

Form **990-PF****Return of Private Foundation**

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

Department of the Treasury
Internal Revenue Service

- ▶ 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.

OMB No 1545-0047

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning

, 2019, and ending

, 20

Name of foundation

THE COMPASS FUND

Number and street (or P O box number if mail is not delivered to street address)

PO BOX 156

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

KINGSTON NH 03848-0156

- G** Check all that apply: ☐ Initial return ☐ Initial return of a former public charity
☐ Final return ☐ Amended return
☐ Address change ☐ Name change

- H** Check type of organization: ☒ Section 501(c)(3) exempt private foundation **04**
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

- I** Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,856,968.
J Accounting method: ☒ Cash ☐ Accrual
☐ Other (specify) _____ (Part I, column (d), must be on cash basis)

A Employer identification number

04-3366745

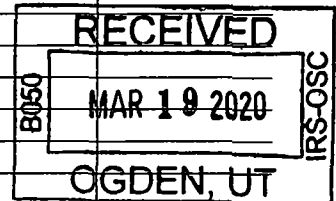
B Telephone number (see instructions)

(800) 392-9244

C If exemption application is pending, check here ☐ **le****D** 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐**E** If private foundation status was terminated under section 507(b)(1)(A), check here ☐**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐**Part 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) (see instructions).)

(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 (attach schedule)	103,917.		
2 Check ☐ if the foundation is not required to attach Sch. B			
3 Interest on savings and temporary cash investments	189.	189.	
4 Dividends and interest from securities	38,348.	38,348.	
5a Gross rents			
b Net rental income or (loss)			
6a Net gain or (loss) from sale of assets not on line 10	-23,691.		
b Gross sales price for all assets on line 6a 246,973.	L Ca Stmt		
7 Capital gain net income (from Part IV, line 2)		0.	
8 Net short-term capital gain		0.	
9 Income modifications			
10a Gross sales less returns and allowances			
b Less: Cost of goods sold			
c Gross profit or (loss) (attach schedule)			
11 Other income (attach schedule) See Stmt	53,188.		
12 Total. Add lines 1 through 11	171,951.	38,537.	0.
13 Compensation of officers, directors, trustees, etc.			
14 Other employee salaries and wages			
15 Pension plans, employee benefits			
16a Legal fees (attach schedule)			
b Accounting fees (attach schedule) L-16b Stmt	3,537.	3,537.	
c Other professional fees (attach schedule) L-16c Stmt	27,377.	27,377.	
17 Interest			
18 Taxes (attach schedule) (see instructions) See Stmt	1,400.		
19 Depreciation (attach schedule) and depletion			
20 Occupancy			
21 Travel, conferences, and meetings			
22 Printing and publications			
23 Other expenses (attach schedule)			
24 Total operating and administrative expenses. Add lines 13 through 23	32,314.	30,914.	
25 Contributions, gifts, grants paid	135,011.		135,011.
26 Total expenses and disbursements. Add lines 24 and 25	167,325.	30,914.	135,011.
27 Subtract line 26 from line 12:			
a Excess of revenue over expenses and disbursements	4,626.		
b Net investment income (if negative, enter -0-)		7,623.	
c Adjusted net income (if negative, enter -0-)			0.



For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	126,518.	32,149.	32,149.
	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) L-10b Stmt	877,481.	1,228,579.	1,973,684.
	c Investments—corporate bonds (attach schedule)			
Liabilities	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule) L-13 Stmt	1,063,901.	811,798.	851,135.
	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)	2,067,900.	2,072,526.	2,856,968.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	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)			
	Foundations that follow FASB ASC 958, check here ▶ ☐ 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 ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	2,067,900.	2,072,526.	
Net Assets or Fund Balances	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	2,067,900.	2,072,526.	
	30 Total liabilities and net assets/fund balances (see instructions)	2,067,900.	2,072,526.	

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	2,067,900.
2 Enter amount from Part I, line 27a	2	4,626.
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	2,072,526.
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	2,072,526.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, 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 SHORT TERM COVERED SECURITIES	P	01/01/2019	12/31/2019
b SHORT TERM NONCOVERED SECURITIES	P	01/01/2019	12/31/2019
c LONG TERM COVERED SECURITIES	P	12/30/2018	12/31/2019
d LONG TERM NONCOVERED SECURITIES	P	12/30/2018	12/31/2019
e			

(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 19,157.		19,371.	-214.
b 22,938.		40,939.	-18,001.
c 156,507.		122,534.	33,973.
d 48,372.		87,821.	-39,449.
e			

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

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-214.
b			-18,001.
c			33,973.
d			-39,449.
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-23,691.
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	-18,215.

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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the 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	119,216.	2,692,554.	0.044276
2017	110,075.	2,475,905.	0.044458
2016	111,563.	2,042,670.	0.054616
2015	117,452.	2,291,420.	0.051257
2014	56,075.	2,356,473.	0.023796

2 Total of line 1, column (d)	2	0.218403
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.043681
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	2,733,680.
5 Multiply line 4 by line 3	5	119,410.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	76.
7 Add lines 5 and 6	7	119,486.
8 Enter qualifying distributions from Part XII, line 4 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.	8	135,011.

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	76.
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	76.
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	76.
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	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	76.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax 0. 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ _____ (2) On foundation managers. ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ► NH		
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 <i>General Instruction G</i> ? If "No," attach explanation	X	
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 tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

	Yes	No
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	X
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	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X
14 The books are in care of ► NBW CAPITAL, LLC Telephone no. ► (617) 482-2222 Located at ► 101 FEDERAL STREET BOSTON MA ZIP+4 ► 02110		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year ► 15		
16 At any time during calendar year 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

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? ☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ► ☐	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	X
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 (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 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 Form 4720, Schedule C, 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	X
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	X

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and 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
STEVEN B. FRENCH PO BOX 156 KINGSTON NH 03848	TRUSTEE 2.00	0.	0.	0.
EMILY F. BREakey PO BOX 156 KINGSTON NH 03848	TRUSTEE 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ☐ 0

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 NONE	
	0.
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
	0.
2	
All other program-related investments See instructions	
3 NONE	
	0.
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	2,656,471.
b	Average of monthly cash balances	1b	118,839.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	2,775,310.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,775,310.
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	41,630.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,733,680.
6	Minimum investment return. Enter 5% of line 5	6	136,684.

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	136,684.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	76.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	76.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	136,608.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	136,608.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	136,608.

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	135,011.
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	135,011.
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	76.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	134,935.

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				136,608.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			125,011.	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014	0.			
b From 2015	0.			
c From 2016	0.			
d From 2017	0.			
e From 2018	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part XII, line 4. ► \$ <u>135,011.</u>				
a Applied to 2018, but not more than line 2a			125,011.	
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2019 distributable amount				10,000.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
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				126,608.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015	0.			
b Excess from 2016	0.			
c Excess from 2017	0.			
d Excess from 2018	0.			
e Excess from 2019	0.			

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

N/A

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 foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year				(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 $\frac{2}{3}$ of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

NONE

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.

NONE

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 email address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

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

Recipient Name and address (home or business)	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
a Paid during the year				
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS TN 38105		501C3	RESEARCH AND TREATMENT OF CHILDHOOD DISEASES	5,000.
THE GOVERNOR'S ACADEMY 1 ELM STREET BYFIELD MA 01922		501C3	ANNUAL FUND, GENERAL SUPPORT	10,000.
GRANITE STATE WOODLAND INSTITUTE 54 PORTSMOUTH STREET CONCORD NH 03301		501C3	EDUCATION	10,000.
BROOKS SCHOOL 1160 GREAT POND ROAD NORTH ANDOVER MA 01845		501C3	GENERAL SUPPORT	5,000.
TRUSTEES OF UNION COLLEGE 807 UNION STREET SCHENECTADY NY 12308		501C3	GENERAL SUPPORT	1,000.
MEMPHIS ATHLETIC MINISTRIES, INC. 2146 BALL ROAD MEMPHIS TN 38114		501C3	YOUTH DEVELOPMENT	1,000.
THE SHRINER'S HOSPITAL FOR CHILDREN PO BOX 31356 TAMPA FL 33631		501C3	HEALTH - REHABILITATIVE	5,000.
ESSEX COUNTY GREEN BELT ASSOCIATION, INC. 82 EASTERN AVENUE ESSEX MA 01929		501C3	LAND CONSERVATION LAND STEWARDSHIP	2,000.
FRIENDS OF BIG ISLAND POND PO BOX 222 HAMPSTEAD NH 03841		501C3	WATER QUALITY HABITAT PRESERVATION	5,000.
See Statement				91,011.
Total			3a	135,011.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
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	189.	
4	Dividends and interest from securities			14	38,348.	
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			18	-23,691.	0.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a ML PARTNERSHIP DISTRIBUTIONS			18	52,104.	
b	OTHER INCOME					1,084.
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)				66,950.	1,084.
13	Total. Add line 12, columns (b), (d), and (e)				13	68,034

(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

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

[illegible]

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

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

Sign correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign Here correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee [Signature] Date 3/2/90 Title TRUSTEE

May the IRS discuss this return with the preparer shown below? See instructions ☐ Yes ☐ No

May the IRS discuss this return with the preparer shown below?
See instructions ☐ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Timothy F. Hagan, CPA		02/14/2020		P00365920
	Firm's name ▶ BERNARD, JOHNSON & COMPANY, P.C.	Firm's EIN ▶ 04-3068663			
	Firm's address ▶ 15 MAIN STREET,	Phone no (978) 887-2220			

BAA TOPSFIELD MA 01983 Form 990-PF (2019)

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

THE COMPASS FUND

Employer identification number

04-3366745

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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 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 33 $\frac{1}{3}$ % 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 990-PF, 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

THE COMPASS FUND

Employer identification number

04-3366745

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	FRENCH CHARITABLE LEAD ANNUITY TRUST 1092 GREAT POND ROAD NORTH ANDOVER MA 01845	\$ 103,917.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization

THE COMPASS FUND

Employer identification number

04-3366745

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
-----	----- ----- ----- -----	\$ -----	-----
(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
-----	----- ----- ----- -----	\$ -----	-----

Name of organization

Employer identification number

THE COMPASS FUND

04-3366745

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
-------------------------	-------------------------

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

----- ----- -----	----- ----- -----
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Form 990-PF: Return of Private Foundation**Part XV, Line 3a: Grants and Contributions Paid During the Year****Continuation Statement**

Recipient name and address (home or business)	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
<i>a Paid during the year</i>				
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET, SUITE 540 BOSTON, MA 02114		501C3	OVARIAN CANCER RESEARCH	3,000.
CYSTIC FIBROSIS FOUNDATION MA/RI 6931 ARLINGTON ROAD BETHESDA, MD 20814		501C3	THERAPIES DISEASE RESEARCH	3,000.
CHILD AND FAMILY SERVICES OF NH 464 CHESTNUT STREET MANCHESTER, NH 03105		501C3	CHILD ABUSE TREATMENT AND PREVENTION	2,000.
HARTWICK COLLEGE PO BOX 4020 ONEONTA, NY 13820		501C3	GEOLOGY DEPARTMENT, ANNUAL FUND	7,000.
FORESTRY SOCIETY OF MAINE 115 FRANKLIN STREET BANGOR, ME 04401		501C3	FORESTRY CONSERVATION IN MAINE	2,000.
NATIONAL RIFLE ASSOCIATION OF AMERICA, INC. 11250 WAPLES MILL ROAD FAIRFAX, VA 22030		501C4	ADVOCACY	1,011.
THE AMERICAN BLUEFIN TUNA ASSOCIATION PO BOX 854 NORWELL, MA 02061		501C3	SUSTAINABLE FISHERIES	2,000.
LAWRENCE BOYS & GIRLS CLUBS, INC. 136 WATER STREET LAWRENCE, MA 01841		501C3	PROGRAM SUPPORT	2,000.
THE TRUSTEES OF RESERVATIONS 572 ESSEX STREET BEVERLY, MA 01915		501C3	LAND CONSERVATION	2,000.
YMCA CAMP BELKNAP, INC. PO BOX 1546 WOLFEBORO, NH 03894		501C3	YOUTH PROGRAMS	5,000.
THE ALBANY ACADEMIES 135 ACADEMY ROAD ALBANY, NY 12208		501C3	PROGRAM SUPPORT	3,000.
SECOND CONGREGATIONAL CHURCH OF BOXFORD 173 WASHINGTON STREET BOXFORD, MA 01921		501C3	GENERAL SUPPORT	3,000.
FIRST PRESBYTERIAN CHURCH 362 STATE STREET ALBANY, NY 12210		501C3	GENERAL SUPPORT	1,000.
ALZHEIMERS DISEASE RESEARCH FOUNDATION 34 WASHINGTON STREET, STE 200 WELLESLEY HILLS, MA 02481		501C3	DISEASE RESEARCH	1,000.
DOWNEAST LAKES LAND TRUST 4 WATER STREET GRAND LAKE STREAM, ME 04668		501C3	LAND CONSERVATION	2,000.
THE NATIONAL CHILDRENS CANCER SOCIETY 500 NORTH BROADWAY, STE 1850 ST LOUIS, MO 63102		501C3	EDUCATIONAL SUPPORT	2,000.
PARKINSON RESEARCH FOUNDATION, INC. PO BOX 96318 WASHINGTON, DC 20090		501C3	DISEASE RESEARCH	2,000.

Form 990-PF: Return of Private Foundation**Part XV, Line 3a: Grants and Contributions Paid During the Year****Continuation Statement**

Recipient name and address (home or business)	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
<i>a Paid during the year</i>				
UPPER VALLEY LAND TRUST, INC. 19 BUCK ROAD HANOVER, NH 03755		501C3	LAND CONSERVATION	1,000.
VERMONT LAND TRUST 8 BAILEY AVENUE MONTPELIER, VT 05602		501C3	LAND CONSERVATION	5,000.
PINEY WOODS SCHOOL PO BOX 57 PINEY WOODS, MS 39148		501C3	CHRISTIAN EDUCATION	2,000.
NEW ENGLAND FORESTRY FOUNDATION, INC. PO BOX 1346 LITTLETON, MA 01460		501C3	FORESTRY MANAGEMENT	5,000.
NH FARM MUSEUM, INC. PO BOX 644 MILTON, NH 03851		501C3	NH FARM PRESERVATION	500.
THE TRUST FOR PUBLIC LANDS 30 DANFORTH STREET, SUITE 106 PORTLAND, ME 04101		501C3	LAND CONSERVATION	5,000.
SOUTHEAST LAND TRUST OF NH 6 CENTER STREET EXETER, NH 03833		501C3	LAND CONSERVATION	7,500.
AMERICAN FORESTRY FOUNDATION 2000 M STREET NW, STE 550 WASHINGTON, DC 20036		501C3	TREE FARM, SUSTAINABLE FORESTRY	3,000.
PISCATAQUOG LAND CONSERVANCY 5A MILL STREET NEW BOSTON, NH 03070		501C3	ANNUAL CONSERVATION FUND	2,000.
LARGE PELAGICS RESEARCH CENTER PO BOX 3188 GLOUCESTER, MA 01930		501C3	BIOLOGICAL AND ECOLOGICAL RESEARCH	2,000.
THE CHARLEY DAVIDSON CHILDREN'S CANCER FUND C/O MGH 125 NASHUA STREET, STE 540 BOSTON, MA 02114-1101		501C3	CANCER RESEARCH	2,000.
LOW IMPACT HYDROPOWER INSTITUTE 329 MASSACHUSETTS AVENUE LEXINGTON, MA 02420		501C3	ANNUAL FUND	1,000.
THE CONSERVATION FUND 1655 N. FORT MYER DRIVE, SUITE 1300 ARLINGTON, VA 22209		501C3	ANNUAL FUND	10,000.
WEST PARISH GARDEN CEMETARY, INC. 129 RESERVATION ROAD ANDOVER, MA 01810		501C3	BURIAL GROUND PRESERVATION	1,000.
THE GOOD SHEPHERD SCHOOL 20 WINTHROP STREET CHARLESTOWN, MA 02129		501C3	GENERAL SUPPORT	1,000.
				91,011.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
MASTER LIMITED PARTNERSHIP DISTRIBUTIONS	52,104.		
OTHER INCOME	1,084.		
Total	53,188.		

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL EXCISE TAX	1,400.			
Total	1,400.			

Name
THE COMPASS FUND

Employer Identification No
04-3366745

Asset Information:

Description of Property	58	ULTIMATE SOFTWARE GP	
Business Code		Exclusion Code	
Date Acquired	01/07/13	How Acquired	Purchased
Date Sold	05/06/19	Name of Buyer	
Check Box, if Buyer is a Business . . . ☐			
Sales Price	19,226.	Cost or other basis (do not reduce by depreciation)	5,569.
Sales Expense		Valuation Method	Cost
Total Gain (Loss)	13,657.	Accumulated Depreciation	
Description of Property	72	ULTIMATE SOFTWARE GP	
Business Code		Exclusion Code	
Date Acquired	01/08/13	How Acquired	Purchased
Date Sold	05/06/19	Name of Buyer	
Check Box, if Buyer is a Business . . . ☐			
Sales Price	23,868.	Cost or other basis (do not reduce by depreciation)	6,917.
Sales Expense		Valuation Method	Cost
Total Gain (Loss)	16,951.	Accumulated Depreciation	
Description of Property	7	ULTIMATE SOFTWARE GP	
Business Code		Exclusion Code	
Date Acquired	01/27/14	How Acquired	Purchased
Date Sold	05/06/19	Name of Buyer	
Check Box, if Buyer is a Business . . . ☐			
Sales Price	2,321.	Cost or other basis (do not reduce by depreciation)	1,076.
Sales Expense		Valuation Method	Cost
Total Gain (Loss)	1,245.	Accumulated Depreciation	
Description of Property	18	ULTIMATE SOFTWARE GP	
Business Code		Exclusion Code	
Date Acquired	01/05/15	How Acquired	Purchased
Date Sold	05/06/19	Name of Buyer	
Check Box, if Buyer is a Business . . . ☐			
Sales Price	5,967.	Cost or other basis (do not reduce by depreciation)	2,603.
Sales Expense		Valuation Method	Cost
Total Gain (Loss)	3,364.	Accumulated Depreciation	
Description of Property	See Net Gain or Loss from Sale of Assets		
Business Code		Exclusion Code	
Date Acquired		How Acquired	
Date Sold		Name of Buyer	
Check Box, if Buyer is a Business . . . ☐			
Sales Price		Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	
Total Gain (Loss)		Accumulated Depreciation	

Totals:

Total Gain (Loss) of all assets	-23,691.	
Gross Sales Price of all assets	246,973.	
Unrelated Business Income		Business Code
Excluded by section 512, 513, 514		Exclusion Code
Related/Exempt Function Income	-23,691.	

QuickZoom here to Form 990-PF, Page 1. ►
QuickZoom here to Form 990-PF, Page 12. ►

Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Bu sin es s Co de	Excl usio n Cod e	Dat e Acq uire d	How Acquired	Dat e Sol d	Name of Buyer	B u y e r a B u si n e s s	Sale s Pric e	Cost or other basis	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
1100 ANTERO MIDSTREAM CORP			07/23/18	Purchased	12/02/19			4,956. .	20,233. .		Cost	- 15,277.	
639 ANTERO MIDSTREAM CORP			07/25/18	Purchased	12/02/19			2,879. .	11,844. .		Cost	- 8,965.	
370 ANTERO MIDSTREAM CORP			07/26/18	Purchased	12/02/19			1,667. .	6,918. .		Cost	- 5,251.	
414 ANTERO MIDSTREAM CORP			07/27/18	Purchased	12/02/19			1,865. .	7,679. .		Cost	- 5,814.	
121 ANTERO MIDSTREAM CORP			07/30/18	Purchased	12/02/19			545. .	2,221. .		Cost	- 1,676.	
242 ANTERO MIDSTREAM CORP			07/31/18	Purchased	12/02/19			1,090. .	4,466. .		Cost	- 3,376.	
17 ANTERO MIDSTREAM CORP			08/01/18	Purchased	12/02/19			77. .	311. .		Cost	-234. .	
56 ANTERO MIDSTREAM CORP			08/02/18	Purchased	12/02/19			252. .	1,019. .		Cost	-767. .	
1238 ANTERO MIDSTREAM CORP			03/27/19	Purchased	12/02/19			5,578. .	15,540. .		Cost	- 9,962.	
136 CHEGG INC			11/21/14	Purchased	02/11/19			4,777. .	921. .		Cost	3,856. .	
104 CHEGG INC			11/24/14	Purchased	02/11/19			3,653. .	704. .		Cost	2,949. .	
193 ENLINK MIDSTREAM LLC			12/05/11	Purchased	06/06/19			1,954. .	1,864. .		Cost	90. .	
225 ENLINK MIDSTREAM LLC			12/08/11	Purchased	06/06/19			2,279. .	2,152. .		Cost	127. .	
210 ENLINK MIDSTREAM LLC			12/12/11	Purchased	06/06/19			2,127. .	2,023. .		Cost	104. .	
65 ENLINK MIDSTREAM LLC			12/13/11	Purchased	06/06/19			658. .	625. .		Cost	33. .	
127 ENLINK MIDSTREAM LLC			04/01/16	Purchased	06/06/19			1,286. .	1,049. .		Cost	237. .	
47 ENLINK MIDSTREAM LLC			12/05/11	Purchased	06/05/19			481. .	454. .		Cost	27. .	
52 ENLINK MIDSTREAM LLC			12/06/11	Purchased	06/05/19			532. .	503. .		Cost	29. .	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer's Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
125 ENLINK MIDSTREAM LLC			04/01/16	Purchased	07/08/19			1,301.	1,033.		Cost	268.	
1204 ENLINK MIDSTREAM LLC			04/04/16	Purchased	07/08/19			12,527.	9,746.		Cost	2,781.	
190 ENLINK MIDSTREAM LLC			04/04/16	Purchased	07/08/19			1,977.	1,525.		Cost	452.	
15 NGL ENERGY PARTNERS LP			11/02/16	Purchased	12/02/19			149.	261.		Cost	-112.	
281 NGL ENERGY PARTNERS LP			11/22/17	Purchased	12/02/19			2,788.	3,394.		Cost	-606.	
704 NGL ENERGY PARTNERS LP			11/27/17	Purchased	12/02/19			6,984.	8,505.		Cost	-1,521.	
1750 NGL ENERGY PARTNERS LP			05/29/19	Purchased	12/02/19			17,360.	25,398.		Cost	-8,038.	
39 REPLIGEN CORP			09/08/15	Purchased	07/30/19			3,684.	1,345.		Cost	2,339.	
35 REPLIGEN CORP			09/09/15	Purchased	07/30/19			3,307.	1,211.		Cost	2,096.	
27 REPLIGEN CORP			04/26/17	Purchased	07/30/19			2,551.	950.		Cost	1,601.	
41 REPLIGEN CORP			01/05/18	Purchased	07/30/19			3,873.	1,532.		Cost	2,341.	
54 SEMGROUP CORP			06/09/15	Purchased	12/02/19			830.	3,977.		Cost	-3,147.	
55 SEMGROUP CORP			06/12/15	Purchased	12/02/19			845.	4,048.		Cost	-3,203.	
270 SEMGROUP CORP			02/01/18	Purchased	12/02/19			4,150.	6,890.		Cost	-2,740.	
454 SEMGROUP CORP			02/02/18	Purchased	12/02/19			6,979.	11,374.		Cost	-4,395.	
174 SEMGROUP CORP			06/13/18	Purchased	12/02/19			2,675.	3,839.		Cost	-1,164.	
510 SEMGROUP CORP			04/01/16	Purchased	12/03/19			7,665.	8,968.		Cost	-1,303.	
557 SEMGROUP CORP			04/04/16	Purchased	12/03/19			8,373.	9,655.		Cost	-1,282.	
74 SEMGROUP CORP			04/05/16	Purchased	12/03/19			1,112.	1,278.		Cost	-166.	
131 SEMGROUP CORP			04/05/16	Purchased	12/03/19			1,969.	2,890.		Cost	-921.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
1096 SEMGROUP CORP			02/27/19	Purchased	12/03/19			16,475.	16,321.		Cost	154.	
48.4298 UNITEDHEALTH GROUP INC			09/25/15	Purchased	09/11/19			11,214.	6,771.		Cost	4,443.	
7.8055 UNITEDHEALTH GROUP INC			05/04/16	Purchased	09/11/19			1,808.	1,295.		Cost	513.	
11.5736 UNITEDHEALTH GROUP INC			09/28/16	Purchased	09/11/19			2,680.	1,920.		Cost	760.	
6.7414 UNITEDHEALTH GROUP INC			09/29/16	Purchased	09/11/19			1,561.	1,118.		Cost	443.	
12.9194 UNITEDHEALTH GROUP INC			10/03/16	Purchased	09/11/19			2,992.	2,143.		Cost	849.	
15.0726 UNITEDHEALTH GROUP INC			10/04/16	Purchased	09/11/19			3,490.	2,500.		Cost	990.	
13.4577 UNITEDHEALTH GROUP INC			10/06/16	Purchased	09/11/19			3,118.	2,231.		Cost	887.	
301 COMERICA INC			06/12/18	Purchased	07/30/19			21,816.	28,805.		Cost	-6,989.	
37 COMERICA INC			03/14/19	Purchased	07/30/19			2,682.	3,050.		Cost	-368.	

Name THE COMPASS FUND	Employer Identification No 04-3366745
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Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-PF, Part I, Line 16a					

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE STREET	CUSTODY ADVISOR FEES	1,037.	1,037.		
BJHC, PC	TAX RETURN PREPARATION FEE	2,500.	2,500.		
Total to Form 990-PF, Part I, Line 16b		3,537.	3,537.		

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE STREET	INVESTMENT MANAGEMENT FEES	27,377.	27,377.		
Total to Form 990-PF, Part I, Line 16c		27,377.	27,377.		

