<u>t</u>						
g			<u> </u>			
h			<u> </u>			
1						
		· · · · · · · · · · · · · · · · · · ·				
m						
n						
0			the foundation on 19/21/60		// //-	
Com	piete only for assets snowin	ig gain in column (h) and owned by		(I) LO Gains (excess	sses (from col. (h) of col (h) gain ove) er col. (k).
(r)	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (I) over col. (I), If any	but (not less than "-0-")	
a						11,719.
b			<u> </u>			
С				 .		
d						
e						
<u> </u>	<u> </u>		 			
g			<u> </u>			
h			 			
1			 		 	
			 			
<u>k</u>	· -					
<u> </u>						
m			 			
n o						
0						
2 Capita	al gain net income or (net ca	apital loss) { If gain, also ent If (loss), enter "	er in Part I, line 7 -0-" in Part I, line 7	_2	1,	014,151.
3 Netsi	hort-term capital gain or (los	ss) as defined in sections 1222(5) a	, I			
	n, also enter in Part I, line 8, ss), enter "-0-" in Part I, line 8		j	3	N/A	

Pe	rt VII-A Statements Regarding Activities (continued)			
	Continued)	T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1.00	
• • •	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
19	•	 -''-	-	 -
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1	1 1	x
40	If "Yes," attach statement. See instructions	12	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Λ.	
	Website address ► N/A The books are in care of ► WILLIAM SMITH Telephone no. ► 978-72	Λ E	200	
14			300	
	Located at ► 210 ESSEX STREET, SALEM, MA ZIP+4 ► 01	9/0		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fieu of Form 1041 - check here		. ▶	
	and enter the amount of tax-exempt interest received or accrued during the year		/A	•
16	At any time during calendar year 2019, did the foundation have an interest in oi a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	18	L	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the			
	foreign country	l		
Pa	rt 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
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	l		1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(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)?			
	(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)	١,	j	
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	37/3	1b		
		···		
	Organizations relying on a current notice regarding disaster assistance, check here	1		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1-4-		$\overline{\mathbf{x}}$
•	before the first day of the tax year beginning in 2019?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	İ		
	6d and 6e) for tax year(s) beginning before 2019?	1	}	
	If "Yes," list the years \(\bigs_{	1		
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			ĺ
	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.) N/A	2b		 ,
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		
	<u> </u>	ľ		1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
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	1]	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		X
_			n-PF	(2019)

orm 990-PF (2019) SALEM FIVE CHARITABLE FOU			<u>04-33424</u>	05 <u>Page 6</u>
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contin}	ued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	; }
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>		es X No I.	
(4) Provide a grant to an organization other than a charitable, etc., organization			,	u n r star star star
4945(d)(4)(A)? See instructions	acsoribed in section	, LJ v	es X No	. a (, 44
	or advantional nurnaces, or fe		58 <u>23</u> NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or it		es X No	
the prevention of cruelty to children or animals?			8 A NO	. 35 6 .
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	n Regulations	N7 / N	
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	[/A Y	es L No	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on			
a personal benefit contract?		Yo	es X No _	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal benefit contract?		[_	вь Х
If "Yes" to 6b, file Form 8870.			Γ	4
7a At any time during the tax year, was the foundation a party to a prohibited tax si	nelter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribut	table to the transaction?		N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				
excess parachute payment(s) during the year?	,,,		es X No	
Part VIII Information About Officers, Directors, Truste	es. Foundation Mar			
Paid Employees, and Contractors				
List all officers, directors, trustees, and foundation managers and th	eir compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred	account, other allowances
	to position	enter-o-)	compensation	anovances
сте статемент 7		٥.	0.	0.
SEE STATEMENT 7		- 0.		·
				•
				·
				1
			ļ	
			}	{
				<u> </u>
Compensation of five highest-paid employees (other than those incl		enter "NONE."	1 741	T
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				
		T		
		İ		
				
	<u> </u>	 	 	
		}	ļ]
*. AI aumhor of other ampleuses and ause 050,000				
otal number of other employees paid over \$50,000				
			Form	990-PF (2019)

Part VIII Information About Officers Directors Trustees Foundation Managers Highly	-3342	405	Page 7
Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		() Comm	
(a) Name and address of each person paid more than \$50,000 (b) Type of service NONE		(c) Comp	ensation
NONE	ļ		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	Τ		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses	
1 NONE			
]		
			0.
2	_		
	4		
	+	·	
3	-		
	┪		
4	 		
	<u> </u>		
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 NONE	┥		
	-		0.
2	+		
<u> </u>	7		
	1		
All other program-related investments. See instructions.			
3 NONE	_		
	4		
	-		
	-		
	┥		0.
Total. Add lines 1 through 3	 		0.
		m 990-P	

IP.	artX■ Minimum Investment Return (All domestic foundations must complete this part Foreign foun	idations,	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	8,129,562.
b	Average of monthly cash balances	1b	81,001.
c	Fair market value of all other assets	1c	11,226.
d	Total (add lines 1a, b, and c)	1d	8,221,789.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,221,789.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	123,327.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,098,462.
в	Minimum investment return. Enter 5% of line 5	6	404,923.
IP.	art XII Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	404,923.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	22,599.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	382,324.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	382,324.
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	382,324.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	465,600.
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	465,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	_
	income. Enter 1% of Part I, line 27b	5	0.
в	Adjusted qualifying distributions Subtract line 5 from line 4	6	465,600.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section
	4940(e) reduction of tax in those years		

Form 990-PF (2019)

Page 9

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,			, ,	200 201
line 7				382,324.
2 Undistributed income, if any, as of the end of 2019			0	, -
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 285, 634.				
b From 2015 381,817.				
c From 2016 343,070.				
d From 2017 376,536.				
e From 2018 156,512.	ľ			
f Total of lines 3a through e	1,543,569.			
4 Qualifying distributions for 2019 from	e			
Part XII, line 4 [·] ► \$ 465,600.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior			-	<u> </u>
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				····
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount			·	382,324.
e Remaining amount distributed out of corpus	83,276.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as		ч		
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,626,845.			
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 instr.			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	285,634.			
9 Excess distributions carryover to 2020	4 44 44]
Subtract lines 7 and 8 from line 6a	1,341,211.			
10 Analysis of line 9;				
a Excess from 2015 381,817.				
b Excess from 2016 343,070.				
c Excess from 2017 376,536.				
d Excess from 2018 156,512.				
e Excess from 2019 83,276.	<u></u>		<u> </u>	5 000 PE (0040)

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Form 990-PF (2019) SALEM F	IVE CHARITA	BLE FOUNDAT	ION, INC.	04-33	42405 Page 10
Part XIV Private Operating F			A, question 9)	N/A	/
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ └		
b Check box to indicate whether the foun		ig foundation described in		4942(J)(3) of 4942	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(a) Tatal
income from Part I or the minimum	(4) 2019	(0) 2010	(6) 2017	(0) 2010	(e) Total
investment return from Part X for					
each year listed		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 			
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4, for each year listed 				}	
d Amounts included in line 2c not			/		
used directly for active conduct of		X			
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			<u> </u>		
alternative test relied upon:					
a "Assets" alternative test - enter. (1) Value of all assets					
, ,				<u> </u>	
(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	I)				
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)			,		Λ
(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				<u> </u>	
(4) Gross investment income		<u></u>			L
Part XV Supplementary Info			the foundation	had \$5,000 or moi	re in assets
at any time during t	he year-see instri	uctions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed i	nore than \$5,000). (See so	ection 507(d)(2))			
NONE				 -	
b List any managers of the foundation wh			or an equally large portion	on of the ownership of a pa	irtnership or
other entity) of which the foundation ha	is a 10% or greater interes	SI.			
NONE					
2 Information Regarding Contribut					
Check here I if the foundation of					ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	ber or email address of th	e person to whom applica	ations snould be address	sea	
SEE STATEMENT 8					
b The form in which applications should l	oe submitted and informat	ion and materials they sh	ould include.		
		,			
c Any submission deadlines:	-			 -	
A Annual and a second a second and a second	la avala de la company	danaga abasabah kata	lando of metatrates	ather feeters:	
d Any restrictions or limitations on award	s, such as by geographica	ii areas, charitadie fields,	kinas oi institutions, or (JUICH MACHOES.	

Tare Av Cappionionally information	(continued)			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient Name and address (home as humanes)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year		Ì		
	1			
SEE ATTACHMENT	NOT RELATED	PC	CHARITY EXEMPT PURPOSE	
ON FILE	NOT KDBATED	ľ	DIRECTIF BEBEFF TORFOOD	
AVAILABLE UPON REQUEST				465,030.
		<u> </u>		
		 	 	
	İ		1	
·				
		İ		
•				
			1	
		 	<u> </u>	
·				465,030.
Total	<u> </u>		> 3a	403,030.
b Approved for future payment				
NONE			1	
	· · · · · · · · · · · · · · · · · · ·	ļ		
		ļ		
	<u> </u>			
	1	ì		
Total		<u> </u>	▶ 3b	0.

Form 990-PF (2019)

iter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
not gross aniconic anicos cine visc macarca.	(a) Business	(b) Amount	Exclu-	(d) Amount	Related or exempt function income
Program service revenue.	code	Amount	code	Amount	
<u> </u>			+ +		
b	1 1				· · · · · ·
<u> </u>	i 1	· · · · · · · · · · · · · · · · · · ·			
d			+		
e	-		+		
g Fees and contracts from government agencies	-			* *	
Membership dues and assessments	<u> </u>			, -:: :-	
Interest on savings and temporary cash					
investments			14	8,811.	
Dividends and interest from securities			14	143,890.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	465,803.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_				
b	_				
C	_				
d	-				
e			_	C10 F04	
Subtotal. Add columns (b), (d), and (e)	ļl	0	•	618,504.	618,50
Total Add line 12, columns (b), (d), and (e)				13	010,50
ee worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xempt Pu	urposes	
ine No. Explain below how each activity for which in	rome is renorted in	column (e) of Part XVI	I-A contribute	d importantly to the accomp	plishment of
the foundation's exempt purposes (other tha			71 0011111111111	a mportantly to the accomp	
				· · · · · · · · · · · · · · · · · ·	-
T					
					- <u>-</u>

1	5 (00 to)	TTUE CUIDIMIDI	a normina mrov	TYG 04 3	242405	Dawa 40
orm 990-P Part XV		FIVE CHARITABLE garding Transfers to a		d Relationships With Nonc	3342405 haritable	Page 13
	Exempt Organ					
Did th	e organization directly or indi	rectly engage in any of the followin	g with any other organization	described in section 501(c)		Yes No
(other	than section 501(c)(3) organ	izations) or in section 527, relating	to political organizations?			
a Transf	icrs from the reporting founda	ition to a noncharitable exempt org	janization of,			
(1) C	ash				1a(1)	X
(2) 0	ther assets				1a(2)	X
Other	transactions:					
(1) S	ales of assets to a noncharital	ble exempt organization			1b(1)	<u> </u>
(2) P	urchases of assets from a noi	ncharitable exempt organization			1b(2)	X
(3) R	ental of facilities, equipment,	or other assets			1b(3)	X
(4) R	eimbursement arrangements				1b(4)	X
(5) L	oans or loan guarantees				1b(5)	X X
		mbership or fundraising solicitatio			1b(8)	X
	• • • • • •	iling lists, other assets, or paid em		ays show the fair market value of the go	1c	X
		other assets, or services received. (c) Name of noncharitable		in any transaction or sharing arrangem (d) Description of transfers, transaction		ngements
ĺ		N/A				
			<u></u>			
				ļ ————————————————————————————————————		
					<u> </u>	
				 		_
ın sec	•	l tly affiliated with, or related to, one n 501(c)(3)) or in section 527?	or more tax-exempt organiza	ations described	Yes	X No
, ii 165	(a) Name of org		(b) Type of organization	(c) Description of re	lationship	
	N/A	,	, , ,		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	-1/ 44					
			 			

		penalties of perjury, I declare that I have exampled this							May the IRS discuss this
Sign Here	and be	lief, it is true, correct, and complete Declaration of pre	parer (other than tax		sed on all informat	CLEASE	i		return with the preparer shown below? See
	Sign	ature of officer or trustee		Date [*]		Title			
		Print/Type preparer's name	Preparer's sign	ature	•	Date	Check	ıf F	PTIN
		HARRY A. KALAJIAN,					self- employe	d	
Paid		JR., CPA	HARRY A	. KAI	AJIAN	05/04/20			P00464296
Prepa Use C		Firm's name ► WOLF & COMPA	NY, P.C	•			Firm's EIN	▶ 04	-2689883
			EET, 219 02110	ST FL	OOR		Phone no	617	-439-9700

Form 990-PF (2019)

Sign Here

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

2019

Name of the organization

Employer identification number

S	ALEM FIVE CHARITABLE FOUNDATION, INC.	04-3342405
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990 EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, ,	n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions
General Rule		
	ion filing Form 990, 990-EZ, or 990 PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules	,	
sections 509(a)(1 any one contribu	ion described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support I) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 16a itor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amo EZ, line 1 Complete Parts I and II	, or 16b, and that received from
year, total contri	non described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, ente purpose Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from ns exclusively for religious, charitable, etc., purposes, but no such contributions totaled in the result that the total contributions that were received during the year for an exclusively religion complete any of the parts unless the General Rule applies to this organization because the contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box us, charitable, etc ,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its it the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF)	

Schedule B (Form 990, 990-EZ, or 990 PF) (2019) Page 2 Name of organization Employer identification number SALEM FIVE CHARITABLE FOUNDATION, INC. 04-3342405 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) (c) Type of contribution No. Name, address, and ZIP + 4 Total contributions 1 SALEM FIVE CENTS SAVINGS BANK Person Payroll 40,000. 210 ESSEX STREET Noncash (Complete Part II for SALEM, MA 01970 noncash contributions) (a) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 2 SALEM FIVE CENTS SAVINGS BANK Person Payroll 144,448. 211 ESSEX STREET Noncash (Complete Part II for noncash contributions) SALEM, MA 01971 (c) (d) (a) Name, address, and ZIP + 4 No. Total contributions Type of contribution 3 SALEM FIVE CENTS SAVINGS BANK Person Payroll

	212 ESSEX STREET SALEM, MA 01972	\$ 54,791.	Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SALEM FIVE CENTS SAVINGS BANK 213 ESSEX STREET SALEM, MA 01973	\$ <u>174,335.</u>	Person Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	SALEM FIVE CENTS SAVINGS BANK 214 ESSEX STREET SALEM, MA 01974	\$ <u>391,370.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	SALEM FIVE CENTS SAVINGS BANK 215 ESSEX STREET	\$9,680.	Person Payroll Noncash X

noncash contributions)

Name of organization Employer identification number 04-3342405 SALEM FIVE CHARITABLE FOUNDATION, INC. Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 7 SALEM FIVE CENTS SAVINGS BANK Person Payroll 60,658. 216 ESSEX STREET Noncash (Complete Part II for SALEM, MA 01976 noncash contributions) (c) (d) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 8 SALEM FIVE CENTS SAVINGS BANK Person Payroll 81,320. Noncash 217 ESSEX STREET (Complete Part II for noncash contributions) SALEM, MA 01977 (d) (c) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 9 SALEM FIVE CENTS SAVINGS BANK Person Pavroll 66,682. 218 ESSEX STREET Noncash (Complete Part II for SALEM, MA 01978 noncash contributions) (a) (b) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 10 SALEM FIVE CENTS SAVINGS BANK Person Payrol! 219 ESSEX STREET 87,968. Noncash (Complete Part II for noncash contributions) SALEM, MA 01979 (d) (c) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 11 SALEM FIVE CENTS SAVINGS BANK Person Payroli 220 ESSEX STREET 38,230. Noncash (Complete Part II for SALEM, MA 01980 noncash contributions) (c) (d) (a) (b) Total contributions Type of contribution No. Name, address, and ZIP + 4 12 SALEM FIVE CENTS SAVINGS BANK Person Payroll 7,716. Noncash X 221 ESSEX STREET (Complete Part II for noncash contributions) SALEM, MA 01981

Employer identification number

SALEM	FIVE CHARITABLE FOUNDATION, INC.		04	-3342405
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 contribution	ıs	(d) Type of contribution
13	SALEM FIVE CENTS SAVINGS BANK 222 ESSEX STREET SALEM, MA 01982	\$65,70	03.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	16	(d) Type of contribution
14	SALEM FIVE CENTS SAVINGS BANK 223 ESSEX STREET SALEM, MA 01983	\$25,7	20.	Person Payroll (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าธ	(d) Type of contribution
15	SALEM FIVE CENTS SAVINGS BANK 224 ESSEX STREET SALEM, MA 01984	\$823,3	82.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
16	SALEM FIVE CENTS SAVINGS BANK 225 ESSEX STREET SALEM, MA 01985	\$ 22,1	82.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
17	SALEM FIVE CENTS SAVINGS BANK 226 ESSEX STREET SALEM, MA 01986	\$99,9	17.	Person Payroll Moncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
18	SALEM FIVE CENTS SAVINGS BANK 227 ESSEX STREET SALEM, MA 01987	\$65,1	20.	Person Payroll Noncash X (Complete Part II for noncash contributions)

Page 2 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization Employer identification number 04-3342405 SALEM FIVE CHARITABLE FOUNDATION, INC. Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) (c) Total contributions Type of contribution Name, address, and ZIP + 4 No. 19 SALEM FIVE CENTS SAVINGS BANK Person Payroll 99,155. Noncash 228 ESSEX STREET (Complete Part II for noncash contributions) SALEM, MA 01988 (b) (c) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (d) (c) (a) Type of contribution Name, address, and ZIP + 4 Total contributions No. Person Payroll Noncash (Complete Part II for noncash contributions) (c) (b) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) Type of contribution Name, address, and ZIP + 4 Total contributions No. Person Payroll Noncash (Complete Part II for noncash contributions) (d) · (c) (a) (b) Type of contribution Total contributions Name, address, and ZIP + 4 No. Person Payroll

Noncash (Complete Part II for noncash contributions)

Employer identification number

SALEM FIVE CHARITABLE FOUNDATION, INC.

04-3342405

SALEM	FIVE CHARITABLE FOUNDATION, INC.	04	-3342405
Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ 2	580 SHARES OF APPLE		
		\$\s144,448.	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	220 SHARES OF APPLE		<u></u>
		\$\$	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	700 SHARES OF APPLE		
		\$\\$\\$\\$\	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	1305 SHARES OF THERMO FISCHER		
5		\$\$	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	75 SHARES OF UBIQUITI NETWORKS INC.		······································
		\$9,680.	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	470 SHARES OF UBIQUITI NETWORKS INC.		
			10/20/10
34\$3 11-06		\$ 60,658.	10/28/19 990, 990-EZ, or 990-PF) (20°

Employer identification number

SALEM FIVE CHARITABLE FOUNDATION, INC.

04-3342405

SALEM	FIVE CHARITABLE FOUNDATION, INC.		3342405
Part II	Noncash Property (see instructions) Use duplicate copies of Part	II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
8	500 SHARES OF DOLLAR GENERAL		
			10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
9	410 SHARES OF DOLLAR GENERAL	_	
			10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1.0	690 SHARES OF AVERY DENNISON		
10		\$ 87,968.	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	327 SHARES OF LIBERTY BROADBAND		
11		sss	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
12	66 SHARES OF LIBERTY BROADBAND		
		<u></u>	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
13	562 SHARES OF LIBERTY BROADBAND		
		 \$ 65,703.	10/28/19
923453 11-0	10.10		90, 990-EZ, or 990-PF) (2019)

2019.03040 SALEM FIVE CHARITABLE FOU 13525_J1

Employer identification number

SALEM FIVE CHARITABLE FOUNDATION, INC.

04-3342405

SALEM	FIVE CHARITABLE FOUNDATION, INC.	04	-3342405
Part II	Noncash Property (see instructions) Use duplicate copies of Part II	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
14_	220 SHARES OF LIBERTY BROADBAND		10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
15	200 SHARES OF LIBERTY BROADBAND	\$\$	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
16	565 SHARES OF PERFICIENT	\$\$	_10/28/19_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
17	2545 SHARES OF PERFICIENT	\$\$	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
18	1480 SHARES OF BANK MARIN BANCORP	 	10/28/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
19	5785 SHARES OF CONSTRUCTION PARTNERS	_	
		\$ 99,155.	10/28/19
923453 11-0	6-19	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

ivame or or	rganization			Employer Identification number				
	FIVE CHARITABLE FOUNDA	TION, INC.		04-3342405				
Part III	Exclusively religious, charitable, etc., contribition any one contributor. Complete columns	(a) through (a) and the following line er	ntry For organizations					
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	r less for the year (Enterthis info on	ce) ► \$				
(a) No.	Ose duplicate copies of Fart III II additions	i space is freeded						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	(d) Description of how gift is held				
Farti								
į								
	(e) Transfer of gift							
,	Transferee's name, address,	Relationship of tra	Relationship of transferor to transferee					
								
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
		<u> </u>						
		(e) Transfer of g	ft					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
Ì	Transieree's flame, address,	and Zir + 4	netationship of the	more of to danseres				
İ								
1								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I		(3, 55 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						
			 					
ŀ		(e) Transfer of g	ift					
		(4) 114110101 0. 3						
	Transferee's name, address,	and ZIP + 4	Relationship of tra	ensferor to transferee				
		<u> </u>						
(a) No. from								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
ŀ	Transferee's name, address,	and ZIP + 4	neiationship of tra	anateror to transferee				
	· · · · · · · · · · · · · · · · · · ·							

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY O	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE	REVE	(A) REVENUE NE PER BOOKS 8,811.		(B) VESTMENT COME	(C) ADJUSTED NET INCOME		
INTEREST ON SAVINGS					8,811.		
TOTAL TO PART I, LI	NE 3		8,811.		8,811.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	1 SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV	(A) VENUE BOOKS	(B) NET INVES MENT INCO		
DIVIDENDS	143,890	•	0. 14	13,890.	143,89	0.	
TO PART I, LINE 4 143,890		. 0.		143,890. 143,8		90.	
FORM 990-PF	0	THER PROFES			(0)	STATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET IN MENT IN	/EST-	(C) ADJUSTED NET INCOM		
ADVISOR FEE	_	36,909.		5,909.			
		30,303.	3 (3,505.		0.	
TO FORM 990-PF, PG	1, LN 16C =	36,909.		5,909.		0.	
TO FORM 990-PF, PG	1, LN 16C =	36,909.					
	1, LN 16C =	36,909. OTHER E	XPENSES (B)	5,909.	(C) ADJUSTED NET INCOM	STATEMENT 4 (D) CHARITABLE	
FORM 990-PF	1, LN 16C	OTHER E (A) EXPENSES	XPENSES (B) NET IN MENT IN	5,909.	ADJUSTED	STATEMENT 4 (D) CHARITABLE	

FORM 990-PF OTHER INCREASES IN NET ASSETS OR F	UND BALANCES	STATEMENT 5
DESCRIPTION		AMOUNT
ASSETS TRANSFERRED FROM STONEHAM AND HERITAGE FO	UNDATIONS	1,987,839.
TOTAL TO FORM 990-PF, PART III, LINE 3		1,987,839.
FORM 990-PF CORPORATE STOCK		STATEMENT 6
		
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION CORPORATE/MUNICIPAL BONDS EQUITY	BOOK VALUE 2,527,044. 6,323,018.	FAIR MARKET

		OF OFFICERS, DIRECTORS FOUNDATION MANAGERS		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
WILLIAM H MITCHELSON 210 ESSEX STREET SALEM, MA 01970	DIRECTOR/CHAIRM 1.00	MAN OF BOARI		0.
PING YIN CHAI 210 ESSEX STREET SALEM, MA 01970	PRESIDENT 1.00	0.	0.	0.
DONALD A SADOSKI D.M.D. 210 ESSEX STREET SALEM, MA 01970	DIRECTOR 1.00	0.	0.	0.
WILLIAM J LUNDGREN III 210 ESSEX STREET SALEM, MA 01970	DIRECTOR 1.00	0.	0.	0.
BRIAN W. SHAUGHNESSY 210 ESSEX STREET SALEM, MA 01970	CLERK/TREASUREF	0.	0.	0,
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BRIAN W. SHAUGHNESSY 210 ESSEX STREET SALEM, MA 01970

TELEPHONE NUMBER

978-740-5401

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS AVAILABLE AT ABOVE ADDRESS

ANY SUBMISSION DEADLINES

SEE APPLICATIONS FOR VARIOUS DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS WILL BE GIVEN TO SOCIAL SERVICE AGENCIES, CULTURAL, EDUCATIONAL, ART, COMMUNITY ECEONOMIC DEVELOPMENT AND OTHER PROGRAMS THAT IMPACT THE NEEDS OF THE SALEM FIVE COMMUNITIES.