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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019

Name of foundation
ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

A Employer identification number
04-6063152

Number and street (or P.O. box number if mail is not delivered to street address)
2 LIBERTY SQUARE SUITE 500

Room/suite

B Telephone number (see instructions)
(617) 426-7080

City or town, state or province, country, and ZIP or foreign postal code
BOSTON, MA 02109

C If exemption application is pending, check here ▶ ☐

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

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

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

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 22,318,810

J Accounting method: ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

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)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ▶ ☑ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments	72	72		
	4	Dividends and interest from securities	384,642	384,642		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	603,666			
	b	Gross sales price for all assets on line 6a 2,325,639				
	7	Capital gain net income (from Part IV, line 2)		603,666		
	8	Net short-term capital gain				
	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)				
	12	**Total.** Add lines 1 through 11	988,380	988,380		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)	605	0		605
	b	Accounting fees (attach schedule)	10,784	0		10,784
	c	Other professional fees (attach schedule)	54,238	45,681		8,557
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	42,550	0		250
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	1,508	0		1,508
	24	**Total operating and administrative expenses.** Add lines 13 through 23	109,685	45,681		21,704
	25	Contributions, gifts, grants paid	1,105,986			1,105,986
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,215,671	45,681		1,127,690
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	-227,291			
	b	**Net investment income** (if negative, enter -0-)		942,699		
	c	**Adjusted net income** (if negative, enter -0-)				

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	57,271	66,714	66,714
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	125		
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	19,742,689	22,252,096	22,252,096
	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)	19,800,085	22,318,810	22,318,810
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☑ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions	19,800,085	22,318,810	
	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			
	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)	19,800,085	22,318,810	
	30 **Total liabilities and net assets/fund balances** (see instructions)	19,800,085	22,318,810	

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	19,800,085
2	Enter amount from Part I, line 27a	2	-227,291
3	Other increases not included in line 2 (itemize) ▶	3	2,746,016
4	Add lines 1, 2, and 3	4	22,318,810
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	22,318,810

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	PUBLICLY TRADED SECURITIES			
b	AETOS MULTI-STRATEGY	P	2007-05-01	2019-07-01
c	AETOS DISTRESSED INVEST.	P	2008-06-01	2019-07-01
d	AETOS LONG/SHORT	P	2007-05-01	2019-07-01
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	1,825,639		1,358,081	467,558
b	228,600		180,715	47,885
c	107,900		67,020	40,880
d	163,500		116,157	47,343
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** Losses (from col.(h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a				467,558
b				47,885
c				40,880
d				47,343
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	603,666
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	1,025,053	21,477,332	0.047727
2017	1,140,845	21,556,327	0.052924
2016	1,055,707	20,216,396	0.052220
2015	1,101,791	21,424,816	0.051426
2014	1,118,229	22,298,480	0.050148

2	**Total** of line 1, column (d)	2	0.254445
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	0.050889
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	21,052,970
5	Multiply line 4 by line 3	5	1,071,365
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	9,427
7	Add lines 5 and 6	7	1,080,792
8	Enter qualifying distributions from Part XII, line 4	8	1,127,690

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ 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	9,427
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	9,427
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	9,427
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 21,025		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments. Add lines 6a through 6d	7	21,025
8	Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	11,598
11	Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ▶ 11,598 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WWW.ROGERSFAMILYFOUNDATION.COM

14 The books are in care of ▶ GMA FOUNDATIONS Telephone no. ▶ (617) 426-7080

Located at ▶ 2 LIBERTY SQUARE SUITE 500 BOSTON MA ZIP+4 ▶ 02109

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?	16		No

See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶

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

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

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	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019?		☐ 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

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

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ 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		No
	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?	6b		No
	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?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year? ☐ Yes ☑ No			

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

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

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

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

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

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

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		
Total number of others receiving over $50,000 for professional services. ▶		0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	16,577,244
b	Average of monthly cash balances	1b	327,219
c	Fair market value of all other assets (see instructions)	1c	4,469,111
d	**Total** (add lines 1a, b, and c)	1d	21,373,574
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	21,373,574
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	320,604
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,052,970
6	**Minimum investment return.** Enter 5% of line 5	6	1,052,649

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	1,052,649
2a	Tax on investment income for 2019 from Part VI, line 5	2a	9,427		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
c	Add lines 2a and 2b			2c	9,427
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	1,043,222
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	1,043,222
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	1,043,222

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	1,127,690
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	1,127,690
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	9,427
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	1,118,263

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				1,043,222
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			641,672	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f **Total** of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ $ 1,127,690				
a Applied to 2018, but not more than line 2a			641,672	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				486,018
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019.	0			0
(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.		0		
d Subtract line 6c from line 6b. Taxable amount —see instructions		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				557,204
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .	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. . . .				
b Excess from 2016. . . .				
c Excess from 2017. . . .				
d Excess from 2018. . . .				
e Excess from 2019. . . .				

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

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

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

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

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).)

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

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

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

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

GMA FOUNDATIONS INC
2 LIBERTY SQUARE SUITE 500
BOSTON, MA 02109
(617) 426-7080

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

TO BE CONSIDERED, THE ORGANIZATION MUST BE TAX EXEMPT UNDER IRC 501(C)3 AND BE CLASSIFIED AS NOT A PRIVATE FOUNDATION" UNDER SECTION 509(A). APPLICATIONS SHOULD BE SUBMITTED ELECTRONICALLY THROUGH THE ORGANIZATIONS WEBSITE. THE ONLINE APPLICATION FOLLOWS THE COMMON PROPOSAL DESIGNED AND PUBLISHED BY ASSOCIATED GRANT MAKERS, INC.

c Any submission deadlines:

N/A

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

THE ROGERS FAMILY FOUNDATION TYPICALLY ONLY MAKES GRANTS TO NONPROFIT ORGANIZATIONS PROVIDING SERVICES WITHIN MASSACHUSETTS MERRIMACK VALLEY OR NORTH SHORE OR IN SOUTHEASTERN NEW HAMPSHIRE.

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* See Additional Data Table				
Total . . . . . ▶ **3a**				1,105,986
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

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	72	
4 Dividends and interest from securities			14	384,642	
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			14	603,666	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		988,380	0
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13	988,380

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

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)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

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

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

b If "Yes," complete the following schedule.

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

Sign Here

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

******	2020-10-07	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.) ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
THOMAS WASHBURN CPA		2020-09-28		P00537319

Firm's name ▶ AAFCPAS INC	Firm's EIN ▶04-2571780
Firm's address ▶ 50 WASHINGTON STREET WESTBOROUGH, MA 01581	Phone no. (508) 366-9100

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

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
AMY ROGERS DITTRICH 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0
DEBORAH K ROGERS 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0
T TYLER DITTRICH 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0
KATHRYN DOHERTY O'DONNELL 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0
JAMES F SCULLY JR 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0
SARAH H ROGERS 2 LIBERTY SQUARE SUITE 500 BOSTON, MA 02109	TRUSTEE, PART-TIME 1.00	0	0	0

Form 990PF Part XV Line 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*				
AARON'S PRESENTS180 MAIN STREET ANDOVER, MA 01810	NONE	PC	MORE EMPOWERED YOUTH IN LAWRENCE	15,000
ALZHEIMER'S ASSOCIATION MANH CHAPTER 480 PLEASANT STREET WATERTOWN, MA 02472	NONE	PC	VOLUNTEER-POWERED PROGRAM DELIVERY INITIATIVE (PHASE 2)	15,000
ANDOVER COMMITTEE PO BOX 212 134 MAIN STREET ANDOVER, MA 01810	NONE	PC	A BETTER CHANCE OF ANDOVER	5,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
ANDOVER COMMUNITY TRUST 2 DUNDEE PARK SUITE B02A ANDOVER, MA 01810	NONE	PC	LUPINE ROAD--ANDOVER'S FIRST 100% AFFORDABLE HOMEOWNERSHIP COMMUNITY	15,000
ANNA JAQUES COMMUNITY HEALTH FOUNDATION 25 HIGHLAND AVE NEWBURYPORT, MA 01950	NONE	SO I	INVESTING IN THE AJH CARDIAC CATHETERIZATION AND INTERVENTIONAL RADIOLOGY SUITE	25,000
APPALACHIAN MOUNTAIN CLUB 10 CITY SQUARE CHARLESTOWN, MA 02129	NONE	PC	YOUTH OPPORTUNITIES PROGRAM LAWRENCE SUMMIT SITE	5,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
BEYOND SOCCER INC 280 MERRIMACK STREETSUITE 309 LAWRENCE, MA 01843	NONE	PC	2019/2020 SPORT, HEALTH, LEADERSHIP & ACADEMIC PROGRAMS	15,000
BLESSED STEPHEN BELLESINI OSA ACADEMY 94 BRADFORD ST LAWRENCE, MA 01840	NONE	PC	STUDENT SPONSORSHIP	20,000
BOYS & GIRLS CLUB OF GREATER SALEM 3 GEREMONTY DR SALEM, NH 03079	NONE	PC	PREPARING SALEM YOUTH FOR THE 21ST CENTURY	5,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
BOYS & GIRLS CLUB OF LAWRENCE 136 WATER STREET LAWRENCE, MA 01841	NONE	PC	ARTS FOR ALL	7,500
BRADFORD CHRISTIAN ACADEMY 97 OXFORD AVENUE HAVERHILL, MA 01835	NONE	PC	TUITION ASSISTANCE PROGRAM	5,000
BREAD & ROSES HOUSING 15 UNION STREET SUITE 401 LAWRENCE, MA 01842	NONE	PC	STABILIZING FAMILIES THROUGH AFFORDABLE HOMEOWNERSHIP	15,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
BREAD AND ROSES58 NEWBURY ST LAWRENCE, MA 01840	NONE	PC	FIGHTING HUNGER & HARDSHIP IN GREATER LAWRENCE	5,000
BUDGET BUDDIES INC 114 TURNPIKE ROAD 2D CHELMSFORD, MA 01824	NONE	PC	PROGRAMMATIC EXPANSION: MERRIMACK VALLEY	5,000
CARE DIMENSIONS INC 75 SYLVAN STREET SUITE B-102 DANVERS, MA 01923	NONE	PC	PATIENT-CENTERED COMPASSIONATE EXPERTISE FOR ADVANCED ILLNESS	15,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
CENTRAL CATHOLIC HIGH SCHOOL 300 HAMPSHIRE STREET LAWRENCE, MA 01841	NONE	PC	MONTAGNE SCHOOL	18,000
CHILDREN'S CENTER FOR COMMUNICATION 6 ECHO AVENUE BEVERLY, MA 019152417	NONE	PC	ENHANCING SCHOOL AND CAMPUS SECURITY	5,786
COMMUNITY CAREGIVERS OF GREATER DERRY 1B COMMONS DRIVE UNIT 10 LONDONDERRY, NH 03053	NONE	PC	VOLUNTEER CAREGIVING EXPANSION	2,500
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
COMMUNITY INROADS 190 ACADEMY ROAD NORTH ANDOVER, MA 01845	NONE	PC	OPERATIONAL EXPENSE ASSISTANCE	2,500
DISCOVERING JUSTICE MOAKLEY US COURTHOUSE ONE COURTHOUS WAY SUITE 3120 BOSTON, MA 02210	NONE	PC	SCALING UP BEST PRACTICES IN CIVICS EDUCATION: PROGRAM EXPANSION IN LAWRENCE AND LOWELL	5,000
ELEVATED THOUGHT 15 UNION STREET SUITE 120 EVERETT MILL LAWRENCE, MA 01840	NONE	PC	LAWRENCE YOUTH ART & SOCIAL JUSTICE PROGRAM EXPANSION	10,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
ENDICOTT COLLEGE376 HALE STREET BEVERLY, MA 01915	NONE	PC	KEYS TO DEGREES- EDUCATING TWO GENERATIONS TOGETHER	30,000
ESPERANZA ACADEMY 198 GARDEN STREET LAWRENCE, MA 01840	NONE	PC	ESPERANZA ACADEMY GRADUATE SUPPORT PROGRAM	10,000
ESSEX ART CENTER56 ISLAND STREET LAWRENCE, MA 01840	NONE	PC	YOUTH ART PROGRAMS	15,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
FAMILY SERVICES OF THE MERRIMACK VALLEY 430 NORTH CANAL STREET LAWRENCE, MA 01840	NONE	PC	BIG FRIENDS LITTLE FRIENDS YOUTH MENTORING PROGRAM	10,000
FIDELITY HOUSE INC 439 S UNION STREET SUITE 401 LAWRENCE, MA 01843	NONE	PC	WAYPOINT CAREERS, VETERAN EMPLOYMENT PROGRAM	5,000
GREATER LAWRENCE COMM BOATING PROG INC P O BOX 955 1 EATON STREET LAWRENCE, MA 01843	NONE	PC	YOUTH PROGRAMMING	15,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
GREATER LAWRENCE TECHNICAL SCHOOL 57 RIVER ROAD ANDOVER, MA 01810	NONE	PC	ATHLETIC FACILITY RENOVATION (YEAR 2 OF 4)	25,000
HEALING ABUSE WORKING FOR CHANGE INC 27 CONGRESS STREET SUITE 201 SALEM, MA 01970	NONE	PC	DOMESTIC VIOLENCE SERVICES IN ESSEX COUNTY	10,000
HENRY C NEVINS HOME INC 10 INGALLS COURT METHUEN, MA 01844	NONE	PC	LIFE ENRICHMENT THROUGH MUSIC	10,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
HOME HEALTH VNA FBO MERRIMACK VALLEY HOSPICE 360 MERRIMACK STREET BLDG 9 LAWRENCE, MA 01843	NONE	PC	END OF LIFE CARE FOR ALL	10,000
IMMIGRANT CITY ARCHIVES DBA LAWRENCE HISTORY CENTER 6 ESSEX STREET LAWRENCE, MA 01840	NONE	PC	(LAWRENCE STUDENT WRITERS WORKSHOP: THE RISING LOAVES 2019)	2,500
IMPROBABLE PLAYERS INC 22 MT AUBURN ST BOX 746 WATERTOWN, MA 024723955	NONE	PC	PREVENTION. EDUCATION. THEATRE. NEW HAMPSHIRE FOCUS	8,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
JEANNE GEIGER CRISIS CENTER INC 2 HARRIS STREET NEWBURYPORT, MA 01950	NONE	PC	CHILDRENS SAFETY PROJECT	15,000
JUSTICE RESOURCE INSTITUTE INC 160 GOULD STREET SUITE 300 NEEDHAM, MA 02494	NONE	PC	SURVIVOR EMPOWERMENT PROGRAM	15,000
LAHEY HOSPITAL & MEDICAL CENTER 41 MALL ROAD BURLINGTON, MA 01805	NONE	PC	CENTER FOR PROFESSIONAL DEVELOPMENT & SIMULATION EXPANSION (YEAR 2 OF 2)	150,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
LAWRENCE COMMUNITYWORKS INC 168 NEWBURY STREET LAWRENCE, MA 01841	NONE	PC	MOVEMENT CITY YOUTH NETWORK	5,000
LAWRENCE GENERAL HOSPITAL 1 GENERAL STREET LAWRENCE, MA 01842	NONE	PC	ANGIOSCREEN OUTREACH PROGRAM	50,000
LAZARUS HOUSE INC 48 HOLY STREET PO BOX 408 LAWRENCE, MA 01842	NONE	PC	OPENING DOORS OUT OF POVERTY THROUGH FOOD, HOUSING, EDUCATION, & ADVOCACY	20,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
LET'S GET READY 89 SOUTH STREET SUITE 401 BOSTON, MA 02111	NONE	PC	LAWRENCE SUMMER COLLEGE ACCESS 2019	2,000
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET SUITE 540 BOSTON, MA 02114	NONE	PC	IN MEMORY OF ALLAN ROGERS; FOR STEM CELL TRANSPLANT RESEARCH	20,000
MCLEAN HOSPITAL CORPORATION 115 MILL STREET BELMONT, MA 02478	NONE	PC	BRENT FORESTER RESEARCH PROGRAM	150,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
MERRIMACK VALLEY FOOD BANK PO BOX 8638 LOWELL, MA 01853	NONE	PC	FOOD DISTRIBUTION	5,000
MERRIMACK VALLEY IMMIGRANT & ED CENTER 439 S UNION STREET LAWRENCE, MA 01843	NONE	PC	GENERAL SUPPORT	20,000
MERRIMACK VALLEY YMCA 360 MERRIMACK ST BUILDING 9 SUITE 270 LAWRENCE, MA 01843	NONE	PC	HERE FOR GOOD: STRATEGIC EXPANSION & RENOVATION OF THE LAWRENCE YMCA	50,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
MGH MARATHON TEAM 125 NASHUA STREET SUITE 540 BOSTON, MA 02114	NONE	PC	FOR JAY SCULLY, MGH EMERGENCY RESPONSE TEAM	1,000
NEW HAMPSHIRE SPCA 104 PORTSMOUTH AVENUE STRATHAM, NH 03885	NONE	PC	A CAMPAIGN FOR CHANGING TIMES (YEAR 2 OF 2)	25,000
NORTH ANDOVER HISTORICAL SOCIETY 153 ACADEMY ROAD NORTH ANDOVER, MA 01845	NONE	PC	EDUCATIONAL PROGRAM SUPPORT	1,200
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
NOTRE DAME CRISTO REY HIGH SCHOOL 303 HAVERHILL STREET LAWRENCE, MA 01840	NONE	PC	CORPORATE WORK STUDY PROGRAM	10,000
NOTRE DAME EDUCATION CENTER-LAWRENCE 354 MERRIMACK STREET SUITE 210 LAWRENCE, MA 018431755	NONE	PC	NDEC-LAWRENCE-LANGUAGE LITERACY SUPPORT	7,500
PHILLIPS ANDOVER ACADEMY 180 MAIN STREET ANDOVER, MA 01810	NONE	PC	ANDOVER BREAD LOAF	2,500
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
PINGREE SCHOOL 537 HIGHLAND STREET SOUTH HAMILTON, MA 01982	NONE	PC	PREP@PINGREE AT PINGREE SCHOOL	7,500
PLUMMER YOUTH PROMISE 37 WINTER ISLAND ROAD SALEM, MA 01970	NONE	PC	PERMANENCY: CONNECTING FOSTER CHILDREN & TEENS TO PERMANENT FAMILIES	15,000
PROJECT BREAD145 BORDER ST EAST BOSTON, MA 02128	NONE	PC	CHEFS IN SCHOOLS - LAWRENCE	5,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
PROJECT HOME AGAINPO BOX 1236 ANDOVER, MA 01810	NONE	PC	GOOD NIGHTS SLEEP, BED BUNDLE, & A PLACE AT THE TABLE PROGRAMS	10,000
SILVERTHORNE ADULT DAY MEDICAL PROGRAM 23 GEREMONTY DR BUILDING 1 SALEM, NH 03079	NONE	PC	SILVERTHORNE ADULT DAY MEDICAL PROGRAM SLIDING FEE SCALE FUND	5,000
SOMEBODY CARES NEW ENGLAND 358 WASHINGTON ST HAVERHILL, MA 01832	NONE	PC	YOUTH CENTER ON THE HILL	2,500
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
SQUASHBUSTERS INC 60 ISLAND STREET LAWRENCE, MA 01840	NONE	PC	COLLEGE, CHARACTER, HEALTH: ENHANCING SYSTEMS AT SQUASHBUSTERS LAWRENCE	15,000
ST JOHN'S PREPARATORY SCHOOL 72 SPRING STREET DANVERS, MA 01923	NONE	PC	PARTNERSHIP WITH BELLESINI ACADEMY (YEAR 2 OF 4)	25,000
STRONGWATER FARM THERAPEUTIC 500 LIVINGSTON STREET BOX 754 TEWKSBURY, MA 01876	NONE	PC	CAPACITY BUILDING AT STRONGWATER FARM	5,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
TEACH FOR AMERICA MASSACHUSETTS 60 CANAL STREET FIFTH FLOOR BOSTON, MA 02114	NONE	PC	DEEPENING TEACH FOR AMERICAS IMPACT & TALENT IN LAWRENCE	10,000
THE GERMAN HOME 374 HOWARD STREET LAWRENCE, MA 01841	NONE	PC	THE GERMAN HOME REFURBISHMENT PROJECT	15,000
THE LEUKEMIA & LYMPHOMA SOCIETY 70 WALNUT STREET SUITE 301 WELLESLEY, MA 02481	NONE	PC	BEAT AML	10,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
THE PSYCHOLOGICAL CENTER 11 UNION ST LAWRENCE, MA 01840	NONE	PC	EXPANDING HORIZONS FOR HOPE	15,000
UNITED TEEN EQUALITY CENTER UTEC 15 WARREN STREET NO 3 LOWELL, MA 01852	NONE	PC	TRANSFORMATIONAL BEGINNINGS FOR PROVEN-RISK YOUNG ADULTS	5,000
WINDRUSH FARM THERAPEUTIC EQUITATION INC 479 LACY STREET NORTH ANDOVER, MA 01845	NONE	PC	THERAPEUTIC RIDING AND HORSE RELATED ACTIVITIES FOR INDIVIDUALS WITH SPECIAL NEEDS	20,000
Total . . . . . ▶ **3a**				1,105,986

Form 990PF Part XV Line 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*				
YMCA OF THE NORTH SHORE 245 CABOT STREET BEVERLY, MA 01915	NONE	PC	CREATIVE ARTS PROGRAMMING IN HAVERHILL & SALEM	10,000
YOUTH DEVELOPMENT ORGANIZATION INC 15 UNION ST SUITE 563 LAWRENCE, MA 01840	NONE	PC	STEM OPPORTUNITY PIPELINE	5,000
YWCA NORTHERN MASSACHUSETTS INC 38 LAWRENCE STREET LAWRENCE, MA 01840	NONE	PC	WOMEN'S HEALTH SERVICES FUNDING	10,000
Total . . . . . ▶ **3a**				1,105,986

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TY 2019 Accounting Fees Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	6,159	0		6,159
TAX PREPARATION	4,625	0		4,625

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TY 2019 Investments - Other Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUND	FMV	17,782,985	17,782,985
AETOS	FMV	2,093,918	2,093,918
DRAKE	FMV	2,375,193	2,375,193

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TY 2019 Legal Fees Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	605	0		605

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TY 2019 Other Expenses Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS OFFICE EXPENSE	188	0		188
PROPERTY MAINTENANCE EXPENSE	1,320	0		1,320

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TY 2019 Other Increases Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Description	Amount
UNREALIZED GAIN	2,746,016

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TY 2019 Other Professional Fees Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE FEES	8,557	0		8,557
INVESTMENT EXPENSES	45,681	45,681		0

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TY 2019 Taxes Schedule

Name: ROGERS FAMILY FOUNDATION
C/O GMA FOUNDATIONS INC

EIN: 04-6063152

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ESTIMATED TAX PAYMENTS	42,300	0		0
FILING FEES	250	0		250